CHAPTER 15

Diseases of the musculoskeletal system or connective tissue

This chapter has 90 four-character categories.

Code range starts with FA00

This chapter contains diseases of musculoskeletal system and diseases of connective tissue.

Exclusions: Injury, poisoning or certain other consequences of external causes (Chapter 22)

Endocrine, nutritional or metabolic diseases (Chapter 05)

Complications of pregnancy, childbirth and the puerperium (Chapter 18)

Certain infectious or parasitic diseases (Chapter 01)

Temporomandibular joint disorders (DA0E.8)

Certain conditions originating in the perinatal period (Chapter 19)

Coded Elsewhere: Neoplasms of the musculoskeletal system

Monogenic autoinflammatory syndromes (4A60)

Nonorgan specific systemic autoimmune disorders (4A40-4A4Z)

Symptoms, signs or clinical findings of the musculoskeletal system (ME80-MF1Y)

Structural developmental anomalies of the skeleton (LB70-LB9Z)

Syndromes with connective tissue involvement as a major feature (LD28)

Syndromes with skeletal anomalies as a major feature (LD24)

This chapter contains the following top level blocks:

* Arthropathies
* Conditions associated with the spine
* Soft tissue disorders
* Osteopathies or chondropathies
* Neoplasms of the musculoskeletal system

Arthropathies (BlockL1‑FA0)

Osteoarthritis (BlockL2‑FA0)

Osteoarthritis (OA) can be defined as a group of distinct, but overlapping diseases, which may have different etiologies, but similar biological, morphological, and clinical outcomes affecting the articular cartilage, subchondral bone, ligaments, joint capsule, synovial membrane, and periarticular muscles. OA is the most common joint disease in persons 65 years of age and above. Its etiology is not fully understood, although there are several related factors, such as female gender, genetics, metabolism, and excessive mechanical stress. The diagnosis of OA is primarily based on clinical history and physical examination. The cardinal radiographic features of OA are focal/non-uniform narrowing of the joint space in the areas subjected to the most pressure, subchondral cysts, subchondral sclerosis, and osteophytes.

FA00 Osteoarthritis of hip

FA00.0 Primary osteoarthritis of hip

FA00.1 Post traumatic osteoarthritis of hip

FA00.2 Other secondary osteoarthritis of hip

Coding Note: Code aslo the casusing condition

FA00.Z Osteoarthritis of hip, unspecified

FA01 Osteoarthritis of knee

Primary osteoarthritis occurring in an otherwise intact knee joint, involving genetically related, age-related or use-related degeneration with microscopic and macroscopic anatomical changes, which ultimately limit motion in one or more joints. Changes to the joint include increasing cartilage loss and osseous transformation such as sclerosis, osteophyte formation and cysts as well as potential inflammatory changes in surrounding soft tissue structures.

FA01.0 Primary osteoarthritis of knee

FA01.1 Post traumatic osteoarthritis of knee

FA01.2 Other secondary osteoarthritis of knee

Coding Note: Code aslo the casusing condition

FA01.Z Osteoarthritis of knee, unspecified

FA02 Osteoarthritis of wrist and hand

FA02.0 Primary osteoarthritis of wrist and hand

FA02.1 Post traumatic osteoarthritis of wrist and hand

FA02.2 Other secondary osteoarthritis of wrist and hand

Coding Note: Code aslo the casusing condition

FA02.Z Osteoarthritis of wrist and hand, unspecified

FA03 Osteoarthritis of other specified joint

FA03.0 Primary osteoarthritis of other specified joint

FA03.1 Post traumatic osteoarthritis of other specified joint

FA03.2 Other secondary osteoarthritis of other specified joint

Coding Note: Code aslo the casusing condition

FA03.Z Osteoarthritis of other specified joint, unspecified

FA04 Oligoosteoarthritis

Coding Note: Code aslo the casusing condition

FA05 Polyosteoarthritis

Coding Note: Code aslo the casusing condition

FA0Z Osteoarthritis, unspecified

Coding Note: Code aslo the casusing condition

Infection related arthropathies (BlockL2‑FA1)

A disease of the joints, caused by an infection with a bacterial, viral, fungal, or parasitic source.

Distinction is made between the following types of etiological relationship.

a) direct infection of joint, where organisms invade synovial tissue and microbial antigen is present in the joint;

b) indirect infection, which may be of two types: a reactive arthropathy, where microbial infection of the body is established but neither organisms nor antigens can be identified in the joint, and a postinfective arthropathy, where microbial antigen is present but recovery of an organism is inconstant and evidence of local multiplication is lacking.

FA10 Direct infections of joint

Hematogenic or non-hematogenic infections of joints with the microbes listed.

Exclusions: Reactive arthropathies (FA11)

Postinfectious arthropathies (FA12)

FA10.0 Bacterial infection of joint

Coded Elsewhere: Gonococcal arthritis (1A72.0)

FA10.1 Viral infection of joint

FA10.2 Fungal infection of joint

FA10.Z Direct infections of joint, unspecified

FA11 Reactive arthropathies

A disease of the joints, caused by an infection in another part of the body, auto-immune disease, or post-vaccination. This disease is characterised by a secondary inflammation of the joints in reaction to infection, auto-immune disease, or vaccination. Common previous sites of infection are the enteric or genitourinary system.

Coding Note: Code also the underlying disease or aetiology.

Exclusions: Acute rheumatic fever (BlockL2‑1B4)

Behçet disease (4A62)

Coded Elsewhere: Arthritis mutilans (FA21.Y)

FA11.0 Arthropathy following intestinal bypass

Coded Elsewhere: Bowel-associated dermatosis-arthritis syndrome (EB2Y)

FA11.1 Arthropathy following vaccination

FA11.2 Arthropathy following genitourinary infection

Reactive arthritis (ReA) is an autoimmune disorder belonging to the group of seronegative spondyloarthropathies and is characterised by the classic triad of arthritis, urethritis and conjunctivitis.

FA11.Y Other specified reactive arthropathies

Coding Note: Code also the underlying disease or aetiology.

FA11.Z Reactive arthropathies, unspecified

Coding Note: Code also the underlying disease or aetiology.

FA12 Postinfectious arthropathies

Coding Note: Code aslo the casusing condition

FA12.0 Bacterial postinfectious arthropathy

Coding Note: Code aslo the casusing condition

FA12.1 Viral postinfectious arthropathies

Coding Note: Code aslo the casusing condition

FA12.2 Fungal postinfectious arthropathies

Coding Note: Code aslo the casusing condition

FA12.3 Parasitic postinfectious arthropathies

Coding Note: Code aslo the casusing condition

FA12.Y Other specified postinfectious arthropathies

Coding Note: Code aslo the casusing condition

FA12.Z Postinfectious arthropathies, unspecified

Coding Note: Code aslo the casusing condition

FA13 Infectious spondyloarthritis

A condition of the spine, caused by an infection with a bacterial, viral, fungal, or parasitic source. This condition is characterised by inflammation of the vertebrae.

Exclusions: Inflammatory spondyloarthritis (FA92)

FA1Y Other specified infection related arthropathies

FA1Z Infection related arthropathies, unspecified

Inflammatory arthropathies (BlockL2‑FA2)

Coded Elsewhere: Peripheral spondyloarthritis (FA92.1)

FA20 Rheumatoid arthritis

Rheumatoid arthritis (RA) is persistent and/or erosive disease that is defined as the confirmed presence of synovitis in at least 1 joint, absence of an alternative diagnosis that better explains the synovitis, and achievement of a total score of 6 or greater (of a possible 10) from the individual scores in 4 domains: number and site of involved joints, serologic abnormality, elevated acute-phase response, and symptom duration.

