CHAPTER 16

Diseases of the genitourinary system

This chapter has 120 four-character categories.

Code range starts with GA00

Any disease characterised by pathological changes to the genitourinary system.

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)

Coded Elsewhere: Contact with health services for reasons associated with reproduction (QA20-QA4Z)

Predominantly sexually transmitted infections (1A60-1A9Z)

Symptoms, signs or clinical findings of the genitourinary system (MF30-MG0Y)

Female gonococcal pelvic inflammatory disease (1A71)

This chapter contains the following top level blocks:

* Diseases of the female genital system
* Diseases of the male genital system
* Disorders of breast
* Diseases of the urinary system
* Other conditions of the genitourinary system
* Postprocedural disorders of genitourinary system

Diseases of the female genital system (BlockL1‑GA0)

Coded Elsewhere: Certain specified disorders of genital development

Neoplasms of the female genital organs

Symptoms, signs or clinical findings involving the female genital system (MF30-MF3Y)

Inflammatory disorders of the female genital tract (BlockL2‑GA0)

Exclusions: those complicating: abortion or ectopic or molar pregnancy (BlockL1‑JA0)

Infections of genitourinary tract in pregnancy (JA62)

Other infection during labour (JB0D)

Infections in the puerperium (JB40)

GA00 Vulvitis

Exclusions: senile (atrophic) vaginitis (GA30.2)

Coded Elsewhere: Irritant contact dermatitis of vulva (EK02.13)

Genital warts of vulva (1A95.1)

Tuberculous ulceration of vulva (1B12.8)

GA00.0 Acute vulvitis

Exclusions: Streptococcal cellulitis of skin (1B70.1)

Staphylococcal cellulitis of skin (1B70.2)

GA00.1 Subacute, chronic or recurrent vulvitis

GA00.2 Abscess of vulva

A condition of the vulva, caused by an infection with a bacterial, viral, or fungal source. This condition is characterised by a focal accumulation of purulent material in the vulva. This condition may present with pain and swelling of the vulva, pain on sexual intercourse, or fever. Confirmation is by gynaecological examination.

GA00.3 Genital ulcer of vulva

Ulceration of the vulva of unknown or uncertain aetiology but where a sexually transmitted infection, especially Herpes simplex, primary syphilis or chancroid, is suspected. This is a provisional diagnosis which should be amended once the cause of the ulceration is known.

Coding Note: Code aslo the casusing condition

GA00.4 Vulvovaginal ulceration and inflammation

Coded Elsewhere: Vulvovaginal candidosis (1F23.10)

GA00.40 Vulvovaginal ulceration

GA00.4Y Other specified vulvovaginal ulceration and inflammation

GA00.4Z Vulvovaginal ulceration and inflammation, unspecified

GA01 Inflammatory disorders of the uterus, except cervix

A spectrum of inflammation involving the UTERUS and the supporting tissues. It is usually caused by an ascending infection of organisms from the endocervix. Such inflammation can lead to functional impairment and infertility.

GA01.0 Acute inflammatory disease of uterus

GA01.00 Acute endometritis

A disease of the endometrium, caused by an infection with a bacterial or viral source. This condition is characterised by fever, lower abdominal pain, abnormal vaginal bleeding, or vaginal discharge. Confirmation is by a pelvic exam and identification of the bacteria or virus from a cervical swab, endometrial biopsy, or laparoscopy.

Coded Elsewhere: Tuberculous endometritis (1B12.5)

GA01.01 Acute inflammatory disease of uterus with pyometra

GA01.0Z Acute inflammatory disease of uterus, unspecified

GA01.1 Chronic inflammatory disease of uterus

A condition characterised by inflammation of the uterus which lasts for more than 3 months.

GA01.10 Chronic endometritis

Coded Elsewhere: Tuberculous endometritis (1B12.5)

GA01.11 Chronic inflammatory disease of uterus with pyometra

GA01.1Z Chronic inflammatory disease of uterus, unspecified

GA01.Y Other specified inflammatory disorders of the uterus, except cervix

GA01.Z Inflammatory disorders of the uterus, except cervix, unspecified

GA02 Vaginitis

Coded Elsewhere: Vulvovaginal ulceration and inflammation (GA00.4)

Genital warts of vagina (1A95.1)

GA02.0 Acute vaginitis

Coding Note: Code aslo the casusing condition

GA02.1 Inflammatory vaginitis

Clinical syndrome characterised by diffuse exudative vaginitis, epithelial cell exfoliation and a profuse purulent vaginal discharge, associated with vulvovaginal burning or irritation and dyspareunia. Signs may include vulvovaginal erythema and ecchymotic spots.

Coding Note: Code aslo the casusing condition

GA02.2 Subacute or chronic vaginitis

Chronic vulvovaginal candidiasis, marked by chronic irritative symptoms of vestibule, vulva and vagina, with burning replacing itching as the prominent symptom. Differential diagnosis with chronic atopic dermatitis or atrophic vulvovaginitis.

GA02.3 Genital ulcer disease of vagina

GA03 Diseases of Bartholin gland

Any disease characterised by inflammation of the Bartholin gland.

GA03.0 Abscess of Bartholin gland

A condition of the Bartholin gland, caused by an infection with a bacterial, viral, or fungal source. This condition is characterised by focal accumulation of purulent material in the Bartholin gland, located on either side of the vaginal opening. This condition may present with swelling on either side of the vagina, pain on sexual intercourse, or fever. Confirmation is by gynaecological examination.

GA03.1 Cyst of Bartholin gland

A condition of the vagina, caused by growth of a flap of skin, occlusion of the Bartholin duct due to mucus, or infection. This condition is characterised by the accumulation of mucus or clear fluid in a closed sac-like structure that forms on (or from) one of the Bartholin glands or its ducts. This condition is commonly asymptomatic, but may become painful if the cyst becomes enlarged or infected.

GA03.Y Other specified diseases of Bartholin gland

GA03.Z Diseases of Bartholin gland, unspecified

GA04 Cervicitis

Coded Elsewhere: Tuberculosis of cervix uteri (1B12.5)

GA05 Female pelvic inflammatory diseases

Coded Elsewhere: Postprocedural acute female pelvic inflammatory disease (GC78)

Secondary syphilitic female pelvic inflammatory disease (1A61.4)

GA05.0 Acute female pelvic inflammatory disease

Coded Elsewhere: Tuberculous female pelvic inflammatory disease (1B12.5)

GA05.1 Chronic pelvic inflammatory disease

Coded Elsewhere: Chlamydial female pelvic inflammatory disease (1A81.1)

GA05.2 Female pelvic peritonitis, unspecified

This is an inflammation of the peritoneum, the thin tissue that lines the inner wall of the abdomen and covers most of the abdominal organs, unspecified.

GA05.3 Tuboovarian abscess

End-stage process of acute PID, marked by pelvic mass palpable during bimanual examination. Usually bilateral but can be unilateral,

GA05.Y Other specified female pelvic inflammatory diseases

GA05.Z Female pelvic inflammatory diseases, unspecified

GA06 Pelvic peritoneal adhesions of unknown or combined origin

A condition characterised by fibrous bands of scar tissue and abnormal connection between pelvic organs or tissues. This condition may also present with pelvic pain or bowel obstruction.

GA07 Salpingitis and oophoritis

Inflammation of the fallopian tube, characterised by a typical inflammatory response (redness and oedema). It is usually manifested by lower abdominal pain and tenderness, fever, increased pulse rate, hypermenorrhoea and/or metrorrhagia. The disorder may resolve or result in fibrosis, hydrosalpinx, pyosalpinx, or cyst formation.

Inclusions: salpingo-oophoritis

tubo-ovarian inflammatory disease

Coded Elsewhere: Tuberculous oophoritis or salpingitis (1B12.5)

Chlamydial salpingitis (1A81.1)

GA07.0 Acute salpingitis and oophoritis

Coded Elsewhere: Acute gonococcal salpingitis (1A71)

GA07.1 Chronic salpingitis and oophoritis

Coded Elsewhere: Chronic gonococcal salpingitis (1A71)

GA07.Z Salpingitis and oophoritis, unspecified

GA0Z Inflammatory disorders of the female genital tract, unspecified

Noninflammatory disorders of female genital tract (BlockL2‑GA1)

Any disorder of the female genital tract, characterised by pathological changes, leading to noninflammatory effects.

