

Georgia Department of Public Health Birth Defects Registry Reporting Manual

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Georgia Department of Public Health

Birth Defects Program Staff

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Birth Defects Registry

The Georgia Birth Defects Registry is housed within the Georgia Department of Public Health. The Georgia Birth Defects Registry staff prepared this reporting manual to provide guidance for submitting birth defects case reports. The manual contains directions for reporting birth defects, the case definition and information about reportable birth defects, and methods of reporting. The manual will be sent to each reporting contact to assist with complete and accurate reporting. We are interested in your feedback about the manual and suggestions about information you would like to receive.

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Georgia Birth Defects Registry Georgia Department of Public Health

General Information

A birth defect is an abnormality of structure or function that is present at birth and results in physical or mental disability. Birth defects are one of the leading causes of infant mortality in the United States, accounting for one in five infant deaths¹. They may also result in growth and developmental delays, significant medical and rehabilitation expenses, and emotional distress for affected families. Birth defects occur in approximately 1 in every 33 infants born in the United States, and major birth defects are diagnosed in 3–4% of infants in their first year of life².

The Georgia Department of Public Health's (DPH) Birth Defects Registry will provide the data needed to: determine baseline birth defects incidence and mortality rates; analyze trends of incidence, prevalence, and mortality; identify and respond to suspected clusters; formulate and test hypotheses of etiology and association; advocate for planning and development of relevant programs; coordinate referral to early intervention programs; evaluate access, usage, and impact of programs and services; and further educate professionals and the community at large. These activities aim to improve our knowledge about the prevention of birth defects; and ensure Georgia children with birth defects and their families have timely access to available resources and assistance. To achieve these goals, the performance of the Birth Defects Registry is dependent on the ascertainment of cases and the quality of the data reported.

This manual is intended to give instructions for healthcare provider and facility reporting of notifiable birth defects to the State for inclusion in the Birth Defect Registry. Electronic copies of this manual can be downloaded from the Georgia Birth Defects website at <u>https://dph.georgia.gov/birth-defects-reporting</u>. Reporting questions not addressed in this manual should be referred to the Birth Defects Registry staff at (404) 463-0782 or <u>birthdefects@dph.ga.gov</u>.

¹ March of Dimes 2018: National Center for Health Statistics, period-linked birth/infant death data. Annual number of birth defects based on estimates from the Centers for Disease Control and Prevention. Retrieved September 4, 2018, from https://www.marchofdimes.org/Peristats/ViewTopic.aspx?reg=99&top=16&lev=0&slev=1.

² CDC-NCBDDD 2018: Centers for Disease Control and Prevention-National Center for Birth Defects and Developmental Disabilities, Birth Defects Data & Statistics, last revised on April 30, 2018. Retrieved September 4, 2018, from https://www.cdc.gov/ncbddd/birthdefects/data.html.

Legislation and Confidentiality

Birth defects are legally reportable under the Official Code of Georgia Annotated (O.C.G.A.) § 31-12-2, which mandates the reporting of notifiable diseases and conditions (see below and Appendix A on page 32 for the full legislation). The Rules and Regulations of the State of Georgia 511-2-1-.02–.04 governing reporting, quality, manner, collection and analysis of the data, and confidentiality are provided in Appendix A (page 33).

31-12-2(a): "The department is empowered to *declare certain diseases, injuries, and conditions to be diseases requiring notice and to require the reporting* thereof . . . *All such reports and data shall be deemed confidential* and shall not be open to inspection by the public; provided, however, the department may release such reports and data in statistical form or for valid research purposes." (Emphasis added.)

Protection of confidentiality is a major concern. As notifiable conditions under O.C.GA. § 31-12-2, any birth defects reports and data provided through the Georgia Birth Defects Registry shall be deemed confidential and shall not be open to inspection by the public. Confidentiality of all data is required by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and strictly maintained by Department staff. Case reports, medical records, and pertinent correspondence will be transmitted to Department staff via HIPAA-compliant media, including secure fax, encrypted email, and secure file transfer protocol (SFTP). Completed forms will be stored in locked file cabinets and computer files that can only be accessed by authorized personnel. Any published reports will contain aggregate data only and will not disclose personal identifiers.

Personal identifiers must be collected for every reported case. This information ensures that each case is counted once and matched to existing birth and death certificates housed in the Office of Vital Records, as well as other pertinent databases. In addition, personal identifiers will aid early intervention programs in contacting families to enroll eligible infants and determine whether other support services are needed.

Reports are to be submitted within 30 days of diagnosis using the Birth Defect Reporting Form provided by the Georgia Department of Public Health (see Appendix B, page 34) or preferably by secure electronic media using one of the methods described in the following sections. Do <u>not</u> send case report forms to the DPH birth defects email. Any questions pertaining to *methods* of reporting should be referred to Registry staff at <u>birthdefects@dph.ga.gov</u>.

Reporting Requirements

Case Definition for Surveillance

The case definition for the Georgia Birth Defects Registry uses ICD-10-CM diagnosis codes as they appear in hospital medical records. Any child up to six years of age diagnosed with a reportable birth defect (see Appendix D, page 88) who was born to a Georgia state resident should be reported to the Georgia Birth Defects Registry. Information for all fetal losses of at least 20 weeks gestation diagnosed with a reportable birth defect should also be reported. Birth defects should be reported to the Georgia Birth Defects Registry within 30 days of diagnosis.

Reports should be submitted if a child expires, the defect is corrected, and/or the diagnosis changes from an original report. If it cannot be determined whether a report should be submitted or has been previously filed, it is better to submit a report. Prompt reporting will help ensure data are complete and accurate; and families are notified of assistance options early.

For birth defects identified among non-residents, please contact the Georgia Birth Defects Registry staff at <u>birthdefects@dph.ga.gov</u>.

Reportable Conditions

Reportable birth defects are limited to conditions listed in this manual (see Appendix D, page 88) and adhere to the National Birth Defects Prevention Network¹ surveillance guidelines. It is not necessary to report minor defects or conditions resulting from prematurity or birth injury. Some examples are provided in the table below.

Categories and Examples of Non-Reportable Conditions

| CATEGORY | SAMPLE CONDITIONS |
|-----------------------------------|--|
| Minor defects | Ankyloglossia, polydactyly, sacral dimple, nevi, umbilical |
| | hernia, epicanthal folds (NBDPN ³ Appendix 3.3 ⁴) |
| Birth injuries | Shoulder dystocia, cephalohematoma, caput succedaneum, |
| | hip dislocation (if breech birth) |
| Conditions related to prematurity | Retinopathy of prematurity, hypoplastic lungs, patent duct |
| (gestational age <36wk) | arteriosus (PDA), patent foramen ovale (PFO), inguinal |
| | hernia (NBDPN Appendix 3.4 ⁵) |

Any questions regarding reporting conditions not listed in Appendix D (page 88) should be referred to the Georgia Birth Defects Registry staff at <u>birthdefects@dph.ga.gov</u>.

⁴ NBDPN Appendix 3.3: Examples of Conditions Considered to be Minor Anomalies, see page 91, https://www.nbdpn.org/docs/SGSC - Ch3 Case Definition - final draft 3-24-15 2016DEC14.pdf.

³ NBDPN: National Birth Defects Prevention Network.

⁵ NBDPN Appendix 3.4: Conditions Related to Prematurity in Infants Less Than 36 Weeks Gestation, see page 93, https://www.nbdpn.org/docs/SGSC - Ch3 Case Definition - final draft 3-24-15 2016DEC14.pdf.

Mechanisms for Reporting Birth Defects

Providers can report birth defects through one of three mechanisms. The modes differ in the level of detail requested (see table below), yet require a minimum set of information necessary to be accepted into the Birth Defects Registry:

- 1. Child's first name;
- 2. Child's last name;
- 3. Child's date of birth;
- 4. Reporting or birthing facility; and
- 5. At least one reportable birth defect ICD-10-CM diagnosis code.

| TYPE OF REPORT | METHOD | LEVEL OF DETAIL |
|-------------------------------------|--|-------------------|
| .csv file: Line list | Electronic: .csv file upload through | Limited, template |
| Dimenter and the distribution | SendSS ⁶ secure FTP ⁷ (see page 9) | Lingital famo |
| Direct report: Individual cases | Electronic: Birth Defects Reporting | Limited, form |
| | Form in SendSS (page 25) | |
| | Mail or fax: Paper Reporting Form | |
| | (Appendix B, page 34) | |
| eHR ⁸ : Individual cases | Electronic: CDA/HL7 to DPH or Full record, where av | |
| | GaHIN ⁹ (see page 30) | |

Submission Type, Method, and Level of Detail for Reporting Birth Defects

Electronic File (.csv) Submission of Line List Data

Accuracy and thoroughness in case ascertainment and data abstraction determine the quality of the data and the utility of a surveillance system. The ability of personnel to abstract relevant data from medical records is dependent on the quality of the information collected.

This section is a guide for establishing an electronic line list to be reported to the DPH Birth Defects Registry. A line list contains all infants with birth defects diagnosed at a facility during a specified time period. Each row should have data for a suspected birth defect case. This differs from reporting individual cases to DPH through the SendSS Birth Defects Reporting Form (see page 25) or the paper reporting form (see Appendix B, page 34). Line lists should be .csv files that are submitted using a standard file format and uploaded on a routine basis, preferably monthly, through the SendSS Georgia Birth Defects FTP. Each line list should include <u>new</u> cases and diagnoses only (i.e., submissions should *not* include cases with birth defects previously reported by the

⁶ SendSS: State Electronic Notifiable Disease Surveillance System.

⁷ FTP: File transfer protocol. SendSS houses a secure file transfer area where facilities can upload .csv files with line lists of birth defects cases. To access the SendSS Georgia Birth Defects FTP, see pages 10–11.

⁸ eHR: Electronic health record.

⁹ GaHIN: Georgia Health Information Network. GaHIN's purpose is to close the patient information gap across care settings by electronically connecting disparate systems and data sources to support improved quality of care, better health outcomes, and reductions in cost.

facility), one column per ICD-10-CM diagnosis code. A sample template and corresponding codebook are available on the DPH Birth Defects Reporting website (<u>https://dph.georgia.gov/birth-defects</u>).

Much of the information requested by the Birth Defects Registry is self-explanatory. The ideal file layout, variables, and coding structure are outlined in the table beginning on page 12. Specifications for alternative methods of transmission are described above on page 9.

Facilities that would prefer to report birth defects line lists, yet cannot export ICD-10-CM codes from their medical records system or experience other data export issues should contact the Birth Defects Registry staff at <u>birthdefects@dph.ga.gov</u>. Registry staff will coordinate communication between the facility and SendSS IT staff to help resolve export issues.

To begin the SendSS registration process, visit <u>https://sendss.state.ga.us/sendss/login.screen</u>, select "Click Here," and follow the prompts, depicted below.

| Sendss Login | | | | | |
|---|---|--|--|--|--|
| | Welcome to SendSS v4 | | | | |
| the short registration form. C | If you are new to SendSS and have not yet registered for a user account, please <u>Click Here</u> to fill out the short registration form. Once you have received your account confirmation by email, you will be able to begin using SendSS. | | | | |
| | User Id: Password: | | | | |
| Forgot Password? Training Demonstration New! Registration and Login Procedures Neonatal Abstinence Syndrome (NAS) User Guide v2.0 HIV eCRF Tutorial (9.22.16) | | | | | |
| SendSS Demo System Health Statistics Query GRETS | | | | | |
| Login | | | | | |

Highlighted fields with a red dot are required for registration.

| Registration Form | |
|--|--|
| Personal Information | |
| Please select an Id you can easily remember. Examples: Nam Name:William B Hartsfield UserId: willyB | e: John Smith Userld: jsmith1960 |
| User Id • | Password |
| User Information | |
| First Name | Last Name 🔵 |
| | |
| E-Mail Address . | Phone Ext |
| Fax Number | Pager Number |
| Title | Enter Title if not in list |
| Choose One 🔻 | |
| | |
| Diagonal shapes your type of organization from the list below (| Once your type is selected, select your organization. If you can not |
| find your organization, please select "Enter New Organization" | |
| Type of Organization ● Choose One | Organization Select Organization Type |

Facilities interested in reporting birth defects on a monthly basis using a .csv line list can request access to the Georgia Birth Defects File Transfer area by selecting the appropriate checkbox on the user registration (see below).

| Access Requir | ed | | |
|----------------------------------|--------------------------------------|--|---|
| SendSS Net | wborn | | |
| Birth Defects | Reporter New! C | Choose this if you are a reporter of Birth Def | ects for your organization |
| General Notifiable User | Syndromic Surveillance | TB User | |
| STD User | HIV User | Dept of Corrections | |
| STD Case N Health Workers (| fanagement Public Only | | |
| Lead User | □ Varicella User | HL7-Cancer Registry | |
| Survey User | Ga Birth Defects File Transfer | Immunization Assessment System | |
| RevMaxx File Check | GPHL File Transfer | BCW Providers | Allows the user access to the Birth Defects File Transfer area |
| EMS IMS | Vital Records | IISS On Call User | |
| Central Intake Data System | Animal Bite Module | Employee Database Administrator | |
| Neonatal Ab (NAS) Reporting | stinence Syndrome New! | | |

Electronic Line List File (.csv) Layout and Format

| Codebook | |
|----------------|---|
| Missing Data: | Alphanumeric field = Blank |
| | Numeric field = Blank |
| Justification: | Alphanumeric field = Left-justified |
| | Numeric field = Right-justified, with leading 0 if needed |
| Required: | Field cannot be blank when uploading to the SendSS FTP |

Code Book for Electronic (.csv) Line List File Submission to SendSS FTP

| Variable | Field Description | Field Type | Definition and Logic |
|---------------------|-----------------------------------|--|--|
| Name | | | |
| Bhosp (required) | Full name of birthing hospital | Character | Birthing Hospital Full Name This field should not be missing. If the hospital reporting the case is not the birthing facility and the birthing facility is unknown, provide the name of the reporting facility. |
| CMRN | Child medical record number | Alphanumeric | Child's medical record number The case must have at least one medical record number. Multiple medical record numbers are possible. Medical record numbers should be different for different sources. All case medical record numbers must be different from all mother's medical record numbers. The mother's medical record number may be used by the source to identify a fetal death, but would not be allowable in this field. |
| eBC | Birth certificate ID number | Numeric, 6 digits, at least 2 leading zeroes | Electronic birth certificate number (six digits, including at least two leading zeroes) |

| Variable | Field Description | Field Type | Definition and Logic |
|----------------------|---------------------------|----------------------|---|
| Name | | | |
| DOB (required) | Child's date of birth | Date (MM/DD/YYYY) | Child's date of birth OR Fetal death if ≥20wk gestation This field should not be missing. Every live birth must have a date of birth. The date should include valid month, day, and year. If any of the three parts is unknown, all known date elements should be recorded in separate fields. The date of delivery for a live birth should be after the date of last menstrual period (LMP) and date of conception. |
| CLName (required) | Child last name | Character | Child's last name This field should not be missing. If child's name is hyphenated, avoid spaces before/after the hyphen. |
| CFName (required) | Child first name | Character | Child's first name This field should not be missing. |
| СМІ | Child middle initial | Character (1 letter) | Child's middle name initial |
| Caltlast1 | Child alternate last name | Character | Child's alternate last name |
| Sex (required) | Child sex | Numeric | Child's sex (choose one): This field should not be missing. 1=Male 2=Female 3=Ambiguous 9=Unknown |

| Variable | Field Description | Field Type | Definition and Logic |
|--------------------|---------------------------------|-------------------|--|
| Name | | | |
| MMRN | Mother medical record number | Alphanumeric | Mother's medical record number The case should have at least one medical record number. Multiple medical record numbers are possible. Medical record numbers should be different for different sources. All maternal medical record numbers must be different from all child's medical record numbers. The mother's medical record number may be used by the source to identify a fetal death, but would not be allowable in this field. |
| MDOB (required) | Mother date of birth | Date (MM/DD/YYYY) | Mother's date of birth This field should not be missing. If any parts are missing, all known date elements should be recorded in separate fields. The date should include month, day, and year. Maternal age calculated outside of the range of 12 to 49 years suggests the need for verification. If the mother's date of birth is the same as the father's date of birth, the birth defects program should double-check to ensure this is true. |

| Variable | Field Description | Field Type | Definition and Logic |
|----------------------|-----------------------|----------------------|---|
| Name | | | |
| MLName (required) | Mother last name | Character | Mother's last name This field should not be missing. Every record must have at least one name for the mother and should have first and last names. To establish the existence of missing names, there should be separate fields. If the mother's last name is hyphenated, both names should be in the last name field, no space around the hyphen. |
| MFName (required) | Mother first name | Character | Mother's first name This field should not be missing. |
| ММІ | Mother middle initial | Character (1 letter) | Mother's middle name initial |
| Mmaiden | Mother maiden name | Character | Mother's maiden name |
| Mrace | Mother race/ethnicity | Numeric | Mother's race/ethnicity (choose one): 1=White 2=Black/African-American 3=Asian 4=Native Hawaiian/Pacific Islander 5=American Indian/Alaskan Native 6=Other 7=Multiple 9=Unknown Every record should have mother's race recorded except when the mother's identity is unknown (e.g., baby was left at a safe haven or abandoned) Racial categories should be compatible with the federal standards in current use for race |

| Variable | Field Description | Field Type | Definition and Logic |
|----------------|------------------------|-----------------------|---|
| Name | | | |
| Methnicity | Mother's ethnicity | Numeric | Mother's ethnicity 0=Not Hispanic 1=Hispanic/Latino 9=Unknown Every record should have mother's ethnicity recorded except when the mother's identity is unknown (e.g., baby was left at a safe haven or abandoned) Ethnicity categories should be compatible with the federal standards in current use for ethnicity |
| Street_Address | Mother street address | Alphanumeric | Mother's street address |
| City | Mother city | Character | Mother's city |
| County | Mother county | Character | Mother's county |
| State | Mother state | Character (2 letters) | Mother's state |
| Zip | Mother zip code | Numeric (5 digits) | Mother's zip code |
| Home_Phone | Mother phone number | Numeric (10 digits) | Mother's contact number |
| Alt_Phone | Alternate phone number | Numeric (10 digits) | Alternate phone number |
| Gest_Age_w | Gestational age, weeks | Numeric (2 digits) | Gestational age, weeks Completed weeks of gestation at the time of delivery, as derived from prenatal ultrasound, last menstrual period, postnatal exam, etc. Any value less than 9 or greater than 44 should be checked. Birth defects occurring in fetal losses of at least 20 weeks are reportable to the Georgia Birth Defects Registry. If pregnancy outcome is live birth, gestational age less than 20 weeks should be checked. May consider checking for consistency with birth weight. |

| Variable Name | Field Description | Field Type | Definition and Logic |
|------------------|--------------------------------|-------------------|---|
| Gest_Age_d | Gestational age, days | Numeric (1 digit) | Gestational age, days: Completed days of gestation at the time of delivery, as derived from prenatal ultrasound, last menstrual period, postnatal exam, etc. Minimum 0 Maximum 6 |
| BStatus | Birth status | Numeric | Outcome of the index pregnancy (choose one): 1=Live birth 2=Stillbirth (≥20 weeks gestation) 3=Fetal death (<20 weeks gestation) 4=Termination 5=Unspecified non-live birth 6=Multiple live birth 7=Multiple birth, intrauterine fetal demise of twin 9=Unknown |
| Dt_Exp | Date of fetal/infant demise | Date (MM/DD/YYYY) | Date of demise after a live birth This field should only be filled out if the pregnancy outcome is "live birth" and the child is known to have died. If any of the three parts is missing, all known date elements should be recorded in separate fields. The date should include month, day, and year. The date of death should be on or after the date of delivery and on or after any date of prenatal diagnostic procedure or prenatal ultrasound. |

| Variable Name | Field Description | Field Type | Definition and Logic |
|------------------|-------------------|-------------------|--|
| BWt | Birth weight | Numeric | Weight in grams of the infant or fetus at delivery Missing values are possible. Attention is needed to ensure the value used for missing, such as 999, is considered when converting between metrics. If the weight is less than or equal to 227 grams or greater than or equal to 5,000 grams, the weight should be verified. |
| Diagdt | Diagnosis date | Date (MM/DD/YYYY) | Date of birth defect(s) diagnosis, if known If multiple diagnoses, report earliest date. |

| Variable | Field Description | Field Type | Definition and Logic |
|--|--------------------------------------|--|--|
| Name | | | |
| ICD1 – ICD37 (<u>at</u> <u>least 1</u> required) | ICD-10-CM diagnosis codes | Alphanumeric (single letter with 2 digits, decimal point, and up to 3 digits to the right of the decimal point) | Reportable birth defect ICD-10-CM diagnosis codes (alpha-numeric) This field should not be missing. Every row in the line list must have at least one ICD-10-CM code. If exported ICD-10-CM codes do not include the decimal point, please contact the Georgia Birth Defects Registry staff at birthdefects@dph.ga.gov. Only reportable birth defects should be included in these fields. See Appendix D for the full list of major birth defects that are reportable to the Georgia Birth Defects Registry. Each condition should be in its own column. No verbatim or description should be included in this field. If specific verbatim are given, please list in corresponding columns (e.g., ICDverbatim1). Include up to 37 different conditions need to be reported. Please contact the Birth Defects Registry staff with any ICD code export issues or changes. |
| PCFLName | Person reporting case, last name | Character | Last name of the person reporting case |
| PCFFName | Person reporting case, first name | Character | First name of the person reporting case |

| Variable | Field Description | Field Type | Definition and Logic |
|------------------------|-------------------------------------|---------------------|--|
| Name | | | |
| PCFPhone | Person reporting case, phone number | Numeric (10 digits) | Phone number for the person reporting case |
| ReportDt (required) | Report date | Date (MM/DD/YYYY) | Date case is being reported |

Item Review for .csv File Line List Submission

Birth Hospital (required)

- One of several variables used to establish a unique case.
- To allow for matching with birth and death certificate files.
- To aid in any necessary follow-up.

Child's Name (required)

- One of several variables used to establish a unique case and to prevent a case from being counted twice.
- To allow for matching with birth and death certificate files.
- To aid in any necessary follow-up.

Address

- To allow for matching with birth and death certificate files.
- To aid in any necessary follow-up.

Child's Medical Record Number

- To verify or collect additional information and for quality control purposes.

Sex (required)

- One of several variables used to establish a unique case.

Child's Date of Birth (required)

- One of several variables used to establish a unique case.
- To aid in matching with birth and death records.
- To determine age at time of diagnosis and/or treatment.
- To calculate birth defect rates for birth cohorts.

Mother's Name (required)

- One of several variables used to establish a unique case.
- To allow for matching with birth and death certificate files.
- To aid in any necessary follow-up.

Mother's Medical Record Number

- To verify or collect additional information and for quality control purposes.