Exclusions: rheumatoid arthritis, juvenile (FA24.1)

Acute rheumatic fever (BlockL2‑1B4)

Coded Elsewhere: Respiratory disorders in rheumatoid arthritis (CB05.1)

FA20.0 Seropositive rheumatoid arthritis

FA20.1 Seronegative rheumatoid arthritis

FA20.Z Rheumatoid arthritis, serology unspecified

FA21 Psoriatic arthritis

Psoriatic arthritis, a member of the spondyloarthritis family, is defined as an inflammatory arthropathy associated with psoriasis that is usually rheumatic factor negative. It is characterised by various clinical manifestations, including symmetric polyarthritis, asymmetric oligoarthritis or polyarthritis, spinal inflammation similar to ankylosing spondylitis, peripheral enthesitis, anterior chest wall involvement, distal interphalangeal arthritis of the hands and feet, dactylitis (sausage digit or toe), arthritis mutilans and onycho-pachydermo-periostitis. The CASPAR has high sensitivity and specificity.

Exclusions: Juvenile psoriatic arthritis (FA24.2)

FA21.0 Psoriatic spondyloarthritis

Inclusions: Psoriatic spondylitis

FA21.Y Other specified psoriatic arthritis

FA21.Z Psoriatic arthritis, unspecified

FA22 Polymyalgia rheumatica

Polymyalgia rheumatica (PMR) is a syndrome characterised by aching of the proximal portions of the extremities and torso. Provisional classification criteria for PMR by the European League Against Rheumatism/American College of Rheumatology Collaborative Initiative should be applied to patients aged 50 years or older with bilateral shoulder aching, and abnormal CRP and/or ESR. The scoring algorithm is based on morning stiffness >45 minutes (2 points), hip pain/limited range of motion (1 point), absence of rheumatoid factor and/or anti-citrullinated protein antibody (1 point), with optional ultrasound criteria. Most commonly, PMR occurs in isolation, but may be seen in 40-50% of patients with giant cell arteritis.

Exclusions: Giant cell arteritis with polymyalgia rheumatica (4A44.2)

FA23 Adult-onset Still disease

Adult onset Still's disease is a rare rheumatic condition characterised by a combination of symptoms, such as fever higher than 39 degrees C, cutaneous rash during fever peaks, joint or muscle pain, lymph node hypertrophy, increase of white blood cells (especially polymorphonuclear neutrophils) and abnormalities of liver metabolism.

Exclusions: Still disease NOS (FA24.4)

FA24 Juvenile idiopathic arthritis

Juvenile idiopathic arthritis (JIA) is the term used to describe a group of inflammatory articular disorders of unknown cause that begin before the age of 16 and last over 6 weeks. Six disorders have been defined: systemic-onset juvenile idiopathic arthritis (formerly referred to as Still's disease), oligoarticular arthritis, rheumatoid factor-positive polyarthritis, rheumatoid factor-negative polyarthritis, enthesitis-related arthritis (spondyloarthropathies), and the juvenile form of psoriatic arthritis (see these terms). A seventh category has been defined comprising unclassified types of arthritis (types that do not correspond to any of the defined disease or that correspond to more than one of the disease definitions).

Coding Note: Arthritis in children, with onset before 16th birthday and lasting longer than 6 weeks

Exclusions: Juvenile dermatomyositis (4A41.01)

Felty syndrome (FA20.0)

FA24.0 Juvenile idiopathic oligoarthritis

Oligoarticular juvenile arthritis is the most common form of juvenile idiopathic arthritis, representing nearly 50% of cases. It is more common in girls (80% of cases), with onset occurring between ages 2 and 4. It is usually asymmetrical and affects between one and a maximum of four joints, predominantly those of the lower limbs (knee or foot).

Coding Note: Use additional code, if desired, to identify associated uveitis

FA24.00 Juvenile idiopathic oligoarthritis, onset persistent

Onset persistent refers to the fact that the child never has more than four joints involved throughout the course of the disease.

FA24.01 Juvenile idiopathic oligoarthritis, onset extended

Onset extended refers to the fact that after the initial six month period, the total number of affected joints exceeds four.

FA24.0Z Juvenile idiopathic oligoarthritis, onset unspecified

Coding Note: Use additional code, if desired, to identify associated uveitis

FA24.1 Juvenile idiopathic polyarthritis

Juvenile idiopathic polyarthritis is a type of juvenile idiopathic arthritis (JIA) that affects five or more joints in the first six months after onset. It often affects the same joints on each side of the body. It is more common in girls.

FA24.2 Juvenile psoriatic arthritis

Juvenile psoriatic arthritis is an autoimmune inflammatory disorder representing less than 10% of all juvenile idiopathic arthritis (JIA) cases, and characterised by the association of psoriasis with one of two forms of arthritis: the association of psoriasis with an arthritis that most resembles oligoarticular arthritis with a risk of uveitis is more common in girls with onset at around 6 years of age, whereas the association of psoriasis with a form of arthritis that most resembles a spondyloarthropathy is most common in boys and manifests later.

Coding Note: Use additional code to identify associated uveitis

FA24.3 Juvenile enthesitis related arthritis

Enthesitis-related arthritis is a type of juvenile idiopathic arthritis (JIA) that represents the paediatric form of spondyloarthropathy in adults, but differs from it as the initial manifestations in the paediatric form are asymmetric oligoarticular arthritis of the lower limbs, associated with enthesitis. Axial manifestations (sacroiliac involvement) are present in only 25% of cases at onset but appear several years later in the disease course.

Coding Note: Use additional code to identify associated uveitis

FA24.4 Juvenile systemic arthritis

Systemic-onset juvenile idiopathic arthritis represents 10-11% of cases of juvenile idiopathic arthritis (JIA) and is marked by the severity of the extra-articular manifestations (fever, cutaneous eruptions) and by an equal sex ratio. Fever peaks are associated with transient cutaneous eruptions and diffuse erythematosis or urticarial-like lesions. The presence of arthritis is essential for diagnosis but may appear later in the disease course. The number of sites affected is variable (mono-, oligo- or polyarthritis) affecting both the small and large joints in a nearly symmetrical manner. This characteristic diagnostic triad may also be associated with an adenopathy and hepatosplenomegaly. Visceral complications (pericarditis, pleural effusion or serous peritonitis with abdominal pain) may be present.

Coding Note: Code aslo the casusing condition

FA24.Y Other specified juvenile idiopathic arthritis

Coding Note: Arthritis in children, with onset before 16th birthday and lasting longer than 6 weeks

FA24.Z Juvenile idiopathic arthritis, unspecified

Coding Note: Arthritis in children, with onset before 16th birthday and lasting longer than 6 weeks

FA25 Gout

Gout is an acute or chronic arthropathy resulting from deposition of monosodium urate monohydrate crystals in joint tissues. It is strongly associated with hyperuricaemia, which may be secondary to certain drugs, poisons or lymphoproliferative disorders. Gout is definitively diagnosed by demonstration of urate crystals in aspirated synovial fluid in the absence of an alternative aetiology for arthritis. It may be associated with focal urate deposition in skin and subcutaneous tissue (tophaceous gout) and with urate nephropathy

Exclusions: Hyperuricaemia without signs of inflammatory arthritis or tophaceous disease (5C55)

FA25.0 Primary gout

Primary gout refers to those cases that appear to be innate, that are neither secondary to another acquired disorder nor a subordinate manifestation of an inborn error that leads initially to a major disease unlike gout. Although some cases of primary gout have a genetic basis, others do not.

Inclusions: Gouty bursitis

Gouty arthropathy

FA25.1 Secondary gout

Secondary gout refers to those cases that develop during the course of another disease, or as a consequence of treatment with drugs. Secondary gout is associated with increased purine biosynthesis de novo, increased nucleic acid turnover, or decreased renal clearance of uric acid.

Coding Note: Code aslo the casusing condition

FA25.10 Lead-induced gout

FA25.11 Drug-induced gout

FA25.12 Gouty arthropathy due to enzyme defects or other inherited disorders

Coding Note: Code aslo the casusing condition

FA25.1Y Other specified secondary gout

Coding Note: Code aslo the casusing condition

FA25.1Z Secondary gout, unspecified

Coding Note: Code aslo the casusing condition

FA25.2 Gout without specification whether primary or secondary

FA25.20 Tophaceous gout

Tophi are precipitates of monosodium urate in the tissues of patients with hyperuricaemia and may be associated with other manifestations of hyperuricaemia including gouty arthropathy. They present particularly in the skin and subcutaneous tissue. One of the more common sites for them is the helix of the ear.