Coded Elsewhere: Congenital abnormalities of vulva or perineum

Congenital abnormalities of vagina

Congenital abnormalities of cervix uteri

Congenital abnormalities of uterus, except cervix

Congenital abnormalities of fallopian tube

Congenital abnormalities of ovary

Congenital abnormalities of broad ligament

GA10 Endometriosis

A condition of the uterus that is frequently idiopathic. This condition is characterised by ectopic growth and function of endometrial tissue outside the uterine cavity. This condition may be associated with remaining vestigial tissue from the wolffian or mullerian duct, or fragments endometrium refluxed backward into the peritoneal cavity during menstruation. This condition may also present with dysmenorrhoea, dyspareunia, nonmenstrual pelvic pain, infertility, alteration of menses, or may be asymptomatic. Confirmation is by laparoscopy and histological identification of ectopic fragments.

GA10.0 Superficial endometriosis of pelvic peritoneum

A condition that is frequently idiopathic. This condition is characterised by ectopic growth and function of endometrial tissue extending 5 millimetres or less under the visceral or parietal pelvic peritoneal surface and appearing as black-brown or light red-orange lesions. This condition may be associated with remaining vestigial tissue from the wolffian or mullerian duct, or fragments endometrium refluxed backward into the peritoneal cavity during menstruation. This condition may also present with dysmenorrhoea, dyspareunia, nonmenstrual pelvic pain, infertility, alteration of menses, or may be asymptomatic. Confirmation is by laparoscopy and histological identification of ectopic fragments.

GA10.1 Peritoneal pockets

Peritoneal pockets usually observed in the cul-de-sac, may occur in other parts of the female pelvis, also known as Allen-Masters defect. Can be asymptomatic or harbour microscopic endometriosis.

GA10.2 Superficial ovarian endometriosis

Endometriosis on the ovarian cortex, containing typical or subtle lesions.

GA10.3 Deep ovarian endometriosis

Ovarian endometriosis cyst containing dark stained blood (chocolate fluid) and lined by a pseudocyst wall covered by ectopic endometrium. This cyst can be subdivided according to its size in the following categories: less than 1 cm, 1-3 cm, > 3 cm

GA10.4 Deep endometriosis

A condition that is commonly idiopathic. This condition is characterised by ectopic growth and function of endometrial tissue extending more than 5 millimetres under the peritoneal surface. This condition may be associated with remaining vestigial tissue from the wolffian or mullerian duct, or fragments of endometrium refluxed backward into the peritoneal cavity during menstruation, or may be idiopathic. This condition may also present with dysmenorrhoea, dyspareunia, nonmenstrual pelvic pain, infertility, alteration of menses, or may be asymptomatic. Confirmation is by laparoscopy and histological identification of ectopic fragments.

Coded Elsewhere: Deep ovarian endometriosis (GA10.3)

GA10.5 Endometriosis of fallopian tube

GA10.6 Endometriosis in cutaneous scar

GA10.7 Endometriosis of intestine

Endometriosis situated inside the bowel wall at or below the subserosal level, excluding superficial serosal lesions that are still classified as peritoneal endometriosis. Mostly affecting rectosigmoid area, but can be found also in other parts of the bowel system.

GA10.8 Thoracic endometriosis

Thoracic endometriosis lesions can affect the diaphragm, pleura, lung and bronchi. There may be a greater affinity for the right hemi thorax, and the parenchyma is more commonly affected in the lower lobes. Macroscopically, the endometriotic implants appear as brown–yellow and sometimes red nodules surrounded by neovascularization. Symptoms include: dyspnea, shortness of breath, rapid heartbeat, coughing up blood and a variety of pain patterns to include scapula, chest, ipsilateral neck and shoulder, upper abdominal and epigastric. Thoracic endometriosis may present with catamenial pneumothorax (recurrent pneumothorax occurring within 72 hours of menstruation), haemoptysis in case of bronchial location, haemothorax, pericardial effusions. A diagnosis of thoracic endometriosis is simple when both endometrial stroma and gland are present. In cases of endometriosis with stroma only, a further classification of “aggregated pattern”, in which immunohistochemistry is ER-, PR- and CD10-positive might be necessary for diagnosis.

GA10.9 Salpingitis isthmica nodosa

A condition of the fallopian tube caused by infection or inflammation. This condition is characterised by bilateral, nodular thickening of the isthmic and proximal ampullary tunica muscularis. This condition may also present with infertility or ectopic pregnancy. Confirmation is by imaging.

GA10.A Endometriosis-related adhesions

GA10.Y Endometriosis of other specified sites

GA10.Z Endometriosis, unspecified

GA11 Adenomyosis

A condition of the uterus characterised by endometrial tissue growth in the myometrium, hypertrophy of the myometrium, and heavy or prolonged menstrual bleeding, dysmenorrhoea, dyspareunia, bleeding between menstruation, infertility, or is asymptomatic. Confirmation is by histopathology or ultrasound.

Exclusions: Leiomyoma of uterus (2E86.0)

GA12 Dyspareunia

A symptom of the genital system affecting females, caused by physical determinants. This symptom is characterised by recurrent genital pain or discomfort that occurs before, during, or after sexual intercourse, or superficial or deep vaginal penetration that is related to an identifiable physical cause, not including lack of lubrication. Confirmation is by medical assessment of physical causes.

Exclusions: Sexual pain-penetration disorder (HA20)

GA13 Acquired abnormalities of vulva or perineum

Any condition of the vulva and perineum, caused by determinants arising after birth. These conditions are characterised by a malfunction, malformation, or another anomaly of the vulva and perineum.

Coded Elsewhere: Vulvar intraepithelial neoplasia, grade I, usual type, HPV-associated (2F33.0)

GA13.0 Polyp of vulva

GA13.1 Vulvar intraepithelial neoplasia, not otherwise specified

A condition of the vulva, characterised by lesion of the squamous vulvar intraepithelial cells, leading to unspecified grade or severity of dysplasia and varying degrees of atypia of the cells. This condition is associated with smoking and immunosuppression, or conditions such as human papillomavirus, chronic vulvar irritation, or herpes simplex virus type 2. Confirmation is by tissue biopsy.

Exclusions: Vulvar intraepithelial neoplasia grade II-III (2E67.10)

GA13.2 Hypertrophy of vulva

A condition of the vulva that is frequently idiopathic. This condition is characterised by enlargement or thickening of the tissues of all or part of the female external genitalia, such as the clitoris, labia, vestibule, or glands. This condition may also present with a patchy white discolouration, itching, pain or burning of the skin.

GA13.3 Vulvar cyst

Closed, fluid filled sac located on or in the vulvar tissue.

GA13.4 Labial agglutination

Sign of agglutination of labia minora and/or majora as a result of chronic vulvar inflammation from any cause, usually observed in prepubertal girls.

GA13.5 Skene duct cyst

Cystic dilations of the Skene glands, typically located adjacent to the urethral meatus within the vulvar vestibule. Mostly small and often asymptomatic, they may enlarge urinary obstruction, requiring excision.

GA13.6 Vulvar laceration

An injury to the vulva, caused by trauma due to childbirth, sexual abuse, or forceful impact. This injury is characterised by tearing of the skin, muscle, or other tissue in the vulvar area.

GA13.7 Vulvar haematoma

An injury to the vulvar branches of the internal pudendal or inferior rectal arteries, caused by rupture and trauma due to childbirth, sexual abuse, or forceful impact. This injury is characterised by a localised collection of extravasated blood vessels and significant bruising. This injury may also present with an inability to urinate.

GA13.Y Other specified acquired abnormalities of vulva or perineum

GA13.Z Acquired abnormalities of vulva or perineum, unspecified

GA14 Acquired abnormalities of vagina

Any condition of the vagina, caused by determinants arising after birth. These conditions are characterised by pathological changes to the vagina.

Coded Elsewhere: Postoperative adhesions of vagina (GC70)

Prolapse of vaginal vault after hysterectomy (GC71)

Vaginal intraepithelial neoplasia grade I (2F33.1)

Vaginal intraepithelial neoplasia grade II (2E67.20)

Vaginal intraepithelial neoplasia grade III (2E67.21)

GA14.0 Polyp of vagina

GA14.1 Haematocolpos

A condition of the vagina, caused by an outflow vaginal obstruction. This condition is characterised by the presence of blood in the vagina.

GA14.2 Vaginal foreign body

A condition of the vagina, caused by foreign bodies lodged into the vaginal canal. This condition is characterised by vaginitis, vaginal bleeding, foul-smelling and purulent vaginal discharge, abdominal pain, and supra-pubic pain. This condition may also present with dysuria or infection.