Mother's Date of Birth (required)

- One of several variables used to establish a unique case.
- To aid in matching with birth and death records.
- To determine age at time of diagnosis and/or treatment.
- To calculate birth defect rates for birth cohorts.

Maternal Race/Ethnicity

- To calculate birth defect rates for birth cohorts.

Gestational Age (weeks and days)

- To determine age at time of diagnosis and/or treatment.
- Determines reporting eligibility for certain conditions.
- Risk factor of interest.

Birth Status

- To determine age at time of diagnosis and/or treatment.
- To calculate birth defect rates for birth cohorts.
- Determines reporting eligibility for certain conditions.

Date Expired

- To determine age at time of diagnosis and/or treatment.
- To calculate birth defect rates for birth cohorts.
- Determines reporting eligibility for certain conditions.

Birth Weight

- Risk factor of interest.

Diagnosis Date

- To distinguish unique cases and unique reports of duplicate cases.

- To facilitate matching to other data sets.

Diagnosis ICD-10-CM Codes (at least 1 required)

- Report ALL reportable diagnoses (up to 37).

- **Reportable Diagnoses:** A comprehensive list of reportable birth defects is provided in Appendix D, page 88 -List each diagnosis separately on the corresponding column.

-Most items in the Congenital Anomalies section of the ICD-10-CM are reportable to the Georgia Birth Defects Registry. To ensure the defect(s) identified are reportable, please refer to Appendix D.

-In the event that a facility medical record system uses ICD-9-CM, please refer to the ICD-9-CM to ICD-10-CM crosswalk of diagnosis codes included in Appendix C (page 36) for the translation of reportable conditions.

Diagnosis codes are used to:

- To calculate birth defects incidence rates.
- To direct families to available assistance.
- To monitor trends and clusters.
- To identify cases for special studies.
- To determine if there is a need for further diagnostic clarification.
- To facilitate program planning and projections of future assistance needs.

- To monitor birth defects reporting sources.

Contact Information for Person Reporting Case

- To verify or collect additional information and for quality control purposes.

Report Date

- To distinguish unique cases and unique reports of duplicate cases.
- To facilitate matching to other data sets.

Birth Defects Reporting Form

Instructions for Completing the Birth Defects Reporting Form in SendSS

The State Electronic Notifiable Disease Surveillance System (SendSS) can be used to report birth defects to the Georgia Birth Defects Registry. Each facility must have a system in place for identifying all children with a reportable condition up to the age of six and fetal losses with a reportable condition of at least 20 weeks gestation. The best method to obtain detailed birth defect information for a newborn is to wait until the health record is completed. Final diagnoses can be obtained from the health record coding staff in the form of a completed discharge summary, consultation impressions, or face sheet. Please note that birth defects are reportable within 30 days of diagnosis.

In most cases, a birth defects report will be completed for a child by its birthing facility; that child will have an existing birth registration. The paper version of the reporting form has been included in the appendix of this manual (see Appendix B, page 34).

Gaining access to the SendSS-Newborn Module

A user first needs to register in SendSS and be granted appropriate rights to gain access to the module. To request access to SendSS, go to the following link: <u>https://sendss.state.ga.us/sendss/login.screen</u>.

Once you reach the main login page for SendSS, select "Click Here," which will take you to the registration page.

| Sendss Login | | | | |
|-----------------------|---|--|--------|--|
| | Welcome to Send | dSS v4 | | |
| | nd have not yet registered for a Once you have received your ad | | | |
| | User Id: Password: | | | |
| ▶ Neona | Forgot Passwor Training Demonstratio Registration and Login P tal Abstinence Syndrome (I HIV eCRF Tutorial (S | on New! Procedures NAS) User Guide | ∍ v2.0 | |
| SendSS Demo System | Health Statistics Query | DPH | GRITS | |
| | Login |] | | |

Once you have selected "Click Here," you will be taken to the Registration Form, as seen below. Complete all required fields and select "Birth Defects Reporter" under Access Required.

Registration Form

| Personal Information | |
|---|---|
| Please select an Id you can easily remember. Examples: Na Name:William B Hartsfield UserId: willyB | ame: John Smith Userld: jsmith1960 |
| User Id 🔍 | Password |
| | |
| | |
| User Information | |
| First Name | Last Name 🔵 |
| | |
| E-Mail Address O | Phone • |
| | Ext |
| Fax Number | Pager Number |
| | |
| Title | Enter Title if not in list |
| Choose One 🔻 | |
| | |
| Type of Organization Choose One Choose Required | Organization ● Select Organization Type ▼ |
| SendSS Newborn | |
| Senass Newborn | |
| Birth Defects Reporter New! Choose this if you are a | reporter of Birth Defects for your organization |
| General Syndromic DB User Notifiable User Surveillance | |
| STD User HIV User Dept of Correction | ns |
| STD Case Management Public Health Workers Only | |
| | |

SendSS Birth Defects Reporting Form

Once you have received SendSS account access and login information, on the main page, select the Home tab, under which you will see "Birth Defects Reporting Form" in the drop-down list.



Once you select "Birth Defects Reporting Form," you will be taken to the following page.

| Send State Electron | | le Disease Surve | illance System | | Uid: kdial Help | 1906 🔒 🛟 Contact Us | My Account | 7/25/2018 Logout |
|------------------------|-------------------------|----------------------------|---|----------|---------------------------|---------------------------------------|-------------------------------|---------------------|
| | Home | Case Reporting | Analysis | Admin | Developer | Link | s | |
| Birth De | efects Re | eporting Form | 1 4 | | | | | |
| Child | d's Inform | ation | | | | | | |
| Alt | t Name:● Last Name(1 | | First Name:● Alt First Name | e(1): | M.I.: | | | |
| Str | reet Address: | | City: Choose One | | State: Geor | | T | |
| Ho | Choose One | ▼ m/dd/yyyy):● ams): | Zip Code: Cell Phone: Birth Status: Choose One Sex: Choose One | | Child's | Phone: s Medical Reco Hospital: | ord Number: |] |
| Moth | ner's Infor | mation | | | | | | |
| Mo | other's Last N | ame: | Mother's Firs | st Name: | | M. | l.: | |
| Ma | aiden Name: | | Medical Rec | ord No.: | | | | |
| Alt | t Last Name(1 |): | Alt First Nam | ie(1): | | | | |
| | Last Name(2 | | Alt First Nam | ie(2): | | | | |
| Da | ate of Birth (m | m/dd/yyyy): | Race: Choose On | e | | | spanic/Latino: hoose One ▼ | |

The Reporting Form has required fields, as well as drop-down menus.

| endSS | v v - | -0 | | Uid: kdi a | al1906 🔒 🔿 | | 7/25/2018 |
|-------------------|--------------------|-------------------|------------|-------------------|----------------|--------------------------------------|-----------------------------|
| Electronic Notifi | able Disease Surve | illance Systen | n | Help | Contact Us | My Account | Logout |
| Home | Case Reporting | Analysis | Admin | Develope | r Lin | ks | |
| rth Defects F | Reporting Form | 1 4 | | | | | |
| Child's Infor | mation | | | | | | |
| Last Name: | | First Name: | | M.I.: | | | |
| Alt Last Name | »(1): | Alt First Nam | e(1): | | | | |
| Alt Last Name | 2(1). | Althistidi | ie(1). | | | n a red circle ar licate "Regurie | d darker shade d" fields |
| Alt Last Name | e(2): | Alt First Nam | ne(2): | | | licate Require | u neius |
| Street Addres | is: | City: | | State | e: | | |
| Count | | Choose On | e v | Ge | orgia | | |
| County: | _ | Zip Code: | | | | <u> </u> | |
| Choose One | | | | | | ates a drop do | wn list is availab |
| Home Phone: | - | Cell Phone: | - | Othe | r Phone: | | |
| Date of Birth | (mm/dd/yyyy): | Birth Status: | | Chik | 's Medical Rec | ord Number: | - |
| | | Choose On | e v | Diath | Linestek | | |
| Birth Weight (| grams): | Sex: Choose On | e 🔻 | Birth | Hospital: | | |
| | | | | | | | |
| Mother's Info | ormation | | | | | | |
| Mother's Last | | Mother's Fir | st Name: | | N | N.I.: | |
| Maiden Name | | Medical Rec | ord No : | | | | |
| Maiden Name | | | OIG NO | | | | |
| Alt Last Name | e(1): | Alt First Nar | me(1): | | | | |
| Alt Last Name | e(2): | Alt First Nar | me(2): | | | | |
| | | | | | | | |
| Date of Birth | (mm/dd/yyyy): | Race: | | | H | lispanic/Latino: | |

Under the Diagnostic Information section, the display shows a total of 20 ICD codes.

| iagnostic Informat | tion | | | | | | |
|--|-------------------|-------------|----------|----|---------|-----------------|----------|
| Date of Diagnosis (mm/d | ld/yyyy): | | | | | | |
| ICD Code's | | | | _ | | | |
| 1 | 2 | 3 | | 4 | | 5 | |
| 6 | 7 | 8 | | 9 | | 10 | |
| 11 | 12 | 13 | | 14 | | 15 | |
| 16 | 17 | 18 | | 19 | | 20 | |
| Click Here to Enter Addi | tional ICD Code | 's | | | | | |
| Narrative: | | | | | | | |
| | | | | | | | |
| | | | | | lo ente | r additional IC | .D Codes |
| | | | | | | | |
| | | | | 11 | | | |
| Reporting Source: Name: (Please select a r (To add new facility pleas Choose One | | | ils)) | 1. | L | | |
| Name: (Please select a r (To add new facility pleas Choose One | | | | | L | | |
| Name: (Please select a r (To add new facility pleas | | | | // | L | | |
| Name: (Please select a r (To add new facility pleas Choose One | | | | // | L | | |
| Name: (Please select a r (To add new facility pleas Choose One Street Address: | se select other a | | • | | L | | |
| Name: (Please select a r (To add new facility pleas Choose One Street Address: | State: | | • | | | | |
| Name: (Please select a r (To add new facility pleas Choose One Street Address: City: | State: | | • | | | | |
| Name: (Please select a r (To add new facility pleas Choose One Street Address: City: Person Completing Fo | State: | First Name: | ZipCode: | | | | |
| Name: (Please select a r (To add new facility pleas Choose One Street Address: City: Person Completing Fo | State: | First Name: | • | | | | |

Once selecting "Click Here," additional fields will be displayed, as shown below, for the entry of additional ICD-10-CM codes.

| Diagnostic Information | | | | |
|---|------------------------------|--------------------------|----------------------|---|
| Date of Diagnosis (mm/dd/yyyy) | | 7 | | |
| ICD Code's | | | | |
| 1 2 | 3 | 4 | 5 | |
| 6 7 | 8 | 9 | 10 | |
| 11 12 | 13 | 14 | 15 | |
| 16 17 | 18 | 19 | 20 | |
| Click Here to Enter Additional IC | | 15 | 20 | |
| | | 24 | 25. | |
| 21. 22. | 23. | 24. | | |
| 26. 27. | 28. | 29. | 30. | |
| 31 32 | 33. | 34. | 35. | |
| 36 37 | 38. | 39. | 40. | |
| 41. 42. | 43. | 44. | 45. | |
| 46. 47. | 48. | 49. | 50. | |
| Narrative: | | | | |
| | | | | |
| | | , | | |
| | | // | | |
| Reporting Source: | | | | |
| Name: (Please select a name fro | | | | |
| (If name of the facility is not in the Choose One | list please select other ar | nd enter the details)) | | |
| Choose One | | • | | |
| Street Address: | | | | |
| | | | | |
| City: S | itate: | ZipCode: | 7 | |
| | | | | |
| Person Completing Form: | | | | |
| Last Name: | First Name: | | | ding a new report, the |
| Dial | Kim | | | ompleting Form section lates with the reportin |
| Phone: 404 -657 -3107 x | Date of Report | (mm/dd/yyyy): | | son's information. |
| 404 -057 -5107 X | | | | |
| | | | | |
| Cases Entered Previously | | | | |
| We returned the following Record | | | | |
| enter new record. If you have ent questions or concerns related to | | | | |
| (404) 463-5966 or birthdefects@ | lph.ga.gov. For any question | | | |
| Registry staff first at (404) 463-07 | 82. | | | |
| Child's Name | Child's DOB Mother's | s Name | Mother's DOB Date of | f Diagnosis |
| | | | | |
| | | | | |
| Select "Save" to save data entry | Save | Add 🚽 | Select "Add" to | add a new record |
| List fields > all Vals Check > beforesubn | uit() ▶ navcheck() ▶ sendM | essages() > moveallframe | es() • documentit() | |
| List holds - an vals officert - Deforesubli | and merendenti Schull | coordoo() · movedimente | ooti documentati | |

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Instructions for Completing the Paper Birth Defects Reporting Form

Birth defects identified among newborns up to children six years of age and fetal losses of at least 20 weeks gestation are reportable to DPH. Providers may report these cases by filling out the single-page paper form, provided in Appendix B, page 34, and mailing or faxing it to the Birth Defects Registry staff:

Georgia Department of Public Health Birth Defects Registry 2 Peachtree Street NW Suite 14-133 Atlanta, GA 30303

Telephone number: (404) 463-0782 or (404) 463-5966 Fax number: (404) 463-1416

The reporting form has sections for the child's information, the mother's information, up to 10 ICD-10-CM diagnosis codes, and contact information for the person filling out the form. For inclusion in the Registry, the reporting form must contain at minimum: the name of the reporting facility, the child's name and date of birth, at least one reportable ICD-10-CM code (see Appendix D, page 88), and a reporting date.

Some facilities elect to mail the forms on a monthly basis, including all infants and children diagnosed at the facility during the preceding month. If the child has been diagnosed with birth defects at the facility before (i.e., not a newborn), please report novel diagnoses <u>only</u>. If you cannot determine which conditions have been reported previously, please include <u>all</u> reportable birth defects.

For any questions about reporting birth defects using this form, please call the Registry staff at one of the phone numbers above or by emailing <u>birthdefects@dph.ga.gov</u>.

This form is also available electronically through SendSS, see the above section (page 25).

Electronic Health Record (CDA, HL7) Reporting

The Georgia Birth Defects Registry is equipped to consume eHR records from interested eligible providers by two mechanisms: (1) eHR reporting through Georgia Health Information Network (GaHIN) to DPH and (2) Direct eHR-to-DPH by using the Public Health Information Network Messaging System (PHINMS). The schema below depicts these two eHR workflows.

If a facility is interested in attesting for Meaningful Use with the Centers for Medicare and Medicaid Services (CMS) via reporting from their certified eHR, DPH is capable of accepting messages in either HL7 or CDA format. The HL7 and CDA standards for birth defects reporting, along with connection information, will be made available upon registration of intent. For more information on initiating this process, please contact BDR staff at <u>birthdefects@dph.ga.gov</u>.

Electronic Health Record Workflow for Reporting Birth Defects to the Georgia Department of Public Health

- Provider 1 Workflow: This workflow shows SENDSS users having access to clinical data provided by organizations via GaHIN connection into SENDSS.
- Provider 2 Workflow: This workflow shows providers submitting data connecting directly into SENDSS.



APPENDICES

Appendix A. State of Georgia Legislation

Official Code of Georgia Annotated § 31-12-2: Notification of Disease

(a) The Department is empowered to declare certain diseases, injuries, and conditions to be diseases requiring notice and to require the reporting thereof to the county board of health and the Department in a manner and at such times as may be prescribed. The Department shall require that such data be supplied as are deemed necessary and appropriate for the prevention of certain diseases and accidents as are determined by the Department. All such reports and data shall be deemed confidential and shall not be open to inspection by the public; provided, however, the Department may release such reports and data in statistical form or for valid research purposes.

(a.1)(1) As used in this subsection, the term "neonatal abstinence syndrome" means a group of physical problems that occur in a newborn infant who was exposed to addictive illegal or prescription drugs while in the mother's womb.

(2) The Department shall require notice and reporting of incidents of neonatal abstinence syndrome. A health care provider, coroner, or medical examiner, or any other person or entity the Department determines has knowledge of diagnosis or health outcomes related, directly or indirectly, to neonatal abstinence syndrome shall report incidents of neonatal abstinence syndrome to the Department. The Department shall provide an annual report to the President of the Senate, the Speaker of the House of Representatives, the chairperson of the House Committee on Health and Human Services, and the chairperson of the Senate Health and Human Services Committee. Such annual report shall include any Department findings and recommendations on how to reduce the number of infants born with neonatal abstinence syndrome.

- (b) A health care provider, coroner, or medical examiner shall report to the Department and the county board of health all known or presumptively diagnosed cases of persons harboring any illness or health condition that may be caused by bioterrorism, epidemic or pandemic disease, or novel and highly fatal infectious agents or toxins and that may pose a substantial risk of a public health emergency. Reportable illnesses and conditions include, without limitation, diseases caused by biological agents listed at 42 C.F.R. Part 72, app. A (2000) and any illnesses or conditions identified by the Department as potential causes of a public health emergency.
- (c) A pharmacist shall report to the Department and county board of health any unusual or increased prescription rates, unusual types of prescriptions, or unusual trends in pharmacy visits that may reasonably be believed to be caused by bioterrorism, epidemic or pandemic disease, or novel and highly fatal infectious agents or toxins and that may pose a substantial risk of a public health emergency.
- (d) Any person, including but not limited to practitioners of the healing arts, submitting in good faith reports or data to the Department or county boards of health in compliance with the provisions of this Code section shall not be liable for any civil damages therefor.
- (e) Whenever the Department learns of any case of an unusual illness, health condition, or death, or an unusual cluster of such events, or any other suspicious health related event that it reasonably believes has the potential to be caused by bioterrorism, it shall immediately notify the Department of Public Safety and other appropriate public safety authorities.

Rules and Regulations of the State of Georgia 511-2-1: Notification of Disease

Rule 511-2-1-.02: Duty to Report Notifiable Diseases and Conditions

- (1) It shall be the duty of every reporter to promptly notify the Department upon discovering an actual or suspected case of a notifiable disease. Reports may be made through the State Electronic Notifiable Disease Surveillance System (SendSS), by telephone, by letter, or by completing and transmitting forms provided by the Department. As
- (2) Outbreaks or unusual clusters of disease, whether infectious or noninfectious, must be reported promptly to the local county health department or to the Department.
- (3) The Department shall determine which diseases and conditions require notice, and shall publish an official roster of said notifiable diseases and conditions on its website. The official roster of notifiable diseases and conditions may contain instructions requiring a reporter to forward to the Department any clinical materials found to contain an agent of a notifiable disease. Each county health department shall be responsible for making the current notifiable disease roster available to local reporters, and for providing guidance and assistance on their reporting duties.
- (4) Upon special request by the Department, a reporter shall provide information or clinical materials which indicate the presence of diseases or conditions of public health significance, such as newly recognized infectious agents, antimicrobial resistant infections such as those caused by carbapenem-resistant *Enterobacteriacae*, deaths or critical illness from suspected infectious agents, alcohol/drug abuse, birth defects, cancer, heart attack, stroke, injuries, poisonings and occupational diseases.
- (5) Upon special request by the Department, a reporter shall provide additional information to the Department concerning patients for whom they have submitted clinical materials, and to provide additional clinical materials when so requested for the purpose of providing complete laboratory confirmation of cases having public health importance, if the condition and circumstances of the patient permit.
- (6) Clinical laboratories shall retain all reports of notifiable disease for two years from the date of the report. Clinical laboratories shall retain clinical materials containing an agent of a notifiable disease for at least one week from the date of the report, and shall send said materials to the Department for further testing upon request or as directed in the official roster of notifiable diseases and conditions.
- (7) Information concerning the occurrence or probable occurrence of any notifiable disease and condition which comes to the attention of any county health department shall be promptly transmitted to the Department.

Rule 511-2-1-.03: Confidentiality

All reports submitted to a county health department or to the Department pursuant to this Chapter, information requested as part of an epidemiological investigation, and information identified as "non-public" and received from the U. S. Food and Drug Administration, shall be deemed confidential and shall not be subject to public inspection.

Rule 511-2-1-.04: Liability

Any person, including but not limited to practitioners of the healing arts, who in good faith submits reports or data to the Department or to a county health department pursuant to the provisions of this Chapter shall not be liable for any civil damages therefor.

Appendix B. Birth Defects Registry Paper Reporting Form



Georgia Department of Public Health Georgia Birth Defects Registry (GBDR) Reporting Worksheet

|--|

n Last Name: First Name: M.I.: Alt Last Name: Alt First Name: Street Address: City: County: Zip Code: State: Alt Phone: (Home Phone:) -) Date of Birth (mm/dd/yyyy): Birth Status: Child's Medical Record Number: Live birth Fetal death (<20 weeks) Birth Weight Male Birth Hospital: Sex: (grams): Female \Box Fetal death (≥ 20 weeks) Unknown

Mother's Information

| Mother's Last Name: | First Name: | M.I.: | | Maiden Name: | | Medical Record No.: |
|-----------------------------|--|-------|---------------------------------------|--------------|--|---------------------|
| | | | | | | |
| Alt Last Name: | | | Alt First Name: | | | |
| Date of Birth (mm/dd/yyyy): | Race: American Indian/Alask Asian Black/African-America Native Hawaiian/Pacif White Other Unknown | | Hispanic/Latino: Yes No Unknown | | | |

Diagnostic Information

| Date of Diagnosis (mm/dd/yyyy):/ | | | | |
|----------------------------------|-----------|--|--|--|
| ICD-10-CM Code | Narrative | | | |
| 1) | | | | |
| 2) | | | | |
| 3) | | | | |
| 4) | | | | |
| 5) | | | | |
| 6) | | | | |
| 7) | | | | |
| 8) | | | | |
| 9) | | | | |
| 10) | | | | |

| <u>Reporting Source</u> | | | | | |
|--------------------------|--------------------------------|-----------------------------|---|---|--|
| (Stamp Acceptable) | | | | | |
| Name | | | | | |
| Street Address | | | | | |
| City | State | Zip Code | | | |
| Person Completing Form: | | | | | |
| Last Name: | Fi | rst Name: | | | |
| Phone: () - | Da | ate of Report (mm/dd/yyyy): | / | / | |
| Form 3221 (rev. 04/2019) | Information on this form is CO | NFIDENTIAL | | | |

Paper reports can be mailed or faxed to the Birth Defects Registry staff:

Georgia Department of Public Health Birth Defects Registry 2 Peachtree Street NW Suite 14-133 Atlanta, GA 30303

Telephone number: (404) 463-0782 or (404) 463-5966 Fax number: (404) 463-1416

Appendix C. National Birth Defects Prevention Network ICD-9-CM to ICD-10-CM Birth Defects Diagnoses Crosswalk

The ICD-9-CM to ICD-10-CM Crosswalk developed by the National Birth Defects Prevention Network (NBDPN) is also available here: <u>https://www.nbdpn.org/ver2info.php</u>.