FA25.2Y Other specified gout without specification whether primary or secondary

FA25.2Z Gout, unspecified

FA26 Certain specified crystal arthropathies

Coding Note: Code aslo the casusing condition

Exclusions: Gout (FA25)

FA26.0 Calcium pyrophosphate dehydrate deposition disease

Familial calcium pyrophosphate deposition is a chronic inherited arthropathy characterised by chondrocalcinosis (cartilage calcification), often associated with recurrent acute calcium pyrophosphate crystal arthritis and polyarticular osteoarthritis.

FA26.1 Hydroxyapatite deposition disease

Calcium hydroxyapatite crystal deposition disease is characterised by the presence of basic calcium phosphate crystals - predominantly hydroxyapatite - in periarticular soft tissues, especially tendons. This entity is best recognised as "calcific tendinitis" at its most frequent site about the shoulder, but the disease involves numerous other sites and may be more appropriately termed calcific periarthritis.

FA26.2 Chondrocalcinosis

Chondrocalcinosis refers to radiographic calcification in hyaline and/or fibrocartilage and is not specific for CPPD or other particular crystal deposition disease. Familial l CPPD deposition disease has been reported from many countries and some kindred have CPPD disease linked to ANKH mutation on chromosome 5p.

Inclusions: Familial chondrocalcinosis

FA26.Y Other specified crystal arthropathies

Coding Note: Code aslo the casusing condition

FA26.Z Crystal arthropathies, unspecified

Coding Note: Code aslo the casusing condition

FA27 Certain specified inflammatory arthropathies

Exclusions: cricoarytenoid arthropathy (CA0H)

arthropathy NOS (FA38)

FA27.0 Kashin-Beck disease

Kashin-Beck disease (KBD) is a chronic, endemic osteochondropathy of unknown etiology. The disease is mainly distributed in a diagonal belt ranging from the northeast to the southwest of China, where the soil selenium content is low. Mineral deficiencies (e.g., selenium, iodine), fungal cereal contamination, and water contamination may be contributing factors to its etiology. The disease is manifested by arthritic pain, morning stiffness, enlarged and shortened fingers, deformed and enlarged joints, and limited motion of the joints in the extremities.

FA27.1 Pigmented villonodular synovitis

This condition is characterised by outgrowths of synovial membrane composed of villi and fibrous nodules and is histologically characterised by hemosiderin- and lipid-containing macrophages and multinucleated giant cells. It usually occurs in the knee and hip, and is often diagnosed by Magnetic Resonance Imaging.

FA27.2 Palindromic rheumatism

Palindromic rheumatism causes sudden attacks of joint pain and swelling, typically in the hands and feet. An episode may last from a few hours to several days. The frequency of attacks also varies. Between attacks, pain and swelling completely disappear, and the affected joints look normal on X-rays. It is likely that 30 to 50 percent of patients with palindromic rheumatism go on to develop rheumatoid arthritis, but the progression may take several years.

FA27.3 Transient synovitis

FA27.4 Intermittent hydrarthrosis

FA27.Y Other specified inflammatory arthropathies

FA2Z Inflammatory arthropathies, unspecified

Certain specified joint disorders or deformities of limbs (BlockL2‑FA3)

Exclusions: Conditions associated with the spine (BlockL1‑FA7)

FA30 Acquired deformities of fingers or toes

Exclusions: congenital deformities and malformations of fingers and toes (BlockL3‑LB8)

Congenital absence of finger (LB99.7)

Congenital absence of toe (LB9A.5)

Acquired absence of toe (QF00)

Acquired absence of finger, including thumb, unilateral (QF00)

amputation of finger (QF00)

amputation of toe (QF00)

FA30.0 Acquired hallux valgus

FA30.1 Hallux rigidus

FA30.2 Acquired hammer toe

Exclusions: Congenital hammer toe (LB98.5)

FA30.Y Other specified acquired deformities of fingers or toes

FA30.Z Acquired deformities of fingers or toes, unspecified

FA31 Other acquired deformities of limbs

Exclusions: congenital: deformities and malformations of limbs (BlockL2‑LB7)

Acquired deformities of fingers or toes (FA30)

congenital: absence of limbs (BlockL2‑LB7)

Coxa plana (FB82.1)

Acquired absence of limb (QF00)

FA31.0 Valgus deformity, not elsewhere classified

Exclusions: Talipes calcaneovalgus (LB98.22)

Metatarsus valgus (LB98.21)

FA31.1 Varus deformity, not elsewhere classified

Exclusions: Metatarsus varus (LB98.02)

tibia vara (FB82.1)

FA31.2 Flexion deformity

FA31.3 Acquired wrist drop

FA31.4 Acquired foot drop

FA31.5 Acquired pes planus

Exclusions: Congenital pes planus (LB98.1)

FA31.6 Acquired clawhand or clubhand

FA31.7 Acquired clawfoot or clubfoot

Exclusions: congenital clubfoot - varus (LB98.0)

congenital clubfoot - valgus (LB98.22)

FA31.8 Acquired unequal limb length

FA31.Y Other specified acquired deformities of limbs

FA31.Z Acquired deformities of limbs, unspecified

FA32 Disorders of patella

Exclusions: Dislocation of patella (NC93.1)

Coded Elsewhere: Chondromalacia patellae (FB82.00)

FA32.0 Recurrent instability of patella

FA32.1 Patellofemoral disorders

FA32.Y Other specified disorders of patella

FA32.Z Disorders of patella, unspecified

FA33 Internal derangement of knee

Internal derangement of the knee (IDK) is a chronic disorder of the knee due to a torn, ruptured or deranged meniscus of the knee, or a partial or complete cruciate rupture, with or without injury to the capsular ligament, resulting in ongoing or intermittent signs and symptoms such as pain, instability, or abnormal mobility of that knee.

If indicated that derangement is due to trauma, code to Injury, poisoning and certain other consequences of external causes, regardless of time past since injury.

Exclusions: recurrent dislocation or subluxation patella (FA32.0)

Ankylosis of joint (FA34.4)

deformity of knee (FA31)

Injuries to the knee or lower leg (BlockL1‑NC9)

Disorders of patella (FA32)

FA33.0 Cystic meniscus

FA33.1 Discoid meniscus

FA33.2 Derangement of meniscus due to old tear or injury

Inclusions: Old bucket-handle tear

FA33.3 Loose body in knee

FA33.4 Chronic instability of knee

Exclusions: Recurrent instability of patella (FA32.0)

FA33.40 Chronic instability of knee, medial collateral ligament or other and unspecified medial meniscus

FA33.4Y Other specified chronic instability of knee

FA33.4Z Chronic instability of knee, unspecified

FA33.Y Other specified internal derangement of knee

FA33.Z Internal derangement of knee, unspecified

FA34 Certain specified joint derangements

Exclusions: Temporomandibular joint disorders (DA0E.8)

current injury - see injury of joint by body region (Chapter 22)

FA34.0 Loose body in joint

Exclusions: Loose body in knee (FA33.3)

FA34.1 Disorder of ligament

Exclusions: Chronic instability of knee (FA33.4)

familial ligamentous laxity (LD28.1)

FA34.2 Recurrent instability of joint

Exclusions: vertebral subluxation (ME93)

Recurrent instability of patella (FA32.0)

FA34.3 Contracture of joint

Exclusions: Dupuytren contracture (FB51.0)

contracture of tendon (sheath) without contracture of joint (FB42.1)

acquired deformities of limbs (FA31)

FA34.4 Ankylosis of joint

Exclusions: stiffness of joint without ankylosis (ME85)

Ankylosis of spinal joint (FB00)

FA34.5 Impingement syndrome of hip

FA34.Y Other joint derangements

FA35 Wear of articular bearing surface of joint prosthesis

Exclusions: Mode of injury or harm associated with a surgical or other medical device, implant or graft (PL12)

FA35.0 Wear of articular bearing surface of joint prosthesis of hip

FA35.1 Wear of articular bearing surface of joint prosthesis of knee

FA35.2 Wear of articular bearing surface of joint prosthesis of other joint

FA35.Z Wear of articular bearing surface of joint prosthesis of unspecified joint

FA36 Effusion of joint

Increased intra-articular fluid secondary to trauma and/or other acquired conditions not detailed in other codes.