GA14.3 Vaginal haematoma

A condition of the vagina, caused by trauma, commonly subsequent to childbirth, sexual abuse, or forceful impact. This condition is characterised by a localised collection of extravasated blood vessels and significant bruising. This condition may also present with pain, swelling, ecchymosis and urinary retention.

GA14.5 Leukoplakia of vagina

A condition of the vagina, caused by hyperkeratinisation of epithelial cells due to human papillomavirus (HPV) infection, chronic trauma, radiotherapy, or premalignant/ malignant lesions. This condition is characterised by white, whitish yellow, or grey plaque on the mucosal surfaces in the vagina.

GA14.Y Other specified acquired abnormalities of vagina

GA14.Z Acquired abnormalities of vagina, unspecified

GA15 Acquired abnormalities of cervix uteri

GA15.0 Polyp of cervix uteri

GA15.1 Erosion or ectropion of cervix uteri

A condition of the cervix uteri, caused by an increase in the total estrogen level in the body. This condition is characterised by protrusion and transformation of the endocervical columnar epithelium to stratified squamous epithelium on the cervix uteri. This condition may also present with non-purulent vaginal discharge, post-coital bleeding, or may be asymptomatic.

Exclusions: Cervicitis (GA04)

GA15.2 Nabothian cyst

GA15.3 Old laceration of cervix uteri

An injury of the cervix, caused by trauma subsequent to procedures that lacerate the cervix, such as vaginal delivery, induced abortion, or surgery. This condition is characterised by tearing of the cervix uteri tissue.

Exclusions: Perineal laceration during delivery (JB09)

GA15.4 Stricture or stenosis of cervix uteri

A condition of the cervix uteri, caused by inflammation, trauma, scarring, or atrophy. This condition is characterised by narrowing of the cervical ostium.

Exclusions: Obstructed labour due to abnormality of maternal pelvic organs (JB05.5)

GA15.5 Hypertrophic elongation of cervix uteri

A condition of the cervix uteri, caused by uterine prolapse. This condition is characterised by hypertrophy, hyperplasia, elongation or strain to the vaginal or supravaginal parts of the cervix uteri. This condition may also present with dyspareunia or infertility. Confirmation is by pelvic examination to differentiate between vaginal or supravaginal elongation.

GA15.6 Incompetence of cervix uteri

A condition of the cervix uteri, caused by the weakness of the cervical tissue and intrauterine pressure as pregnancy progresses. This condition is characterised by dilation and effacement of the cervix before reaching a term pregnancy. This condition may lead to a miscarriage during the second trimester, or an early preterm birth during the third trimester.

Exclusions: Fetus or newborn affected by incompetence of cervix uteri (KA01.0)

Maternal care for cervical incompetence (JA84.3)

GA15.7 Dysplasia of cervix uteri

A condition of the cervix uteri caused by chronic infection. This condition is characterised by premalignant transformation and abnormal cell growth and behaviour of the cervical squamous epithelial tissue.

Exclusions: Carcinoma in situ of cervix uteri (2E66)

Coded Elsewhere: Cervical Intraepithelial neoplasia grade I (2F31.00)

Cervical Intraepithelial neoplasia grade II (2E66.0)

Cervical intraepithelial neoplasia grade III (2E66.1)

GA15.Y Other specified acquired abnormalities of cervix uteri

GA15.Z Acquired abnormalities of cervix uteri, unspecified

GA16 Acquired abnormalities of uterus, except cervix

Any condition of the uterus, caused by determinants arising after birth. These conditions are characterised by a malfunction, malformation, or another anomaly of the uterus (excluding the cervix).

Coded Elsewhere: Adenomyosis (GA11)

Leiomyoma of uterus (2E86.0)

Acquired absence of the uterus (QF01.10)

GA16.0 Endometrial glandular hyperplasia

A condition of the uterus, caused by chronic, excess oestrogen stimulation due to obesity, anovulation, or oestrogen therapy. This condition is characterised by excessive proliferation of the endometrial gland cells and a greater gland-to-stroma ratio of endometrial cells. This condition may also present with abnormal uterine bleeding, particularly among postmenopausal women and premenopausal women of increasing age. Confirmation is by sampling endometrial tissue through biopsy or dilation and curettage.

GA16.1 Malposition of uterus

A condition of the uterus, caused by weakened pelvic ligaments, enlargement of the uterus, scarred pelvic tissue from pregnancy, tumour, menopause, endometriosis, inflammation, or salpingitis. This condition is characterised by a deviation in the position of the uterus from normal.

Exclusions: Obstructed labour due to abnormality of maternal pelvic organs (JB05.5)

Maternal care for other abnormalities of pelvic organs (JA84)

GA16.2 Intrauterine synechiae

Intrauterine adhesions caused by pelvic inflammatory disease, uterine surgery, or complications related to spontaneous, incomplete or induced abortion. May be asymptomatic or associated with amenorrhea or light menstrual bleeding and subfertility.

GA16.3 Haematometra

Presence of blood clots inside the uterus, usually caused by a uterine outflow obstruction.

Exclusions: haematometra with haematocolpos (GA14.1)

GA16.Y Other specified acquired abnormalities of uterus, except cervix

GA16.Z Acquired abnormalities of uterus, except cervix, unspecified

GA17 Acquired abnormalities of fallopian tube

A condition of the fallopian tube, caused by determinants arising after birth. This condition is characterised by a malfunction, malformation, or another anomaly.

GA17.0 Acquired parafimbrial cyst of the fallopian tube

Cyst located on the fallopian tube at the outside of the fimbrial end.

GA17.1 Fimbrial agglutination

Agglutination of fimbriae in the presence of an open or closed fallopian tube

GA17.2 Hydrosalpinx

A condition of the fallopian tube, caused by a distal occlusion and the release of purulent material following infection. This condition is characterised by the presence of fluid inside the fallopian tube, and pelvic pressure, pelvic pain, or dyspareunia.

GA17.3 Haematosalpinx

A condition of the Fallopian tube, caused by tubal pregnancy, endometriosis, tubal carcinoma, or cryptomenorrhoea. This condition is characterised by bleeding and the presence of blood clots inside the Fallopian tubes, and pelvic pain or uterine bleeding. Confirmation is by imaging.

Exclusions: haematosalpinx with haematocolpos (GA14.1)

haematosalpinx with haematometra (GA16.3)

GA17.Y Other specified acquired abnormalities of fallopian tube

GA17.Z Acquired abnormalities of fallopian tube, unspecified

GA18 Acquired abnormalities of ovary

Any condition of the ovary, caused by determinants arising after birth. These conditions are characterised by a malfunction, malformation, or another anomaly of the ovary.

Coded Elsewhere: Polycystic ovary (5A80.2)

Cystic teratoma (2F32.0)

Ovarian fibroma (2F32.1)

Meigs' Syndrome (2F32.2)

Serous ovarian cystadenoma (2F32.3)

GA18.0 Follicular cyst of ovary

A condition of the ovary, caused by a follicular growth or involution due to failure of ovulation. This condition is characterised by the non-neoplastic formation of closed sac-like structures filled with fluid on or in the ovary and lined by layers of granulosa cells. This condition is commonly asymptomatic, but may also present with pelvic pain, irregular menstrual bleeding, dyspareunia, nausea, vomiting, or urgency to urinate. Confirmation is by imaging.

Inclusions: Cyst of graafian follicle

GA18.1 Corpus luteum cyst

A condition affecting females, caused by the expansion of the corpus luteum with air, blood, or fluid in the ovary after ovulation of a follicle. This condition is characterised by a mass of up to 10 cm in diameter. This condition may also present with pelvic or abdominal pain, haemorrhage, or ovarian torsion.

GA18.2 Theca lutein cyst

Least common of functional ovarian cysts, usually bilateral and coexistent with pregnancy, including molar pregnancies. May be quite large (up to 30 cm), are multicystic and disappear spontaneously.

GA18.4 Para ovarian cyst

GA18.5 Torsion of ovary, ovarian pedicle or fallopian tube

A condition of the ovary, ovarian pedicle, and fallopian tube, caused by a benign ovarian cyst or ovarian hyperstimulation. This condition is characterised by the partial or complete rotation of the ovarian vascular pedicle and abdominal pain. Confirmation is by imaging.

GA18.6 Other or unspecified ovarian cysts

Any collection of fluid, surrounded by a very thin wall, within an ovary, which is not classified elsewhere. This includes any ovarian follicle that is larger than about two centimetres in diameter.

