

# The Occupational Health Provider Coding Guide



NAVY AND MARINE CORPS PUBLIC HEALTH CENTER  
BUREAU OF MEDICINE AND SURGERY

# The Occupational Health Provider Coding Guide

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## Section 1 Introduction

This document is meant to serve as a quick coding guide for Occupational Health providers and is ordered to emulate the experience that a provider would encounter in an electronic health record (EHR) (i.e., diagnosis, procedure, evaluation, and management codes). This guide does not contain an exhaustive list of all codes pertinent to Occupational Health; it attempts to summarize the most commonly coded patient encounters seen by Navy Occupational Health providers. Providers and staff are encouraged to use the search engine in their EHR to find accurate codes for the services provided.

### Organization

This document covers surveillance and certification encounters, problem oriented encounters, and non-credentialed (clinical staff encounters), including ICD10, CPT, E&M, and some common coding scenarios. Coders can assist in the correct coding and documenting of unique encounters. The final section includes a table with external cause codes.

### Updates

Help in keeping this guidance pertinent, useful, and up to date is greatly appreciated. Please forward all recommended edits to [usn.pnsy.brmedclinporsnh.list.oemcodingupdate@mail.mil](mailto:usn.pnsy.brmedclinporsnh.list.oemcodingupdate@mail.mil). The current version may be downloaded from <https://www.med.navy.mil/sites/nmcphc/Documents/oem/OEMcoding.pdf>.

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## Section 2 Definitions and Reimbursement

### Definitions

The following acronyms are used throughout this document.

**ICD-10 code:** Diagnosis Codes. International classification of diseases – 10<sup>th</sup> edition, published by WHO and updated annually with new codes becoming effective Oct 1<sup>st</sup> of each year.

**CPT:** Current Procedural Terminology. Procedure codes (e.g., laceration repair, immunizations, PFT/Spirometry, ECG, etc.) Published by the AMA and updated annually with new codes becoming effective Jan 1 of each year.

**HCPCS Level II codes:** Begin with a letter (i.e., A4570) and allow the provider to report the items used during the course of the patient encounter (vaccines, splint products, injectable drugs, crutches, slings, and other durable medical equipment).

**E&M code (99xxx):** Evaluation and Management codes, which are a subset of CPT codes that quantify the complexity level of the work done by the privileged provider during (or associated with) a patient encounter. For most specialties, E&M codes are the largest contributor to reimbursement and allow for the accurate capture of workflow through the tracking of Relative Value Units (RVUs). Preventive medicine codes are reported as medical surveillance encounters (993xx series) while management of injuries and illness is reported using problem focused E&M codes (99201-99215) as they are providing services similar to primary care clinics.

**Z-codes:** Used to describe the reason for the encounter, i.e., certification update, work status, etc., but do not necessarily represent a current illness or injury.

### Reimbursement

E&M codes, CPT procedure codes, and HCPCS Level II codes together determine the reimbursement value of the patient visit.

## Section 3 Surveillance and Certification Encounters

These include: Surveillance (lead, cadmium, beryllium, chromium etc.), Certification (Police, Firefighter, Forklift Operator, DOT Driver, Crane Operator, etc.), and Pre-placement exams. (The complete list of programs & exam requirements are found in the [NMCPHC – TM OM 6260 Medical Surveillance Procedures Manual and Medical Matrix.](#))

The Military Health System has implemented DOD Unique Codes to add a greater level of detail for occupational examination data collection. The DOD codes are 1<sup>st</sup> position only codes.

**Table 1 Commonly Used DoD Specific Codes**

<b>Most utilized DOD specific ICD-10:</b>	
<b>DOD0214</b>	Occupational Health Exam - <b>Baseline</b>
<b>DOD0215</b>	Occupational Health Exam - <b>Periodic</b>
<b>DOD0216</b>	Occupational Health Exam – <b>Termination</b>

Note: Secondary exposure(s) i.e., lead exposure, must also be coded if present for DOD0215-0216