Inclusions: hydrarthrosis

Exclusions: hydrarthrosis of yaws (1C1D.2)

FA36.0 Effusion of joint containing blood

Inclusions: haemarthrosis

Exclusions: Dislocation or strain or sprain of unspecified body region (ND56.3)

FA36.Y Other specified effusion of joint

FA36.Z Effusion of joint, unspecified

FA37 Certain joint disorders, not elsewhere classified

Exclusions: calcification of: tendon (FB40.3)

difficulty in walking (MB44.2)

abnormality of gait and mobility (MB44)

Acquired deformities of fingers or toes (FA30)

Other acquired deformities of limbs (FA31)

Coded Elsewhere: Pain in joint (ME82)

Stiffness of joint (ME85)

FA37.0 Osteophyte

FA37.Y Other specified certain joint disorders, not elsewhere classified

FA37.Z Certain joint disorders, not elsewhere classified, unspecified

FA38 Arthropathy in diseases classified elsewhere

Coding Note: Code aslo the casusing condition

Exclusions: arthropathy in: haematological disorders (Chapter 03)

neuropathic spondylopathy (BlockL2‑FB0)

psoriatic and enteropathic arthropathies juvenile (FA24.2)

FA38.0 Diabetic arthropathy

Coding Note: Code aslo the casusing condition

Exclusions: Diabetic Charcot arthropathy (FA38.10)

Diabetic cheiroarthropathy (BlockL3‑EE4)

FA38.1 Neuropathic arthropathy

Neuropathic arthropathy is a progressive destructive arthritis associated with loss of pain sensation, proprioception, or both. Normal muscular reflexes that modulate joint movement are decreased. Without these protective mechanisms, joints are subjected to repeated trauma, resulting in progressive cartilage and bone damage. Additional symptoms include skin changes, such as erythema, swelling, hyperpigmentation, or purpura and soft tissue ulcers over the affected area, as well as joint loosening or instability and joint deformities.

Coding Note: Use additional code, if desired, to identify neuropathy.

FA38.10 Diabetic Charcot arthropathy

Joint damage resulting from diabetic sensory polyneuropathy. This most commonly affects the ankle and foot in patients with longstanding diabetes mellitus.

Coding Note: Always assign an additional code for diabetes mellitus.

FA38.1Y Other specified neuropathic arthropathy

Coding Note: Use additional code, if desired, to identify neuropathy.

FA38.1Z Neuropathic arthropathy, unspecified

Coding Note: Use additional code, if desired, to identify neuropathy.

FA38.2 Arthropathy in hypersensitivity reactions classified elsewhere

Coding Note: Code aslo the casusing condition

FA38.3 Haemophilic arthropathy

Joint destruction in the knees, shoulders, ankles, elbows, and hips is associated with haemophilia. The condition includes acute hemarthrosis, subacute or chronic arthritis, and end-stage haemophilic arthropathy. Nearly all patients with severe haemophilia A or B and half of patients with moderate disease activity experience hemarthrosis. Symptoms include joint pain, joint swelling, joint fibrosis, development of flexion deformities, and erosion of joint cartilage. Joints most commonly affected are knees, ankles, elbows, shoulders, and hips (in order of frequency). Bleeding into muscle and soft tissue also causes musculoskeletal dysfunction.

Coding Note: Code aslo the casusing condition

FA38.Y Other specified arthropathy in diseases classified elsewhere

Coding Note: Code aslo the casusing condition

FA38.Z Unspecified arthropathy in diseases classified elsewhere

Coding Note: Code aslo the casusing condition

FA3Z Unspecified joint disorders and deformities of limbs

FA5Y Other specified arthropathies

FA5Z Arthropathies, unspecified

Conditions associated with the spine (BlockL1‑FA7)

This is a group of conditions in which there is a deviation from or interruption of the normal structure or function of the spine.

Coded Elsewhere: Spinal pain (ME84)

Structural disorders of spine (BlockL2‑FA7)

FA70 Spinal deformities

FA70.0 Kyphosis

This is a curving of the spine that causes a bowing or rounding of the back, which leads to a hunchback or slouching posture.

Exclusions: Post radiation kyphosis (FC01.2)

FA70.1 Scoliosis

Coded Elsewhere: Post radiation scoliosis (FC01.5)

FA70.2 Lordosis

This is the inward curvature of a portion of the lumbar and cervical vertebral column, excessive curvature is called hyperlordosis.

Coded Elsewhere: Postsurgical lordosis (FC01.4)

FA70.Z Spinal deformities, unspecified

FA71 Torticollis

Exclusions: Cervical dystonia or spasmodic torticollis (8A02.0)

Congenital torticollis (LA62)

current injury - see injury of spine by body region (BlockL1‑NB5)

torticollis: due to birth injury (KA43.3)

FA72 Disorders of vertebra

Changes in the structure of the spine causing damage to vertebrae and surrounding tissue secondary to infection, injury, tumours, infections, bone changes that come with age etc. Spinal diseases often limit movement and cause pain when bone changes put pressure on the spinal cord or nerves.

FA72.0 Ankylosing hyperostosis

FA72.1 Kissing spine

FA72.2 Traumatic spondylopathy

Coding Note: Code aslo the casusing condition

FA72.3 Fatigue fracture of vertebra

Coding Note: Code aslo the casusing condition

Inclusions: Stress fracture of vertebra

FA72.4 Collapsed vertebra, not elsewhere classified

Exclusions: collapsed vertebra in osteoporosis (BlockL2‑FB0)

current injury - see injury of spine by body region. (BlockL1‑NB5)

FA72.Y Other specified disorders of vertebra

FA7Y Other specified structural disorders of spine

FA7Z Structural disorders of spine, unspecified

Degenerative condition of spine (BlockL2‑FA8)

This is a disease characterised by degenerative changes in the intervertebral disc, vertebral end-plates and spinal joints due to aging or structural change.

FA80 Intervertebral disc degeneration

FA80.0 Intervertebral disc degeneration of cervical spine without prolapsed disc

This is a disease characterised by degenerative changes in the intervertebral disc and vertebral end-plates without prolapse of the intervertebral disc.

Exclusions: Intervertebral disc degeneration of cervical spine with nervous system involvement (FA80.3)

FA80.1 Intervertebral disc degeneration of cervical spine with prolapsed disc

Exclusions: Intervertebral disc degeneration of cervical spine with nervous system involvement (FA80.3)

FA80.2 Intervertebral disc degeneration of cervical spine with bony spur at the vertebra

Exclusions: Intervertebral disc degeneration of cervical spine with nervous system involvement (FA80.3)

FA80.3 Intervertebral disc degeneration of cervical spine with nervous system involvement

FA80.4 Intervertebral disc degeneration of thoracic spine without prolapsed disc

Exclusions: Intervertebral disc degeneration of thoracic spine with nervous system involvement (FA80.7)

FA80.5 Intervertebral disc degeneration of thoracic spine with prolapsed disc

Exclusions: Intervertebral disc degeneration of thoracic spine with nervous system involvement (FA80.7)

FA80.6 Intervertebral disc degeneration of thoracic spine with bony spur at the vertebra

Exclusions: Intervertebral disc degeneration of thoracic spine with nervous system involvement (FA80.7)

FA80.7 Intervertebral disc degeneration of thoracic spine with nervous system involvement

FA80.8 Intervertebral disc degeneration of lumbar spine without prolapsed disc

Exclusions: Intervertebral disc degeneration of lumbar spine with nervous system involvement (FA80.B)

FA80.9 Intervertebral disc degeneration of lumbar spine with prolapsed disc

Exclusions: Intervertebral disc degeneration of lumbar spine with nervous system involvement (FA80.B)

FA80.A Intervertebral disc degeneration of lumbar spine with bony spur at the vertebra

Exclusions: Intervertebral disc degeneration of lumbar spine with nervous system involvement (FA80.B)

FA80.B Intervertebral disc degeneration of lumbar spine with nervous system involvement

FA80.Y Other specified intervertebral disc degeneration

FA80.Z Intervertebral disc degeneration, unspecified

FA81 Spondylolysis

This is a condition characterised by deficient development or degeneration of a portion of the vertebra, usually in the pars interarticularis (the bone bridge between the superior and inferior facet joints of the lumbar vertebra).