Exclusions: Polycystic ovary syndrome (5A80.1)

ovarian cyst: developmental (LB45.2)

ovarian cyst: neoplastic (2C73)

GA18.7 Acquired atrophy of ovary or fallopian tube

A condition of the ovary and Fallopian tube, caused by determinants such as infection, chemotherapy or radiation therapy, or shock, arising after birth. This condition is characterised by the partial or complete decrease in size and function of the ovary and the Fallopian tube, premature menopause, fatigue, irregular menstruation, weight gain, and irritability. Confirmation is by identification of elevated levels of oestrogen and follicle stimulating hormone levels in a blood sample.

GA18.Y Other specified acquired abnormalities of ovary

GA18.Z Acquired abnormalities of ovary, unspecified

GA19 Acquired abnormalities of broad ligament

Coded Elsewhere: Postprocedural pelvic peritoneal adhesions (GC73)

GA19.0 Haematoma of broad ligament

A condition affecting females, caused by childbirth, trauma, or surgery. This condition is characterised by a tear in the upper vagina, cervix, or uterus that extends into uterine or vaginal arteries, bleeding (although not always with obvious vaginal bleeding), back pain, pressure in the rectoanal area, dizziness, hypotension, or anaemia. Confirmation is by rectovaginal exam to rule out clotting and expansion of haematoma.

GA19.Y Other specified acquired abnormalities of broad ligament

GA19.Z Acquired abnormalities of broad ligament, unspecified

GA1Y Other specified noninflammatory disorders of female genital tract

GA1Z Noninflammatory disorders of female genital tract, unspecified

Abnormal uterine or vaginal bleeding (BlockL2‑GA2)

A condition of the genital system, caused by hormonal disturbances, weight changes, neoplasms, or use of pharmacological agents. This condition is characterised by irregular or excessive shedding of the uterine lining, or vaginal bleeding during or between menstrual cycles.

Exclusions: pseudomenses (KA83.9)

neonatal vaginal haemorrhage (KA83.9)

Coded Elsewhere: Postmenopausal uterine bleeding (GA30.1)

GA20 Menstrual cycle bleeding disorders

GA20.0 Amenorrhoea

A condition of the genital system, caused by hormonal or endocrine disturbances, absence of the uterus, pregnancy, lactation, abnormalities of the genital outflow tract, or failure of the ovaries to retain egg cells during the antenatal period. This condition is characterised by the absence of menstruation by age 16, or the termination of an established menstruation cycle for more than 3-9 months.

Exclusions: Ovarian dysfunction (5A80)

Coded Elsewhere: Amenorrhoea related to obstetric fistula (GC04.1Y)

GA20.00 Primary amenorrhoea

No menses by age 14 in the absence of growth or development of secondary sexual characteristics ; OR; no menses by age 16 regardless of the presence of normal growth and development of secondary sexual characteristics

Coded Elsewhere: 46,XX gonadal dysgenesis (LB45.1)

GA20.01 Secondary amenorrhoea

In women who have menstruated previously, no menses for an interval of time equivalent to a total of at least 3 previous cycles, or 6 months

Coding Note: Code aslo the casusing condition

GA20.02 Lactational amenorrhoea

A condition of the genital system affecting females, caused by hormonal disturbances associated with lactation. This condition is characterised by the termination of an established menstruation cycle for more than 3-9 months.

GA20.0Y Other specified amenorrhoea

GA20.0Z Amenorrhoea, unspecified

GA20.1 Abnormal frequency of uterine bleeding

Any condition of the genital system affecting females, caused by hormonal disturbances. These conditions are characterised by menstrual bleeding episodes that occur with increased frequency or are delayed over several menstrual cycles (within 90 days).

GA20.10 Frequent menstrual bleeding

A condition of the genital system affecting females, caused by hormonal change due to pharmacologic or nonpharmacologic agents. This condition is characterised by menstrual bleeding episodes that occur with increased frequency over several menstrual cycles (more than four episodes within 90 days).

GA20.11 Infrequent menstrual bleeding

Menstruation with a frequency of 39 days or more

GA20.1Z Abnormal frequency of uterine bleeding, unspecified

GA20.2 Ovulation bleeding

A condition of the genital system affecting females, caused by natural and routine fluctuations in endocrine hormones. This condition is characterised by recurrent and cyclic bleeding of the uterine lining, occurring during the peri-ovulatory period.

GA20.20 Intermenstrual bleeding

A condition of the genital system affecting females, caused by a hormonal imbalance, use of an intrauterine device, pregnancy complications, uterine fibroids or polyps, infection, or cancer. This condition is characterised by vaginal bleeding between menstrual periods.

GA20.2Y Other specified ovulation bleeding

GA20.2Z Ovulation bleeding, unspecified

GA20.3 Abnormal regularity of uterine bleeding

A condition of the genital system affecting females, caused by hormonal disturbances. This condition is characterised by abnormal menstruation, with a between cycle variation of 2-20 days.

GA20.4 Abnormal duration of uterine bleeding

GA20.5 Abnormal volume of uterine bleeding

GA20.50 Heavy menstrual bleeding

Menstruation with heavy (> 80 ml) volume of monthly blood loss

GA20.51 Light menstrual bleeding

Menstruation with light (< 5 ml) volume of monthly blood loss

GA20.5Z Abnormal volume of uterine bleeding, unspecified

GA20.Y Other specified menstrual cycle bleeding disorders

GA20.Z Menstrual cycle bleeding disorders, unspecified

GA21 Nonmenstrual bleeding disorders

Coded Elsewhere: Postprocedural nonmenstrual uterine bleeding (GC77)

GA21.0 Postcoital or contact bleeding

A condition of the genital system, caused by infection, cervical ectropion, cervical or endometrial polyps, cancer, or trauma to the cervix or vagina. This condition is characterised by non-menstrual bleeding after sexual intercourse. Confirmation is by transvaginal imaging to identify any structural abnormalities.

GA21.Y Other specified nonmenstrual bleeding disorders

GA21.Z Nonmenstrual bleeding disorders, unspecified

GA22 Excessive menstruation with irregular cycle

Inclusions: Menometrorrhagia

GA23 Anovulatory bleeding

GA2Y Other specified abnormal uterine or vaginal bleeding

GA2Z Abnormal uterine or vaginal bleeding, unspecified

GA30 Menopausal or certain specified perimenopausal disorders

Any disorder affecting females, characterised by pathological changes during the menopausal and perimenopausal periods.

Coded Elsewhere: Postprocedural ovarian failure (5D44)

Menopausal symptom or complaint (MF32)

GA30.0 Menopause

A condition affecting females, caused by the loss of ovarian follicular function and decline in circulating blood oestrogen levels. This condition is characterised by the cessation of menstruation, hot flushes, atrophic genital changes, psychophysiological effects, and bone loss. Confirmation is by taking a patient history to determine psychophysiological effects such as the presence of amenorrhoea, and identification of hypooestrogenaemia and elevated serum FSH levels in a blood sample.

Coded Elsewhere: Contact with health services for menopausal counselling (QA4B)

GA30.00 Menopausal or female climacteric states

Any condition of the genital system affecting females, caused by pathological changes associated with the perimenopausal period, such as the permanent cessation of menstruation and infertility.

Coding Note: Includes: Symptoms such as flushing, sleeplessness, headache, lack of concentration, associated with menopause

Exclusions: States associated with artificial menopause (GA30.3)

GA30.01 Menopausal transition

A condition affecting females, caused by gradual loss of ovarian follicular function and decline in circulating blood estrogen levels. This condition is characterised by infrequent or irregular menstrual bleeding, alterations in the functioning of the ovary, and gradual atrophic genital changes, psychophysiological effects. Confirmation is by taking a patient history to determine psychophysiological effects.

GA30.02 Excessive bleeding in the premenopausal period

aka ""menorrhagia"", excessive uterine bleeding during MENSTRUATION

GA30.0Y Other specified menopause

GA30.0Z Menopause, unspecified

GA30.1 Postmenopausal uterine bleeding

A condition of the genital system, caused by polyps, endometrial atrophy, hyperplasia, or cancer. This condition is characterised by abnormal uterine bleeding subsequent to the completion of menopause.

Exclusions: that associated with artificial menopause (GA30.3)

GA30.2 Postmenopausal atrophic vaginitis

A condition of the vagina, caused by decreased oestrogen levels during the menopausal period. This condition is characterised by inflammation of the vagina and outer urinary tract, thinning and drying of the vaginal tissues, decreased lubrication, vaginal burning or dryness, shortening and tightening of the vaginal canal, or urinary incontinence after menopause.