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone | |
|---|---|----------------|--|---------------------|--|
| ANENCEPHALUS AND SIMILAR ANOMALIES | | | | | |
| 740.0 | ANENCEPHALUS | 'Q00.0' | Anencephaly | YES | |
| 740.1 | CRANIORACHISCHISIS | 'Q00.1' | Craniorachischisis | YES | |
| 740.2 | INIENCEPHALY | 'Q00.2' | Iniencephaly | YES | |
| Excludes | FIDA INCLUSION/EXCLUSION CRITERIA : spina bifida occulta (756.17) FIDA WITH HYDROCEPHALUS Arnold-Chiari syndrome | | | | |
| | Any condition classifiable to 741.9 with an | - | | | |
| 741.00 | SPINA BIFIDA WITH HYDROCEPHALUS NOS | 'Q05.4' | Unspecified spina bifida with hydrocephalus | YES | |
| | | 'Q07.01' | Arnold-Chiari syndrome with spina bifida | | |
| | | 'Q07.02' | Arnold-Chiari syndrome with hydrocephalus | | |
| | | 'Q07.03' | Arnold-Chiari syndrome with spina bifida and hydrocephalus | | |
| 741.01 | SPINA BIFIDA WITH HYDROCEPHALUS – CERVICAL | 'Q05.0' | Cervical spina bifida with hydrocephalus | YES | |
| 741.02 | SPINA BIFIDA WITH HYDROCEPHALUS – DORSAL REGION | 'Q05.1' | Thoracic spina bifida with hydrocephalus | YES | |
| 741.03 | SPINAL BIFIDA WITH HYDROCEPHALUS – LUMBAR REGION | 'Q05.2' | Lumbar spina bifida with hydrocephalus | YES | |
| | | 'Q05.3' | Sacral spina bifida with hydrocephalus | | |
| SPINA BIFIDA WITHOUT MENTION OF HYDROCEPHALUS INCLUSION/EXCLUSION CRITERIA Hydromeningocele (spinal) Myelocystocele Hydromyelocele Rachischisis Meningocele (spinal) Spina bifida (aperta) Meningomyelocele Syringomyelocele Myelocele Syringomyelocele | | | | | |
| 741.90 | SPINA BIFIDA WITHOUT HYDROCEPHALUS, UNSPEC REGION | 'Q05.8' | Sacral spina bifida without hydrocephalus | YES | |
| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| | | 'Q05.9' | Spina bifida, unspecified | |
| | | 'Q07.00' | Arnold-Chiari syndrome without spina bifida or hydrocephalus | YES |
| 741.91 | SPINA BIFIDA WITHOUT HYDROCEPHALUS, CERVICAL | 'Q05.5' | Cervical spina bifida without hydrocephalus | YES |
| 741.92 | SPINA BIFIDA WITHOUT HYDROCEPHALUS, DORSAL | 'Q05.6' | Thoracic spina bifida without hydrocephalus | YES |
| 741.93 | SPINA BIFIDA WITHOUT HYDROCEPHALUS, LUMBAR | 'Q05.7' | Lumbar spina bifida without hydrocephalus | |
| | OTHER CONGENITAL NERVOU | IS SYSTEM A | NOMALIES | |
| OTHER C | ONGENITAL ANOMALIES OF NERVOUS SYSTEM | | | |
| 742.0 | ENCEPHALOCELE | 'Q01.0' | Frontal encephalocele | YES |
| | | 'Q01.1' | Nasofrontal encephalocele | |
| | | 'Q01.2' | Occipital encephalocele | |
| | | 'Q01.8' | Encephalocele of other sites | |
| | | 'Q01.9' | Encephalocele, unspecified | |
| 742.1 | MICROCEPHALUS | 'Q02' | Microcephaly | YES |
| 742.2 | REDUCTION DEFORMITY, BRAIN | 'Q04.0' | Congenital malformations of corpus callosum | YES |
| | | 'Q04.1' | Arhinencephaly | |
| | | 'Q04.2' | Holoprosencephaly | |
| | | 'Q04.3' | Other reduction deformities of brain | |
| 742.3 | CONGENITAL HYDROCEPHALUS | 'Q03.0' | Malformations of aqueduct of Sylvius | YES |
| | | 'Q03.1' | Atresia of foramina of Magendie and Luschka | |
| | | 'Q03.8' | Other congenital hydrocephalus | |
| | | 'Q03.9' | Congenital hydrocephalus, unspecified | |
| 742.4 | BRAIN ANOMALY, NOT ELSEWHERE CLASSIFIED (NEC) | 'Q04.4' | Septo-optic dysplasia of brain | YES |
| | | 'Q04.5' | Megalencephaly | |
| | | 'Q04.6' | Congenital cerebral cysts | |
| | | 'Q04.8' | Other specified congenital malformations of brain | |
| SPINAL C | ORD ANOMALY NEC | | | |
| 742.51 | DIASTEMATOMYELIA | 'Q06.2' | Diastematomyelia | YES |
| | | | | 37 |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|-------------------|--|----------------|--|---------------------|
| 742.53 | HYDROMYELIA | 'Q06.4' | Hydromyelia | YES |
| 742.59 | OTHER SPECIFIED SPINAL CORD ANOMALY | 'Q06.0' | Amyelia | YES |
| | | 'Q06.1' | Hypoplasia and dysplasia of spinal cord | |
| | | 'Q06.3' | Other congenital cauda equina malformations | |
| | | 'Q06.8' | Other specified congenital malformations of spinal cord | |
| | | 'Q06.9' | Congenital malformation of spinal cord, unspecified | |
| 742.8 | OTHER SPECIFIED ANOMALIES OF NERVOUS SYSTEM | 'G90.1' | Familial dysautonomia [Riley-Day] | YES |
| | | 'Q07.8' | Other specified congenital malformations of nervous system | |
| 742.9 | UNSPEC ANOM BRAIN, SPINAL CORD, AND NERVOUS SYSTEM | 'Q04.9' | Congenital malformation of brain, unspecified | YES |
| | | 'Q06.9' | Congenital malformation of spinal cord, unspecified | |
| | | 'Q07.9' | Congenital malformation of nervous system, unspecified | |
| | CONGENITAL EYE | ANOMALIES | | |
| CONGEN ANOPHTI | TAL ANOMALIES OF EYE HALMOS | | | |
| 743.00 | CLINICAL ANOPHTHALMOS NOS | 'Q11.1' | Other anophthalmos | YES |
| 743.03 | CONGENITAL CYSTIC EYEBALL | 'Q11.0' | Cystic eyeball | YES |
| 743.06 | CRYPTOPHTHALMOS | 'Q11.2' | Microphthalmos | YES |
| 743.10 | MICROPHTHALMOS, NOT OTHERWISE SPECIFIED (NOS) | 'Q11.2' | Microphthalmos | YES |
| 743.11 | SIMPLE MICROPHTHALMOS | 'Q11.2' | Microphthalmos | YES |
| 743.12 | MICROPHTHALMOS ASSOC WITH ANOM OF EYE & ADNEXA NEC | 'Q11.2' | Microphthalmos | YES |
| BUPHTHA | ALMOS INCLUSION/EXCLUSION CRITERIA Glaucoma: Hydrophthalmos congenital newborn Excludes: glaucoma of childhood (365.14) traumatic glaucoma due to birth | ı injury (767 | 8) | |
| 743.20 | BUPHTHALMOS NOS | 'Q15.0' | Congenital glaucoma | YES |
| 743.21 | SIMPLE BUPHTHALMOS | 'Q15.0' | Congenital glaucoma | YES |
| 743.22 | BUPHTHALMOS WITH OTHER OCULAR ANOMALIES | 'Q15.0' | Congenital glaucoma | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|--|----------------|---|---------------------|
| CONGEN | ITAL CATARACT AND LENS ANOMALIES Excludes: infantile cataract (366.00-366.09) | | | |
| 743.30 | CONGENITAL CATARACT NOS | 'Q12.0' | Congenital cataract | YES |
| 743.31 | CAPSULAR AND SUBCAPSULAR CATARACT | 'Q12.0' | Congenital cataract | YES |
| 743.32 | CORTICAL/ZONULAR CATARACT | 'Q12.0' | Congenital cataract | YES |
| 743.33 | NUCLEAR CATARACT | 'Q12.0' | Congenital cataract | YES |
| 743.34 | TOTAL AND SUBTOTAL CATARACT, CONGENITAL | 'Q12.0' | Congenital cataract | YES |
| 743.35 | CONGENITAL APHAKIA | 'Q12.3' | Congenital aphakia | YES |
| 743.36 | ANOMALIES OF LENS SHAPE | 'Q12.2' | Coloboma of lens | YES |
| | | 'Q12.4' | Spherophakia | |
| | | 'Q12.8' | Other congenital lens malformations | |
| 743.37 | CONGENITAL ECTOPIC LENS | 'Q12.1' | Congenital displaced lens | YES |
| 743.39 | CONGENITAL CATARACT/LENS ANOMALIES NEC | 'Q12.9' | Congenital lens malformation, unspecified | YES |
| COLOBO | MA AND OTHER ANOMALIES OF ANTERIOR SEGMEN | | | |
| 743.41 | ANOMALIES OF CORNEAL SIZE AND SHAPE | 'Q13.4' | Other congenital corneal malformations | YES |
| 743.42 | CONGENITAL CORNEA OPACITIES AFFECTING VISION | 'Q13.3' | Congenital corneal opacity | YES |
| 743.43 | OTHER CONGENITAL CORNEAL OPACITIES NEC | 'Q13.3' | Congenital corneal opacity | YES |
| 743.44 | SPEC ANOMALIES OF ANTERIOR CHAMBER, CHAMBER ANGLE | 'Q13.4' | Other congenital corneal malformations | YES |
| | | 'Q13.81' | Rieger's anomaly | |
| | | 'Q13.9' | Congenital malformation of anterior segment of eye, unspecified | |
| | | 'Q15.0' | Congenital glaucoma | |
| 743.45 | ANIRIDIA | 'Q13.1' | Absence of iris | YES |
| 743.46 | ANOMALIES OF IRIS AND CILIARI BODY NEC | 'Q13.0' | Coloboma of iris | YES |
| | | 'Q13.2' | Other congenital malformations of iris | |
| 743.47 | SPECIFIED ANOMALIES OF SCLERA | 'Q13.5' | Blue sclera | YES |
| 743.48 | MULTIPLE AND COMBINED ANOMALIES OF ANTERIOR SEG | 'Q13.89' | Other congenital malformations of anterior segment of eye | YES |
| 743.49 | OTHER ANOMALIES OF ANTERIOR SEGMENT NEC | 'Q13.89' | Other congenital malformations of anterior segment of eye | YES |