FA81.0 Spondylolysis with slippage

This is a condition characterised by deficient development or degeneration of a portion of the vertebra, usually in the pars interarticularis (the bone bridge between the superior and inferior facet joints of the lumbar vertebra) with forward displacement of a superior vertebral body over the vertebral body below.

FA81.1 Spondylolysis without slippage

This is a condition characterised by deficient development or degeneration of a portion of the vertebra, usually in the pars interarticularis (the bone bridge between the superior and inferior facet joints of the lumbar vertebra) without slippage of the vertebrae.

FA81.Z Spondylolysis, unspecified

FA82 Spinal stenosis

This is a condition characterised by narrowing of the spinal canal.

FA83 Ossification of spinal ligaments

Coding Note: Code aslo the casusing condition

Coded Elsewhere: Ankylosing hyperostosis (FA72.0)

FA84 Spondylolisthesis

This is a forward displacement of a vertebral body (the anterior or front-facing portion of a vertebrae), with a higher position over the vertebral body below.

Coding Note: Code aslo the casusing condition

FA84.0 Spondylolisthesis with pars defect

FA84.1 Spondylolisthesis without pars defect

This is a condition characterised by forward displacement of a superior vertebral body over the vertebral body below without a defect in the pars interarticularis.

FA84.Z Spondylolisthesis, unspecified

Coding Note: Code aslo the casusing condition

FA85 Spinal endplate defects

FA85.0 Spinal epiphysiopathy with no determinant

FA85.1 Spinal epiphysiopathy with determinants

FA85.10 Localised central endplate defect

FA85.11 Multiple anterior endplate defect

Familial Scheuermann disease is an inherited disorder characterised by kyphotic deformity of the spine that develops in adolescence. The spinal deformity includes irregularities of the vertebral endplates, the presence of Schmorl's nodes, disk-space narrowing, and vertebral wedging.

FA85.12 Separation of ring apophysis

FA85.1Y Other specified spinal epiphysiopathy with determinants

FA85.1Z Spinal epiphysiopathy with determinants, unspecified

FA85.Y Other specified spinal endplate defects

FA85.Z Spinal endplate defects, unspecified

FA8Y Other specified degenerative condition of spine

FA8Z Degenerative condition of spine, unspecified

Inflammation of spine (BlockL2‑FA9)

FA90 Infection of vertebra

A condition of the vertebrae, caused by an infection with a bacterial, viral, fungal, or parasitic source. This condition commonly present with fever, chills, headache, weight loss, or may be asymptomatic. Confirmation is by identification of the infectious agent in a blood sample, or radiographic tests.

FA90.0 Infection of vertebra with no determinant

FA90.1 Infection of vertebra with determinants

FA90.Y Other specified infection of vertebra

FA90.Z Infection of vertebra, unspecified

FA91 Infection of intervertebral disc

A condition of the intervertebral discs, caused by an infection with a bacterial, viral, fungal, or parasitic source. This condition commonly present with fever, chills, headache, stiffness of the neck, or tingling sensations in the arms or legs. Confirmation is by identification of the infectious agent in a blood sample, or radiographic tests.

FA92 Inflammatory spondyloarthritis

Inflammatory spondyloarthritis is a rheumatic disease referring to the group of inflammatory disorders affecting the lower limb, enthesitis, dactylitis, and uveitis. Clinical characteristics include typical patterns of peripheral arthritis (i.e., predominantly of the lower limb and asymmetric), absence of rheumatoid factor, absence of subcutaneous nodules and other extra-articular features of rheumatoid arthritis, overlapping extra-articular features of the group (e.g., anterior uveitis), and significant familial aggregation and association with HLA-B27.

Exclusions: Infectious spondyloarthritis (FA13)

FA92.0 Axial spondyloarthritis

Inclusions: Ankylosing spondylitis

Exclusions: Behçet disease (4A62)

FA92.00 Spinal enthesitis

FA92.01 Sacroiliitis, not elsewhere classified

Inflammation of the sacroiliac joint that may be related to local disease or systemic disease.

FA92.0Y Other specified axial spondyloarthritis

FA92.0Z Axial spondyloarthritis, unspecified

FA92.1 Peripheral spondyloarthritis

Experts from the Assessment of SpondyloArthritis international Society (ASAS) developed classification criteria for axSpA and peripheral SpA. These criteria were developed for patients with peripheral manifestations without back pain, arthritis, enthesitis or dactylitis plus SpA features.

FA92.Y Other specified inflammatory spondyloarthritis

FA92.Z Inflammatory spondyloarthritis, unspecified

FA9Y Other specified inflammation of spine

FA9Z Inflammation of spine, unspecified

Spondylopathies (BlockL2‑FB0)

Coded Elsewhere: Infectious spondyloarthritis (FA13)

Collapsed vertebra, not elsewhere classified (FA72.4)

Nonunion after spinal arthrodesis (FC01.70)

FB00 Ankylosis of spinal joint

FB0Y Other specified spondylopathies

FB0Z Spondylopathies, unspecified

FB10 Spinal instabilities

Exclusions: Spondylolysis (FA81)

FB1Y Other specified conditions associated with the spine

FB1Z Conditions associated with the spine, unspecified

Soft tissue disorders (BlockL1‑FB3)

Coded Elsewhere: Diabetic radiculoplexoneuropathy (8B94)

Autoimmune neuritis (8E4A.1)

Disorders of muscles (BlockL2‑FB3)

Exclusions: Muscular dystrophy (8C70)

Coded Elsewhere: Foreign body granuloma of soft tissue, not elsewhere classified (FB56.0)

FB30 Infectious myositis

Infective myositis is an acute, subacute, or chronic infection of skeletal muscle and may be caused by a wide range of infecting organisms. Immunosuppression, particularly as the result of HIV infection, is an important predisposing factor.

FB31 Calcification or ossification of muscle

FB31.0 Progressive osseous heteroplasia

FB31.1 Fibrodysplasia ossificans progressiva

This is an extremely rare disease of the connective tissue where a mutation of the body's repair mechanism causes fibrous tissue (including muscle, tendon, and ligament) to be ossified when damaged.

FB31.Y Other specified calcification or ossification of muscle

FB31.Z Calcification or ossification of muscle, unspecified

FB32 Certain specified disorders of muscle

This is an impairment of health or a condition of abnormal functioning of the muscle that does not fit in another category.

Exclusions: Alcoholic myopathy (8D44.1)

Myalgia (FB56.2)

Cramp or spasm (MB47.3)

Stiff person syndrome (8E4A.0)

Primary disorders of muscles (BlockL2‑8C7)

Coded Elsewhere: Drug-induced myopathy (8C80)

Sarcoid myositis (4B20.Y)

FB32.0 Diastasis of muscle

This is a pathological separation or tearing of muscle fibres from other muscle fibres, tendons or fascia

FB32.1 Spontaneous rupture of muscle

This is a spontaneous tearing or separation of muscle fibres from other muscle fibres and/or tendons in the absence of trauma.

Exclusions: rupture of tendon (Chapter 22)

traumatic rupture of muscle - see injury of muscle by body region (Chapter 22)

FB32.2 Ischaemic infarction of muscle

Exclusions: Volkmann ischaemic contracture (NF0A.6)

traumatic ischaemia of muscle (NF0A.6)

compartment syndrome, traumatic (NF0A.6)

FB32.20 Idiopathic rhabdomyolysis

Skeletal muscle breakdown with leakage of muscle contents, frequently accompanied by myoglobinuria, occurring in both adult and paediatric populations with no identifiable cause. The attacks are often recurrent. Renal failure due to tubular necrosis is a severe complication.