Exclusions: States associated with artificial menopause (GA30.3)

GA30.3 States associated with artificial menopause

Any condition caused by the artificial cessation of menstruation induced by surgical or pharmacological effects.

GA30.4 Menopausal hot flush

A condition affecting females, caused by hormonal changes associated with menopause. This condition is characterised by recurrent and transient periods of flushing, sweating, and a systemic sensation of heat. This condition may also present with palpitations, anxiety, or periods of heat followed by chills.

GA30.5 Menopausal osteoporosis

GA30.6 Premature ovarian failure

Menopause occurring spontaneously before 40 years of age, generally resulting in secondary amenorrhea although some women may exhibit intermittent ovarian function and ovulation, with a minority conceiving and delivering a pregnancy. POF/POI occurs mostly without a known cause, but can be caused by the following conditions: numerical and structural chromosomal abnormalities, Fragile X (FMR1) premutations, autoimmune disorders, radiation therapy, chemotherapy, galactosemia, and other rare enzyme defects or mutations. To be subdivided in 4 categories according to cause: congenital, acquired, iatrogenic and unknown

Exclusions: Isolated gonadotropin deficiency (5A61.0)

Postprocedural ovarian failure (5D44)

Coded Elsewhere: Primary amenorrhoea (GA20.00)

Secondary amenorrhoea (GA20.01)

GA30.Y Other specified menopausal and perimenopausal disorders

GA30.Z Menopausal and perimenopausal disorders, unspecified

GA31 Female infertility

Disease of the reproductive system defined by the failure to achieve a clinical pregnancy after 12 months or more of regular unprotected sexual intercourse.

Inclusions: inability to achieve a pregnancy

Exclusions: relative infertility (GA33)

Male infertility (GB04)

Coded Elsewhere: Contact with health services for preconception counselling (QA33)

Contact with health services for fertility preservation counselling (QA34)

Contact with health services by gestational carrier (QA35)

Female hypofertility in classical cystic fibrosis (CA25.0)

Female hypofertility in atypical cystic fibrosis (CA25.1)

Contact with health services for preimplantation genetic diagnosis (QA3Y)

Contact with health services for preimplantation genetic screening (QA3Y)

GA31.0 Primary female infertility

Infertility in a woman who has never had a clinical pregnancy

GA31.00 Primary female infertility of uterine origin

Female infertility caused by uterine abnormalities on the level of the endometrium or myometrium, with more detailed description classified elsewhere, i.e. under genitourinary infections, STDs and noninflammatory benign gynaecological disease

Coding Note: Code aslo the casusing condition

GA31.01 Primary female infertility of tubal origin

Female infertility caused by dysfunction of one or both fallopian tubes, usually related to pelvic adhesions or occurring after pelvic surgery, with or without hydrosalpinx

Coding Note: Code aslo the casusing condition

GA31.0Y Primary female infertility of other specified origin

GA31.0Z Primary female infertility of unspecified origin

GA31.1 Secondary female infertility

Infertility in a woman who has had at least one clinical pregnancy

GA31.10 Secondary female infertility of uterine origin

GA31.11 Secondary female infertility of tubal origin

GA31.1Y Secondary female infertility of other specified origin

GA31.1Z Secondary female infertility of unspecified origin

GA31.Z Female infertility without specification whether primary or secondary

GA32 Complications associated with medically assisted reproduction

Any complication caused by or subsequent to any intervention used to achieve pregnancy by artificial or partially artificial means.

GA32.0 Ovarian hyperstimulation syndrome

A disease of the endocrine system, caused by elevated human chorionic gonadotropin hormone, commonly after the use of injectable fertility treatments. This disease is characterised by ovarian enlargement, and hemodynamic or metabolic complications. This disease may also present with abdominal pain, abdominal bloating, or weight gain depending on graded symptoms.

Inclusions: Hyperstimulation of ovaries associated with induced ovulation

GA32.1 Bleeding after egg retrieval

Significant bleeding after egg retrieval requiring hospitalization for blood transfusion, surgical intervention, clinical observation or other medical procedure

GA32.2 Infection associated with medically assisted reproduction

Significant genital or pelvic infection occurring after egg retrieval or other treatment with medically assisted reproduction

GA32.3 Complications of attempted embryo transfer or medically assisted insemination

Any complication caused by or subsequent to any attempted embryo transfer or medically assisted sperm insemination procedure.

GA32.Y Other specified complications associated with medically assisted reproduction

GA32.Z Complications associated with medically assisted reproduction, unspecified

GA33 Recurrent pregnancy loss

Exclusions: currently pregnant (Chapter 18)

with current abortion (BlockL1‑JA0)

GA34 Female pelvic pain associated with genital organs or menstrual cycle

A symptom affecting females, characterised by pain in the pelvic region associated with any of the genital organs or the menstrual cycle.

Coded Elsewhere: Interstitial cystitis (GC00.3)

GA34.0 Pain related to vulva, vagina or pelvic floor

A condition affecting females, characterised by any type of pain associated with the vulva, vagina, and pelvic floor tissues, either during sexual intercourse, physical activity, or rest.

GA34.00 Vulval pain

A symptom of vulval pain affecting females, caused by trauma, infection, injury, inflammation, or hypersensitivity of the nerve fibres. This symptom is characterised by any type of pain in the vulva, during sexual intercourse, physical activity, or rest.

GA34.01 Perineal pain

A symptom of perineal pain affecting females, caused by trauma, infection, injury, inflammation, or hypersensitivity of the nerve fibres. This symptom is characterised by any type of pain in the area between the posterior lip of the vaginal introitus and the anus, during sexual intercourse, physical activity, or rest.

GA34.02 Vulvodynia

Vulvodynia describes a chronic sensation of pain, burning or rawness of vulval skin which cannot be ascribed to any specific cause and persists for at least three months. Symptoms may be diffuse and unprovoked (dysaesthetic vulvodynia) or localised, usually to the vulval vestibule, and provoked by touch (vestibulodynia). Dysaesthetic vulvodynia characteristically occurs in postmenopausal women who are often not sexually active: pain is spontaneous and often occurs independently of touch. Vestibulodynia occurs typically in younger women and is characterised by vestibular tenderness to touch, erythema of the vestibular epithelium and secondary dyspareunia.

GA34.0Y Other specified pain related to vulva, vagina or pelvic floor

GA34.0Z Pain related to vulva, vagina or pelvic floor, unspecified

GA34.1 Vaginal laxity

GA34.2 Female pelvic pain

Pain in the pelvic region in a female associated with any of the genital organs or the menstrual cycle.

Exclusions: Pain related to vulva, vagina or pelvic floor (GA34.0)

Pelvic or perineal pain (MD81.11)

Bladder pain (MF52)

Chronic primary bladder pain syndrome (MG30.00)

Sexual pain-penetration disorder (HA20)

Coded Elsewhere: Chronic pelvic pain in females (MG30.00)

GA34.20 Cyclic pelvic pain

A symptom affecting females, caused by gynaecological and physiological aspects associated with the menstrual cycle such as dysmenorrhoea or mittelschmertz. This symptom is characterised by recurrent pain in the pelvis, anterior abdominal wall, lower back, or buttocks, associated with a specific moment or period of time.

GA34.21 Noncyclic pelvic pain

A symptom affecting females, caused by gynaecological and physiological aspects not associated with the menstrual cycle. This symptom is characterised by chronic pelvic pain in the pelvis, anterior abdominal wall, lower back, or buttocks, not associated with a specific moment or period of time.

GA34.2Z Female pelvic pain, unspecified

GA34.3 Dysmenorrhoea

A condition of the genital system affecting females, caused by endometriosis, adenomyosis, ovarian cysts, or may be idiopathic. This condition is characterised by cyclic pelvic pain preceding or accompanying menstruation that interferes with daily activities, lower, umbilical, or suprapubic abdominal pain, such as sharp, throbbing, burning, or shooting pains that may extend to the thighs and lower back.

GA34.4 Premenstrual disturbances

GA34.40 Premenstrual tension syndrome

A syndrome affecting females that is frequently idiopathic. This syndrome is characterised by certain environmental, metabolic, or behavioural factors that occur during the luteal phase of the menstrual cycle, and leads to cyclic emotional, physical, or behavioural symptoms that interfere with an individual's lifestyle. Confirmation is by documentation of specific cyclic symptoms associated with the luteal and menstrual phases of the cycle (from a prospective symptom diary), and evidence of socioeconomic dysfunction.