<b>Other DOD specific ICD-10:</b>	
<b>DOD0211</b>	Assessment, pre-deployment, documented on DD2795
<b>DOD0212</b>	Initial Post-Deployment Assessment documented on DD2796
<b>DOD0213</b>	Post Deployment Health Reassessment (PDHRA), documented on DD2900
<b>DOD0217</b>	Aviation Occupational Exam, Long;
<b>DOD0218</b>	Aviation Occupational Exam, Short
<b>DOD0222</b>	Retirement from Military Service Exam, Long
<b>DOD0223</b>	Retirement from Military Service Exam, Short- Abbreviated exam
<b>DOD0224</b>	Occupational Health Exam - Personnel Reliability Program (PRP)
<b>DOD0225</b>	Service Member Periodic Health Assessment (PHA)/Exam
<b>DOD0227</b>	Exam/assessment, occupational, fetal protection program

### Z02.79

Used for administrative purposes such as the issuance of a medical certificate, rating, or statement and for issuance of work limitations and to indicate return to work (RTW) status. This must be reported in the first position and should not be used in combination with a DODxxxx code. Below are two common uses for this code.

1. Update of certification or surveillance exam in which worker was previously marked pending or not qualified.

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Example: A 62 year old male DOT driver with a history of OSA initially marked as “determination pending” during his examination 44 days ago returns today with adequate documentation of appropriate CPAP use and denies daytime tiredness. A 1 year certification is issued.

ICD-10-CM: Z02.79 issuance of medical certificate (work status)

E&M: 99499

2. 1<sup>st</sup> diagnosis code for all work limitation or RTW encounters. See problem oriented section below for details.

## Z02.89

Primarily used by Occupational Health Techs (OHT’s) for part 1 physicals and by providers and nurses for review of labs and ancillary studies while reporting 99499 for the E&M code. This must be reported in the first position and should not be used in combination with a DODxxxx code. A few scenarios for correct use of this code include the following.

- OHT performing a part 1 physical
- Review of B-reader results – normal, stable, abnormal
- Review of Pre-placement exam by second provider
- Review of all lab results including periodic lead labs and cadmium.

Example: A 34 yo F underwent a part 1 pre-placement exam and was seen by an OHT. During the appointment, the OHT performed a spirometry for the patient. The patient is scheduled to see the provider during the part 2 exam in 1 week.

ICD-10-CM: Z02.89

E&M: 99499

CPT for spirometry will be coded during the part 2 exam

## Secondary ICD-10 Codes

These codes are secondary codes to the appropriate primary diagnostic or other Z-codes and help to further define the primary codes.

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**Table 2 Common secondary exposure codes\***

Z77.010	Contact with or suspected exposure to <b>Arsenic</b>
Z77.011	Contact with or suspected exposure to <b>Lead</b>
Z77.018	Contact with or suspected exposure to <b>Metals</b>
Z77.021	Contact with or suspected exposure to <b>Benzene</b>
Z77.090	Contact with or suspected exposure to <b>Asbestos</b>
Z77.21	Contact with or suspected exposure to <b>body fluids</b>
Z77.9	Contact with or suspected exposure hazardous to health (specified)
Z57.0	Occupational exposure to <b>noise</b>
Z57.1	Occupational exposure to <b>radiation</b> (Ionizing radiation is implied)
Z57.2	Occupational exposure to <b>dust</b>
Z57.5	Occupational exposure to toxic agents in other industries
Z57.6	Occupational exposure to extreme <b>temperatures</b>
Z57.7	Occupational exposure to <b>vibration</b>
Z57.8	Occupational exposure to other risk factors

**\* Search the complete list in the EHR**

**Figure 1 Example of Z codes and DoD codes in AHLTA**

Priority	ICD	Diagnosis	Add to Problem List?	Type
1	D0D0215	EXAM, FORMAL OCCUPATIONAL HEALTH PROGRAM INCLUDING HEARING CONSERVATION PROGRAM, PERIODIC FOR CONTINUED SURVEILLANCE FOR OCCUPATIONAL WORKPLACE EXPOSURE	No	New
2	Z77.090	Contact with and (suspected) exposure to asbestos	No	New
3	Z77.011	Contact with and (suspected) exposure to lead	No	New

## Codes for Workers Not Fully Qualified

Any time there is a diagnosis that results in an abbreviated certification, disqualification, work limitations, or "NPQ" status, that diagnosis must be coded. While the primary diagnosis (i.e., the main reason for the visit) of medical surveillance or certification is exposure to a hazard, or assessment, or exam, the reason for the work limitation will be a medical condition. That condition must be an additional code (i.e., a secondary or Priority 2, 3, 4, etc., code).