Exclusions: Myasthenia gravis or certain specified neuromuscular junction disorders (BlockL2‑8C6)

Secondary myopathies (BlockL2‑8C8)

FB32.2Y Other specified ischaemic infarction of muscle

FB32.2Z Ischaemic infarction of muscle, unspecified

FB32.3 Immobility syndrome

FB32.4 Contracture of muscle

Exclusions: Contracture of joint (FA34.3)

FB32.5 Muscle strain or sprain

Exclusions: current injury - see injury of muscle by body region (Chapter 22)

FB32.Y Other specified disorders of muscles

FB33 Secondary disorders of muscle

Coding Note: Code aslo the casusing condition

Exclusions: myopathy in: metabolic diseases (BlockL2‑8C8)

FB3Z Disorders of muscles, unspecified

Disorders of synovium or tendon (BlockL2‑FB4)

This is a group of disorders which affect the synovial joint lining (synovium) and also tendons.

FB40 Tenosynovitis

Exclusions: soft tissue disorders related to use, overuse and pressure (FB50.1)

current injury - see injury of ligament or tendon by body region (Chapter 22)

FB40.0 Infectious tenosynovitis

FB40.1 Plantar fasciitis

FB40.2 Posterior tibial tendonitis

FB40.3 Calcific tendinitis

This is a disorder characterised by deposits of hydroxyapatite in any tendon of the body causing inflammation and pain.

FB40.4 Trigger finger

This is a common disorder characterised by catching, snapping or locking of the involved finger flexor tendon, associated with dysfunction and pain.

Inclusions: Nodular tendinous disease

FB40.5 Radial styloid tenosynovitis

Inflammation of the flexor and/or extensor tendon synovial sheaths in the hand and wrist that control movement of the thumb.

FB40.Y Other specified tenosynovitis

FB40.Z Tenosynovitis, unspecified

FB41 Spontaneous rupture of synovium or tendon

This is a spontaneous rupture to a fluid-filled sac containing viscous fluid which normally acts to decrease friction and also provides a cushion between bones and tendons and/or muscles around a joint.

Coding Note: Includes rupture that occurs when a normal force is applied to tissues that are inferred to have less than normal strength.

Exclusions: rupture where an abnormal force is applied to normal tissue - see injury of tendon by body region (Chapter 22)

rotator cuff syndrome (FB53.1)

FB41.0 Spontaneous rupture of popliteal cyst

This is a rupture of the semimembranous or more rarely some other synovial bursa, or fluid filled sac, found behind the knee joint.

FB41.1 Spontaneous rupture of synovium

This is a rupture to a fluid-filled sac containing viscous fluid which normally acts to decrease friction and also provides a cushion between bones and tendons and/or muscles around a joint.

Exclusions: Spontaneous rupture of popliteal cyst (FB41.0)

FB41.2 Spontaneous rupture of tendon

FB41.Y Other specified spontaneous rupture of synovium or tendon

Coding Note: Includes rupture that occurs when a normal force is applied to tissues that are inferred to have less than normal strength.

FB41.Z Spontaneous rupture of synovium or tendon, unspecified

Coding Note: Includes rupture that occurs when a normal force is applied to tissues that are inferred to have less than normal strength.

FB42 Certain specified disorders of synovium or tendon

Exclusions: Palmar fascial fibromatosis (FB51.0)

tendinitis NOS (FB55)

xanthomatosis localized to tendons (5C80.2)

FB42.0 Acquired short Achilles tendon

FB42.1 Contracture of tendon sheath

FB42.2 Ganglion

This is a nodular tumour-like lesions or mucoid flesh, arising from tendon sheaths, ligaments, or joint capsule, especially of the hands, wrists, or feet. They are not true cysts as they lack epithelial wall. They are distinguished from synovial cysts by the lack of communication with a joint cavity or the synovial membrane.

Inclusions: Ganglion of tendon sheath

Exclusions: ganglion in yaws (1C1D.1)

FB42.3 Synovial hypertrophy, not elsewhere classified

This is an increase in synovial lining thickness which is not elsewhere classified.

FB43 Secondary disorders of synovium or tendon

Coding Note: Code aslo the casusing condition

FB4Y Other specified disorders of synovium or tendon

FB4Z Disorders of synovium or tendon, unspecified

Miscellaneous specified soft tissue disorders (BlockL2‑FB5)

This is a group of other disorders, which are not defined elsewhere, affecting tissues that connect, support, or surround other structures and organs of the body, not being bone.

FB50 Bursitis

This is a disorder of inflammation of one or more bursae (small sacs) of synovial fluid in the body which usually results in pain.

Coding Note: Code aslo the casusing condition

Exclusions: Tibial collateral bursitis (FB54.2)

FB50.0 Infectious bursitis

This is a disorder of inflammation of one or more bursae (small sacs) of synovial fluid in the body which usually results in pain and is caused by an infectious agent.

Exclusions: Tuberculous bursitis (1B12.4)

FB50.1 Bursitis related to use, overuse or pressure

This is a disorder of inflammation of one or more bursae (small sacs) of synovial fluid in the body which usually results in pain and is caused by repetitive use, overuse and pressure irritation.

FB50.2 Synovial cyst of popliteal space

This is a benign swelling of the semimembranous or more rarely some other synovial bursa found behind the knee joint.

Exclusions: Spontaneous rupture of popliteal cyst (FB41.0)

FB50.3 Calcium deposit in bursa

Exclusions: Calcific tendinitis of shoulder (FB40.3)

FB50.Y Other specified bursitis

Coding Note: Code aslo the casusing condition

FB50.Z Bursitis, unspecified

Coding Note: Code aslo the casusing condition

FB51 Fibroblastic disorders

FB51.0 Palmar fascial fibromatosis

This is a fixed flexion contracture of the hand where the fingers bend towards the palm and cannot be fully extended (straightened).

Inclusions: Dupuytren disease of palm

FB51.1 Knuckle pads

This is a benign, asymptomatic, well-circumscribed, smooth, firm, skin-coloured papules, nodules, or plaques, located in the skin over the dorsal aspects of the metacarpophalangeal (MCP) and interphalangeal (IP) joints.

FB51.2 Pseudosarcomatous fibromatosis

FB51.3 Fibroblastic rheumatism

FB51.4 Retroperitoneal fibrosis

Retroperitoneal fibrosis (RPF) is a disease characterised by the development of extensive proliferation of fibrous tissue in the retroperitoneum, resulting in entrapment and obstruction of retroperitoneal structures, notably the ureters. RPF can be classified as primary (idiopathic) meaning that the cause is not known or secondary. But its association with various immune-related conditions and response to immunosuppression have led to speculation regarding an autoimmune aetiology of idiopathic RPF. One-third of the cases are secondary to malignancy, medication, trauma, or certain infections.

FB51.40 Primary retroperitoneal fibrosis

This is the commonest form of retroperitoneal fibrosis. By definition, no associated trigger (e.g. drugs or malignancy) can be determined, although atherosclerosis of the abdominal aorta is often associated. It has been postulated that such atherosclerosis may be of aetiological significance in some cases.

FB51.4Y Other specified retroperitoneal fibrosis

FB51.Y Other specified fibroblastic disorders

FB51.Z Fibroblastic disorders, unspecified

FB52 Soft tissue disorders in diseases classified elsewhere

This is a group of disorders affecting tissues that connect, support, or surround other structures and organs of the body, not being bone and occur in diseases classified elsewhere.

Coding Note: Code aslo the casusing condition

FB53 Shoulder lesions

This is a group of disorders which are normally characterised with shoulder pain and reduced range of motion of the shoulder girdle.

Exclusions: shoulder-hand syndrome (FB56.5)

Rotator cuff tendonitis (FB40.3)

FB53.0 Adhesive capsulitis of shoulder

This is a condition characterised by spontaneous onset of shoulder pain accompanied by progressive loss of active and passive ranges of motion.