Exclusions: Premenstrual dysphoric disorder (GA34.41)

Coded Elsewhere: Premenstrual symptom or complaint (MF33)

GA34.41 Premenstrual dysphoric disorder

During a majority of menstrual cycles within the past year, a pattern of mood symptoms (depressed mood, irritability), somatic symptoms (lethargy, joint pain, overeating), or cognitive symptoms (concentration difficulties, forgetfulness) that begin several days before the onset of menses, start to improve within a few days after the onset of menses, and then become minimal or absent within approximately 1 week following the onset of menses. The temporal relationship of the symptoms and luteal and menstrual phases of the cycle should ideally be confirmed by a prospective symptom diary over at least two symptomatic menstrual cycles. The symptoms are severe enough to cause significant distress or significant impairment in personal, family, social, educational, occupational or other important areas of functioning and do not represent the exacerbation of a mental disorder.

Inclusions: PMDD - [premenstrual dysphoric disorder]

Exclusions: Premenstrual tension syndrome (GA34.40)

GA34.4Y Other specified premenstrual disturbances

GA34.4Z Premenstrual disturbances, unspecified

GA34.5 Ovarian remnant syndrome

Chronic pelvic pain in a patient after bilateral salpingooophorectomy for severe endometriosis or PID, caused by residual ovarian cortical tissue left in situ after difficult dissection. Symptoms may include lateralizing pelvic pain, often cyclic and associated with genitourinary or gastrointestinal symptoms. Signs may include a tender mass in the lateral region of the pelvis.

GA34.6 Female genital pain

A symptom of genital pain affecting females that is idiopathic. This symptom is characterised by any type of pain in the genital area tissues, during sexual intercourse, physical activity, or rest.

GA34.Y Other specified female pelvic pain associated with genital organs or menstrual cycle

GA34.Z Female pelvic pain associated with genital organs or menstrual cycle, unspecified

Dermatoses of female genitalia (BlockL2‑GA4)

Coded Elsewhere: Malignant neoplasms of vulva (2C70)

Carcinoma in situ of vulva (2E67.1)

GA40 Inflammatory dermatoses of the vulva

Coded Elsewhere: Dermatitis or eczema of female genitalia (EA87.1)

Lichen sclerosus of vulva (EB60.0)

Vulval psoriasis (EA90.53)

GA41 Ulcerative or erosive disorders of the vulva

Coded Elsewhere: Genital ulcer of vulva (GA00.3)

Herpes simplex infection of vulva (1A94.0)

Erosive lichen planus of vulva or vagina (EA91.3)

Ulceration of vulva due to Behçet disease (4A62)

Vulval pemphigus (EB40.0Y)

Mucous membrane pemphigoid of vulval mucosa (EB41.1)

GA41.0 Vulval aphthosis

Vulval aphthae are vulval ulcers not attributable to infection or other identifiable cause. They typically occur on the medial aspects of the labia minora in young females (second decade of life). They may be associated with fever and malaise or with oral aphthae.

GA41.Y Other specified ulcerative or erosive disorders of the vulva

GA42 Sensory disturbance of the vulva

Disorders characterised by vulval pruritus, dysaesthesia or pain.

Coded Elsewhere: Lichen simplex of vulva (EA83.00)

Vulvodynia (GA34.02)

GA42.0 Vulval pruritus

Intense itching of the external female genitalia.

GA43 Miscellaneous dermatoses of female genitalia

Coded Elsewhere: Vulval melanotic macule (ED61.11)

Heterotopic sebaceous glands of vulva (ED91.0)

GA4Y Other specified dermatoses of female genitalia

GA6Y Other specified diseases of the female genital system

GA6Z Diseases of the female genital system, unspecified

Diseases of the male genital system (BlockL1‑GA8)

Any disease characterised by pathological changes to the male genital system.

Coded Elsewhere: Neoplasms of the male genital organs

Ejaculatory dysfunctions (HA03)

Problems of male genital organs (MF40)

Structural developmental anomalies of the male genital system (LB50-LB5Z)

Symptoms, signs or clinical findings involving the male genital system (MF40-MF4Y)

Herpes simplex infection of genitalia or urogenital tract (1A94.0)

Dermatoses of male genitalia (BlockL2‑GA8)

Coded Elsewhere: Inflammatory dermatoses affecting the penis or scrotum

Premalignant or malignant disorders of the penis or scrotum

Balanoposthitis (GB06.0)

GA80 Ulcerative disorders of the penis or scrotum

Coded Elsewhere: Herpes simplex infection of penis (1A94.0)

Mucous membrane pemphigoid of penile mucosa (EB41.1)

Ulceration of penis or scrotum due to Behçet disease (4A62)

Necrotising fasciitis of the scrotum, penis or perineum (1B71.1)

Amoebiasis of penis (1A36.1Y)

GA80.0 Aphthosis of penis or scrotum

Genital aphthosis in men is a non-infective but often painful ulceration of penile, scrotal or perigenital skin. It may be associated with oral ulceration (orogenital aphthosis) or with Behçet disease but may occur on its own. Both genital and orogenital aphthosis may represent formes frustes of Behçet disease.

Inclusions: Penile or scrotal ulceration due to Behçet disease

Genital aphthosis in the male

GA80.1 Ulcer of penis of uncertain nature

Exclusions: Syphilitic chancre of penis (1A61.0)

Penile chancroid (1A90)

Herpetic ulcer of penis (1A94.0)

Penile aphthosis (GA80.0)

Ulceration of penis or scrotum due to Behçet disease (4A62)

GA80.Y Other specified ulcerative disorders of penis and scrotum

GA81 Miscellaneous dermatoses of male genitalia

Coded Elsewhere: Lichen simplex of male genitalia (EA83.01)

Penile melanotic macule (ED61.10)

Heterotopic sebaceous glands of penis (ED91.0)

Angiokeratoma of the scrotum (EF20.1)

Burning scrotum (EC92.0)

Genitoperineal median raphe cyst (LB5Y)

GA81.0 Penoscrotal pruritus

An intense itching sensation that produces the urge to rub or scratch the skin of the scrotum and/ or base of the penis to obtain relief.

GA81.Y Other specified dermatoses of male genitalia

Diseases of prostate (BlockL2‑GA9)

Coded Elsewhere: Tuberculosis of prostate (1B12.5)

GA90 Hyperplasia of prostate

A condition of the prostate, caused by an increased rate of cellular division of the glandular and stromal cells. This condition is characterised by enlargement of the prostatic tissue, dysuria, urinary urgency, nocturia, weak urine stream, straining while urinating, incomplete bladder emptying during urination, or increased frequency of urinary tract infection.

Inclusions: Adenofibromatous hypertrophy of prostate

Exclusions: Benign neoplasms of prostate (2F34)

GA91 Inflammatory and other diseases of prostate

Any disease caused by obstruction of the prostate gland. These diseases are characterised by a build-up of secretions and inflammation of the prostate.

Coding Note: Code aslo the casusing condition

Coded Elsewhere: Gonococcal prostatitis (1A70.Y)

Prostatitis due to Trichomonas vaginalis (1A92)

GA91.0 Chronic prostatitis

A condition caused by obstruction of the prostate glands. This condition is characterised by inflammation of the prostate gland, dysuria, pollakiuria, urinary urgency, genital pain, lower back pain, abdominal pain, and repeated bladder infections that last for at least three months.

GA91.1 Abscess of prostate

A condition caused by infection with the gram-negative bacteria Neisseria gonorrhoeae, Staphylococcus, or Escherichia coli, or the gram-positive bacteria Staphylococcus aureus or Mycobacterium tuberculosis. This condition is characterised by a focal accumulation of purulent material and neutrophils within or on the prostatic tissue, dysuria, fever, and suprapubic pain. Confirmation is by a transrectal ultrasound to identify size and location of abscess, and a urine sample to identify leukocytes.

GA91.2 Prostatocystitis

A condition characterised by inflammation of the bladder, bladder neck, prostate, and prostatic urethra.

GA91.3 Calculus of prostate

A condition characterised by a small, solid calcification commonly composed of calcium carbonate or calcium phosphate that is formed in the prostate. This condition may be associated with diabetes mellitus, infection, cancer, iatrogenic factors, or may be idiopathic. Confirmation is by imaging.

Inclusions: Prostatolithiasis

GA91.4 Haemorrhage of the prostate

A condition of the prostate, caused by ruptured vessel walls in the prostate. This condition is characterised by excessive loss of blood from the prostate.

