Assigning Pregnancy, Childbirth, Puerperium, Perinatal Period, and Congenital Abnormalities Codes

Pregnancy, Childbirth, and Puerperium

Diseases and conditions that occur during pregnancy, childbirth and six weeks following immediately after childbirth are described in Chapter 15 of the Tabular List of ICD-10-CM. Codes range from O00 to O9A. The following are the key guidelines to keep in mind when coding conditions that occur during this period:

- Any condition that occurs during pregnancy, childbirth, or the puerperium is considered to be a complication unless the physician states otherwise.
- If the condition is not a complication, and the pregnancy is incidental to the encounter, use Z33.1 to note the pregnancy.
- For routine outpatient prenatal visits, use codes from category Z34.
- Assess if a condition was existing prior to pregnancy, or developed during or due to the pregnancy.
- Most codes from this chapter end with a final character indicating the trimester. Trimesters are calculated from the first day of the last menstrual period (LMP).
  - First trimester: LMP to 13 weeks
  - Second trimester: 14 weeks to 27 weeks
  - Third trimester: 28 weeks to estimated delivery date

Notes

Chapter 15 codes are never used on the newborn’s record, and should only be used on the maternal records.

Notes

A code from category Z37, Outcome of Delivery, should be included on every maternal record when a delivery has occurred. These codes are not to be used on subsequent records or on the newborn’s record.
### Assignment of Trimester

- If the condition developed prior to the current admission or represents a pre-existing condition, the trimester character assigned should be the trimester at the time of the admission.

- When a patient is admitted to a hospital for complications of pregnancy during one trimester and remains in the hospital into a subsequent trimester, the trimester character for the antepartum complication code should be assigned on the basis of the trimester when the complication developed, not the trimester of the discharge.

### Notes

The code **O80** should be assigned for a full-term, normal delivery of a single, healthy infant without any complications before, during, or after delivery. The outcome of O80 delivery is reported with **Z37.0**, Single Live Birth. No other outcome of delivery would be correct to report with O80.

### Conditions Originating in the Perinatal Period

Codes for conditions that originate in the perinatal period (before birth through 28 days after birth) described in Chapter 16. Codes range from P00 to P96.

<table>
<thead>
<tr>
<th>Code Range</th>
<th>Description</th>
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<tbody>
<tr>
<td>P00 – P04</td>
<td>Newborn affected by maternal factors and by complications of pregnancy, labor, and delivery</td>
</tr>
<tr>
<td>P05 – P08</td>
<td>Disorders of newborns related to length of gestation and fetal growth</td>
</tr>
<tr>
<td>P09</td>
<td>Abnormal findings on neonatal screening</td>
</tr>
<tr>
<td>P10 – P15</td>
<td>Birth trauma</td>
</tr>
<tr>
<td>P19 – P29</td>
<td>Respiratory and cardiovascular disorders specific to the perinatal period</td>
</tr>
<tr>
<td>P35 – P39</td>
<td>Infections specific to the perinatal period</td>
</tr>
<tr>
<td>P50 – P61</td>
<td>Hemorrhagic and hematological disorders of newborn</td>
</tr>
<tr>
<td>P70 – P74</td>
<td>Transitory endocrine and metabolic disorders specific to newborn</td>
</tr>
<tr>
<td>P76 – P78</td>
<td>Digestive system disorders of newborn</td>
</tr>
<tr>
<td>P80 – P83</td>
<td>Conditions involving the integument and temperature regulation of newborn</td>
</tr>
<tr>
<td>P84</td>
<td>Other problems with newborn</td>
</tr>
<tr>
<td>P90 – P96</td>
<td>Other disorders originating in the perinatal period</td>
</tr>
</tbody>
</table>
Congenital anomalies and conditions that originate in the perinatal period are described in Chapter 17. The codes range from Q00 to Q99.

Q00 – Q07 Congenital malformations of the nervous system
Q10 – Q18 Congenital malformations of eye, ear, face and neck
Q20 – Q28 Congenital malformations of the circulatory system
Q30 – Q34 Congenital malformations of the respiratory system
Q35 – Q37 Cleft lip and cleft palate
Q38 – Q45 Other congenital malformations of the digestive system
Q50 – Q56 Congenital malformations of genital organs
Q60 – Q64 Congenital malformations of the urinary system
Q65 – Q79 Congenital malformations and deformations of the musculoskeletal system
Q80 – Q89 Other congenital malformations
Q90 – Q99 Chromosomal abnormalities, not elsewhere classified

- A malformation/deformation/chromosomal abnormality may be the principle diagnosis on the record, or the secondary diagnosis.
- Codes from this chapter may be used throughout the life of the patient.
- If a congenital malformation or deformity has been corrected, a personal history code should be used to identify the history of the malformation or deformity.