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|---------------|--|----------------|--|---------------------|
| | | 'Q13.9' | Congenital malformation of anterior segment of eye, unspecified | |
| CONGEN | TAL ANOMALIES OF POSTERIOR SEGMENT | | | |
| 743.51 | VITREOUS ANOMALIES | 'Q14.0' | Congenital malformation of vitreous humor | YES |
| 743.52 | FUNDUS COLOBOMA | 'Q14.8' | Other congenital malformations of posterior segment of eye | YES |
| 743.53 | CONGENITAL CHORIORETINAL DEGENERATION | 'Q14.3' | Congenital malformation of choroid | YES |
| 743.54 | CONGENITAL FOLDS/CYSTS OF POSTERIOR SEGMENT | 'Q14.8' | Other congenital malformations of posterior segment of eye | YES |
| 743.55 | CONGENITAL MACULAR CHANGES | 'Q14.8' | Other congenital malformations of posterior segment of eye | YES |
| 743.56 | CONGENITAL RETINAL CHANGES NEC | 'Q14.1' | Congenital malformation of retina | YES |
| 743.57 | SPECIFIED OPTIC DISC ANOMALIES | 'Q14.2' | Congenital malformation of optic disc | YES |
| 743.58 | VASCULAR ANOMALIES – POSTERIOR SEGMENT | 'Q14.8' | Other congenital malformations of posterior segment of eye | YES |
| 743.59 | POSTERIOR SEGMENT ANOMALIES NEC | 'Q14.8' | Other congenital malformations of posterior segment of eye | YES |
| | | 'Q14.9' | Congenital malformation of posterior segment of eye, unspecified | |
| CONGEN | TAL ANOMALIES OF EYELIDS, LACRIMAL SYSTEM AND | ORBIT | | |
| 743.61 | CONGENITAL PTOSIS | 'Q10.0' | Congenital ptosis | YES |
| 743.62 | CONGENITAL EYELID DEFORMITIES | 'Q10.1' | Congenital ectropion | YES |
| | | 'Q10.2' | Congenital entropion | |
| | | 'Q10.3' | Other congenital malformations of eyelid | |
| 743.63 | SPECIFIED CONGENITAL ANOMALIES OF EYELID NEC | 'Q10.3' | Other congenital malformations of eyelid | YES |
| 743.64 | SPECIFIED LACRIMAL GLAD ANOMALIES | 'Q10.6' | Other congenital malformations of lacrimal apparatus | YES |
| 743.65 | SPECIFIED CONGENITAL ANOMALIES OF LACRIMAL PASSAGE | 'Q10.4' | Absence and agenesis of lacrimal apparatus | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
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| | | 'Q10.5' | Congenital stenosis and stricture of lacrimal duct | |
| | | 'Q10.6' | Other congenital malformations of lacrimal apparatus | |
| 743.66 | SPECIFIED ANOMALIES OF ORBIT, CONGENITAL | 'Q10.7' | Congenital malformation of orbit | YES |
| 743.69 | OTHER EYELID, ORBIT OR LACRIMAL SYSTEM ANOMALIES | 'Q10.3' | Other congenital malformations of eyelid | YES |
| | | 'Q10.6' | Other congenital malformations of lacrimal apparatus | |
| | | 'Q10.7' | Congenital malformation of orbit | |
| 743.8 | EYE ANOMALIES NEC | 'Q11.3' | Macrophthalmos | YES |
| | | 'Q15.8' | Other specified congenital malformations of eye | |
| 743.9 | EYE ANOMALY NOS | 'Q15.9' | Congenital malformation of eye, unspecified | YES |
| | CONGENITAL ANOMALIES | OF EAR, FAG | CE, NECK | |
| | ITAL ANOMALIES OF EAR, FACE, NECK INCLUSION/EX Excludes: anomaly of: cervical spine (754.2, 756.10,-756.19) larynx (748.2-748.3) nose (748.0-748.1) parathyroid gland (759.2) thyroid gland (759.2) cleft lip (749.10-749.25) IES OF EAR CAUSING IMPAIRMENT OF HEARING | | | |
| | Excludes: congenital deafness without mentio | - | - | 1 |
| 744.00 | UNSPECIFIED ANOMALY OF EAR WITH IMPAIRED HEARING | 'Q16.9' | Congenital malformation of ear causing impairment of hearing, unspecified | YES |
| 744.01 | CONGENITAL ABSENCE OF EXTERNAL EAR | 'Q16.0' | Congenital absence of (ear) auricle | YES |
| 744.02 | EXTERNAL EAR ANOMALIES WITH IMPAIRMENT OF HEARING | 'Q16.1' | Congenital absence, atresia and stricture of auditory canal (external) | YES |
| 744.03 | MIDDLE EAR ANOMALY, EXCEPT OSSICLES | 'Q16.4' | Other congenital malformations of middle ear | YES |
| 744.04 | ANOMALIES OF EAR OSSICLES | 'Q16.3' | Congenital malformation of ear ossicles | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|---|---------------------|
| 744.05 | ANOMALIES OF INNER EAR | 'Q16.5' | Congenital malformation of inner ear | YES |
| 744.09 | EAR ANOMALIES NEC WITH HEARING IMPAIRMENT | 'Q16.9' | Congenital malformation of ear causing impairment of hearing, unspecified | YES |
| 744.1 | ACCESSORY AURICLE | 'Q17.0' | Accessory auricle | YES |
| | PECIFIED ANOMALIES OF EAR INCLUSION/EXCLUSION | CRITERIA | | |
| | that with impairment of hearing (744.00-744.09) | | | |
| 744.21 | CONGENITAL ABSENCE OF EAR LOBE | 'Q17.8' | Other specified congenital malformations of ear | YES |
| 744.22 | MACROTIA | 'Q17.1' | Macrotia | YES |
| 744.23 | MICROTIA | 'Q17.2' | Microtia | YES |
| 744.24 | EUSTACHIAN TUBE ANOMALIES NEC | 'Q16.2' | Absence of eustachian tube | YES |
| 744.29 | EAR ANOMALIES NEC | 'Q17.3' | Other misshapen ear | YES |
| | | 'Q17.4' | Misplaced ear | |
| | | 'Q17.5' | Prominent ear | |
| | | 'Q17.8' | Other specified congenital malformations of ear | |
| 744.3 | EAR ANOMALY NOS | 'Q17.9' | Congenital malformation of ear, unspecified | YES |
| BRANCH | AL CLEFT CYST OR FISTULA; PREAURICULAR SINUS | | 1 | |
| 744.41 | BRANCHIAL CLEFT SINUS OR FISTULA (VESTIGE) | 'Q18.0' | Sinus, fistula and cyst of branchial cleft | YES |
| 744.42 | BRANCHIAL CLEFT CYST | 'Q18.0' | Sinus, fistula and cyst of branchial cleft | YES |
| 744.43 | CERVICAL AURICLE | 'Q18.2' | Other branchial cleft malformations | YES |
| 744.46 | PREAURICULAR SINUS OR FISTULA | 'Q18.1' | Preauricular sinus and cyst | YES |
| 744.47 | PREAURICULAR CYST | 'Q18.1' | Preauricular sinus and cyst | YES |
| 744.49 | BRANCHIAL CLEFT ANOMALIES NEC | 'Q18.0' | Sinus, fistula and cyst of branchial cleft | YES |
| | | 'Q18.1' | Preauricular sinus and cyst | |
| | | 'Q18.2' | Other branchial cleft malformations | |
| 744.5 | WEBBING NECK | 'Q18.3' | Webbing of neck | YES |
| OTHER S | PECIFIED ANOMALIES OF FACE AND NECK | | | |
| 744.81 | MACROCHEILIA | 'Q18.6' | Macrocheilia | YES |
| 744.82 | MICROCHEILIA | 'Q18.7' | Microcheilia | YES |
| 744.83 | MACROSTOMIA | 'Q18.4' | Macrostomia | YES |
| 744.84 | MICROSTOMIA | 'Q18.5' | Microstomia | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| 744.89 | OTHER SPEC CONGEN ANOMALIES OF THE FACE AND NECK | 'Q18.8' | Other specified congenital malformations of face and neck | YES |
| 744.9 | CONGENITAL ANOMALIES OF FACE AND NECK NOS | 'Q18.9' | Congenital malformation of face and neck, unspecified | YES |
| | BULBUS CORDIS ANOMALIES AND ANOM | ALIES OF CA | RDIAC SEPTAL CLOSURE | |
| | CORDIS ANOMALIES AND ANOMALIES OF CARDIAC SE | | | |
| 745.0 | COMMON TRUNCUS | 'Q20.0' | Common arterial trunk | YES |
| | OSITION OF GREAT VESSELS | | | 1 |
| 745.10 | COMPLETE TRANSPOSITION OF GREAT VESSELS | 'Q20.3' | Discordant ventriculoarterial connection | YES |
| 745.11 | DOUBLE OUTLET RIGHT VENTRICLE | 'Q20.1' | Double outlet right ventricle | YES |
| 745.12 | CORRECTED TRANSPOSITION OF GREAT VESSELS | 'Q20.5' | Discordant atrioventricular connection | YES |
| 745.19 | TRANSPOSITION OF GREAT VESSELS NEC | 'Q20.2' | Double outlet left ventricle | YES |
| | | 'Q20.3' | Discordant ventriculoarterial connection | |
| | | 'Q20.8' | Other congenital malformations of cardiac chambers and connections | |
| 745.2 | TETRALOGY OF FALLOT | 'Q21.3' | Tetralogy of Fallot | YES |
| 745.3 | COMMON VENTRICLE | 'Q20.4' | Double inlet ventricle | YES |
| 745.4 | VENTRICULAR SEPTAL DEFECT | 'Q21.0' | Ventricular septal defect | YES |
| 745.5 | OSTIUM SECUNDUM TYPE ATRIAL SEPTAL DEFECT | 'Q21.1' | Atrial septal defect | YES |
| ENDOCA | RDIAL CUSHION DEFECTS | | | 1 |
| 745.60 | ENDOCARDIAL CUSION DEFECT, NOS | 'Q21.2' | Atrioventricular septal defect | YES |
| 745.61 | OSTIUM PRIMUM DEFECT | 'Q21.2' | Atrioventricular septal defect | YES |
| 745.69 | ENDOCARDIAL CUSHION DEFECT NEC | 'Q21.2' | Atrioventricular septal defect | YES |
| 745.7 | COR BILOCULARE | 'Q20.8' | Other congenital malformations of cardiac chambers and connections | YES |
| 745.8 | SEPTAL CLOSURE ANOMALIES NEC | 'Q20.6' | Isomerism of atrial appendages | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| | | 'Q20.8' | Other congenital malformations of cardiac chambers and connections | |
| | | 'Q21.4' | Aortopulmonary septal defect | |
| | | 'Q21.8' | Other congenital malformations of cardiac septa | |
| 745.9 | SEPTAL CLOSURE ANOMALIES NOS | 'Q21.9' | Congenital malformation of cardiac septum, unspecified | YES |
| | OTHER CONGENITAL AND | OMALIES OF | HEART | |
| | ONGENITAL ANOMALIES OF HEART INCLUSION/EXCLU Excludes: endocardial fibroelastosis (425.3) IES OF PULMONARY VALVE Excludes: infundibular or subvalvular pulmonic tetralogy of Fallot (745.2) | | | |
| 746.00 | PULMONARY VALVE ANOMALY NOS | 'Q22.3' | Other congenital malformations of pulmonary valve | YES |
| 746.01 | CONGENITAL PULMONARY VALVE ATRESIA | 'Q22.0' | Pulmonary valve atresia | YES |
| 746.02 | CONGENITAL PULMONARY VALVE STENOSIS | 'Q22.1' | Congenital pulmonary valve stenosis | YES |
| 746.09 | PULMONARY VALVE ANOMALY NEC | 'Q22.2' | Congenital pulmonary valve insufficiency | YES |
| 746.1 | CONGENITALTRICUSPID ATRESIA AND STENOSIS | 'Q22.4' | Congenital tricuspid stenosis | YES |
| | | 'Q22.6' | Hypoplastic right heart syndrome | |
| | | 'Q22.8' | Other congenital malformations of tricuspid valve | |
| | | 'Q22.9' | Congenital malformation of tricuspid valve, unspecified | |
| 746.2 | EBSTEIN'S ANOMALY | 'Q22.5' | Ebstein's anomaly | YES |
| 746.3 | CONGENITAL STENOSIS OF AORTIC VALVE | 'Q23.0' | Congenital stenosis of aortic valve | YES |
| 746.4 | CONGENITAL INSUFFICIENCY OF AORTIC VALVE | 'Q23.1' | Congenital insufficiency of aortic valve | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| 746.5 | CONGENITAL MITRAL STENOSIS | 'Q23.2' | Congenital mitral stenosis | YES |
| 746.6 | CONGENITAL MITRAL INSUFFICIENCY | 'Q23.3' | Congenital mitral insufficiency | YES |
| 746.7 | HYPOPLASTIC LEFT HEART SYNDROME | 'Q23.4' | Hypoplastic left heart syndrome | YES |
| OTHER SE | PECIFIED ANOMALIES OF HEART | | | |
| 746.81 | CONGENITAL SUBAORTIC STENOSIS | 'Q24.4' | Congenital subaortic stenosis | YES |
| 746.82 | COR TRIATRIATUM | 'Q24.2' | Cor triatriatum | YES |
| 746.83 | INFUNDIBULAR PULMONIC STENOSIS | 'Q24.3' | Pulmonary infundibular stenosis | YES |
| 746.84 | OBSTRUCTIVE ANOMALIES OF HEART NEC | 'Q24.8' | Other specified congenital malformations of heart | YES |
| 746.85 | CORONARY ARTERY ANOMALY | 'Q24.5' | Malformation of coronary vessels | YES |
| 746.86 | CONGENITAL HEART BLOCK | 'Q24.6' | Congenital heart block | YES |
| 746.87 | MALPOSITION OF HEART AND CARDIAC APEX | 'Q24.0' | Dextrocardia | YES |
| | | 'Q24.1' | Levocardia | |
| | | 'Q24.8' | Other specified congenital malformations of heart | |
| 746.89 | CONGENITAL ANOMALIES OF HEART NEC | 'Q23.8' | Other congenital malformations of aortic and mitral valves | YES |
| | | 'Q23.9' | Congenital malformation of aortic and mitral valves, unspecified | |
| | | 'Q24.8' | Other specified congenital malformations of heart | |
| 746.9 | CONGENITAL ANOMALIES OF HEART NOS | 'Q20.9' | Congenital malformation of cardiac chambers and connections, unspecified | YES |
| | | 'Q24.9' | Congenital malformation of heart, unspecified | |
| | OTHER CONGENITAL ANOMALIES | OF CIRCUL | ATORY SYSTEM | |
| OTHER CO | ONGENITAL ANOMALIES OF CIRCULATORY SYSTEM | | | |
| 747.0 | PATENT DUCTUS ARTERIOSSUS (LIVE BIRTHS ≥2,500g) | 'Q25.0' | Patent ductus arteriosus | NO |
| 747.10 | COARCTATION AORTA (PREDUCTAL) (POSTDUCTAL) | 'Q25.1' | Coarctation of aorta | YES |
| 747.11 | INTERRUPTION OF AORTIC ARCH | 'Q25.2' | Atresia of aorta | YES |
| OTHER A | NOMALIES OF AORTA | | | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| 747.20 | CONGENITAL ANOMALIES OF AORTA NOS | 'Q25.4' | Other congenital malformations of aorta | YES |
| 747.21 | ANOMALIES OF AORTIC ARCH | 'Q25.4' | Other congenital malformations of aorta | YES |
| 747.22 | AORTIC ATRESIA/STENOSIS | 'Q25.2' | Atresia of aorta | YES |
| | | 'Q25.3' | Supravalvular aortic stenosis | |
| 747.29 | CONGENITAL ANOMALIES OF AORTA NEC | 'Q25.4' | Other congenital malformations of aorta | YES |
| | | 'Q25.8' | Other congenital malformations of other great arteries | |
| | | 'Q25.9' | Congenital malformation of great arteries, unspecified | |
| 747.31 | PULMONARY ARTERY COARCTATION AND ATRESIA | 'Q25.5' | Atresia of pulmonary artery | |
| | | 'Q25.71' | Coarctation of pulmonary artery | |
| 747.32 | PULMONARY ARTERIOVENOUS MALFORMATION | 'Q25.72' | Congenital pulmonary arteriovenous malformation | |
| 747.39 | OTHER ANOMALIES OF PULMNARY ARTERY AND PULMONARY CIRCULATION | 'Q25.6' | Stenosis of pulmonary artery | |
| | | 'Q25.79' | Other congenital malformations of pulmonary artery | YES |
| ANOMA | LIES OF GREAT VEINS | 1 | | 1 |
| 747.40 | GREAT VEIN ANOMALY NOS | 'Q26.9' | Congenital malformation of great vein, unspecified | YES |
| 747.41 | TOTAL ANOMALOUS PULMONARY VENOUS CONNECTION | 'Q26.2' | Total anomalous pulmonary venous connection | YES |
| 747.42 | PARTIAL ANOMALOUS PULMONARY VENOUS CONNECTON | 'Q26.3' | Partial anomalous pulmonary venous connection | |
| | | 'Q26.4' | Anomalous pulmonary venous connection, unspecified | |
| 747.49 | GREAT VEIN ANOMALY NEC | 'Q26.0' | Congenital stenosis of vena cava | YES |
| | | 'Q26.1' | Persistent left superior vena cava | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
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| | | 'Q26.8' | Other congenital malformations of great veins | |
| 747.5 | ABSENCE OR HYPOPLASIA OF UMBILICAL ARTERY | 'Q27.0' | Congenital absence and hypoplasia of umbilical artery | YES |
| 747.60 | ANOMALY OF THE PERIPHERAL VASCULAR SYSTEM, UNSPECIFIED SITE | 'Q27.9' | Congenital malformation of peripheral vascular system, unspecified | |
| 747.61 | GASTOINTESTINAL VESSEL ANOMALY | 'Q26.5' | Anomalous portal venous connection | |
| | | 'Q26.6' | Portal vein-hepatic artery fistula | |
| | | 'Q27.33' | Arteriovenous malformation of digestive system vessel | |
| 747.62 | RENAL VESSEL ANOMALY | 'Q27.1' | Congenital renal artery stenosis | |
| | | 'Q27.2' | Other congenital malformations of renal artery | |
| | | 'Q27.34' | Arteriovenous malformation of renal vessel | |
| 747.63 | UPPER LIMB VESSEL ANOMALY | 'Q27.31' | Arteriovenous malformation of vessel of upper limb | |
| 747.64 | LOWER LIMB VESSEL ANOMALY | 'Q27.32' | Arteriovenous malformation of vessel of lower limb | |
| 747.69 | ANOMALIES OF OTHER SPICIFIED SITES OF PERIPHERAL VASCULAR SYSTEM | 'Q27.39' | Arteriovenous malformation, other site | |
| | | 'Q27.8' | Other specified congenital malformations of peripheral vascular system | |
| OTHER S | PECIFIED ANOMALIES OF CIRCULATORY SYSTEM | | | |
| 747.81 | CEREBROVASCULAR SYSTEM ANOMALIES | 'Q28.2' | Arteriovenous malformation of cerebral vessels | YES |
| | | 'Q28.3' | Other malformations of cerebral vessels | |
| 747.82 | SPINAL VESSEL ANOMALY | 'Q27.9' | Congenital malformation of peripheral vascular system, unspecified | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
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| 747.83 | PERSISTENT FETAL CIRCULATION | 'P29.3' | Persistent fetal circulation | YES |
| 747.89 | CIRCULATORY ANOMALY NEC | 'Q27.30' | Arteriovenous malformation, site unspecified | YES |
| | | 'Q27.4' | Congenital phlebectasia | |
| | | 'Q28.0' | Arteriovenous malformation of precerebral vessels | |
| | | 'Q28.1' | Other malformations of precerebral vessels | |
| | | 'Q28.8' | Other specified congenital malformations of circulatory system | |
| 747.9 | CIRCULATORY ANOMALY NOS | 'Q28.9' | Congenital malformation of circulatory system, unspecified | YES |
| | CONGENITAL ANOMALIES O | F RESPIRATO | RY SYSTEM | |
| | ITAL ANOMALIES OF RESPIRATORY SYSTEM INCLUSIC : congenital defect of diaphragm (756.6) | ON/EXCLUSIC | ON CRITERIA | |
| 748.0 | CHOANAL ATRESIA | 'Q30.0' | Choanal atresia | YES |
| 748.1 | NOSE ANOMALY NEC | 'Q30.1' | Agenesis and underdevelopment of nose | YES |
| | | 'Q30.2' | Fissured, notched and cleft nose | |
| | | 'Q30.3' | Congenital perforated nasal septum | |
| | | 'Q30.8' | Other congenital malformations of nose | |
| | | 'Q30.9' | Congenital malformation of nose, unspecified | |
| 748.2 | LARYNGEAL WEB | 'Q31.0' | Web of larynx | YES |
| 748.3 | OTHER ANOMALIES OF LARYNX, TRACHEA, AND BRONCHUS | 'Q31.1' | Congenital subglottic stenosis | YES |
| | | 'Q31.2' | Laryngeal hypoplasia | |
| | | 'Q31.3' | Laryngocele | |
| | | 'Q31.5' | Congenital laryngomalacia | |
| | | 'Q31.8' | Other congenital malformations of larynx | |
| | | 'Q31.9' | Congenital malformation of larynx, unspecified | |
| | | 'Q32.0' | Congenital tracheomalacia | |
| | | 'Q32.1' | Other congenital malformations of trachea | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
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| | | 'Q32.2' | Congenital bronchomalacia | |
| | | 'Q32.3' | Congenital stenosis of bronchus | |
| | | 'Q32.4' | Other congenital malformations of bronchus | |
| 748.4 | CONGENITAL CYSTIC LUNG | 'Q33.0' | Congenital cystic lung | YES |
| 748.5 | AGENESIS, HYPOPLASIA AND DYSPLASIA OF LUNG | 'Q33.2' | Sequestration of lung | YES |
| | | 'Q33.3' | Agenesis of lung | |
| | | 'Q33.6' | Congenital hypoplasia and dysplasia of lung | |
| OTHER A | NOMALIES OF LUNG | | | |
| 748.60 | LUNG ANOMALY NOS | 'Q33.9' | Congenital malformation of lung, unspecified | YES |
| 748.61 | CONGENITAL BRONCHIECTASIS | 'Q33.4' | Congenital bronchiectasis | YES |
| 748.69 | LUNG ANOMALY NEC | 'Q33.1' | Accessory lobe of lung | YES |
| | | 'Q33.5' | Ectopic tissue in lung | |
| | | 'Q33.8' | Other congenital malformations of lung | |
| 748.8 | RESPIRATORY SYSTEM ANOMALY NEC | 'Q34.0' | Anomaly of pleura | YES |
| | | 'Q34.1' | Congenital cyst of mediastinum | |
| | | 'Q34.8' | Other specified congenital malformations of respiratory system | |
| 748.9 | RESPIRATORY SYSTEM ANOMALY NOS | 'Q34.9' | Congenital malformation of respiratory system, unspecified | YES |
| | CLEFT PALATE AN | D CLEFT LIP | | |
| CLEFT PA CLEFT PA | LATE AND CLEFT LIP LATE | | | |
| 749.00 | CLEFT PALATE NOS | 'Q35.1' | Cleft hard palate | YES |
| | | 'Q35.3' | Cleft soft palate | |
| | | 'Q35.5' | Cleft hard palate with cleft soft palate | |
| | | 'Q35.9' | Cleft palate, unspecified | |
| 749.01 | UNILATERAL CLEFT PALATE, COMPLETE | 'Q35.9' | Cleft palate, unspecified | YES |
| 749.02 | UNILATERAL CLEFT PALATE, INCOMPLETE | 'Q35.7' | Cleft uvula | YES |
| | | 'Q35.9' | Cleft palate, unspecified | |
| 749.03 | BILATERAL CLEFT PALATE, COMPLETE | 'Q35.9' | Cleft palate, unspecified | YES |
| 749.04 | BILATERAL CLEFT PALATE, INCOMPLETE | 'Q35.9' | Cleft palate, unspecified | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
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| CLEFT LIP | INCLUSION/EXCLUSION CRITERIA Cheiloschisis Harelip Congenital fissure of lip Labium leporinum | | | |
| 749.10 | CLEFT LIP NOS | 'Q36.9' | Cleft lip, unilateral | YES |
| 749.11 | UNILATERAL CLEFT LIP, COMPLETE | 'Q36.1' | Cleft lip, median | YES |
| | | 'Q36.9' | Cleft lip, unilateral | |
| 749.12 | UNILATERAL CLEFT LIP, INCOMPLETE | 'Q36.9' | Cleft lip, unilateral | YES |
| 749.13 | BILATERAL CLEFT LIP, COMPLETE | 'Q36.0' | Cleft lip, bilateral | YES |
| 749.14 | BILATERAL CLEFT LIP, INCOMPLETE | 'Q36.0' | Cleft lip, bilateral | YES |
| CLEFT PA | LATE WITH CLEFT LIP Cheilopalatoschisis | | | |
| 749.20 | CLEFT PALATE AND LIP NOS | 'Q37.9' | Unspecified cleft palate with unilateral cleft lip | YES |
| 749.21 | UNILATERAL CLEFT PALATE WITH LEFT LIP, COMPLETE | 'Q37.1' | Cleft hard palate with unilateral cleft lip | YES |
| | | 'Q37.3' | Cleft soft palate with unilateral cleft lip | |
| | | 'Q37.5' | Cleft hard and soft palate with unilateral cleft lip | |
| | | 'Q37.9' | Unspecified cleft palate with unilateral cleft lip | |
| 749.22 | UNILATERAL CLEFT PALATE AND LIP, INCOMPLETE | 'Q37.1' | Cleft hard palate with unilateral cleft lip | YES |
| | | 'Q37.3' | Cleft soft palate with unilateral cleft lip | |
| | | 'Q37.5' | Cleft hard and soft palate with unilateral cleft lip | |
| | | 'Q37.9' | Unspecified cleft palate with unilateral cleft lip | |
| 749.23 | BILATERAL CLEFT PALATE AND LIP, COMPLETE | 'Q37.0' | Cleft hard palate with bilateral cleft lip | YES |
| | | 'Q37.2' | Cleft soft palate with bilateral cleft lip | |
| | | 'Q37.4' | Cleft hard and soft palate with bilateral cleft lip | |
| | | 'Q37.8' | Unspecified cleft palate with bilateral cleft lip | |
| 749.24 | BILATERAL CLEFT PALATE AND LIP, INCOMPLETE | 'Q37.0' | Cleft hard palate with bilateral cleft lip | YES |
| | | 'Q37.2' | Cleft soft palate with bilateral cleft lip | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|--|----------------|--|---------------------|
| | | 'Q37.4' | Cleft hard and soft palate with bilateral cleft lip | |
| | | 'Q37.8' | Unspecified cleft palate with bilateral cleft lip | |
| 749.25 | CLEFT PALATE AND LIP NEC | 'Q37.9' | Unspecified cleft palate with unilateral cleft lip | YES |
| | OTHER CONGENITAL ANOMALIES O | OF UPPER AL | IMENTARY TRACT | 1 |
| | ONGENITAL ANOMALIES OF UPPER ALIMENTARY TRA Excludes: dentofacial anomalies (524.0 - 524.9) NOMALIES OF TONGUE | | DN/EXCLUSION CRITERIA | |
| 750.0 | TONGUE TIE – ANKYLOGLOSSIA | 'Q38.1' | Ankyloglossia | NO |
| 750.10 | TONGUE ANOMALY NOS | 'Q38.3' | Other congenital malformations of tongue | YES |
| 750.11 | AGLOSSIA | 'Q38.3' | Other congenital malformations of tongue | YES |
| 750.12 | CONGENITAL ADHESIONS OF THE TONGUE | 'Q38.3' | Other congenital malformations of tongue | NO |
| 750.13 | CONGENITAL FISSURE OF TONGUE | 'Q38.3' | Other congenital malformations of tongue | YES |
| 750.15 | CONGENITAL MACROGLOSSIA | 'Q38.2' | Macroglossia | YES |
| 750.16 | MICROGLOSSIA | 'Q38.3' | Other congenital malformations of tongue | YES |
| 750.19 | TONGUE ANOMALY NEC | 'Q38.3' | Other congenital malformations of tongue | YES |
| OTHER S | PECIFIED ANOMALIES OF MOUTH AND PHARYNX | | | |
| 750.21 | SALIVARY GLAD ABSENCE | 'Q38.4' | Congenital malformations of salivary glands and ducts | YES |
| 750.22 | ACCESSORY SALIVARY GLAD | 'Q38.4' | Congenital malformations of salivary glands and ducts | YES |
| 750.23 | CONGENITAL ATRESIA, SALIVARY DUCT | 'Q38.4' | Congenital malformations of salivary glands and ducts | YES |
| 750.24 | CONGENITAL SALIVARY GLAD FISTULA | 'Q38.4' | Congenital malformations of salivary glands and ducts | YES |
| 750.25 | CONGENITAL LIP FISTULA | 'Q38.0' | Congenital malformations of lips, not elsewhere classified | YES |
| 750.26 | MOUTH ANOMALY NEC | 'Q38.6' | Other congenital malformations of mouth | YES |
| 750.27 | DIVERTICULUM OF PHARYNX | 'Q38.7' | Congenital pharyngeal pouch | YES |
| 750.29 | PHARYNGEAL ANOMALY NEC | 'Q38.8' | Other congenital | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|--|----------------|--|---------------------|
| | | | malformations of pharynx | |
| 750.3 | TRACHOESOPH FISTULA, ESOPH ATRESIA & STENOSIS | 'Q39.0' | Atresia of esophagus without fistula | YES |
| | | 'Q39.1' | Atresia of esophagus with tracheo-esophageal fistula | |
| | | 'Q39.2' | Congenital tracheo- esophageal fistula without atresia | |
| | | 'Q39.3' | Congenital stenosis and stricture of esophagus | |
| | | 'Q39.4' | Esophageal web | |
| 750.4 | ESOPHAGEAL ANOMALY NEC | 'Q39.5' | Congenital dilatation of esophagus | YES |
| | | 'Q39.6' | Congenital diverticulum of esophagus | |
| | | 'Q39.8' | Other congenital malformations of esophagus | |
| | | 'Q39.9' | Congenital malformation of esophagus, unspecified | |
| 750.5 | CONGENITAL HYPERTROPHIC PYLORIC STENOSIS | 'Q40.0' | Congenital hypertrophic pyloric stenosis | YES |
| 750.6 | CONGENITAL HIATUS HERNIA | 'Q40.1' | Congenital hiatus hernia | YES |
| 750.7 | GASTRIC ANOMALY NEC | 'Q40.2' | Other specified congenital malformations of stomach | YES |
| 750.8 | OTHER SPEC ANOMALIES OF UPPER ALIMENTARY TRACT | 'Q40.2' | Other specified congenital malformations of stomach | YES |
| | | 'Q40.8' | Other specified congenital malformations of upper alimentary tract | |
| 750.9 | UNSPECIFIED ANOMALY OF UPPER ALIMENTARY TRACT NEC | 'Q38.5' | Congenital malformations of palate, not elsewhere classified | YES |
| | | 'Q40.3' | Congenital malformation of stomach, unspecified | |
| | | 'Q40.9' | Congenital malformation of upper alimentary tract, unspecified | |
| | OTHER CONGENITAL ANOMALI | ES OF DIGES | TIVE SYSTEM | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|--|----------------|---|---------------------|
| | I ONGENITAL ANOMALIES OF DIGESTIVE SYSTEM | | | Alone |
| 751.0 | MECKEL'S DIVERTICULUM | 'Q43.0' | Meckel's diverticulum (displaced) (hypertrophic) | YES |
| 751.1 | ATRESIA AND STENOSIS OF SMALL INTESTINE | 'Q41.0' | Congenital absence, atresia and stenosis of duodenum | YES |
| | | 'Q41.1' | Congenital absence, atresia and stenosis of jejunum | |
| | | 'Q41.2' | Congenital absence, atresia and stenosis of ileum | |
| | | 'Q41.8' | Congenital absence, atresia and stenosis of other specified parts of small intestine | |
| | | 'Q41.9' | Congenital absence, atresia and stenosis of small intestine, part unspecified | YES |
| 751.2 | ATRESIA AND STENOSIS OF COLON, RECTUM AND ANUS | 'Q42.0' | Congenital absence, atresia and stenosis of rectum with fistula | |
| | | 'Q42.1' | Congenital absence, atresia and stenosis of rectum without fistula | |
| | | 'Q42.2' | Congenital absence, atresia and stenosis of anus with fistula | |
| | | 'Q42.3' | Congenital absence, atresia and stenosis of anus without fistula | |
| | | 'Q42.8' | Congenital absence, atresia and stenosis of other parts of large intestine | |
| | | 'Q42.9' | Congenital absence, atresia and stenosis of large intestine, part unspecified | |
| 751.3 | HIRSCHSPRUNG'S DISEASE, OTHER DISFUNCTION OF COLON | 'Q43.1' | Hirschsprung's disease | YES |
| | | 'Q43.2' | Other congenital functional disorders of colon | |
| 751.4 | INTESTINAL FIXATION ANOMALIES | 'Q43.3' | Congenital malformations of intestinal fixation | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|--|----------------|--|---------------------|
| 751.5 | INTESTINAL ANOMALY NEC | 'Q43.4' | Duplication of intestine | YES |
| | | 'Q43.5' | Ectopic anus | |
| | | 'Q43.6' | Congenital fistula of rectum and anus | |
| | | 'Q43.7' | Persistent cloaca | |
| | | 'Q43.8' | Other specified congenital malformations of intestine | |
| | | 'Q43.9' | Congenital malformation of intestine, unspecified | |
| ANOMA | LIES OF GALLBLADDER, BILE DUCTS AND LIVER | | | |
| 751.60 | UNSPEC ANOMALY OF GALLBLADDER BILE DUCTS AND LIVER | 'Q44.1' | Other congenital malformations of gallbladder | YES |
| | | 'Q44.4' | Choledochal cyst | |
| | | 'Q44.5' | Other congenital malformations of bile ducts | |
| | | 'Q44.7' | Other congenital malformations of liver | |
| 751.61 | BILIARY ATRESIA | 'Q44.2' | Atresia of bile ducts | YES |
| | | 'Q44.3' | Congenital stenosis and stricture of bile ducts | |
| 751.62 | CONGENITAL CYSTIC ILVER DISASE | 'Q44.6' | Cystic disease of liver | YES |
| 751.69 | OTHER ANOMALY OF GALLBLADDER BILE DUCTS AND LIVER | 'Q44.0' | Agenesis, aplasia and hypoplasia of gallbladder | YES |
| | | 'Q44.1' | Other congenital malformations of gallbladder | |
| | | 'Q44.4' | Choledochal cyst | |
| | | 'Q44.5' | Other congenital malformations of bile ducts | |
| | | 'Q44.7' | Other congenital malformations of liver | |
| 751.7 | PANCREAS ANOMALIES | 'Q45.0' | Agenesis, aplasia and hypoplasia of pancreas | YES |
| | | 'Q45.1' | Annular pancreas | |
| | | 'Q45.2' | Congenital pancreatic cyst | |
| | | 'Q45.3' | Other congenital malformations of pancreas and pancreatic duct | |
| 751.8 | OTHER SPECIFIED ANOMALIES OF DIGESTIVE SYSTEM NEC | 'Q45.8' | Other specified congenital malformations of digestive system | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|--|----------------|---|---------------------|
| 751.9 | UNSPECIFIED ANOMALY OF DIGESTIVE SYSTEM | 'Q45.9' | Congenital malformation of digestive system, unspecified | YES |
| | CONGENITAL ANOMALIES | OF GENITAL | ORGANS | 1 |
| | ITAL ANOMALIES OF GENITAL ORGANS INCLUSION/E | | | |
| Exc | ludes: syndromes associated with anomalies in the nu | umber and fo | orm of chromosomes (758.0-758 | 8.9) |
| 752.0 | testicular feminization syndrome (257.8) | | Concentral chapters of over | VEC |
| 752.0 | ANOMALIES OF OVARIES | 'Q50.01' | Congenital absence of ovary, unilateral | YES |
| | | 'Q50.02' | Congenital absence of ovary, bilateral | |
| | | 'Q50.1' | Developmental ovarian cyst | |
| | | 'Q50.2' | Congenital torsion of ovary | |
| | | 'Q50.31' | Accessory ovary | |
| | | 'Q50.32' | Ovarian streak | |
| | | 'Q50.39' | Other congenital malformation of ovary | |
| ANOMA | LIES OF FALLOPIAN TUBES AND BROAD LIGAMENTS | 1 | 1 | |
| 752.10 | UNSPEC ANOMALY OF FALLOPIAN TUBES, BROAD LIGAMENT | 'Q50.6' | Other congenital malformations of fallopian tube and broad ligament | YES |
| 752.11 | EMBRYONIC CYST OF FALLOPIAN TUBES, BROAD LIGAMENT | 'Q50.4' | Embryonic cyst of fallopian tube | YES |
| | | 'Q50.5' | Embryonic cyst of broad ligament | |
| 752.19 | TUBAL/BROAD LIGAMENT ANOMALIES NEC | 'Q50.6' | Other congenital malformations of fallopian tube and broad ligament | YES |
| 752.2 | DOUBLING OF UTERUS | 'Q51.10' | Doubling of uterus with doubling of cervix and vagina without obstruction | YES |
| | | 'Q51.11' | Doubling of uterus with doubling of cervix and vagina with obstruction | |
| | | 'Q51.2' | Other doubling of uterus | |
| 752.31 | AGENESIS OF UTERUS | 'Q51.0' | Agenesis and aplasia of uterus | |
| 752.32 | HYPOPLASIA OF UTERUS | 'Q51.811' | Hypoplasia of uterus | |
| 752.33 | UNICORNUATE UTERUS | 'Q51.4' | Unicornate uterus | |
| 752.34 | BICORNUATE UTERUS | 'Q51.3' | Bicornate uterus | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|---|---------------------|
| 752.35 | SEPTATE UTERUS | 'Q51.2' | Other doubling of uterus | |
| 752.36 | ARCUATE UTERUS | 'Q51.810' | Arcuate uterus | |
| 752.39 | OTHER ANOMALIES OF UTERUS | 'Q51.818' | Other congenital malformations of uterus | |
| | | 'Q51.9' | Congenital malformation of uterus and cervix, unspecified | |
| ANOMAL | IES OF CERVIX, VAGINA, AND EXTERNAL FEMALE GEN | ITALIA | | |
| 752.40 | UNSPEC ANOMALY CERVIX, VAGINA, EXT FEMALE GENITALS | 'Q52.9' | Congenital malformation of female genitalia, unspecified | YES |
| 752.41 | EMBRYONIC CYST CERVIC, VAGINA, EXT FEMALE GENITALS | 'Q51.6' | Embryonic cyst of cervix | YES |
| | | 'Q52.4' | Other congenital malformations of vagina | |
| | | 'Q52.79' | Other congenital malformations of vulva | |
| 752.42 | IMPERFORATE HYMEN | 'Q52.3' | Imperforate hymen | YES |
| 752.43 | CERIVAL AGENESIS | 'Q51.5' | Agenesis and aplasia of cervix | |
| | | 'Q51.821' | Hypoplasia of cervix | |
| 752.44 | CERVICAL DUPLICATION | 'Q51.820' | Cervical duplication | |
| 752.45 | VAGINAL AGENESIS | 'Q52.0' | Congenital absence of vagina | |
| 752.46 | TRANSVERSE VAGINAL SEPTUM | 'Q52.11' | Transverse vaginal septum | |
| 752.47 | LONGITUDINAL VAGINAL SEPTUM | 'Q52.12' | Longitudinal vaginal septum | |
| 752.49 | OTHER ANOMALIES CERVIX, VAGINA, EXT FEMALE GENITAL | 'Q51.0' | Agenesis and aplasia of uterus | YES |
| | | 'Q51.5' | Agenesis and aplasia of cervix | |
| | | 'Q51.821' | Hypoplasia of cervix | |
| | | 'Q51.828' | Other congenital malformations of cervix | |
| | | 'Q52.10' | Doubling of vagina, unspecified | |
| | | 'Q52.2' | Congenital rectovaginal fistula | |
| | | 'Q52.4' | Other congenital malformations of vagina | |
| | | 'Q52.5' | Fusion of labia | |
| | | 'Q52.6' | Congenital malformation of clitoris | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| | | 'Q52.70' | Unspecified congenital malformations of vulva | |
| | | 'Q52.71' | Congenital absence of vulva | |
| | | 'Q52.79' | Other congenital malformations of vulva | |
| | | 'Q52.8' | Other specified congenital malformations of female genitalia | |
| 752.51 | UNDESCENDED TESTIS | 'Q53.00' | Ectopic testis, unspecified | YES |
| | | 'Q53.01' | Ectopic testis, unilateral | |
| | | 'Q53.02' | Ectopic testes, bilateral | |
| | | 'Q53.10' | Unspecified undescended testicle, unilateral | |
| | | 'Q53.11' | Abdominal testis, unilateral | |
| | | 'Q53.12' | Ectopic perineal testis, unilateral | |
| | | 'Q53.20' | Undescended testicle, unspecified, bilateral | |
| | | 'Q53.21' | Abdominal testis, bilateral | |
| | | 'Q53.22' | Ectopic perineal testis, bilateral | |
| | | 'Q53.9' | Undescended testicle, unspecified | NO |
| 752.52 | RETRACTILE TESTES | 'Q55.22' | Retractile testis | YES |
| 752.6 HY | POSPADIAS AND EPISPADIAS AND OTHER PENILE AND | OMALIES | | · |
| 752.61 | HYPOSPADIAS | 'Q54.0' | Hypospadias, balanic | |
| | | 'Q54.1' | Hypospadias, penile | |
| | | 'Q54.2' | Hypospadias, penoscrotal | |
| | | 'Q54.3' | Hypospadias, perineal | |
| | | 'Q54.8' | Other hypospadias | |
| | | 'Q54.9' | Hypospadias, unspecified | |
| 752.62 | EPISPADIAS | 'Q64.0' | Epispadias | YES |
| 752.63 | CONGENITAL CHORDEE | 'Q54.4' | Congenital chordee | YES |
| 752.64 | MICROPENIS | 'Q55.62' | Hypoplasia of penis | YES |
| 752.65 | HIDDEN PENIS | 'Q55.64' | Hidden penis | YES |
| 752.69 | OTHER PENILE ABNORMALITIES | 'Q55.5' | Congenital absence and aplasia of penis | YES |
| | | 'Q55.61' | Curvature of penis (lateral) | |
| | | 'Q55.63' | Congenital torsion of penis | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|--|----------------|--|---------------------|
| | | 'Q55.69' | Other congenital malformation of penis | |
| 752.7 | INDETERMINATE SEX AND PSEUDOHERMAPHRODITISM | 'Q56.0' | Hermaphroditism, not elsewhere classified | YES |
| | | 'Q56.1' | Male pseudohermaphroditism, not elsewhere classified | |
| | | 'Q56.2' | Female pseudohermaphroditism, not elsewhere classified | |
| | | 'Q56.3' | Pseudohermaphroditism, unspecified | |
| | | 'Q56.4' | Indeterminate sex, unspecified | |
| 752.81 | SCROTAL TRANSPOSITION | 'Q55.23' | Scrotal transposition | YES |
| 752.89 | OTHER SPECIFIED ANOMALIES OF GENITAL ORGANS | 'Q52.8' | Other specified congenital malformations of female genitalia | YES |
| | | 'Q55.0' | Absence and aplasia of testis | |
| | | 'Q55.1' | Hypoplasia of testis and scrotum | |
| | | 'Q55.20' | Unspecified congenital malformations of testis and scrotum | |
| | | 'Q55.21' | Polyorchism | |
| | | 'Q55.29' | Other congenital malformations of testis and scrotum | |
| | | 'Q55.3' | Atresia of vas deferens | |
| | | 'Q55.4' | Other congenital malformations of vas deferens, epididymis, seminal vesicles and prostate | |
| | | 'Q55.7' | Congenital vasocutaneous fistula | |
| | | 'Q55.8' | Other specified congenital malformations of male genital organs | |
| 752.9 | GENITAL ORGAN ANOMALY NOS | 'Q52.9' | Congenital malformation of female genitalia, unspecified | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| | | 'Q55.9' | Congenital malformation of male genital organ, unspecified | |
| | CONGENITAL ANOMALIES | OF URINAR | (SYSTEM | |
| CONGEN | ITAL ANOMALIES OF URINARY SYSTEM | | | |
| 753.0 | RENAL AGENESIS AND DYSGENESIS | 'Q60.0' | Renal agenesis, unilateral | YES |
| | | 'Q60.1' | Renal agenesis, bilateral | |
| | | 'Q60.2' | Renal agenesis, unspecified | |
| | | 'Q60.3' | Renal hypoplasia, unilateral | |
| | | 'Q60.4' | Renal hypoplasia, bilateral | |
| | | 'Q60.5' | Renal hypoplasia, unspecified | |
| | | 'Q60.6' | Potter's syndrome | |
| СҮЗТІС К | IDNEY DISEASE INCLUSION/EXCLUSION CRITERIA Excludes: acquired cyst of kidney (583.2) | | | 1 |
| 753.10 | CYSTIC KIDNEY DISEASE, UNSPECIFIED | 'Q61.00' | Congenital renal cyst, unspecified | YES |
| | | 'Q61.9' | Cystic kidney disease, unspecified | |
| 753.11 | CONGENITAL SINGLE RENAL CYST | 'Q61.01' | Congenital single renal cyst | YES |
| 753.12 | POLYCYSTIC KIDNEY, UNSPECIFIED TYPE | 'Q61.3' | Polycystic kidney, unspecified | YES |
| 753.13 | POLYCYSTIC KIDNEY, AUTOSOMAL DOMINANT | 'Q61.2' | Polycystic kidney, adult type | YES |
| 753.14 | POLYCYSTIC KIDNEY, AUTOSOMAL RECESSIVE | 'Q61.11' | Cystic dilatation of collecting ducts | YES |
| | | 'Q61.19' | Other polycystic kidney, infantile type | |
| 753.15 | RENAL DYSPLASIA | 'Q61.4' | Renal dysplasia | YES |
| 753.16 | MEDULLARY CYSTIC KIDNEY | 'Q61.5' | Medullary cystic kidney | YES |
| 753.17 | MEDULLARY SPONGE KIDNEY | 'Q61.5' | Medullary cystic kidney | YES |
| 753.19 | OTHER SPECIFIED CYSTIC KIDNEY DISEASE | 'Q61.02' | Congenital multiple renal cysts | YES |
| | | 'Q61.8' | Other cystic kidney diseases | |
| 753.2 OE | STRUCTIVE DEFECTS OF RENAL PELVIS AND URETER | | | |
| 753.20 | UNSPECIFIED OBSTRUCTION OF RENAL PELVIS AND URETER | 'Q62.39' | Other obstructive defects of renal pelvis and ureter | YES |
| 753.21 | CONGENITAL OBSTRUCTION OF URETEROPELVIC JUNCTION | 'Q62.11' | Congenital occlusion of ureteropelvic junction | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| 753.22 | CONGENITAL OBSTRUCTION OF THE URETOVESICAL JUNCTION | 'Q62.12' | Congenital occlusion of ureterovesical orifice | YES |
| | | 'Q62.2' | Congenital megaureter | |
| 753.23 | CONGENITAL URETEROCELE | 'Q62.31' | Congenital ureterocele, orthotopic | YES |
| | | 'Q62.32' | Cecoureterocele | |
| 753.29 | OTHER OBSTRUCTIVE DEFECT – RENAL PELVIS AND URETER | 'Q62.0' | Congenital hydronephrosis | YES |
| | | 'Q62.10' | Congenital occlusion of ureter, unspecified | |
| | | 'Q62.11' | Congenital occlusion of ureteropelvic junction | |
| | | 'Q62.39' | Other obstructive defects of renal pelvis and ureter | |
| 753.3 | KIDNEY ANOMALY NEC | 'Q63.0' | Accessory kidney | YES |
| | | 'Q63.1' | Lobulated, fused and horseshoe kidney | |
| | | 'Q63.2' | Ectopic kidney | |
| | | 'Q63.3' | Hyperplastic and giant kidney | |
| | | 'Q63.8' | Other specified congenital malformations of kidney | |
| | | 'Q63.9' | Congenital malformation of kidney, unspecified | |
| 753.4 | URETERAL ANOMALY NEC | 'Q62.4' | Agenesis of ureter | YES |
| | | 'Q62.5' | Duplication of ureter | |
| | | 'Q62.60' | Malposition of ureter, unspecified | |
| | | 'Q62.61' | Deviation of ureter | |
| | | 'Q62.62' | Displacement of ureter | |
| | | 'Q62.63' | Anomalous implantation of ureter | |
| | | 'Q62.69' | Other malposition of ureter | |
| | | 'Q62.7' | Congenital vesico-uretero- renal reflux | |
| | | 'Q62.8' | Other congenital malformations of ureter | |
| 753.5 | URINARY BLADDER EXSTROPHY | 'Q64.10' | Exstrophy of urinary bladder, unspecified | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|---|---------------------|
| | | 'Q64.11' | Supravesical fissure of urinary bladder | |
| | | 'Q64.12' | Cloacal extrophy of urinary bladder | |
| | | 'Q64.19' | Other exstrophy of urinary bladder | |
| 753.6 | ATRESIA AND STENOSIS OF URETHRA AND BLADDER NECK | 'Q64.2' | Congenital posterior urethral valves | YES |
| | | 'Q64.31' | Congenital bladder neck obstruction | |
| | | 'Q64.32' | Congenital stricture of urethra | |
| | | 'Q64.33' | Congenital stricture of urinary meatus | |
| | | 'Q64.39' | Other atresia and stenosis of urethra and bladder neck | |
| 753.7 | ANOMALIES OF URACHUS | 'Q64.4' | Malformation of urachus | YES |
| 753.8 | OTHER SPECIFIED ANOMALIES OF BLADDER AND URETHRA | 'Q64.11' | Supravesical fissure of urinary bladder | YES |
| | | 'Q64.5' | Congenital absence of bladder and urethra | |
| | | 'Q64.6' | Congenital diverticulum of bladder | |
| | | 'Q64.70' | Unspecified congenital malformation of bladder and urethra | |
| | | 'Q64.71' | Congenital prolapse of urethra | |
| | | 'Q64.72' | Congenital prolapse of urinary meatus | |
| | | 'Q64.73' | Congenital urethrorectal fistula | |
| | | 'Q64.74' | Double urethra | |
| | | 'Q64.75' | Double urinary meatus | |
| | | 'Q64.79' | Other congenital malformations of bladder and urethra | |
| 753.9 | URINARY ANOMALY NOS | 'Q64.8' | Other specified congenital malformations of urinary system | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| Code | | 'Q64.9' | Congenital malformation of | Alone |
| | | Q04.5 | urinary system, unspecified | |
| | CERTAIN CONGENITAL MUSCU | LOSKELETAL | | |
| CERTAIN | CONGENITAL MUSCULOSKELETAL DEFORMITIES INCI | USION/EXCL | USION CRITERIA | |
| | Includes: Nonteratogenic deformities which are co | onsidered to | be due to intrauterine malposit | tion and |
| pressure | | 1 | | |
| 754.0 | CONGENITAL SQUASHED OR BENT NOSE | 'Q67.0' | Congenital facial asymmetry | NO |
| | | 'Q67.1' | Congenital compression facies | |
| | | 'Q67.2' | Dolichocephaly | |
| | | 'Q67.3' | Plagiocephaly | |
| | | 'Q67.4' | Other congenital deformities of skull, face and jaw | |
| 754.1 | CONGENITAL STERNOCLEIDOMASTOID MUSCLE | 'Q68.0' | Congenital deformity of sternocleidomastoid muscle | YES |
| 754.2 | CONGENITAL POSTURAL DEFORMITY (SPINE) | 'Q67.5' | Congenital deformity of spine | YES |
| | | 'Q76.3' | Congenital scoliosis due to congenital bony malformation | |
| | | 'Q76.425' | Congenital lordosis, thoracolumbar region | |
| | | 'Q76.426' | Congenital lordosis, lumbar region | |
| | | 'Q76.427' | Congenital lordosis, lumbosacral region | |
| | | 'Q76.428' | Congenital lordosis, sacral and sacrococcygeal region | |
| | | 'Q76.429' | Congenital lordosis, unspecified region | |
| CONGEN | ITAL DISLOCATION OF HIP | | | |
| 754.30 | CONGENITAL DISLOCATION OF HIP, UNILATERAL | 'Q65.00' | Congenital dislocation of unspecified hip, unilateral | YES |
| | | 'Q65.01' | Congenital dislocation of right hip, unilateral | |
| | | 'Q65.02' | Congenital dislocation of left hip, unilateral | |
| | | 'Q65.2' | Congenital dislocation of hip, unspecified | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|---|---------------------|
| 754.31 | CONGENITAL DISLOCATION OF HIP, BILATERAL | 'Q65.1' | Congenital dislocation of hip, bilateral | YES |
| 754.32 | CONGENITAL SUBLUXATION OF HIP, UNILATERAL | 'Q65.30' | Congenital partial dislocation of unspecified hip, unilateral | NO |
| | | 'Q65.31' | Congenital partial dislocation of right hip, unilateral | |
| | | 'Q65.32' | Congenital partial dislocation of left hip, unilateral | |
| | | 'Q65.5' | Congenital partial dislocation of hip, unspecified | |
| | | 'Q65.6' | Congenital unstable hip | |
| 754.33 | CONGENITAL SUBLUXATION OF HIP, BELATERAL | 'Q65.4' | Congenital partial dislocation of hip, bilateral | NO |
| 754.35 | CONGENITAL DISLOCATION OF ONE HIP WITH SUBLUXATION | 'Q65.01' | Congenital dislocation of right hip, unilateral | YES |
| | | 'Q65.32' | Congenital partial dislocation of left hip, unilateral | |
| | | 'Q65.02' | Congenital dislocation of left hip, unilateral | |
| | | 'Q65.31' | Congenital partial dislocation of right hip, unilateral | |
| CONGEN | ITAL GENU RECURVATUM AND BOWING OF LONG BO | NES OF LEG | · | |
| 754.40 | GENU RECURVATUM | 'Q68.2' | Congenital deformity of knee | YES |
| | | 'Q74.1' | Congenital malformation of knee | |
| 754.41 | CONGENITAL KNEE DISLOCATION (WITH GENU RECURVATUM) | 'Q68.2' | Congenital deformity of knee | YES |
| 754.42 | CONGENITAL BOWING OF FEMUR | 'Q68.3' | Congenital bowing of femur | YES |
| 754.43 | CONGENITAL BOWING OF TIBIA AND FIBIA | 'Q68.4' | Congenital bowing of tibia and fibula | NO |
| 754.44 | CONGENITAL BOWING OF UNSPECIFIED LONG BONES OF LEG | 'Q68.3' | Congenital bowing of femur | YES |
| | | 'Q68.4' | Congenital bowing of tibia and fibula | |
| | | 'Q68.5' | Congenital bowing of long bones of leg, unspecified | |
| VARUS D | EFORMITIES OF FEET INCLUSION/EXCLUSION CRITERI | A | | |
| 754 55 | Excludes: acquired (736.71, 736.75, 736.79) | | Concentration | VEC |
| 754.50 | TALIPES VARUS | 'Q66.0' | Congenital talipes equinovarus | YES |
| 754.51 | TALIPES EQUINOVARUS | 'Q66.0' | Congenital talipes equinovarus | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|---|---------------------|
| 754.52 | METATARSUS PRIMUS VARUS | 'Q66.2' | Congenital metatarsus (primus) varus | YES |
| 754.53 | METATARSUS VARUS | 'Q66.2' | Congenital metatarsus (primus) varus | YES |
| 754.59 | CONGENITAL VARUS FOOT DEFORMITIES NEC | 'Q66.1' | Congenital talipes calcaneovarus | YES |
| | | 'Q66.3' | Other congenital varus deformities of feet | |
| VALGUS | DEFORMITIES OF FEET INCLUSION/EXCLUSION CRITER | | | |
| 754.60 | Excludes: valgus deformity of foot (acquired) (7 TALIPES VALGUS | 'Q66.4' | Congenital talipes | YES |
| 754.00 | | | calcaneovalgus | TL3 |
| | | 'Q66.6' | Other congenital valgus deformities of feet | |
| 754.61 | CONGENITAL PES PLANUS | 'Q66.50' | Congenital pes planus, unspecified foot | YES |
| | | 'Q66.51' | Congenital pes planus, right foot | |
| | | 'Q66.52' | Congenital pes planus, left foot | |
| | | 'Q66.80' | Congenital vertical talus deformity, unspecified foot | |
| | | 'Q66.81' | Congenital vertical talus deformity, right foot | |
| | | 'Q66.82' | Congenital vertical talus deformity, left foot | |
| 754.62 | TALIPES CALCANEOVVALGUS | 'Q66.4' | Congenital talipes calcaneovalgus | YES |
| 754.69 | CONGENITAL VALGUS FOOT DEFORMITIES NEC | 'Q66.6' | Other congenital valgus deformities of feet | YES |
| | EFORMITIES OF FEET INCLUSION/EXCLUSION CRITERI/ acquired (736.70-736.79) | 4 | · | • |
| 754.70 | TALIPES NOS | 'Q66.89' | Other specified congenital deformities of feet | YES |
| 754.71 | TALIPES CAVUS | 'Q66.7' | Congenital pes cavus | YES |
| 754.79 | OTHER CONGENITAL FOOT DEFORMITIES NEC | 'Q66.89' | Other specified congenital deformities of feet | YES |
| | | 'Q66.9' | Congenital deformity of feet, unspecified | |
| OTHER S | PECIFIED NONTERATOGENIC ANOMALIES | | · | |
| 754.81 | PECTUS EXCAVATUM | 'Q67.6' | Pectus excavatum | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| 754.82 | PECTUS CARINATUM | 'Q67.7' | Pectus carinatum | YES |
| 754.89 | NONTERATOGENIC ANOMALIES NEC | 'Q67.8' | Other congenital deformities of chest | YES |
| | | 'Q68.1' | Congenital deformity of finger(s) and hand | |
| | | 'Q68.8' | Other specified congenital musculoskeletal deformities | |
| | | 'Q71.40' | Longitudinal reduction defect of unspecified radius | |
| | | 'Q71.41' | Longitudinal reduction defect of right radius | |
| | | 'Q71.42' | Longitudinal reduction defect of left radius | |
| | | 'Q71.43' | Longitudinal reduction defect of radius, bilateral | |
| | | 'Q74.3' | Arthrogryposis multiplex congenita | |
| | OTHER CONGENITAL AND | OMALIES OF | LIMBS | |
| OTHER C | ONGENITAL ANOMALIES OF LIMBS INCLUSION/EXCLU Excludes: those deformities classifiable to 754.0 | | RIA | |
| POLYDA | | 75410 | | |
| 755.00 | POLYDACTYLY, UNSPECIFIED DIGITS | 'Q69.9' | Polydactyly, unspecified | YES |
| | | 'Q70.4' | Polysyndactyly, unspecified | |
| 755.01 | POLYDACTYLY OF FINGERS | 'Q69.0' | Accessory finger(s) | YES |
| | | 'Q69.1' | Accessory thumb(s) | |
| 755.02 | POLYDACTYLY, TOES | 'Q69.2' | Accessory toe(s) | YES |
| SYNDAC | | • | | |
| 755.10 | SymphalangyWebbing of digitsSYNDACTYLY OF MULTIPLE AND UNSPECIFIED SITES | 'Q70.4' | Polysyndactyly, unspecified | YES |
| 755.10 | STNDACTTLT OF MOLTIFLE AND UNSPECIFIED SITES | 'Q70.9' | Syndactyly, unspecified | TES |
| 755.11 | SYNDACTYLY OF FINGERS WITHOUT FUSION OF BONES | 'Q70.10' | Webbed fingers, unspecified hand | NO |
| | | 'Q70.11' | Webbed fingers, right hand | |
| | | 'Q70.12' | Webbed fingers, left hand | |
| | | 'Q70.13' | Webbed fingers, bilateral | |
| 755.12 | SYNDACTYLY OF FINGERS WITH FUSION OF BONE | 'Q70.00' | Fused fingers, unspecified hand | YES |
| | | 'Q70.01' | Fused fingers, right hand | |
| | | 'Q70.02' | Fused fingers, left hand | |
| | | | | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|--|----------------|---|---------------------|
| 755.13 | SYNDACTYLY OF TOES WITHOUT FUSION OF BONES | 'Q70.30' | Webbed toes, unspecified foot | NO |
| | | 'Q70.31' | Webbed toes, right foot | |
| | | 'Q70.32' | Webbed toes, left foot | |
| | | 'Q70.33' | Webbed toes, bilateral | |
| 755.14 | SYNDACTYLY OF TOES WITH FUSION OF BONE | 'Q70.20' | Fused toes, unspecified foot | YES |
| | | 'Q70.21' | Fused toes, right foot | |
| | | 'Q70.22' | Fused toes, left foot | |
| | | 'Q70.23' | Fused toes, bilateral | |
| REDUCTI | ON DEFORMITIES OF UPPER LIMB | | · | |
| 755.20 | REDUCTION DEFORMITY OF UPPER LIMB NOS | 'Q71.811' | Congenital shortening of right upper limb | YES |
| | | 'Q71.812' | Congenital shortening of left upper limb | |
| | | 'Q71.813' | Congenital shortening of upper limb, bilateral | |
| | | 'Q71.819' | Congenital shortening of unspecified upper limb | |
| | | 'Q71.891' | Other reduction defects of right upper limb | |
| | | 'Q71.892' | Other reduction defects of left upper limb | |
| | | 'Q71.893' | Other reduction defects of upper limb, bilateral | |
| | | 'Q71.899' | Other reduction defects of unspecified upper limb | |
| | | 'Q71.90' | Unspecified reduction defect of unspecified upper limb | |
| | | 'Q71.91' | Unspecified reduction defect of right upper limb | |
| | | 'Q71.92' | Unspecified reduction defect of left upper limb | |
| | | 'Q71.93' | Unspecified reduction defect of upper limb, bilateral | |
| 755.21 | TRANSVERSE DEFICIENCY OF UPPER LIMB | 'Q71.00' | Congenital complete absence of unspecified upper limb | YES |
| | | 'Q71.01' | Congenital complete absence of right upper limb | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|---|---------------------|
| | | 'Q71.02' | Congenital complete absence of left upper limb | |
| | | 'Q71.03' | Congenital complete absence of upper limb, bilateral | |
| 755.22 | LONGITUDINAL DEFICIENCY OF UPPER LIMB, NEC | 'Q71.00' | Congenital complete absence of unspecified upper limb | YES |
| 755.23 | LONGIT DEFICIENCY, INVOLVING HUMERUS, RADUS, ULNA | 'Q71.10' | Congenital absence of unspecified upper arm and forearm with hand present | YES |
| | | 'Q71.11' | Congenital absence of right upper arm and forearm with hand present | |
| | | 'Q71.12' | Congenital absence of left upper arm and forearm with hand present | |
| | | 'Q71.13' | Congenital absence of upper arm and forearm with hand present, bilateral | |
| 755.24 | LONGIT DEFICIENCY OF HUMERUS, COMPLETE OR PARTIAL | 'Q71.10' | Congenital absence of unspecified upper arm and forearm with hand present | YES |
| | | 'Q71.11' | Congenital absence of right upper arm and forearm with hand present | |
| | | 'Q71.12' | Congenital absence of left upper arm and forearm with hand present | |
| | | 'Q71.13' | Congenital absence of upper arm and forearm with hand present, bilateral | |
| 755.25 | LONGIT DEFICIENCY, RADIOULNAR, COMPLETE OR PARTIAL | 'Q71.20' | Congenital absence of both forearm and hand, unspecified upper limb | YES |
| | | 'Q71.21' | Congenital absence of both forearm and hand, right upper limb | |
| | | 'Q71.22' | Congenital absence of both forearm and hand, left upper limb | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|--|----------------|--|---------------------|
| | | 'Q71.23' | Congenital absence of both forearm and hand, bilateral | |
| 755.26 | LONGIT DEFICIENCY, RADIAL, COMPLETE OR PARTIAL | 'Q71.40' | Longitudinal reduction defect of unspecified radius | YES |
| | | 'Q71.41' | Longitudinal reduction defect of right radius | |
| | | 'Q71.42' | Longitudinal reduction defect of left radius | |
| | | 'Q71.43' | Longitudinal reduction defect of radius, bilateral | |
| 755.27 | LONGIT DEFICIENCY, ULNAR, COMPLETE OR PARTIAL | 'Q71.50' | Longitudinal reduction defect of unspecified ulna | YES |
| | | 'Q71.51' | Longitudinal reduction defect of right ulna | |
| | | 'Q71.52' | Longitudinal reduction defect of left ulna | |
| | | 'Q71.53' | Longitudinal reduction defect of ulna, bilateral | |
| 755.28 | LONGIT DEFICIT CARPALS OR METACARPALS, COMP/PART | 'Q71.30' | Congenital absence of unspecified hand and finger | YES |
| | | 'Q71.31' | Congenital absence of right hand and finger | |
| | | 'Q71.32' | Congenital absence of left hand and finger | |
| | | 'Q71.33' | Congenital absence of hand and finger, bilateral | |
| 755.29 | LONGIT DEFICIENCY, PHALANGES, COMPLETE OR PARTIAL | 'Q71.30' | Congenital absence of unspecified hand and finger | YES |
| | | 'Q71.31' | Congenital absence of right hand and finger | |
| | | 'Q71.32' | Congenital absence of left hand and finger | |
| | | 'Q71.33' | Congenital absence of hand and finger, bilateral | |
| 755.30 | REDUCTION DEFORMITY OF LOWER LIMB NOS | 'Q72.811' | Congenital shortening of right lower limb | YES |
| | | 'Q72.812' | Congenital shortening of left lower limb | |
| | | 'Q72.813' | Congenital shortening of lower limb, bilateral | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|---|---------------------|
| | | 'Q72.819' | Congenital shortening of unspecified lower limb | |
| | | 'Q72.891' | Other reduction defects of right lower limb | |
| | | 'Q72.892' | Other reduction defects of left lower limb | |
| | | 'Q72.893' | Other reduction defects of lower limb, bilateral | |
| | | 'Q72.899' | Other reduction defects of unspecified lower limb | |
| 755.31 | TRANSVERSE DEFICIENCY OF LOWER LIMB | 'Q72.00' | Congenital complete absence of unspecified lower limb | YES |
| | | 'Q72.01' | Congenital complete absence of right lower limb | |
| | | 'Q72.02' | Congenital complete absence of left lower limb | |
| | | 'Q72.03' | Congenital complete absence of lower limb, bilateral | |
| 755.32 | LONGITUDINAL DEFICIENCY OF LOWER LIMB, NEC | 'Q72.899' | Other reduction defects of unspecified lower limb | YES |
| | | 'Q72.90' | Unspecified reduction defect of unspecified lower limb | |
| | | 'Q72.91' | Unspecified reduction defect of right lower limb | |
| | | 'Q72.92' | Unspecified reduction defect of left lower limb | |
| | | 'Q72.93' | Unspecified reduction defect of lower limb, bilateral | |
| 755.33 | LONGIT DEFICIENCY INVOLVING FEMUR, TIBIA, FIBULA | 'Q72.10' | Congenital absence of unspecified thigh and lower leg with foot present | YES |
| | | 'Q72.11' | Congenital absence of right thigh and lower leg with foot present | |
| | | 'Q72.12' | Congenital absence of left thigh and lower leg with foot present | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| | | 'Q72.13' | Congenital absence of thigh and lower leg with foot present, bilateral | |
| 755.34 | LONGITUDINAL DEFICIENCY, FEMORAL, COMPLETE OR PART | 'Q72.40' | Longitudinal reduction defect of unspecified femur | YES |
| | | 'Q72.41' | Longitudinal reduction defect of right femur | |
| | | 'Q72.42' | Longitudinal reduction defect of left femur | |
| | | 'Q72.43' | Longitudinal reduction defect of femur, bilateral | |
| 755.35 | LONGIT DEFICIENCY, TIBIOFIBULAR, COMPLETE OR PART | 'Q72.20' | Congenital absence of both lower leg and foot, unspecified lower limb | YES |
| | | 'Q72.21' | Congenital absence of both lower leg and foot, right lower limb | |
| | | 'Q72.22' | Congenital absence of both lower leg and foot, left lower limb | |
| | | 'Q72.23' | Congenital absence of both lower leg and foot, bilateral | |
| 755.36 | LONGIT DEFICIENCY, TIBIA, COMPLETE OR PARTIAL | 'Q72.50' | Longitudinal reduction defect of unspecified tibia | YES |
| | | 'Q72.51' | Longitudinal reduction defect of right tibia | |
| | | 'Q72.52' | Longitudinal reduction defect of left tibia | |
| | | 'Q72.53' | Longitudinal reduction defect of tibia, bilateral | |
| 755.37 | LONGITUDINAL DEFICIENCY, FIBULAR, COMPLETE OR PART | 'Q72.60' | Longitudinal reduction defect of unspecified fibula | YES |
| | | 'Q72.61' | Longitudinal reduction defect of right fibula | |
| | | 'Q72.62' | Longitudinal reduction defect of left fibula | |
| | | 'Q72.63' | Longitudinal reduction defect of fibula, bilateral | |
| 755.38 | LONGIT DEFICIT TARSALS OR METATARSALS, COMP/PART | 'Q72.30' | Congenital absence of unspecified foot and toe(s) | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| | | 'Q72.31' | Congenital absence of right foot and toe(s) | |
| | | 'Q72.32' | Congenital absence of left foot and toe(s) | |
| | | 'Q72.33' | Congenital absence of foot and toe(s), bilateral | |
| | | 'Q72.70' | Split foot, unspecified lower limb | |
| | | 'Q72.71' | Split foot, right lower limb | |
| | | 'Q72.72' | Split foot, left lower limb | |
| | | 'Q72.73' | Split foot, bilateral | |
| 755.39 | LONGIT DEFICIENCY, PHALANGES. COMPLETE OR PARTIAL | 'Q72.30' | Congenital absence of unspecified foot and toe(s) | YES |
| | | 'Q72.31' | Congenital absence of right foot and toe(s) | |
| | | 'Q72.32' | Congenital absence of left foot and toe(s) | |
| | | 'Q72.33' | Congenital absence of foot and toe(s), bilateral | |
| | | 'Q72.70' | Split foot, unspecified lower limb | |
| | | 'Q72.71' | Split foot, right lower limb | |
| | | 'Q72.72' | Split foot, left lower limb | |
| | | 'Q72.73' | Split foot, bilateral | |
| 755.4 | REDUCTION DEFORMITIES, UNSPECIFIED LIMB | 'Q73.0' | Congenital absence of unspecified limb(s) | YES |
| | | 'Q73.1' | Phocomelia, unspecified limb(s) | |
| | | 'Q73.8' | Other reduction defects of unspecified limb(s) | |
| OTHER A | NOMALIES OF UPPER LIMB, INCLUDING SHOULDER G | IRDLE | | |
| 755.50 | UPPER LIMB ANOMALY NOS | 'Q74.9' | Unspecified congenital malformation of limb(s) | YES |
| 755.51 | CONGENITAL DEFORMITY OF CLAVICLE | 'Q68.8' | Other specified congenital musculoskeletal deformities | YES |
| 755.52 | CONGENITAL ELEVATION OF SCAPULA | 'Q68.8' | Other specified congenital musculoskeletal deformities | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|---|---------------------|
| 755.53 | RADIOULNAR SYNOSTOSIS | 'Q74.0' | Other congenital malformations of upper limb(s), including shoulder girdle | YES |
| 755.54 | MADELUNG'S DEFORMITY | 'Q74.0' | Other congenital malformations of upper limb(s), including shoulder girdle | YES |
| 755.55 | ACROCEPHALOSYNDACTYLY | 'Q87.0' | Congenital malformation syndromes predominantly affecting facial appearance | YES |
| 755.56 | ACCESSORY CARPAL BONES | 'Q74.0' | Other congenital malformations of upper limb(s), including shoulder girdle | YES |
| 755.57 | MACRODACTYLIS (FINGERS) | 'Q74.0' | Other congenital malformations of upper limb(s), including shoulder girdle | YES |
| 755.58 | CONGENITAL CLEFT HAND | 'Q71.60' | Lobster-claw hand, unspecified hand | YES |
| | | 'Q71.61' | Lobster-claw right hand | |
| | | 'Q71.62' | Lobster-claw left hand | |
| | | 'Q71.63' | Lobster-claw hand, bilateral | |
| 755.59 | UPPER LIMB ANOMALY NEC | 'Q74.0' | Other congenital malformations of upper limb(s), including shoulder girdle | YES |
| OTHER A | NOMALIES OF LOWER LIMB, INCLUDING PELVIC GIRDI | LE | | |
| 755.60 | LOWER LIMB ANOMALY INCLUDING PELVIC GIRDLE NOS | 'Q74.2' | Other congenital malformations of lower limb(s), including pelvic girdle | YES |
| 755.61 | CONGENITAL COXA VALGA | 'Q65.81' | Congenital coxa valga | YES |
| 755.62 | CONGENITAL COXA VARA | 'Q65.82' | Congenital coxa vara | YES |
| 755.63 | CONGENITAL HIP (JOINT) DEFORMITY NEC | 'Q65.89' | Other specified congenital deformities of hip | YES |
| | | 'Q65.9' | Congenital deformity of hip, unspecified | |
| 755.64 | CONGENITAL KNEE (JOINT) DEFORMITY | 'Q68.2' | Congenital deformity of knee | YES |
| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|---------------------------|---|---------------------|
| | | 'Q74.1' | Congenital malformation of knee | |
| 755.65 | MACRODACTYLIA OF TOES | 'Q74.2' | Other congenital malformations of lower limb(s), including pelvic girdle | YES |
| 755.66 | ANOMALIES OF TOES NEC | 'Q66.89' | Other specified congenital deformities of feet | NO |
| 755.67 | ANOMALIES OF FOOT NEC | 'Q66.89' | Other specified congenital deformities of feet | YES |
| 755.69 | LOWER LIMB ANOMALY NEC | 'Q74.2' | Other congenital malformations of lower limb(s), including pelvic girdle | YES |
| 755.8 | CONGENITAL LIMB ANOMALY NEC | 'Q74.8' | Other specified congenital malformations of limb(s) | YES |
| 755.9 | CONGENITAL LIMB ANOMALY NOS | 'Q74.9' | Unspecified congenital malformation of limb(s) | YES |
| | OTHER CONGENITAL MUSCUL | OSKELETAL | ANOMALIES | |
| OTHER C | ONGENITAL MUSCULOSKELETAL ANOMALIES INCLUSI | - | ION CRITERIA | |
| 756.0 | Excludes: those deformities classifiable to 754.0 ANOMALIESOF SKULL AND FACE BONES | - /54.8 'Q75.0' | Craniosynostosis | YES |
| | | | | |
| | | 'Q75.1' 'Q75.2' | Craniofacial dysostosis Hypertelorism | |
| | | Q75.3' | Macrocephaly | |
| | | 'Q75.4' | Mandibulofacial dysostosis | |
| | | 'Q75.5' | Oculomandibular dysostosis | |
| | | Q75.5 | | |
| | | 'Q75.8' | Other specified congenital malformations of skull and face bones | |
| | | 'Q75.9' | Congenital malformation of skull and face bones, unspecified | |
| | | 'Q87.0' | Congenital malformation syndromes predominantly affecting facial appearance | |
| ANOMA | IES OF SPINE | | | |
| 756.10 | ANOMALY OF SPINE NOS | 'Q76.49' | Other congenital malformations of spine, not associated with scoliosis | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---------------------------------------|----------------|--|---------------------|
| 756.11 | SPONDYLOLYSIS, LUMBOSACRAL REGION | 'Q76.2' | Congenital spondylolisthesis | YES |
| 756.12 | SPONDYLOLISTHESIS | 'Q76.2' | Congenital spondylolisthesis | YES |
| 756.13 | CONGENITAL ABSENCE OF VERTEBRA | 'Q76.49' | Other congenital malformations of spine, not associated with scoliosis | YES |
| 756.14 | HEMIVERTEBRA | 'Q76.49' | Other congenital malformations of spine, not associated with scoliosis | YES |
| 756.15 | CONGENITAL FUSION OF SPINE (VERTEBRA) | 'Q76.49' | Other congenital malformations of spine, not associated with scoliosis | YES |
| 756.16 | KLIPPEL-FEIL SYNDROME | 'Q76.1' | Klippel-Feil syndrome | YES |
| 756.17 | SPINA BIFIDA OCCULTA | 'Q76.0' | Spina bifida occulta | YES |
| 756.19 | ANOMALY OF SPINE NEC | 'Q76.411' | Congenital kyphosis, occipito-atlanto-axial region | YES |
| | | 'Q76.412' | Congenital kyphosis, cervical region | |
| | | 'Q76.413' | Congenital kyphosis, cervicothoracic region | |
| | | 'Q76.414' | Congenital kyphosis, thoracic region | |
| | | 'Q76.415' | Congenital kyphosis, thoracolumbar region | |
| | | 'Q76.419' | Congenital kyphosis, unspecified region | |
| | | 'Q76.49' | Other congenital malformations of spine, not associated with scoliosis | |
| 756.2 | CERVICAL RIB | 'Q76.5' | Cervical rib | YES |
| 756.3 | RIB AND STERNUM ANOMALIES NEC | 'Q76.6' | Other congenital malformations of ribs | YES |
| | | 'Q76.7' | Congenital malformation of sternum | |
| | | 'Q76.8' | Other congenital malformations of bony thorax | |
| | | 'Q76.9' | Congenital malformation of bony thorax, unspecified | |
| | | 'Q77.2' | Short rib syndrome | |
| 756.4 | CHONDRODYSTROPHY | 'Q77.0' | Achondrogenesis | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---------------------------------------|----------------|--|---------------------|
| | | 'Q77.1' | Thanatophoric short stature | |
| | | 'Q77.2' | Short rib syndrome | |
| | | 'Q77.4' | Achondroplasia | |
| | | 'Q77.5' | Diastrophic dysplasia | |
| | | 'Q77.7' | Spondyloepiphyseal dysplasia | |
| | | 'Q77.8' | Other osteochondrodysplasia with defects of growth of tubular bones and spine | |
| | | 'Q77.9' | Osteochondrodysplasia with defects of growth of tubular bones and spine, unspecified | |
| | | 'Q78.4' | Enchondromatosis | |
| OSTEOD | (STROPHIES | | | |
| 756.50 | OSTEODYSTROPHY NOS | 'Q78.9' | Osteochondrodysplasia, unspecified | YES |
| 756.51 | OSTEOGENESIS IMPERFECTA | 'Q78.0' | Osteogenesis imperfecta | YES |
| 756.52 | OSTEOPETROSIS | 'Q78.2' | Osteopetrosis | YES |
| 756.53 | OSTEOPOIKILOSIS | 'Q78.8' | Other specified osteochondrodysplasias | YES |
| 756.54 | POLYOSTOTIC FIBROUS DYSPLASIA OF BONE | 'Q78.1' | Polyostotic fibrous dysplasia | YES |
| 756.55 | CHONDROECTODERMAL DYSPLASIA | 'Q77.6' | Chondroectodermal dysplasia | YES |
| 756.56 | MULTIPLE EPIPHYSEAL SYSPLASIA | 'Q78.3' | Progressive diaphyseal dysplasia | YES |
| 756.59 | OSTEODYSTROPHY NEC | 'Q77.3' | Chondrodysplasia punctata | YES |
| | | 'Q78.5' | Metaphyseal dysplasia | |
| | | 'Q78.6' | Multiple congenital exostoses | |
| | | 'Q78.8' | Other specified osteochondrodysplasias | |
| 756.6 | ANOMALIES OF DIAPHRAGM | 'Q79.0' | Congenital diaphragmatic hernia | YES |
| | | 'Q79.1' | Other congenital malformations of diaphragm | |
| 756.70 | ABDOMINAL WALL ANOMALIES | 'Q79.59' | Other congenital malformations of abdominal wall | |
| 756.71 | PRUNE BELLY SYNDROME | 'Q79.4' | Prune belly syndrome | |
| | | 'Q79.51' | Congenital hernia of bladder | |