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## CPT Codes (Procedure codes)

Always use the search engine within your EHR for a complete list of codes.

**Table 3 Common additional CPT Codes Used in the Occupational Health Clinic**

<b>Venipuncture</b>	36415 (blood drawn by clinic staff sent to lab for processing)
<b>Spirometry</b>	94010
<b>Visual Acuity</b>	99172/3*
<b>Color Vision</b>	92283
<b>Vision Field exam</b>	92081-92083 (limited, intermediate, extended)
<b>ECG</b>	93000 (Global), 93005 (tracing only), 93010 (interpret/report)
<b>PPD Placement</b>	86580 (When read 2 days later report 99499)
<b>Urine Dip stick</b>	81002 (only report if in-house lab processes)
<b>Audiometry</b>	HCP and non-HCP has its own guidelines, please refer to these.
<b>Digital Rectal Exam for Prostate Cancer Screening</b>	G0102

\*99173 (Visual acuity screening - Snellen chart) may be reported with the patient encounter, whereas 99172 (Visual function screening including Snellen chart, ocular alignment, color, and field of vision) may only be reported in a separate encounter by the tech performing the screenings. (To reduce confusion, it is acceptable to have all vision screenings (99172 or 99173) reported by the OHT.)

## Immunizations

Immunizations given at the point of service (i.e., in the clinic performing the physical) are coded and reported on the same encounter as the physical.

## E&M Codes

Preventive Medicine codes (99381-99397) describe routine periodic examinations performed in the absence of patient complaints or symptoms and is coded only once for the physical examination regardless of the number of return visits for the same physical examination. **Time is not a factor** in the selection of this code; therefore, prolonged E&M services cannot be used in addition to these codes. All additional visits required to complete this medical surveillance encounter should be reported with 99499.

**Table 4 Licensed Independent Practitioner Codes**

<b>9938X</b>	well exam, new patient (not seen in the last 3 years)
<b>9939X</b>	well exam, established patient
<b>96160</b>	record review (face to face), no exam, and counseling, reviewed by provider (for PHAs)
<b>99499</b>	Provider record review (no face to face)

**Table 5 Nurse/Tech/Corpsman Codes**

<b>99211</b>	face to face, no privileged provider contact, established patient
<b>99499</b>	face to face, no privileged provider contact



## Section 4 Coding Scenarios

### Medical Surveillance / Certification exam

A 40-year-old explosives handler presents to the clinic for a certification exam. The clinic staff draws blood and takes the specimen to the lab. They also perform an ECG, an audiogram, and a visual screening which the provider interprets and documents in the visit note. No additional problems are noted during the visit and the worker was issued a full certification. **NOTE: Audio and optometry screening are reported separately by the tech that performed the screening.**

**ICD-10-CM:** DOD0215  
**Secondary ICD-10-CM:** None  
**CPT:** EKG tracing and report: 93000  
Venipuncture: 36415  
**E&M:** 99396 (Established Patient Preventive Services, 40-64)

### Surveillance Exam

A 25 year old civilian painter presents for surveillance exam for the following periodic stressors: Cadmium, chromium, lead, beryllium, and noise. All ancillary testing is WNL. No abnormalities were noted.

**ICD-10-CM:** DOD0215  
**Secondary ICD-10-CM:** Exposure codes: Z77.011 (lead)  
Z77.018 (cadmium)  
Z57.0 (noise)  
**CPT:** Spirometry: 94010  
Venipuncture: 36415  
**E&M:** 99396 (Established Patient Preventive Services, 40-64)

### Pre-placement exam – Part I

A 22 year old civilian presents to the clinic for Part 1 of her pre-placement assessment. The tech reviews the medical packet, performs the visual acuity test and documents what the patient needs to complete Part 2 of the exam (i.e., immunizations, labs, etc.). No counseling is provided.