Inclusions: Bleeding of prostate

prostatic varicosis

GA91.5 Atrophy of prostate

A condition of the prostate, caused by apoptosis of the cells due to diminished cellular proliferation, decreased cellular volume, decreased function, ischemia, malnutrition, disease, mutation, or hormonal changes. This condition is characterised by a partial or complete decrease in size and function of the prostatic tissue.

GA91.6 Dysplasia of prostate

A condition of the prostate, caused by an alteration or mutation in cell growth, or prostatic epithelial cells that are dividing more rapidly than normal epithelium. This condition is characterised by premalignant transformation and abnormal development of the prostatic epithelial tissue.

Inclusions: Low grade prostatic intraepithelial neoplasia

Exclusions: high grade dysplasia of prostate (2E67.5)

PIN III (2E67.5)

high grade PIN (2E67.5)

GA91.Y Other specified inflammatory and other diseases of prostate

Coding Note: Code aslo the casusing condition

GA91.Z Inflammatory and other diseases of prostate, unspecified

Coding Note: Code aslo the casusing condition

GB00 Hydrocele or spermatocele

A condition characterised by an accumulation of serous fluid in the tunica vaginalis testis or along the spermatic cord, and cystic swelling containing fluid and dead spermatozoa of the testicular epididymis, rete testis or efferent ductuli.

Coded Elsewhere: Congenital hydrocele (KC00)

GB00.0 Encysted hydrocele

A condition of the testis, caused by inflammation or testicular epididymis, obstruction to the venous or lymphatic systems through the cord, or an abnormality during the antenatal period. This condition is characterised by a circumscribed accumulation of fluid in the tunica vaginalis testis or along the spermatic cord.

GB00.1 Infected hydrocele

GB00.2 Spermatocele

A condition characterised by cystic swelling (containing fluid and dead spermatozoa) of the epididymis, rete testis, or efferent ductuli. This condition may be associated with obstruction of the epididymal ducts due to trauma, infection, or an inflammatory process.

Exclusions: Encysted hydrocele (GB00.0)

Infected hydrocele (GB00.1)

GB00.Y Other specified hydrocele or spermatocele

GB00.Z Hydrocele or spermatocele, unspecified

GB01 Torsion of testis, epididymis or appendices

Any condition characterised by a partial or complete rotation and an occlusion to the venous or arterial blood supply of the testis, epididymis or testicular appendix.

GB01.0 Torsion of testis

A condition of the testes, caused by determinants arising during the antenatal period, or exposure to cold temperatures. This condition is characterised by twisting of the spermatic cord, ischaemia of the testis, severe pain, tenderness, and decreased or absent cremasteric reflex. Confirmation is by imaging.

Inclusions: Torsion of spermatic cord

GB01.1 Torsion of epididymis

A condition of the epididymis, caused by determinants arising during the antenatal period. This condition is characterised by twisting of the epididymis around its axis and ischaemia, scrotal pain, or inflammation. This condition may also present with a thickened scrotal wall, a reactive hydrocele, and enlargement of the head of the epididymis. Confirmation is by imaging.

GB01.2 Torsion of hydatids

A condition of the testicular appendix, caused by determinants arising during the antenatal period. This condition is characterised by twisting of the hydatid of Morgagni and pedunculated hydatid around its axis and ischaemia, testicular pain, scrotal oedema, and a palpable blue dot discolouration on the scrotum. Confirmation is by imaging.

GB01.Z Torsion of testis, epididymis or appendices, unspecified

GB02 Orchitis or epididymitis

Coding Note: Code aslo the casusing condition

Coded Elsewhere: Orchitis due to mumps virus (1D80.1)

Chlamydial epididymitis (1A81.1)

Chlamydial orchitis (1A81.1)

GB02.0 Orchitis, epididymitis or epididymo-orchitis with abscess

Inflammation of a testis and / or the epididymitis with an associated abscess, a collection of pus (neutrophils) that has accumulated within a tissue because of an inflammatory process in response to either an infectious process or other foreign materials.

GB02.Y Other specified orchitis or epididymitis

Coding Note: Code aslo the casusing condition

GB02.Z Orchitis or epididymitis, unspecified

Coding Note: Code aslo the casusing condition

GB03 Atrophy of testis

A condition of the testis, caused by apoptosis of the cells due to diminished cellular proliferation, decreased cellular volume, decreased function, ischemia, malnutrition, disease, infection, mutation, or hormonal changes. This condition is characterised by a partial or complete decrease in size and function of the testis tissue.

GB04 Male infertility

Any disorder of the reproductive system affecting males, characterised by dysfunctionalities in the ejection of semen or an abnormal absence in the measurable level of sperm in semen.

Coded Elsewhere: Male infertility in classical cystic fibrosis (CA25.0)

Male infertility in atypical cystic fibrosis (CA25.1)

GB04.0 Azoospermia

Any condition of the genital system affecting males, caused by obstruction of the reproductive tract, abnormal hormone levels, testicular failure, or inadequate production of spermatozoa. These conditions are characterised by the absence of a measurable level of sperm cells in semen, and very low levels of fertility. Confirmation is by the absence of spermatozoa in the sediment of a centrifuged sample of ejaculate.

GB04.Y Other specified male infertility

GB04.Z Male infertility, unspecified

GB05 Redundant prepuce, phimosis or paraphimosis

Several conditions of the foreskin, caused by abnormalities in the prepuce. This condition is characterised by redundant or tight foreskin and lack of retractability of the foreskin or the inability of the foreskin to be reduced.

GB05.0 Redundant prepuce

A condition of the foreskin, caused by determinants arising during the antenatal period. This condition is characterised by the presence of excess foreskin tissue.

GB05.1 Frenulum breve

A condition of the frenulum preputii penis, caused by determinants arising during the antenatal period. This condition is characterised by a short frenulum and restricted movement of the prepuce, leading to hindered penetration during sexual intercourse or pain and tearing.

GB05.2 Phimosis

A condition of the foreskin, caused by the improper development of the foreskin during the antenatal period, balanitis, lichen sclerosus, inflammation, infection, repeated catheterization, or forcible foreskin retraction. This condition is characterised by constriction of the preputial orifice and restricted movement of the prepuce over the glans. This condition may also present with difficulty urinating or dysfunctions during sexual intercourse.

GB05.3 Paraphimosis

A condition of the foreskin, caused by a narrow or inflamed foreskin, improper handling of foreskin, or retraction of the foreskin for an extended duration. This condition is characterised by an inability for the foreskin to return to its normal position after being retracted over the glans, pain, and inflammation, and may lead to gangrene.

GB05.4 Adherent prepuce

A condition in which the prepuce is adherent to the prepuce which makes it hard to retract the prepuce.

GB05.Z Redundant prepuce, phimosis or paraphimosis, unspecified

GB06 Certain specified disorders of penis

Exclusions: Redundant prepuce, phimosis or paraphimosis (GB05)

Coded Elsewhere: Male erectile dysfunction (HA01.1)

GB06.0 Balanoposthitis

Inflammation of the foreskin and/or glans penis. It may be associated with specific disorders such as lichen planus, lichen sclerosus, reactive arthritis or contact dermatitis etc. but is most commonly "non-specific".

Coded Elsewhere: Candida balanoposthitis (1F23.11)

GB06.00 Non-specific balanoposthitis

Inflammation of the glans penis and/or prepuce which cannot be attributed to a specific cause. It is usually regarded as an irritant reaction to the presence of certain microorganisms including Pseudomonas and Candida.

GB06.0Y Other specified forms of balanitis and balanoposthitis

GB06.0Z Balanoposthitis, unspecified

GB06.1 Priapism

A condition of the penis, caused by acute leukaemia, sickle cell anaemia, infection, a penile or central nervous system lesion, or the use of certain pharmacological agents. This condition is characterised by prolonged or persistent painful penile erection lasting over four hours without physical or psychological sexual arousal.

Inclusions: Painful erection

GB06.2 Penile fibromatosis

A condition characterised by induration of the corpora cavernosa of the penis producing a painful fibrous chordee within the soft tissue of the penis and inflammation of the tunica albuginea. This condition may be associated with trauma or injury to the penis. This condition may also present with pain during erection, erectile dysfunction, shortening, or abnormal curvature of the penis when erect. Confirmation is by ultrasonography.