| ICD-9 | Description | ICD-10 | Description | Reportable |
|---------|--|-------------|--|------------|
| Code | | Code | | Alone |
| 756.72 | OMPHALOCELE | 'Q79.2' | Exomphalos | |
| 756.73 | GASTROSCHISIS | 'Q79.3' | Gastroschisis | |
| 756.79 | OTHER CONGENITAL ANOMALIES OF ABDOMINAL WALL | 'Q79.59' | Other congenital malformations of abdominal wall | |
| OTHER S | PECIFIED ANOMALIES OF MUSCLE, TENDON, FASCIA, A | AND CONNE | CTIVE TISSUE | |
| 756.81 | ABSENCE OF MUSCLE/TENDON | 'Q79.8' | Other congenital malformations of musculoskeletal system | YES |
| 756.82 | ACCESSORY MUSCLE ANOMALIES | 'Q79.8' | Other congenital malformations of musculoskeletal system | YES |
| 756.83 | EHLERS-DANLOS SYNDROME | 'Q79.6' | Ehlers-Danlos syndrome | YES |
| 756.89 | SOFT TISSUE ANOMALY NEC | 'Q79.8' | Other congenital malformations of musculoskeletal system | YES |
| 756.9 | MUSCULOSKELETAL SYSTEM ANOMALIES NEC/NOS | 'Q68.8' | Other specified congenital musculoskeletal deformities | YES |
| | | 'Q79.8' | Other congenital malformations of musculoskeletal system | |
| | | 'Q79.9' | Congenital malformation of musculoskeletal system, unspecified | |
| | CONGENITAL ANOMALIES | OF THE INTE | GUMENT | |
| li | ITAL ANOMALIES OF THE INTEGUMENT INCLUSION/E ncludes: anomalies of skin, subcutaneous tissue, hair, xcludes: hemangioma (228.00-228.09) pigmented nevus (216.0-216.9) | | | |
| 757.0 | HEREDITARY EDEMA OF LEGS | 'Q82.0' | Hereditary lymphedema | YES |
| 757.1 | ICHTHYOSIS CONGENITA | 'Q80.0' | Ichthyosis vulgaris | YES |
| | | 'Q80.1' | X-linked ichthyosis | |
| | | 'Q80.2' | Lamellar ichthyosis | |
| | | 'Q80.3' | Congenital bullous ichthyosiform erythroderma | |
| | | 'Q80.4' | Harlequin fetus | |
| | | 'Q80.8' | Other congenital ichthyosis | |
| | | 'Q80.9' | Congenital ichthyosis, unspecified | |
| 757.2 | DERMATOGLYPHIC ANOMALIES | 'Q82.8' | Other specified congenital malformations of skin | YES |