**ICD-10-CM:** Z02.89  
**CPT:** 99172/3  
The OHT reports the vision screening at this encounter. All other ancillary services are reported with the Part 2 encounter.  
**E&M:** 99499

### Pre-placement exam – Part 2

A 22 year old civilian presents to the clinic for part 2 of her pre-placement exam. The provider reviews the Employee Medical Record, performs the physical exam and documents in AHLTA. The provider also

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reviews and interprets results from any ancillary studies (i.e. Labs, ECG, and spirometry). The provider will assign the tech who performed part 1 as a secondary provider.

**ICD-10-CM:** DOD0214 Encounter for pre-employment examination  
**Secondary ICD-10-CM:** None  
**CPT:** Spirometry 94010  
Venipuncture 36415  
ECG 93000  
**E&M:** 99385 Patient is new and her age is within defined age range for this code

## Section 5 Problem Oriented Visits (Occupational and Non-Occupational Injuries)

These codes are used when the patient presents for an injury, illness, or follow-up visit (including return to work and work limitations).

### Z-code

This is not used if the occupational provider is also the treating provider (skip to the Diagnosis Code).

Z02.79: Indicates a work status determination has been made (i.e., limitations, full duty, certification issuance, etc.). It must be included on all RTW and work limitations. It must be used in the first position.

This code is not used if the occupational provider is also the treating provider. Instead, the diagnosis code is listed first until the medical condition is resolved, or the patient is able to RTW without limits.

Upon resolution of the medical condition select a personal history code.

- Z98.890 Other specified post procedural state (personal history of surgery)
- Z87.828 If treatment is complete: Personal history of other (healed) physical injury and trauma
- Z87.81 If treatment is complete: Personal history of (healed) traumatic fracture
- Z92.89 Personal history of other medical treatment

### Diagnosis code

The diagnosis code is to be listed at EVERY encounter unless the condition is resolved. If resolved use appropriate Z code above.

Example: Low Back Strain, **S**39.012 **A**



Note: 1<sup>st</sup> alpha character designates category of diagnosis.  
“S” relates to “Injuries, poisoning and other consequences of external cause.  
“M” is for musculoskeletal and connective tissue

Note: The 7<sup>th</sup> alpha character specifies:  
“A” active treatment phase of care  
“D” healing phase of care  
“S” result of a sequela or late effects

### External Cause Codes: V, W, X, Y

V and W codes are used to identify WHAT HAPPENED.

### V Codes

Vehicle (mode of transport, i.e., cars, bikes, etc.) related, to be listed at EVERY encounter.

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For example, motor vehicle collision NOS, V00.xxxA – V99.xxxA.

## W Codes

Injuries due to slipping, tripping, stumbling, and falling or exposure to inanimate mechanical force, to be listed at EVERY encounter.

For example, lifting a machine and appliance, W24.0xxA.

## X Codes

Exposures to forces of nature.

For example, natural heat, cold, avalanche, volcano, blizzard, etc. (See Section 9 for an expanded list of external cause codes.)

## Y Codes

Y codes are reported at the FIRST encounter only. It is important to document HOW and WHERE the injury occurred.

- Activity codes (Y93.xxx)  
Covers just about every activity imaginable and the provider should search the EHR database for the most specific.  
Y93.xxx Overexertion or strenuous movement pull, lift, push
- Employment status codes (Y99.x) : describe if the person is employed, military, a volunteer, etc.  
Y99.0 civilian activity done for income or pay  
Y99.1 Military activity  
Y99.2 Volunteer activity  
Y99.8 Other external cause status (hobby/leisure; recreational activity)
- Place of occurrence codes (Y92.xxx)- Location where injury or illness was sustained. Examples:  
Y92.69 Accident occurring at place of work  
Y92.89 Accident occurring in parking lot

## SUMMARY

STEP 1: Add Z02.79 (work status) for any encounter where the occupational provider was not the treating provider or if treatment is complete.

STEP 2: Add diagnosis code, or if treatment complete add a personal history code i.e., Z87.828, Z98.890 and stop here.

If treatment is not complete, proceed to Step 3.