Inclusions: Frozen shoulder

FB53.1 Rotator cuff syndrome

Exclusions: Rotator cuff tendonitis (FB40.3)

FB53.2 Impingement syndrome of shoulder

This is a clinical syndrome which occurs when the tendons of the rotator cuff muscles become irritated and inflamed as they pass through the subacromial space, the passage beneath the acromion. This can result in pain, weakness and loss of movement at the shoulder.

FB53.Y Other specified shoulder lesions

FB53.Z Shoulder lesions, unspecified

FB54 Enthesopathies of lower limb

This is a group of disorders which refer to any abnormality of tendon and ligament insertion points of the leg. Abnormalities include inflammation and calcification.

Exclusions: Bursitis related to use, overuse or pressure (FB50.1)

FB54.0 Iliac crest spur

This is a disorder characterised by bony exostosis at iliac muscle origins.

FB54.1 Iliotibial band syndrome

This is the most common running injury of the lateral side of the knee. It is a non-traumatic overuse injury caused by repeated flexion and extension of the knee that causes irritation in the structures around the knee causing knee pain.

FB54.2 Tibial collateral bursitis

FB54.3 Calcaneal spur

This is a disorder characterised by a bone outgrowth located on the calcaneus (heel bone).

FB54.4 Metatarsalgia

This is a condition characterised by pain and inflammation in the ball of your foot or at the metatarsal heads.

Exclusions: Morton metatarsalgia (8C11.6)

FB54.Y Other specified enthesopathies of lower limb

FB54.Z Enthesopathies of lower limb, unspecified

FB55 Certain specified enthesopathies

Exclusions: Bursitis related to use, overuse or pressure (FB50.1)

spinal enthesopathy (FA92.00)

Osteophyte (FA37.0)

FB55.0 Medial epicondylitis of elbow

This is a common upper extremity disorder which is characterised by degenerative changes in the musculotendonous region of the medial epicondyle, resulting from repetitive stress of flexion and extension movements of the wrist joint.

FB55.1 Lateral epicondylitis of elbow

This is a common upper extremity disorder which is characterised by degenerative changes in the musculotendonous region of the lateral epicondyle, resulting from repetitive stress of flexion and extension movements of the wrist joint

Inclusions: Tennis elbow

FB55.2 Periarthritis of wrist

This is disorder is characterised by inflammation of tissues around the joints of the wrist.

FB55.Z Enthesopathies, unspecified

FB56 Specified soft tissue disorders, not elsewhere classified

This is a group of other disorders, which are not classified elsewhere, affecting tissues that connect, support, or surround other structures and organs of the body, not being bone.

Exclusions: brachial radiculitis NOS (8B93)

lumbosacral radiculitis NOS (8B93)

Mononeuropathy (BlockL2‑8C1)

radiculitis NOS (8B93)

Sciatica (ME84.3)

FB56.0 Foreign body granuloma of soft tissue, not elsewhere classified

Exclusions: Foreign body granuloma of skin (EH93.3)

FB56.1 Residual foreign body in soft tissue

Exclusions: Foreign body granuloma of skin (EH93.3)

Foreign body granuloma of soft tissue, not elsewhere classified (FB56.0)

FB56.2 Myalgia

This is a disorder characterised by pain in a muscle or group of muscles.

FB56.3 Hypertrophy of infrapatellar fat pad

This is a hypertrophy of an intracapsular but extrasynovial structure limited by the inferior pole of the patella superiorly, the joint capsule and patellar tendon anteriorly, the proximal tibia and deep infrapatellar bursa inferiorly, and the synovium-lined joint cavity posteriorly.

FB56.4 Pain in limb

Exclusions: Chronic primary limb pain (MG30.02)

FB56.5 Algoneurodystrophy

FB56.6 Other specified soft tissue disorders

FB6Z Soft tissue disorders, unspecified

Osteopathies or chondropathies (BlockL1‑FB8)

Coded Elsewhere: Bone diseases with increased bone density (LD24.1)

Bone diseases with disorganised development of skeletal components (LD24.2)

Congenital vascular bone syndromes (LD26.6)

Tuberculosis of bones or joints (1B12.40)

Tuberculosis of bones or joints (1B12.40)

Malignant otitis externa (AA02)

FB80 Certain specified disorders of bone density or structure

Exclusions: Osteopoikilosis (LD24.11)

Osteopetrosis (LD24.10)

Coded Elsewhere: Osteogenesis imperfecta (LD24.K0)

FB80.0 Fibrous dysplasia of bone

Fibrous dysplasia of bone is a congenital non-hereditary benign bone disease, where normal bone is replaced by a fibrous-like tissue with immature osteogenesis. Bone lesions are mono- or polyostotic and may be associated with bone pain and fragility, leading to fractures. In some patients or bone sites, they are hypertrophic, and responsible for neurological complications.

FB80.1 Skeletal fluorosis

FB80.2 Osteitis condensans

FB80.3 Hyperostosis of skull

FB80.4 Osteosclerosis

FB80.5 Solitary bone cyst

A solitary bone cyst is a benign non-epithelial bone cavity that is asymptomatic and that is found most commonly in the second decade of life by chance. The long bones are most often affected, but cases involving the jaw bone have been reported.

Exclusions: solitary cyst of jaw (DA05)

FB80.6 Aneurysmal bone cyst

Exclusions: aneurysmal cyst of jaw (DA05)

FB80.7 Malunion of fracture

FB80.8 Nonunion of fracture

Exclusions: Pseudarthrosis after fusion or arthrodesis (FC01.0)

FB80.9 Delayed union of fracture

FB80.A Stress fracture, not elsewhere classified

Exclusions: stress fracture of vertebra (FA72.3)

FB80.B Pathological fracture, not elsewhere classified

Exclusions: Collapsed vertebra, not elsewhere classified (FA72.4)

FB80.Y Other specified disorders of bone density and structure

FB80.Z Disorder of bone density and structure, unspecified

FB81 Osteonecrosis

Osteonecrosis is the medical term for death of bone tissue that occurs when the supply of blood to the bone is cut off for some reason. Doctors sometimes refer to the condition as avascular necrosis, aseptic necrosis or ischemic bone necrosis

Inclusions: avascular necrosis of bone

Coded Elsewhere: Other secondary osteonecrosis (1B12.40)

FB81.0 Idiopathic aseptic osteonecrosis

FB81.1 Osteonecrosis due to dialysis

FB81.2 Drug-induced osteonecrosis

Alteration of the normal structure of orofacial tissues resulting from medicinal substances acting locally or systemically.

Inclusions: Osteonecrosis due to chemical burn of oral mucosa

FB81.3 Osteonecrosis due to trauma

FB81.4 Osteonecrosis due to haemoglobinopathy

FB81.5 Osteonecrosis due to ionizing radiation

Necrosis of bone attributable to ionizing radiation, most commonly seen affecting the mandible following radical radiotherapy for the treatment of head and neck cancer or the chest wall following radiotherapy for breast cancer.

Coded Elsewhere: Osteoradionecrosis of jaw (DA06.0)

FB81.Y Other specified osteonecrosis

FB81.Z Osteonecrosis, unspecified

FB82 Chondropathies

Exclusions: postprocedural chondropathies (FC01)

Coded Elsewhere: Chondrodysplasia punctata (LD24.04)

FB82.0 Chondromalacia

FB82.00 Chondromalacia patellae

A disease of the knee joint, caused by damaged to the cartilage under the patella. This disease is characterised by pain in the front of the knee that worsens when walking up or down stairs. This disease may be associated with injury or overuse.

FB82.0Y Other specified chondromalacia

FB82.0Z Chondromalacia, unspecified

FB82.1 Osteochondrosis or osteochondritis dissecans

Note: Osteochondroses are typically referred to by eponyms. The most common eponyms are indexed to osteochondrosis with specification identified by the site and time in life.