| ICD-9 | Description | ICD-10 | Description | Reportable |
|--------|-----------------------------------|---------|---|------------|
| Code | | Code | | Alone |
| | PECIFIED ANOMALIES OF SKIN | 1 | | |
| 757.31 | CONGENITAL ECTODERMAL DYSPLASIA | 'Q82.4' | Ectodermal dysplasia (anhidrotic) | YES |
| 757.32 | PORT WINE STAIN | 'Q82.5' | Congenital non-neoplastic nevus | NO |
| 757.33 | CONGENITAL SKIN PIGMENT ANOMALIES | 'Q82.1' | Xeroderma pigmentosum | YES |
| | | 'Q82.2' | Mastocytosis | |
| | | 'Q82.3' | Incontinentia pigmenti | |
| 757.39 | SKIN ANOMALY NEC | 'Q81.0' | Epidermolysis bullosa simplex | YES |
| | | 'Q81.1' | Epidermolysis bullosa letalis | |
| | | 'Q81.2' | Epidermolysis bullosa dystrophica | |
| | | 'Q81.8' | Other epidermolysis bullosa | |
| | | 'Q81.9' | Epidermolysis bullosa, unspecified | |
| | | 'Q82.8' | Other specified congenital malformations of skin | |
| | | 'Q82.9' | Congenital malformation of skin, unspecified | |
| 757.4 | HAIR ANOMALIES NEC | 'Q84.0' | Congenital alopecia | YES |
| | | 'Q84.1' | Congenital morphological disturbances of hair, not elsewhere classified | |
| | | 'Q84.2' | Other congenital malformations of hair | |
| 757.5 | NAIL ANOMALIES NEC | 'Q84.3' | Anonychia | YES |
| | | 'Q84.4' | Congenital leukonychia | |
| | | 'Q84.5' | Enlarged and hypertrophic nails | |
| | | 'Q84.6' | Other congenital malformations of nails | |
| 757.6 | BREAST ANOMALIES NEC | 'Q83.0' | Congenital absence of breast with absent nipple | YES |
| | | 'Q83.1' | Accessory breast | |
| | | 'Q83.2' | Absent nipple | |
| | | 'Q83.3' | Accessory nipple | |
| | | 'Q83.8' | Other congenital malformations of breast | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|--|----------------|--|---------------------|
| | | 'Q83.9' | Congenital malformation of breast, unspecified | |
| 757.8 | OTHER INTEGUMENT ANOMALIES | 'Q84.8' | Other specified congenital malformations of integument | YES |
| 757.9 | INTEGUMENT ANOMALY NOS | 'Q84.9' | Congenital malformation of integument, unspecified | YES |
| | CHROMOSOMAL | ANOMALIES | | · |
| CHROMO | SOMAL ANOMALIES INCLUSION/EXCLUSION CRITERIA | | an and form of chromosomos | |
| 758.0 | Includes: syndromes associated with anomalies DOWN'S SYNDROME | 'Q90.0' | Trisomy 21, nonmosaicism | YES |
| 750.0 | | Q.90.0 | (meiotic nondisjunction) | 125 |
| | | 'Q90.1' | Trisomy 21, mosaicism (mitotic nondisjunction) | |
| | | 'Q90.2' | Trisomy 21, translocation | |
| | | 'Q90.9' | Down syndrome, unspecified | |
| 758.1 | PATAU'S SYNDROME | 'Q91.4' | Trisomy 13, nonmosaicism (meiotic nondisjunction) | YES |
| | | 'Q91.5' | Trisomy 13, mosaicism (mitotic nondisjunction) | |
| | | 'Q91.6' | Trisomy 13, translocation | |
| | | 'Q91.7' | Trisomy 13, unspecified | |
| 758.2 | EDWARDS' SYNDROME | 'Q91.0' | Trisomy 18, nonmosaicism (meiotic nondisjunction) | YES |
| | | 'Q91.1' | Trisomy 18, mosaicism (mitotic nondisjunction) | |
| | | 'Q91.2' | Trisomy 18, translocation | |
| | | 'Q91.3' | Trisomy 18, unspecified | |
| 758.31 | CRI-DU-CHAT SYNDROME | 'Q93.4' | Deletion of short arm of chromosome 5 | YES |
| 758.32 | VELO-CARDIO-FACIAL SYNDROME | 'Q93.81' | Velo-cardio-facial syndrome | YES |
| 758.33 | OTHER MICRODELETIONS | 'Q93.88' | Other microdeletions | YES |
| 758.39 | OTHER AUTOSOMAL DELETIONS | 'Q93.3' | Deletion of short arm of chromosome 4 | YES |
| | | 'Q93.5' | Other deletions of part of a chromosome | |
| | | 'Q93.7' | Deletions with other complex rearrangements | |
| | | 'Q93.89' | Other deletions from the autosomes | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| | | 'Q93.9' | Deletion from autosomes, unspecified | |
| 758.4 | BALANCED AUTOSOMAL TRANSLOC IN NORMAL INDIVIDUAL | 'Q95.0' | Balanced translocation and insertion in normal individual | YES |
| | | 'Q95.1' | Chromosome inversion in normal individual | |
| | | 'Q95.5' | Individual with autosomal fragile site | |
| | | 'Q95.8' | Other balanced rearrangements and structural markers | |
| | | 'Q95.9' | Balanced rearrangement and structural marker, unspecified | |
| 758.5 | AUTOSOMAL ANOMALIES NEC | 'Q92.0' | Whole chromosome trisomy, nonmosaicism (meiotic nondisjunction) | YES |
| | | 'Q92.1' | Whole chromosome trisomy, mosaicism (mitotic nondisjunction) | |
| | | 'Q92.2' | Partial trisomy | |
| | | 'Q92.5' | Duplications with other complex rearrangements | |
| | | 'Q92.61' | Marker chromosomes in normal individual | |
| | | 'Q92.62' | Marker chromosomes in abnormal individual | |
| | | 'Q92.7' | Triploidy and polyploidy | |
| | | 'Q92.8' | Other specified trisomies and partial trisomies of autosomes | |
| | | 'Q92.9' | Trisomy and partial trisomy of autosomes, unspecified | |
| | | 'Q93.0' | Whole chromosome monosomy, nonmosaicism (meiotic nondisjunction) | |
| | | 'Q93.1' | Whole chromosome monosomy, mosaicism (mitotic nondisjunction) | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| | | 'Q93.2' | Chromosome replaced with ring, dicentric or isochromosome | |
| | | 'Q95.2' | Balanced autosomal rearrangement in abnormal individual | |
| | | 'Q95.3' | Balanced sex/autosomal rearrangement in abnormal individual | |
| 758.6 | GONADAL DYSGENESIS | 'Q96.0' | Karyotype 45, X | YES |
| | | 'Q96.1' | Karyotype 46, X iso (Xq) | |
| | | 'Q96.2' | Karyotype 46, X with abnormal sex chromosome, except iso (Xq) | |
| | | 'Q96.3' | Mosaicism, 45, X/46, XX or XY | |
| | | 'Q96.4' | Mosaicism, 45, X/other cell line(s) with abnormal sex chromosome | |
| | | 'Q96.8' | Other variants of Turner's syndrome | |
| | | 'Q96.9' | Turner's syndrome, unspecified | |
| 758.7 | KLINEFELTER'S SYNDROME | 'Q98.0' | Klinefelter syndrome karyotype 47, XXY | YES |
| | | 'Q98.1' | Klinefelter syndrome, male with more than two X chromosomes | |
| | | 'Q98.3' | Other male with 46, XX karyotype | |
| | | 'Q98.4' | Klinefelter syndrome, unspecified | |
| 758.8 OT | HER CONDITIONS DUE TO SEX CHROMOSOME ANOM | ALIES | | |
| 758.81 | OTHER CONDITIONS DUE TO SEC CHROMOSOME ANOMALIES | 'Q96.4' | Mosaicism, 45, X/other cell line(s) with abnormal sex chromosome | YES |
| | | 'Q97.0' | Karyotype 47, XXX | |
| | | 'Q97.1' | Female with more than three X chromosomes | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| | | 'Q97.2' | Mosaicism, lines with various numbers of X chromosomes | |
| | | 'Q97.3' | Female with 46, XY karyotype | |
| | | 'Q97.8' | Other specified sex chromosome abnormalities, female phenotype | |
| | | 'Q97.9' | Sex chromosome abnormality, female phenotype, unspecified | |
| | | 'Q98.5' | Karyotype 47, XYY | |
| | | 'Q98.6' | Male with structurally abnormal sex chromosome | |
| | | 'Q98.7' | Male with sex chromosome mosaicism | |
| | | 'Q98.8' | Other specified sex chromosome abnormalities, male phenotype | |
| | | 'Q98.9' | Sex chromosome abnormality, male phenotype, unspecified | |
| | | 'Q99.0' | Chimera 46, XX/46, XY | |
| | | 'Q99.1' | 46, XX true hermaphrodite | |
| | | 'Q99.8' | Other specified chromosome abnormalities | |
| 758.89 | OTHER CONDITIONS DUE TO CHROMOSOME ANOMALIES | 'Q99.8' | Other specified chromosome abnormalities | YES |
| 758.9 | CONDITIONS DUE TO ANOMALY OF UNSPEC CHROMOSOME | 'Q99.9' | Chromosomal abnormality, unspecified | YES |
| | OTHER AND UNSPECIFIED CC | NGENITAL A | NOMALIES | 1 |
| OTHER A | ND UNSPECIFIED CONGENITAL ANOMALIES | | | |
| 759.0 | ANOMALIES OF SPLEEN | 'Q89.01' | Asplenia (congenital) | YES |
| | | 'Q89.09' | Congenital malformations of spleen | |
| 759.1 | ADRENAL GLAND ANOMALY | 'Q89.1' | Congenital malformations of adrenal gland | YES |
| 759.2 | ANOMALIESOF OTHER ENDOCRINE GLANDS | 'Q89.2' | Congenital malformations of other endocrine glands | YES |
| 759.3 | SITUS INVERSUS | 'Q89.3' | Situs inversus | YES |
| 759.4 | CONJOINED TWINS | 'Q89.4' | Conjoined twins | YES |
| 759.5 | TUBEROUS SCLEROSIS | 'Q85.1' | Tuberous sclerosis | YES |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone | | |
|---------------|--|----------------|---|---------------------|--|--|
| 759.6 | HAMARTOSES NEC | 'Q85.8' | Other phakomatoses, not elsewhere classified | YES | | |
| | | 'Q85.9' | Phakomatosis, unspecified | | | |
| 759.7 | MULTIPLE CONGENITAL ANOMALIES SO DESCRIBED | 'Q89.7' | Multiple congenital malformations, not elsewhere classified | YES | | |
| OTHER S | PECIFIED ANOMALIES | 1 | · | 1 | | |
| 759.81 | PRADER-WILLI SYNDROME | 'Q87.1' | Congenital malformation syndromes predominantly associated with short stature | YES | | |
| 759.82 | MARFAN SYNDROME | 'Q87.40' | Marfan's syndrome, unspecified | YES | | |
| | | 'Q87.410' | Marfan's syndrome with aortic dilation | | | |
| | | 'Q87.418' | Marfan's syndrome with other cardiovascular manifestations | | | |
| | | 'Q87.42' | Marfan's syndrome with ocular manifestations | | | |
| | | 'Q87.43' | Marfan's syndrome with skeletal manifestation | | | |
| 759.83 | FRAGILE X SYNDROME | 'Q99.2' | Fragile X chromosome | | | |
| 759.89 | OTHER SPECIFIED ANOMALIES | 'E78.71' | Barth syndrome | YES | | |
| | | 'E78.72' | Smith-Lemli-Opitz syndrome | | | |
| | | 'Q87.2' | Congenital malformation syndromes predominantly involving limbs | | | |
| | | 'Q87.3' | Congenital malformation syndromes involving early overgrowth | | | |
| | | 'Q87.5' | Other congenital malformation syndromes with other skeletal changes | | | |
| | | 'Q87.81' | Alport syndrome | | | |
| | | 'Q87.89' | Other specified congenital malformation syndromes, not elsewhere classified | | | |
| | | 'Q89.8' | Other specified congenital malformations | | | |
| 759.9 | CONGENITAL ANOMALY, UNSPECIFIED | 'Q89.9' | Congenital malformation, unspecified | YES | | |
| | CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD | | | | | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|---|---------------------|
| | des: conditions which have their origin in the perinata | - | | |
| | R NEWBORN AFFECTED BY MATERNAL CONDITIONS W | 1 | | |
| 760.2 | MATERNAL INFECTIONS AFFECTING FETUS | 'P00.2' | Newborn (suspected to be) affected by maternal infectious and parasitic diseases | YES |
| 760.71 | FETAL ALCOHOL SYNDROME | 'P04.3' | Newborn (suspected to be) affected by maternal use of alcohol | YES |
| | | 'Q86.0' | Fetal alcohol syndrome (dysmorphic) | |
| 760.72 | FETUS AFFECTED BY EXPOSURE TO NARCOTICS | 'P04.49' | Newborn (suspected to be) affected by maternal use of other drugs of addiction | |
| 760.75 | FETUS AFFECTED BY MATERNAL COCAINE | 'P04.41' | Newborn (suspected to be) affected by maternal use of cocaine | YES |
| 760.77 | FETUS AFFECTED BY MATERNAL EXPOSURE TO ANTICONVULSANTS | 'P04.1' | Newborn (suspected to be) affected by other maternal medication | |
| | | 'Q86.1' | Fetal hydantoin syndrome | |
| 760.79 | FETUS AFFECTED BY OTHER MATERNAL EXPOSURES | 'P04.2' | Newborn (suspected to be) affected by maternal use of tobacco | YES |
| | | 'P04.5' | Newborn (suspected to be) affected by maternal use of nutritional chemical substances | |
| | | 'P04.6' | Newborn (suspected to be) affected by maternal exposure to environmental chemical substances | |
| | | 'P04.8' | Newborn (suspected to be) affected by other maternal noxious substances | |
| | | 'P04.9' | Newborn (suspected to be) affected by maternal noxious substance, unspecified | |
| | | 'Q86.2' | Dysmorphism due to warfarin | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|---|---------------------|
| | | 'Q86.8' | Other congenital malformation syndromes due to known exogenous causes | |
| '767.11' | Epicranial subaponeurotic hemorrhage (massive) | 'P12.2' | Epicranial subaponeurotic hemorrhage due to birth injury | NO |
| '767.19' | Other injuries to scalp | 'P12.0' | Cephalhematoma due to birth injury | NO |
| | | 'P12.1' | Chignon (from vacuum extraction) due to birth injury | |
| | | 'P12.3' | Bruising of scalp due to birth injury | |
| | | 'P12.4' | Injury of scalp of newborn due to monitoring equipment | |
| | | 'P12.81' | Caput succedaneum | |
| | | 'P12.89' | Other birth injuries to scalp | |
| | | 'P12.9' | Birth injury to scalp, unspecified | |
| 769 | RESPIRATORY DISTRESS SYNDROME | 'P22.0' | Respiratory distress syndrome of newborn | NO |
| 770.2 | INTERSTITIAL EMPHYSEMA AND RELATED CONDITIONS | 'P25.0' | Interstitial emphysema originating in the perinatal period | NO |
| | | 'P25.1' | Pneumothorax originating in the perinatal period | |
| | | 'P25.2' | Pneumomediastinum originating in the perinatal period | |
| | | 'P25.3' | Pneumopericardium originating in the perinatal period | |
| | | 'P25.8' | Other conditions related to interstitial emphysema originating in the perinatal period | |
| 770.7 | CHRONIC RESPIRATORY DISEASE FROM PERINATAL PERIOD | 'P27.0' | Wilson-Mikity syndrome | NO |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|---|----------------|--|---------------------|
| | | 'P27.1' | Bronchopulmonary dysplasia originating in the perinatal period | |
| | | 'P27.8' | Other chronic respiratory diseases originating in the perinatal period | |
| | | 'P27.9' | Unspecified chronic respiratory disease originating in the perinatal period | |
| INFECTIO | ONS SPECIFIC TO THE PERINATAL PERIOD | | | 1 |
| 771.0 | CONGENITAL RUBELLA | 'P35.0' | Congenital rubella syndrome | YES |
| 771.1 | CONGENITAL CYTOMEGALOVIRUS INFECTION | 'P35.1' | Congenital cytomegalovirus infection | YES |
| 771.2 | OTHER CONGENITAL INFECTIONS | 'P35.2' | Congenital herpesviral [herpes simplex] infection | YES |
| | | 'P35.3' | Congenital viral hepatitis | |
| | | 'P35.8' | Other congenital viral diseases | |
| | | 'P35.9' | Congenital viral disease, unspecified | |
| | | 'P37.0' | Congenital tuberculosis | |
| | | 'P37.1' | Congenital toxoplasmosis | |
| | | 'P37.2' | Neonatal (disseminated) listeriosis | |
| | | 'P37.3' | Congenital falciparum malaria | |
| | | 'P37.4' | Other congenital malaria | |
| | | 'P37.8' | Other specified congenital infectious and parasitic diseases | |
| | | 'P37.9' | Congenital infectious or parasitic disease, unspecified | |
| CONDITI | ONS INVOLVING THE INTEGUMENT AND TEMPERAT | | TION OF FETUS AND NEWBORN | I |
| 779.5 | DRUG WITHDRAWAL SYNDROME IN NEWBORN | 'P96.1' | Neonatal withdrawal symptoms from maternal use of drugs of addiction | YES |
| | | 'P94.1' | Congenital hypertonia | |
| | | 'P94.2' | Congenital hypotonia | |
| | | 'P94.8' | Other disorders of muscle tone of newborn | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|--|----------------|--|---------------------|
| | | 'P94.9' | Disorder of muscle tone of newborn, unspecified | |
| | | 'P96.0' | Congenital renal failure | |
| | | 'P96.3' | Wide cranial sutures of newborn | |
| | | 'P96.5' | Complication to newborn due to (fetal) intrauterine procedure | |
| | | 'P96.89' | Other specified conditions originating in the perinatal period | |
| 785.2 | UNDIAGNOSED CARDIAC MURMURS | 'R01.0' | Benign and innocent cardiac murmurs | NO |
| | | 'R01.1' | Cardiac murmur, unspecified | |
| V12.29 | PERSONAL HISTORY OF OTHER ENDOCRINE, METABOLIC, AND IMMUNITY DISORDERS | 'Z86.2' | Personal history of diseases of the blood and blood- forming organs and certain disorders involving the immune mechanism | |
| | | 'Z86.31' | Personal history of diabetic foot ulcer | |
| | | 'Z86.39' | Personal history of other endocrine, nutritional and metabolic disease | |
| V13.61 | PERSONAL HISTORY OF (CORRECTED) HYPOSPADIAS | 'Z87.710' | Personal history of (corrected) hypospadias | |
| V13.62 | PERSONAL HISTORY OF OTHER (CORRECTED) CONGENITAL MALFORMATIONS OF GENITOURINARY SYSTEM | 'Z87.718' | Personal history of other specified (corrected) congenital malformations of genitourinary system | |
| V13.63 | PERSONAL HISTORY OF (CORRECTED) CONGENITAL MALFORMATIONS OF NERVOUS | 'Z87.728' | Personal history of other specified (corrected) congenital malformations of nervous system and sense organs | |
| V13.64 | PERSONAL HISTORY OF (CORRECTED) CONGENITAL MALFORMATIONS OF EYE, EAR, FACE AND NECK | 'Z87.720' | Personal history of (corrected) congenital malformations of eye | |
| | | 'Z87.721' | Personal history of (corrected) congenital malformations of ear | |

