CODEX

CODING DECODED

Chapter 20: External Causes of Morbidity

ICD-10-CM Official Guidelines (V00–Y99) — Quick Reference for Students

External cause codes capture how an injury or health condition happened (cause), the intent (accidental or intentional), the place it occurred, the patient's activity at the time, and the patient's status (e.g., civilian, military). They provide data for injury research and prevention.

Never Forget: external cause codes are never sequenced as the first-listed or principal diagnosis.

- No national mandate to report Chapter 20 codes — unless required by a state mandate or a specific payer. Voluntary reporting is still encouraged for injury-prevention data.

1. General External Cause Coding Guidelines

- **Used with any code A00.0–T88.9, Z00–Z99 —** valid for injuries, but also infections, diseases, or other conditions (e.g., a heart attack) due to an external source.
- **7th character required —** A (initial), D (subsequent), or S (sequela) for each encounter; must match the 7th character of the associated injury/condition code.
- Use the full range of codes needed: cause, intent, place, activity, and status.
- Assign as many codes as necessary; if only one is allowed, use the one most related to the principal diagnosis.
- Code selection is guided by the Alphabetic Index of External Causes and Tabular List notes.
- **Can never be a principal/first-listed diagnosis.**
- Combination codes (e.g., a fall that results in striking an object) should be sequenced to match the order the events happened — regardless of which caused the more serious injury.
- Not needed when the cause and intent are already built into a code from another chapter (e.g., T36.0X1- Poisoning by penicillin, accidental).

2. Place of Occurrence (Category Y92)

- Secondary code, sequenced after other external cause codes, to identify where the injury occurred.
- Generally assigned once, at the initial encounter (an extra code is allowed if a new injury occurs during hospitalization).
- No 7th character is used for Y92.

Do Not Assign: Y92.9 if the place is not stated or not applicable.

3. Activity Code (Category Y93)

- Describes the patient's activity at the time the injury/condition occurred.
- Used only once, at the initial encounter; only one Y93 code per record.
- Not applicable to poisonings, adverse effects, misadventures, or sequela.
- Appropriate to use alongside cause/intent codes when it adds useful information about the event.

Do Not Assign: Y93.9 (Unspecified activity) if the activity is not stated.

4. Place, Activity & Status Codes With Other External Cause Codes

- Sequenced after the main external cause code(s).
- Generally only one place code + one activity code + one status code per encounter (exception: an additional place code if a new injury occurs during hospitalization).

5. If the Reporting Format Limits the Number of Codes

- Report the cause/intent code most related to the principal diagnosis first.
- If the format allows more codes, prioritize additional cause/intent codes (including medical misadventures) over place, activity, or status codes.

6. Multiple External Cause Codes — Sequencing Priority

- If 2+ events cause separate injuries, assign an external cause code for each. The first-listed code follows this priority order:

Priority	Cause Category
1 (highest)	Child and adult abuse
2	Terrorism
3	Cataclysmic events
4	Transport accidents
5	All other causal (intent) events

- Activity and external cause status codes are always assigned after all causal (intent) codes.
- The first-listed external cause code should reflect the cause of the most serious diagnosis, following the hierarchy above.

7. Child and Adult Abuse Guideline

- Abuse, neglect, and maltreatment are classified as assault; any assault code may describe the external cause of a confirmed abuse injury.
- **Known perpetrator:** add a code from Y07, Perpetrator of maltreatment and neglect, alongside the assault code.
- See Section I.C.19, Child and Adult Abuse Guidelines.

8. Unknown or Undetermined Intent

- **Unknown/unspecified intent** → code as accidental. All transport accident categories already assume accidental intent.

Use Undetermined Intent Codes Only If: the documentation specifically states the intent cannot be determined.

9. Sequelae (Late Effects) of External Cause

- Use the 7th character “S” for any late effect/sequela resulting from a previous injury (see I.B.10).
- **Never** use a sequela external cause code with a related **current** nature-of-injury code.
- Use for subsequent visits treating a late effect — not for routine follow-up care (e.g., healing checks, rehab therapy) unless a late effect has actually been documented.

10. Terrorism Guidelines

- **FBI-confirmed terrorism** → first-listed code from category Y38, Terrorism; add a place-of-occurrence code (Y92.-). More than one Y38 code may be used if there was more than one mechanism of terrorism.
- **Suspected (not confirmed) terrorism** → do not use Y38 — classify as assault instead.
- **Y38.9, Terrorism secondary effects —** for conditions occurring after the terrorist event, not for injuries from the initial act. May be combined with another Y38 code if both initial and subsequent injuries exist.

11. External Cause Status (Category Y99)

- Assigned whenever any other external cause code (including an activity code) is used for the encounter, with a few exceptions.
- Indicates the patient's status at the time of the event (e.g., military activity, civilian at work, student/volunteer in a non-work activity).
- Not applicable to poisonings, adverse effects, misadventures, or late effects.
- Used only once, at the initial encounter; only one Y99 code per record.

Do Not Assign: Y99.9 if status is not stated, or any Y99 code if no other external cause codes apply to the encounter.