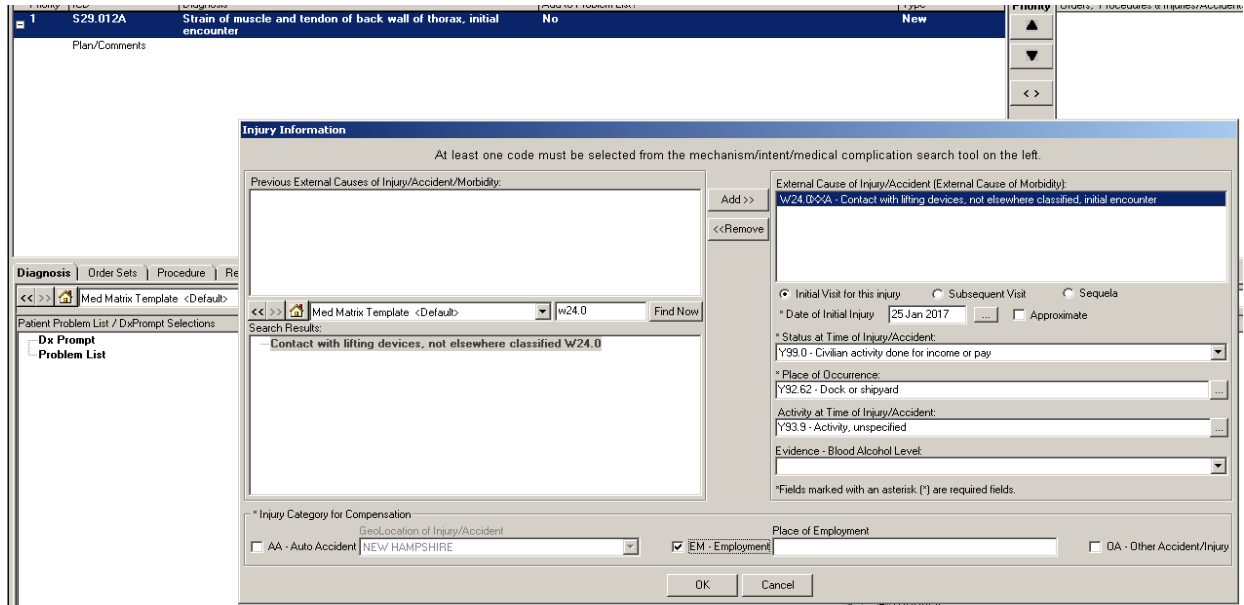
STEP 3: External cause code selection (prompted based on the diagnosis in the EHR, see Figure 2).

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Choose mode of injury (V or W code).

Choose where and how the injury occurred (Y codes). Use Y code for the first encounter only.

**Figure 2** Screen shot of external cause code selection menu



## CPT Codes

**Table 6** Common procedure codes used during problem oriented visits

Application of modality, hot or cold packs	97010
IV Infusion, first hour	96365
IV Push, Initial	96374
Injection, subcutaneous or intramuscular (Medication)	96372
Tdap	90715 (Vaccine) and 90471
For each additional vaccine	90472
Venipuncture	36415
Finger splint, static	Q4049
Crutches, underarm, pair	E0114
Generic Splint Supply	A4570
Ankle Control Ortho	L4350
Suture removal Kit	S0630
Laceration repair scalp/neck/trunk/ext; X cm	1200X*

\*X varies depending on wound size

## E&M Codes

99201-99215 Encounter for illness, injury, follow-up, etc. E&M code is selected based on supporting documentation and services provided.

## Section 6 Common Coding Scenarios

### 1) Work Status Determination “Light Duty”:

34 yo M presents for the first time following ACL repair following a non-occupational injury (skiing). The patient notes low level knee pain, and has a note from his surgeon indicating limitations are needed. The occupational provider performs an exam and agrees. Work limits are issued.

**ICD-10-CM:** Z02.79 (Work status)  
**ICD-10-CM (Secondary Code):** Z98.890 (Other specified post procedural state)  
**E&M:** 992xx - “level selected based on supporting documentation”

### 2) Laceration repair:

A 25 yo M civilian worker not previously known to the clinic presents with a laceration on his right hand while using a non-powered hand tool. The location, mechanism of the injury, and the time at which it occurred is documented. He has no known drug allergies and had his last tetanus shot more than five years ago. Clinic staff has recorded his vitals. The details of the 3 cm laceration repair are documented separately within the AHLTA note. The patient receives a tetanus shot in the Occupational Health clinic.