| ICD-9 Code | Description | ICD-10 Code | Description | Reportable Alone |
|---------------|--|----------------|--|---------------------|
| | | 'Z87.730' | Personal history of (corrected) cleft lip and palate | |
| | | 'Z87.790' | Personal history of (corrected) congenital malformations of face and neck | |
| V13.65 | PERSONAL HISTORY OF (CORRECTED) CONGENITAL MALFORMATIONS OF HEART AND CIRCULATORY SYSTEM | 'Z87.74' | Personal history of (corrected) congenital malformations of heart and circulatory system | |
| V13.66 | PERSONAL HISTORY OF (CORRECTED) CONGENITAL MALFORMATIONS OF RESPIRATORY SYSTEM | 'Z87.75' | Personal history of (corrected) congenital malformations of respiratory system | |
| V13.67 | PERSONAL HISTORY OF (CORRECTED) CONGENITAL MALFORMATIONS OF DIGESTIVE SYSTEM | 'Z87.738' | Personal history of other specified (corrected) congenital malformations of digestive system | |
| V13.68 | PERSONAL HISTORY OF (CORRECTED) CONGENITAL MALFORMATIONS OF INTEGUMENT, LIMBS AND MUSCULOSKELETAL SYSTEM | 'Z87.76' | Personal history of (corrected) congenital malformations of integument, limbs and musculoskeletal system | |
| V13.69 | PERSONAL HISTORY OF OTHER (CORRECTED) CONGENITAL MALFORMATION | 'Z87.798' | Personal history of other (corrected) congenital malformations | |