Coded Elsewhere: Medial condensing osteitis of clavicle (LB72.Y)

Idiopathic aseptic osteonecrosis of carpal lunate (FB81.0)

FB82.2 Slipped upper femoral epiphysis

FB82.3 Relapsing polychondritis

Relapsing polychondritis is a multisystem inflammatory disease of unknown etiology affecting the cartilage. The disease is characterised by intermittent or fluctuant inflammatory manifestations due to inflammation of the cartilaginous structures, resulting in tissue damage and tissue destruction. Chondritis of auricular, nasal, tracheal cartilage predominates in this disease, suggesting response to tissue-specific antigens such as collagen II and cartilage matrix protein (matrillin-1). In about one third of patients, RP is associated with vasculitis (from isolated cutaneous leucocytoclastic vasculitis to systemic polyangiitis) and autoimmune rheumatic diseases (autoimmune rheumatic diseases mainly rheumatoid arthritis and systemic lupus erythematosus). haematological malignant diseases, gastrointestinal disorders and endocrine diseases may also occur. Functional and anatomical evaluation for upper and lower airway disease is essential in evaluation and management of the disease.

FB82.Y Other specified chondropathies

FB82.Z Chondropathies, unspecified

FB83 Low bone mass disorders

Coded Elsewhere: Genetic bone diseases with decreased bone density (LD24.K)

FB83.0 Osteopenia

Coding Note: Code aslo the casusing condition

FB83.00 Premenopausal idiopathic osteopenia

FB83.01 Postmenopausal osteopenia

FB83.02 Senile osteopenia

Coding Note: Code aslo the casusing condition

FB83.03 Osteopenia of disuse

FB83.04 Drug-induced osteopenia

FB83.0Y Other specified osteopenia

Coding Note: Code aslo the casusing condition

FB83.0Z Osteopenia, unspecified

Coding Note: Code aslo the casusing condition

FB83.1 Osteoporosis

Coded Elsewhere: Postoophorectomy osteoporosis (FC01.9)

Osteoporosis in classical cystic fibrosis (CA25.0)

Osteoporosis in atypical cystic fibrosis (CA25.1)

Osteoporosis in multiple myelomatosis (2A83.1)

FB83.10 Premenopausal idiopathic osteoporosis

FB83.11 Postmenopausal osteoporosis

Susceptibility to bone fracture secondary to a systemic decrease in bone mass and micro-architectural deterioration of bone tissue related to hormonal changes associated with menopause

FB83.12 Osteoporosis of disuse

FB83.13 Drug-induced osteoporosis

FB83.14 Osteoporosis due to malabsorption

FB83.1Y Other specified osteoporosis

FB83.1Z Osteoporosis, unspecified

FB83.2 Adult osteomalacia

A disease characterised by defects in bone mineralization and bone softening secondary to vitamin D deficiency.

Exclusions: renal osteodystrophy (BlockL2‑GB6)

osteomalacia: vitamin-D-resistant (5C64.3)

infantile and juvenile osteomalacia (5B57.0)

rickets (active) vitamin-D-resistant (5C64.3)

Coded Elsewhere: Puerperal osteomalacia (JB44.6)

FB83.20 Aluminium bone disease

Coding Note: Code aslo the casusing condition

FB83.21 Adult osteomalacia due to malnutrition

Coding Note: Code aslo the casusing condition

FB83.22 Drug-induced adult osteomalacia

FB83.2Y Other specified adult osteomalacia

FB83.2Z Adult osteomalacia, unspecified

FB84 Osteomyelitis or osteitis

Coding Note: Code aslo the casusing condition

Exclusions: osteomyelitis jaw (DA06.0)

osteomyelitis vertebra (FA90)

FB84.0 Acute haematogenous osteomyelitis

FB84.1 Other acute osteomyelitis

FB84.2 Subacute osteomyelitis

FB84.3 Chronic multifocal osteomyelitis

FB84.4 Chronic osteomyelitis with draining sinus

FB84.5 Other chronic haematogenous osteomyelitis

FB84.Y Other specified osteomyelitis or osteitis

Coding Note: Code aslo the casusing condition

FB84.Z Osteomyelitis or osteitis, unspecified

Coding Note: Code aslo the casusing condition

FB85 Paget disease of bone

A disorder characterised by pathologically excessive resorption of bone by multinucleated osteoclasts and abnormal modelling of disorganised, woven bone by osteoblasts with resultant bone vascularization, weakness, enlargement and deformity.

Inclusions: Osteitis deformans

FB85.0 Juvenile Paget disease

FB85.1 Paget disease of bone in neoplastic disease

Coding Note: Code aslo the casusing condition

FB85.Y Other specified Paget disease of bone

FB85.Z Paget disease of bone, unspecified

FB86 Disorders associated with bone growth

FB86.0 Epiphyseal arrest

FB86.1 Bone hyperplasias

Coded Elsewhere: Ankylosing hyperostosis (FA72.0)

FB86.10 Hypertrophic osteoarthropathy

Hypertrophic osteoarthropathy (HOA) is a syndrome of clubbing of the digits, subperiosteal new bone formation (periostitis) affecting the long bones, and arthritis. The primary hereditary form is associated with mutations in the HPGD gene. The secondary form may be secondary to a number of systemic disorders, most commonly as a paraneoplastic phenomenon related to bronchial carcinoma.

FB86.11 Hypertrophy of bone

FB86.1Y Other specified bone hyperplasias

FB86.1Z Bone hyperplasias, unspecified

FB86.2 Osteolysis

Coding Note: Code aslo the casusing condition

FB86.Y Other specified disorders associated with bone growth

FB86.Z Disorders associated with bone growth, unspecified

FB8Y Other specified osteopathies or chondropathies

FB8Z Osteopathies or chondropathies, unspecified

FC00 Certain specified acquired deformities of musculoskeletal system or connective tissue, not elsewhere classified

Coding Note: Code aslo the casusing condition

Exclusions: Dentofacial anomalies (DA0E)

Spinal deformities (FA70)

Structural developmental anomalies of the skeleton (BlockL2‑LB7)

acquired deformities of limbs (BlockL2‑FA3)

acquired absence of limbs (QF00)

Postprocedural disorders of the musculoskeletal system (FC01)

Acquired absence of organs (QF01)

FC00.0 Acquired deformity of nose

Coding Note: Code aslo the casusing condition

Exclusions: Deviated nasal septum (CA0D)

FC00.1 Acquired deformity of neck

Coding Note: Code aslo the casusing condition

FC00.2 Acquired deformity of chest or rib

Coding Note: Code aslo the casusing condition

FC00.3 Acquired deformity of pelvis

Coding Note: Code aslo the casusing condition

Exclusions: Maternal care for known or suspected disproportion (JA83)

Obstructed labour due to maternal pelvic abnormality (JB05)

Obstructed labour due to deformed pelvis (JB05.0)

FC00.4 Acquired deformity of trunk

FC00.Y Acquired deformities of musculoskeletal system and connective tissue, not classified elsewhere, other specified sites

Coding Note: Code aslo the casusing condition

FC01 Postprocedural disorders of the musculoskeletal system

Exclusions: Osteoporosis (FB83.1)

Presence of devices other than cardiac or vascular implants (QB51)

Arthropathy following intestinal bypass (FA11.0)

Coded Elsewhere: Osteonecrosis due to ionizing radiation (FB81.5)

Injury or harm arising from surgical or medical care, not elsewhere classified (NE80-NE8Z)

Wear of articular bearing surface of joint prosthesis (FA35)

Post radiation lordosis (FA70.2)

FC01.0 Pseudarthrosis after fusion or arthrodesis

FC01.1 Postlaminectomy syndrome, not elsewhere classified

FC01.2 Post radiation kyphosis

FC01.3 Postlaminectomy kyphosis

FC01.4 Postsurgical lordosis

FC01.5 Post radiation scoliosis

FC01.6 Fracture of bone following insertion of orthopaedic implant, joint prosthesis, or bone plate

FC01.7 Nonunion after arthrodesis

FC01.70 Nonunion after spinal arthrodesis

Inclusions: nonunion after spinal fusion

FC01.7Y Nonunion after arthrodesis of other sites

FC01.8 Postsurgical osteolysis

FC01.9 Postoophorectomy osteoporosis

osteoporosis occurring after oophorectomy

FC01.A Postsurgical malabsorption osteoporosis

FC0Y Other specified diseases of the musculoskeletal system or connective tissue

FC0Z Diseases of the musculoskeletal system or connective tissue, unspecified