**ICD-10-CM:** S61.411 (Open wound of right hand, without complication)  
W27.8xxA (Other hand tool/implement)  
Y92.69 (Accident occurring in industrial workplace)  
Y99.0 (Civilian activity done for pay)  
**CPT:** Laceration repair, 2.6-5 cm: 12002  
*Td Vaccine 90718*  
*Td Admin 90471*  
**E&M:** 99201-25 Problem-Oriented Visit, New Patient, based on documentation

### 3) Return to Work with update medical certification

A shipyard worker with history of non-occupational injury and normal physical exam presents with note from his treating provider indicating he may return to full duty without limits. The Occupational Health provider performs a focused exam and agrees.

**ICD-10-CM:** Z02.79 (Work status)  
**Secondary ICD-10-CM:** Z87.828 (Treatment Complete. “Personal history of other (healed) physical injury and trauma”)  
**E&M:** 99212 or 99213 based on documented History of Present Illness, exam, and medical decision making

## 4) Putting It All Together

A plastic fabricator presents with right hand laceration that occurred at work just prior to his arrival in your clinic.

- The provider/clinic that provides the 1st point of care might report the following (as an example):  
S61.411A Laceration without foreign body of right hand, initial (or any encounter during active phase of care)  
W31.2xxA Contact with powered hand tool, initial (or any encounter during active phase of care)  
Y93.H3 Activity, building and construction  
Y99.0 Civilian activity done for income or pay  
Y92.69 Accident occurring at place of work.
- Let's assume he was sutured at the 1st encounter and now returns 10 days later for stitch removal.  
Z48.02 Encounter for removal of sutures.  
S61.411D Laceration without foreign body of right hand, (NOTICE last letter changed to "D" = patient is in healing or recovery phase of care)  
W31.2xxD Contact with powered hand tool, initial (or any encounter during active phase of care)  
Notice we no longer are required to report all those "Y" codes.
- It's a week later and he comes to the Occupational Health clinic for a simple RTW with note from PCM in hand and no complaints.  
Z02.79 Encounter for other medical certificate (work status)  
Z87.828 Personal history of other (healed) physical injury and trauma (treatment complete)
- Six months later patient returns to the OH clinic with complaints of stiffness and pain in his right hand since he was injured.  
M79.641 Pain, right hand  
S61.411S Laceration without foreign body of right hand (last letter changed to "S" = sequela - a condition/complication has arisen as a direct result of the original injury)  
W31.2xxA Contact with powered hand tool, initial (or any encounter during active phase of care)  
Notice we no longer are required to report all those "Y" codes.

## Section 7 Encounters and Procedures Performed by Non-Credentialed Staff

### Occupational Health Nurses and Technicians

Non-privileged providers are normally restricted to using E&M code 99211 (office or other outpatient visit for established patients) to document face-to-face encounters in which no procedure is performed (e.g., education by a technician or offering a service or supply item that does not have a specific code). Report 99499 for new patients or for any encounters where a scheduled procedure (i.e., spirometry or ECG) has been performed.

OHN Jim sees a healthcare worker and performs the standard screening per medical matrix online instructions. The worker was cleared to work as a HCW.

**ICD-10-CM:**                Z02.79

**E&M:**                        99211



## Section 8 Additional Comments about Coding and Documenting Patient Encounters

### Preventive Medicine plus a problem oriented visit

A Preventive Medicine ICD-10 code (99381-99397) and a problem-oriented E&M code (99201- 99215) may both be coded for the same patient on the same date of service if the E&M service represents a significant, separately identifiable service. Append modifier 25 to the second E&M service.

### Suggested template for provider reviews

S/O: (Mark X next to appropriate review type)

#### Examinee employee medical record reviewed & appropriate forms filled out today for:

- Part 1 of new hire occupational medical screening (patient present & seen by technician)
- Pre-placement
- Radiation Medical Exam Review-
- Asbestos exam/x-ray results – abnormal findings
- Work Limitations issued
- Review and/or extension of Certification

Examinees employee medical record reviewed by provider for quality assurance and approval. All documents brought in from other sources/clinics have been added to the examinees Occupational Health record and all Occupational Health/NavMed/employer required forms have been completed, signed and dated. See the examinees employee medical record for all supporting documentation and decision for fitness.