Appendix D. Reportable Conditions with ICD-10-CM Diagnosis Codes

| Birth Defect | ICD-10-CM |
|--|--------------|
| 1. Brain Malformations and Neural Tube Defects | Q00-Q05, Q07 |
| Anencephaly | Q00.0 |
| Craniorachischisis | Q00.1 |
| Iniencephaly | Q00.2 |
| Frontal encephalocele | Q01.0 |
| Nasofrontal encephalocele | Q01.1 |
| Occipital encephalocele | Q01.2 |
| Encephalocele of other sites | Q01.8 |
| Encephalocele, unspecified | Q01.9 |
| Microcephaly | Q02 |
| Malformations of aqueduct of Sylvius | Q03.0 |
| Atresia of foramina of Magendie and Luschka (including Dandy-Walker) | Q03.1 |
| Other congenital hydrocephalus (including obstructive hydrocephaly) | Q03.8 |
| Congenital hydrocephalus, unspecified | Q03.9 |
| Congenital malformations of corpus callosum | Q04.0 |
| Arhinencephaly | Q04.1 |
| Holoprosencephaly | Q04.2 |
| Other reduction deformities of brain | Q04.3 |
| Septo-optic dysplasia of brain | Q04.4 |
| Congenital cerebral cyst (porencephaly, schizencephaly) | Q04.6 |
| Other specified congenital malformations of brain (including ventriculomegaly) | Q04.8 |
| Congenital malformation of brain, unspecified | Q04.9 |
| Cervical spina bifida with hydrocephalus | Q05.0 |
| Thoracic spina bifida with hydrocephalus | Q05.1 |
| Lumbar spina bifida with hydrocephalus | Q05.2 |
| Sacral spina bifida with hydrocephalus | Q05.3 |
| Unspecified spina bifida with hydrocephalus | Q05.4 |
| Cervical spina bifida without hydrocephalus | Q05.5 |
| Thoracic spina bifida without hydrocephalus | Q05.6 |
| Lumbar spina bifida without hydrocephalus | Q05.7 |
| Sacral spina bifida without hydrocephalus | Q05.8 |
| Spina bifida, unspecified | Q05.9 |
| Arnold-Chiari syndrome without spina bifida or hydrocephalus | Q07.00 |
| Arnold-Chiari syndrome with spina bifida | Q07.01 |
| Arnold-Chiari syndrome with hydrocephalus | Q07.02 |
| Arnold-Chiari syndrome with spina bifida and hydrocephalus | Q07.03 |

Table D.1 Brain Malformations and Neural Tube Defects ICD-10-CM Diagnosis Codes

| Table D.2 Eye Malformations | ICD-10-CM Diagnosis Codes |
|-----------------------------|---------------------------|
|-----------------------------|---------------------------|

| Birth Defect | ICD-10-CM |
|--|--------------|
| 2. Eye Malformations | Q11-Q14, H47 |
| Cystic eyeball | Q11.0 |
| Other anophthalmos | Q11.1 |
| Microphthalmos | Q11.2 |
| Congenital cataract | Q12.0 |
| Coloboma of lens | Q12.2 |
| Coloboma of iris | Q13.0 |
| Rieger's anomaly | Q13.81 |
| Other congenital malformations of anterior segment of eye | Q13.89 |
| Congenital malformation of anterior segment of eye, unspecified | Q13.9 |
| Congenital malformation of retina | Q14.1 |
| Congenital malformation of optic disc | Q14.2 |
| Congenital malformation of choroid | Q14.3 |
| Other congenital malformations of posterior segment of eye | Q14.8 |
| Congenital malformation of posterior segment of eye, unspecified | Q14.9 |
| Optic nerve hypoplasia, right eye | H47.031 |
| Optic nerve hypoplasia, left eye | H47.032 |
| Optic nerve hypoplasia, bilateral | H47.033 |
| Optic nerve hypoplasia, unspecified eye | H47.039 |

| Birth Defect | ICD-10-CM |
|---|-----------------------|
| 3. Ear Malformations and Hearing Loss | Q16-18, H90, H91, H93 |
| Congenital absence of (ear) auricle (anotia) | Q16.0 |
| Congenital absence, atresia and stricture of auditory canal (external) | Q16.1 |
| Absence of eustachian tube | Q16.2 |
| Congenital malformation of ear ossicles | Q16.3 |
| Other congenital malformations of middle ear | Q16.4 |
| Congenital malformation of inner ear | Q16.5 |
| Congenital malformation of ear causing impairment of hearing, unspecified | Q16.9 |
| Microtia | Q17.2 |
| Misplaced ear (low-set ear) | Q17.4 |
| Congenital malformation of face and neck, unspecified (includes dysmorphic | Q18.9 |
| features and low-set ears) | |
| Conductive hearing loss, bilateral | H90.0 |
| Conductive hearing loss, unilateral, right ear, with unrestricted hearing on the | H90.11 |
| contralateral side | |
| Conductive hearing loss, unilateral, left ear, with unrestricted hearing on the | H90.12 |
| contralateral side | |
| Conductive hearing loss, unspecified | H90.2 |
| Sensorineural hearing loss, bilateral | H90.3 |
| Sensorineural hearing loss, unilateral, right ear, with unrestricted hearing on the | H90.41 |
| contralateral side | |
| Sensorineural hearing loss, unilateral, left ear, with unrestricted hearing on the | H90.42 |
| contralateral side | |
| Unspecified sensorineural hearing loss | H90.5 |
| Mixed conductive and sensorineural hearing loss, bilateral | H90.6 |
| Mixed conductive and sensorineural hearing loss, unilateral, right ear, with | H90.71 |
| unrestricted hearing on the contralateral side | |
| Mixed conductive and sensorineural hearing loss, unilateral, left ear, with | H90.72 |
| unrestricted hearing on the contralateral side | |
| Mixed conductive and sensorineural hearing loss, unspecified | H90.8 |
| Conductive hearing loss, unilateral, right ear with restricted hearing on the | H90.A11 |
| contralateral side | |
| Conductive hearing loss, unilateral, left ear with restricted hearing on the | H90.A12 |
| contralateral side | |
| Sensorineural hearing loss, unilateral, right ear, with restricted hearing on the | H90.A21 |
| contralateral side | |
| Sensorineural hearing loss, unilateral, left ear, with restricted hearing on the | H90.A22 |
| contralateral side | 1100.107 |
| Mixed conductive and sensorineural hearing loss, unilateral, right ear with | H90.A31 |
| restricted hearing on the contralateral side | |

Table D.3 Ear Malformations and Hearing Loss ICD-10-CM Diagnosis Codes

| Birth Defect | ICD-10-CM |
|--|-----------|
| Mixed conductive and sensorineural hearing loss, unilateral, left ear with | H90.A32 |
| restricted hearing on the contralateral side | |
| Other specified hearing loss, right ear | H91.8X1 |
| Other specified hearing loss, left ear | H91.8X2 |
| Other specified hearing loss, bilateral | H91.8X3 |
| Other specified hearing loss, unspecified ear | H91.8X9 |
| Unspecified hearing loss, unspecified ear | H91.90 |
| Unspecified hearing loss, right ear | H91.91 |
| Unspecified hearing loss, left ear | H91.92 |
| Unspecified hearing loss, bilateral | H91.93 |
| Other abnormal auditory perceptions, right ear | H93.291 |
| Other abnormal auditory perceptions, left ear | H93.292 |
| Other abnormal auditory perceptions, bilateral | H93.293 |
| Other abnormal auditory perceptions, unspecified ear | H93.299 |
| Disorders of right acoustic nerve | H93.3X1 |
| Disorders of left acoustic nerve | H93.3X2 |
| Disorders of bilateral acoustic nerves | H93.3X3 |
| Disorders of unspecified acoustic nerve | H93.3X9 |

| Birth Defect | ICD-10-CM |
|--|-----------|
| 4. Congenital Heart Disease | Q20-Q26 |
| Common arterial trunk (TA) | Q20.0 |
| Double outlet right ventricle (DORV, Taussig-Bing anomaly) | Q20.1 |
| Discordant ventriculoarterial connection | Q20.3 |
| Double inlet ventricle (single ventricle) | Q20.4 |
| Discordant atrioventricular connection | Q20.5 |
| Ventricular septal defect (VSD) | Q21.0 |
| Atrial septal defect (ASD) | Q21.1 |
| Atrioventricular septal defect (AVSD) | Q21.2 |
| Tetralogy of Fallot (TOF) | Q21.3 |
| Pulmonary valve atresia | Q22.0 |
| Congenital pulmonary valve stenosis | Q22.1 |
| Tricuspid valve stenosis | Q22.4 |
| Ebstein's anomaly | Q22.5 |
| Congenital stenosis of aortic valve | Q23.0 |
| Hypoplastic left heart syndrome (HLHS) | Q23.4 |
| Congenital malformation of heart, unspecified | Q24.9 |
| Coarctation of aorta | Q25.1 |
| Interruption of aortic arch (IAA) | Q25.21 |
| Other atresia of aorta | Q25.29 |
| Congenital malformation of the aorta, unspecified | Q25.40 |
| Absence and aplasia of aorta | Q25.41 |
| Hypoplasia of aorta | Q25.42 |
| Congenital aneurysm of aorta | Q25.43 |
| Congenital dilation of aorta | Q25.44 |
| Double aortic arch | Q25.45 |
| Tortuous aortic arch | Q25.46 |
| Right aortic arch | Q25.47 |
| Anomalous origin of subclavian artery | Q25.48 |
| Other congenital malformations of aorta | Q25.49 |
| Total anomalous pulmonary venous connection (TAPVC) | Q26.2 |

Table D.4 Congenital Heart Disease ICD-10-CM Diagnosis Codes

| Birth Defect | ICD-10-CM |
|--|--------------|
| 5. Orofacial | Q30, Q35-Q37 |
| Choanal atresia | Q30.0 |
| Cleft hard palate | Q35.1 |
| Cleft soft palate | Q35.3 |
| Cleft hard palate with cleft soft palate | Q35.5 |
| Cleft uvula | Q35.7 |
| Cleft palate, unspecified | Q35.9 |
| Cleft lip, bilateral | Q36.0 |
| Cleft lip, median | Q36.1 |
| Cleft lip, unilateral | Q36.9 |
| Cleft hard palate with bilateral cleft lip | Q37.0 |
| Cleft hard palate with unilateral cleft lip | Q37.1 |
| Cleft soft palate with bilateral cleft lip | Q37.2 |
| Cleft soft palate with unilateral cleft lip | Q37.3 |
| Cleft hard and soft palate with bilateral cleft lip | Q37.4 |
| Cleft hard and soft palate with unilateral cleft lip | Q37.5 |
| Unspecified cleft palate with bilateral cleft lip | Q37.8 |
| Unspecified cleft palate with unilateral cleft lip | Q37.9 |

Table D.5 Orofacial Malformations ICD-10-CM Diagnosis Codes

| Birth Defect | ICD-10-CM |
|---|----------------------|
| 6. Gastrointestinal | Q39, Q41-42, Q44-Q45 |
| Atresia of esophagus without fistula | Q39.0 |
| Atresia of esophagus with tracheo-esophageal fistula | Q39.1 |
| Congenital tracheo-esophageal fistula without atresia | Q39.2 |
| Congenital stenosis and stricture of esophagus | Q39.3 |
| Esophageal web | Q39.4 |
| Congenital absence, atresia and stenosis of duodenum | Q41.0 |
| Congenital absence, atresia and stenosis of jejunum | Q41.1 |
| Congenital absence, atresia and stenosis of ileum | Q41.2 |
| Congenital absence, atresia and stenosis of other specified parts of small | Q41.8 |
| intestine | |
| Congenital absence, atresia and stenosis of small intestine, part unspecified | Q41.9 |
| Congenital absence, atresia and stenosis of rectum with fistula | Q42.0 |
| Congenital absence, atresia and stenosis of rectum without fistula | Q42.1 |
| Congenital absence, atresia and stenosis of anus with fistula | Q42.2 |
| Congenital absence, atresia and stenosis of anus without fistula (includes | Q42.3 |
| imperforate anus) | |
| Congenital absence, atresia and stenosis of other parts of large intestine | Q42.8 |
| Congenital absence, atresia and stenosis of large intestine, part unspecified | Q42.9 |
| Atresia of bile ducts | Q44.2 |
| Obstruction of bile ducts | Q44.3 |
| Congenital malformation of digestive system, unspecified | Q45.9 |

Table D.6 Gastrointestinal Malformations ICD-10-CM Diagnosis Codes

| Birth Defect | ICD-10-CM |
|--|---------------|
| 7. Genitourinary | Q54, Q60, Q64 |
| Hypospadias, balanic | Q54.0 |
| Hypospadias, penile | Q54.1 |
| Hypospadias, penoscrotal | Q54.2 |
| Hypospadias, perineal | Q54.3 |
| Other hypospadias | Q54.8 |
| Hypospadias, unspecified | Q54.9 |
| Renal agenesis, unilateral | Q60.0 |
| Renal agenesis, bilateral | Q60.1 |
| Renal agenesis, unspecified | Q60.2 |
| Renal hypoplasia, unilateral | Q60.3 |
| Renal hypoplasia, bilateral | Q60.4 |
| Renal hypoplasia, unspecified | Q60.5 |
| Potter's syndrome | Q60.6 |
| Exstrophy of urinary bladder, unspecified | Q64.10 |
| Cloacal exstrophy of urinary bladder | Q64.12 |
| Other exstrophy of urinary bladder | Q64.19 |
| Congenital posterior urethral valves | Q64.2 |
| Congenital malformation of urinary system, unspecified | Q64.9 |

Table D.7 Genitourinary Malformations ICD-10-CM Diagnosis Codes

| Birth Defect | ICD-10-CM |
|---|------------------------|
| 9. Musculoskeletal | Q66, Q68, Q71-Q75, Q79 |
| Congenital talipes equinovarus (clubfoot) | Q66.0 |
| Other specified congenital deformities of feet | Q66.89 |
| Other specified congenital musculoskeletal deformities | Q68.8 |
| Congenital complete absence of unspecified upper limb | Q71.00 |
| Congenital complete absence of right upper limb | Q71.01 |
| Congenital complete absence of left upper limb | Q71.02 |
| Congenital complete absence of upper limb bilateral | Q71.03 |
| Congenital absence of unspecified upper arm and forearm with hand present | Q71.10 |
| Congenital absence of right upper arm and forearm with hand present | Q71.11 |
| Congenital absence of left upper arm and forearm with hand present | Q71.12 |
| Congenital absence of upper arm and forearm with hand present bilateral | Q71.13 |
| Congenital absence of both forearm and hand, unspecified upper limb | Q71.20 |
| Congenital absence of both forearm and hand, right upper limb | Q71.21 |
| Congenital absence of both forearm and hand, left upper limb | Q71.22 |
| Congenital absence of both forearm and hand, bilateral | Q71.23 |
| Congenital absence of unspecified hand and finger | Q71.30 |
| Congenital absence of right hand and finger | Q71.31 |
| Congenital absence of left hand and finger | Q71.32 |
| Congenital absence of hand and finger, bilateral | Q71.33 |
| Longitudinal reduction defect of unspecified radius | Q71.40 |
| Longitudinal reduction defect of right radius | Q71.41 |
| Longitudinal reduction defect of left radius | Q71.42 |
| Longitudinal reduction defect of radius, bilateral | Q71.43 |
| Longitudinal reduction defect of unspecified ulna | Q71.50 |
| Longitudinal reduction defect of right ulna | Q71.51 |
| Longitudinal reduction defect of left ulna | Q71.52 |
| Longitudinal reduction defect of ulna, bilateral | Q71.53 |
| Lobster-claw unspecified hand | Q71.60 |
| Lobster-claw right hand | Q71.61 |
| Lobster-claw left hand | Q71.62 |
| Lobster-claw hand, bilateral | Q71.63 |
| Congenital shortening of right upper limb | Q71.811 |
| Congenital shortening of left upper limb | Q71.812 |
| Congenital shortening of upper limb, bilateral | Q71.813 |
| Congenital shortening of unspecified upper limb | Q71.819 |
| Other reduction defects of right upper limb | Q71.891 |
| Other reduction defects of left upper limb | Q71.892 |
| Other reduction defects of upper limb, bilateral | Q71.893 |

Table D.8 Musculoskeletal Malformations ICD-10-CM Diagnosis Codes

| Birth Defect | ICD-10-CM |
|---|-----------|
| Other reduction defects of unspecified upper limb | Q71.899 |
| Unspecified reduction defect of unspecified upper limb | Q71.90 |
| Unspecified reduction defect of right upper limb | Q71.91 |
| Unspecified reduction defect of left upper limb | Q71.92 |
| Unspecified reduction defect of upper limb, bilateral | Q71.93 |
| Congenital complete absence of unspecified lower limb | Q72.00 |
| Congenital complete absence of right lower limb | Q72.01 |
| Congenital complete absence of left lower limb | Q72.02 |
| Congenital complete absence of lower limb, bilateral | Q72.03 |
| Congenital absence of unspecified thigh and lower leg with foot present | Q72.10 |
| Congenital absence of right thigh and lower leg with foot present | Q72.11 |
| Congenital absence of left thigh and lower leg with foot present | Q72.12 |
| Congenital absence of thigh and lower leg with foot present, bilateral | Q72.13 |
| Congenital absence of both lower leg and foot, unspecified lower limb | Q72.20 |
| Congenital absence of both lower leg and foot, right lower limb | Q72.21 |
| Congenital absence of both lower leg and foot, left lower limb | Q72.22 |
| Congenital absence of both lower leg and foot, bilateral | Q72.23 |
| Congenital absence of unspecified foot and toe(s) | Q72.30 |
| Congenital absence of right foot and toe(s) | Q72.31 |
| Congenital absence of left foot and toe(s) | Q72.32 |
| Congenital absence of foot and toe(s), bilateral | Q72.33 |
| Longitudinal reduction defect of unspecified femur | Q72.40 |
| Longitudinal reduction defect of right femur | Q72.41 |
| Longitudinal reduction defect of left femur | Q72.42 |
| Longitudinal reduction defect of femur, bilateral | Q72.43 |
| Longitudinal reduction defect of unspecified tibia | Q72.50 |
| Longitudinal reduction defect of right tibia | Q72.51 |
| Longitudinal reduction defect of left tibia | Q72.52 |
| Longitudinal reduction defect of tibia, bilateral | Q72.53 |
| Longitudinal reduction defect of unspecified fibula | Q72.60 |
| Longitudinal reduction defect of right fibula | Q72.61 |
| Longitudinal reduction defect of left fibula | Q72.62 |
| Longitudinal reduction defect of fibula, bilateral | Q72.63 |
| Split foot, unspecified lower limb | Q72.70 |
| Split foot, right lower limb | Q72.71 |
| Split foot, left lower limb | Q72.72 |
| Split foot, bilateral | Q72.73 |
| Congenital shortening of right lower limb | Q72.811 |
| Congenital shortening of left lower limb | Q72.812 |
| Congenital shortening of lower limb, bilateral | Q72.813 |
| Congenital shortening of unspecified lower limb | Q72.819 |

| Birth Defect | ICD-10-CM |
|--|-----------|
| Other reduction defects of right lower limb | Q72.891 |
| Other reduction defects of left lower limb | Q72.892 |
| Other reduction defects of lower limb, bilateral | Q72.893 |
| Other reductions defects of unspecified lower limb | Q72.899 |
| Unspecified reduction defect of unspecified lower limb | Q72.90 |
| Unspecified reduction defect of right lower limb | Q72.91 |
| Unspecified reduction defect of left lower limb | Q72.92 |
| Unspecified reduction defect of lower limb, bilateral | Q72.93 |
| Congenital absence of unspecified limb(s) | Q73.0 |
| Phocomelia, unspecified limb(s) | Q73.1 |
| Other reduction defects of unspecified limb(s) | Q73.8 |
| Arthrogryposis multiplex congenita | Q74.3 |
| Craniosynostosis | Q75.0 |
| Congenital diaphragmatic hernia | Q79.0 |
| Other congenital malformations of diaphragm | Q79.1 |
| Exomphalos (omphalocele) | Q79.2 |
| Gastroschisis | Q79.3 |
| Congenital malformation of musculoskeletal system, unspecified | Q79.9 |

| Birth Defect | ICD-10-CM |
|---|------------------|
| 10. Chromosomal Abnormalities, Sequences, and Syndromes | Q89-91, Q96, Q99 |
| Multiple congenital malformations, not elsewhere classified | Q89.7 |
| Congenital malformation, unspecified | Q89.9 |
| Trisomy 21, nonmosaicism | Q90.0 |
| Trisomy 21, mosaicism | Q90.1 |
| Trisomy 21, translocation | Q90.2 |
| Down syndrome, unspecified (Trisomy 21) | Q90.9 |
| Trisomy 18, nonmosaicism | Q91.0 |
| Trisomy 18, mosaicism | Q91.1 |
| Trisomy 18, translocation | Q91.2 |
| Trisomy 18, unspecified | Q91.3 |
| Trisomy 13, nonmosaicism | Q91.4 |
| Trisomy 13, mosaicism | Q91.5 |
| Trisomy 13, translocation | Q91.6 |
| Trisomy 13, unspecified | Q91.7 |
| Velo-cardio-facial syndrome (including DiGeorge syndrome) | Q93.81 |
| Turner's syndrome - Karyotype 45, X | Q96.0 |
| Turner's syndrome - Karyotype 46, X iso (Xq) | Q96.1 |
| Turner's syndrome - Karyotype 46, X with abnormal sex chromosome, except iso (Xq) | Q96.2 |
| Turner's syndrome - Karyotype 45, X/46, XX or XY | Q96.3 |
| Turner's syndrome - Karyotype 45, X/other cell line(s) with abnormal sex | Q96.4 |
| chromosome | |
| Other variants of Turner's syndrome | Q96.8 |
| Turner's syndrome, unspecified | Q96.9 |
| Chromosomal abnormality, unspecified | Q99.9 |

Table D.9 Chromosomal Abnormalities, Sequences, and Syndromes ICD-10-CM Diagnosis Codes