### Correct AHLTA coding:

- ICD-10:**            Z02.79 for certifications  
                          Z02.89 for non-certification reviews (lab, radiation reviews, etc.)
- E&M:**                99499

### S/O section elements

For surveillance and certification exams at the bare minimum a statement must be made indicating that exam was performed and all supporting information can be found in the employee medical record or is scanned into the EHR.

For example: “See Employee Medical Record for details of certification/surveillance exam”

## Section 9 Selected External Causes of Morbidity for Occupational Health- ICD-10-CM<sup>1</sup>

Table 7 Commonly used ICD-10 external cause (injury) codes used in the Occupational Health setting

Code Series	Specific Codes	Definition
<b>V = Transport accidents</b>		
V83		Occupant of special vehicle mainly used on industrial premises
	V83.0xx*	Driver - in traffic accident
	V83.1xx*	Passenger - in traffic accident
	V83.2xx*	Person outside of vehicle - in traffic accident
		Other variables in this code series include: non-traffic accident; person boarding/alighting vehicle, or unspecified occupant
V84		Occupant of special construction vehicle injured in transport accident
	V84.0xx*	Driver - in traffic accident
	V84.1xx*	Passenger - in traffic accident
	V84.2xx*	Person outside of vehicle - in traffic accident
		Other variables in this code series include: non-traffic accident; person boarding/alighting vehicle, or unspecified occupant
<b>W= Injuries due to slip, trip, stumbling, and fall or exposure to inanimate mechanical force</b>		
W00		Fall due to ice and snow
	W00.0xx*	Fall on same level due to ice and snow
	W00.1xx*	Fall from stairs due to ice and snow
	W00.2xx*	Fall from one level to another due to ice and snow
	W00.9xx*	Fall unspecified due to ice and snow
W01		Fall on same level from tripping, slipping and stumbling with and without subsequent striking against object
	W01.0xx*	Fall on same level from tripping, slipping and stumbling without striking against object
	W01.10x*	Striking against unspecified object
	W01.110*	Striking against sharp glass
	W01.111*	Striking against power tool or machine
	W01.118*	Striking against other specified object
	W01.119*	Striking against unspecified sharp object
W10		Fall from stairs or steps
	W10.1xx*	Fall from sidewalk/curb
	W10.2xx*	Fall from ramp/incline
	W10.8xx*	Fall from steps/stairs
		Other variables in this code series include: escalator, unspecified
W11	W11.xxx.*	Fall on/from ladder
W12	W12.xxx.*	Fall on/from scaffolding
W13		Fall from, out of or through building or structure

<sup>1</sup> See the EHR search engine for comprehensive and up to date codes.

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Code Series	Specific Codes	Definition
	W13.0xx*	Fall from balcony / through railing
	W13.1xx*	Fall off/through bridge
	W13.2xx*	Fall out/through roof
	W13.3xx*	Fall through floor
		Other variables in this code series include: window, other specified building /structure, and unspecified
W18		Other tripping, slipping, stumbling , and falls
	W18.30x*	Fall on same level, unspecified
	W18.31x*	Fall on same level due to stepping on an object
W22		Striking against stationary objects
	W22.01x*	Walked into a wall
	W22.8xx*	Striking against or being struck by other specified objects
W23		Caught, crushed, pinched, or jammed between objects
	W23.0xx*	Between moving objects
	W23.1xx*	Between stationary objects
W24		Contact with lifting or transmission devices
	W24.0xx*	Contact with lifting devices - chain hoist, pulley, drive belt
	W24.1xx*	Contact with transmission devices - belts or cables
W26		Contact with sharp objects
		Codes in this series include: knife, paper, other specified sharp objects; and unspecified
W27		Contact with non-powered hand tools
		Codes in this series include: work bench tools; garden tools; kitchen tools; other specified non-powered hand tools
W29		Contact with powered hand tools
		Codes in this series include: kitchen appliances; household machinery; garden & outdoor tools; nailgun; other specified
W31		Contact with other (industrial) machinery
	W31.1xx*	Contact with metalworks machinery (forging maching, lathe, metal drilling, milling, press, etc)
	W31,2xx*	Contact with woodworking machinery (bandsaw, bench saw, all types of saws, overhead plane, sander)
	W31.3xx*	Contact with prime movers (gas turbine, water driven turbine, steam engine, internal combustion engine)
		Codes in this series also covers: contact with mining, earth-drilling machinery
W42	W42.xxx*	Exposure to noise - codes in this series include supersonic noise and other specified noise
W45		Foreign body or object entering through the skin
	W45.0xx*	Nail
	W45.8xx*	Other foreign body (splinter)
W46		Contact with hypodemic needles
	W46.0xx*	Contact with hypodemic needles
	W46.1xx*	Contact with contaminated hypodemic needles
W85	W85.xxx*	Exposure to electric transmission lines (borken/downed power line)

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Code Series	Specific Codes	Definition
W86		Exposure to other specified electric current
	W86.0xx*	Exposure to domestic wiring and/or appliances
	W86.1xx*	Exposure to industrial wiring, appliances, and machinery
	W86.8xx*	Exposure to wiring, appliances, and machinery in public building, schools, residential institutions
W88		Exposure to ionizing radiation - this code series includes: x-rays, radioactive isotopes, other specified ionizing radiation
W89		Exposure to man-made visible or ultra-violet light
	W89.0xx*	Exposure to welding light (arc)
	W89.8xx*	Exposure to other specified man-made visible or ultra-violet light
W90		Exposure to nonionizing radiation - this code series includes: radiofrequency, infrared radiation, laser radiation, other specified nonionizing radiation
W92	W92.xxx*	Exposure to excessive heat of man-made origin
W93		Exposure to excessive cold of man-made origin
	W93.01x*	Contact with dry ice
	W93.02x*	Inhalation of dry ice
	W93.11x*	Contact with liquid air: liquid nitrogen, liquid hydrogen
	W93.11x*	Inhalation of liquid air: liquid nitrogen, liquid hydrogen
W99	W99.xxx*	Exposure to other man-made environmental factors
<b>X = Exposure to unspecified factors</b>		
X00		Exposure to uncontrolled fire in building or structure - this code series covers every possible injury or exposure related to a structure fire
X01		exposure to uncontrolled fire NOT in building or structure - this code series covers every possible injury or exposure related to a structure fire
X02		Exposure to controlled fire in building or structure - this code series covers every possible injury or exposure related to a structure fire
X03		exposure to controlled fire NOT in building or structure - this code series covers every possible injury or exposure related to a structure fire
X13		Contact with steam or other hot vapors
	X13.0xx*	Inhalation of steam or other hot vapors
	X13.1xx*	Other specified contact with steam or other hot vapors
X14		Contact with hot air and other gases
	X14.0xx*	Inhalation of hot air and other gases
	X14.1xx*	Other specified contact with hot air and other gases
X16	X16.xxx*	Contact with hot heating appliances, radiators, and pipes.
X17	X17.xxx*	Contact with hot engines, machinery, and tools
X18	X18.xxx*	Contact with other hot metals (liquid metal)
X19	X19.xxx*	Contact with other specified heat and hot substances
X30-39		Exposure to forces of nature This code series includes: natural heat, cold, sunlight, earthquake, landslides, storms, floods, other specified
X58	X58.xxx*	Exposure (accidental) to other specified factors

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<b>Code Series</b>	<b>Specific Codes</b>	<b>Definition</b>
		<p>x is a placeholder. It is to be entered as x (it does not represent something that goes in its place, i.e., it is not to be replaced with anything).</p> <p>* represents a letter (that goes in position 7), which defines the stage of treatment: A=active treatment, D=healing stage, S=sequela (i.e., * is to be replaced by A, D, or S.)</p> <p>All injury codes must be 7 digits long. Therefore, each time an injury is coded, all the "x" are entered as "x" (without the quotes) and all the * in the Specific Codes column must be replaced by the appropriate letter (A, D, S).</p> <p>Thus a visit for ongoing treatment of exposure to industrial wiring would be coded W86.1xxA.</p>