Inclusions: Peyronie disease

Plastic induration of penis

Induratio penis plastica

GB06.3 Mondor disease of the penis

A well-recognised usually benign and self-limiting entity occurring in sexually active men and presenting with a cord-like thickening of penile veins or lymphatics located around the coronal sulcus or, less commonly, along the dorsal vein of the penis. Infrequently it may be associated with non-sexual trauma or with hypercoagulable states.

GB06.4 Chronic penile oedema

Chronic oedema localised to the penis. Proposed causes include chronic strangulation, low grade streptococcal infection with resultant irreversible lymphatic damage or primary hypoplastic lymphatics.

GB06.5 Sclerosing lymphangitis of penis

This condition presents with a usually painless serpiginous cord-like swelling in the coronal sulcus of the penis. It is typically associated with vigorous sexual intercourse. It normally resolves within a period of weeks.

GB06.Y Other specified disorders of penis

GB06.Z Disorders of penis, unspecified

GB07 Inflammatory disorders of male genital organs, not elsewhere classified

Any disorder of the male genital organs, characterised by pathological changes and inflammation of the tissue, not classified elsewhere.

Exclusions: Inflammation of penis (GB06)

Orchitis or epididymitis (GB02)

Epididymorchitis (GB02)

GB07.0 Inflammatory disorders of seminal vesicle

Any disorder of the seminal vesicle, characterised by pathological changes and inflammation of the tissue.

Coded Elsewhere: Tuberculosis of seminal vesicle (1B12.5)

GB07.1 Inflammatory disorders of spermatic cord, tunica vaginalis or vas deferens

Any disorder of the spermatic cord, tunica vaginalis and vas deferens, characterised by pathological changes and inflammation of the tissue.

Coded Elsewhere: Chylocele of tunica vaginalis in loiasis (1F66.0)

Chylocele of tunica vaginalis in filariasis due to Wuchereria bancrofti (1F66.30)

GB07.2 Inflammatory disorders of scrotum

Any disorder of the scrotum, caused by poor hygiene or chafing of the skin. This condition is characterised by superficial inflammation of the tissue.

Exclusions: Streptococcal cellulitis of skin (1B70.1)

Staphylococcal cellulitis of skin (1B70.2)

GB07.Y Other specified inflammatory disorders of male genital organs, not elsewhere classified

GB08 Vascular disorders of male genital organs

Any disorder affecting the cardiovascular and genital systems, characterised by pathological changes to the blood vessels of the male genital organs.

GB0Y Other specified diseases of the male genital system

GB0Z Diseases of the male genital system, unspecified

Disorders of breast (BlockL1‑GB2)

Any disorder characterised by pathological changes to the breast or breast tissue.

Exclusions: Certain specified disorders of breast or lactation associated with childbirth (JB46)

Coded Elsewhere: Neoplasms of the breast

GB20 Benign breast disease

Any disease affecting females, characterised by benign, noncancerous lesions in the breast, leading to pathological changes to (and discomfort of) the breast or breast tissue.

Coded Elsewhere: Breast abscess (GB21.0)

Disorders of breast augmentation (GC7A)

Disorders of breast reduction (GC79)

GB20.0 Fibrocystic change

A condition characterised by changes to the breast tissue leading to benign, noncancerous lesions in the breast. This conditions may be associated with small or large cyst formation, hyperplasia of the ductal epithelium, apocrine metaplasia of the ductal cells, papillomatosis, duct ectasia, sclerosing adenosis, or fibrosis of the stroma. This condition may also present with breast pain, thickening of breast tissue, or nipple discharge that worsen prior to menstruation, or may be asymptomatic. Confirmation is by clinical breast exam, followed by mammography or ultrasonography to distinguish between abnormal tissue.

GB20.1 Fibroadenosis of breast

Exclusions: Fibroadenoma of breast (2F30.5)

GB20.Y Other specified benign breast disease

GB20.Z Benign breast disease, unspecified

GB21 Inflammatory disorders of breast

Any disorder of the breast or breast tissue, characterised by inflammatory effects, pain, heat, redness, swelling, and loss of function.

Coded Elsewhere: Nonpurulent mastitis associated with childbirth (JB45.1)

Neonatal infectious mastitis (KA65.3)

GB21.0 Breast abscess

A condition of the breast, caused by inflammation due to infection with a bacterial or parasitic host, or contact with other foreign materials. This condition is characterised by a focal accumulation of purulent material within or on the breast tissue.

Coded Elsewhere: Abscess of breast associated with childbirth (JB45.0)

GB21.Y Other specified inflammatory disorders of breast

GB21.Z Inflammatory disorders of breast, unspecified

GB22 Hypertrophy of breast

A condition affecting the breast, characterised by unilateral or bilateral enlargement or thickening of the connective tissues that exceeds 3% of the total body weight. This condition may be associated with increased histologic sensitivity to, or abnormally high levels of, prolactin, estrogen, and progesterone in the blood.

GB23 Certain specified disorders of breast

Any disorder of the breast or breast tissue, characterised by pathological changes, not classified elsewhere.

Coded Elsewhere: Other signs or symptoms in breast (MF3Y)

GB23.0 Mammary duct ectasia

A condition of the breast, caused by lipid and cellular debris or secretory (such as colostrum) stasis, or a nonspecific duct widening process. This condition is characterised by obstruction and subsequent dilation of the lactiferous duct, periductal inflammation, periductal fibrosis, nipple retraction, inversion, pain, or bloody discharge from the nipple.

GB23.1 Fissure or fistula of nipple

A condition characterised by the formation of a deep furrow or crack-like lesion on the nipple and an abnormal passage between the nipple and adjacent tissues or surfaces.

GB23.2 Fat necrosis of breast

A condition of the breast, caused by saponification of fat tissue, commonly subsequent to trauma or radiation therapy. This condition is characterised by damage, death, or inflammation of the fat tissue by blood and tissue digestive enzymes, and the development of scar tissue and lesions. Confirmation is by imaging of the breast and needle aspiration.

GB23.3 Atrophy of breast

A condition of the breast, caused by apoptosis of the cells commonly due to prolonged estrogen reduction, diminished cellular proliferation, decreased cellular volume, decreased function, ischaemia, malnutrition, disease, or mutation. This condition is characterised by a partial or complete decrease in size and function of the breast tissue.

GB23.4 Galactorrhoea not associated with childbirth

A condition of the breast, characterised by persistent and abnormal secretion of white discharge. In females, the secretions occur between intervals of neonate or infant nursing, or after the infant has stopped breastfeeding. In males and children, these secretions occur spontaneously. This condition is not associated with the physiological changes as part of pregnancy, childbirth, or the puerperium.

GB23.5 Mastodynia

The symptom of breast pain. This symptom may be classified as cyclic or non-cyclical depending on the clinical patterns.

GB2Z Disorders of breast, unspecified

Diseases of the urinary system (BlockL1‑GB4)

Any disease characterised by pathological changes to the urinary system.

Coded Elsewhere: Neoplasms of the urinary system

Clinical findings on examination of urine, without diagnosis (MF90-MF9Y)

Structural developmental anomalies of the urinary system (LB30-LB3Z)

Symptoms, signs or clinical findings involving the urinary system (MF50-MF5Y)

Hypertensive renal disease (BA02)

Glomerular diseases (BlockL2‑GB4)

Any disease characterised by pathological changes to the glomerulus.

Exclusions: Hypertensive renal disease (BA02)

Coded Elsewhere: Clinical findings in specimens from the urinary system (MF80-MF8Z)

Symptomatic late syphilis of other sites (1A62.2)

Plasmodium malariae malaria with nephropathy (1F42.0)

Glomerular disorders in secondary systemic amyloidosis (5D00.1)

GB40 Nephritic syndrome

Sudden onset of glomerular disease usually with severe (macroscopic/visible) haematuria accompanied by oliguria, elevated blood pressure, mild oedema and albuminuria or proteinuria usually of sub-nephrotic range. May be a cause of acute renal failure in which case the syndrome is termed rapidly progressive nephritis. Nephritic syndrome has many possible causes and is associated with renal light microscopic changes such hypercellularity, necrosis or thrombosis.

Inclusions: acute nephritis

Exclusions: Tubulo-interstitial nephritis, not specified as acute or chronic (GB54)

GB41 Nephrotic syndrome

A condition characterised by severe proteinuria, greater than 3.5 g/day in an average adult. The substantial loss of protein in the urine results in hypoalbuminaemia and generalised oedema. There is also usually hyperlipidaemia. Other manifestations of glomerular disease may be present. There are many possible causes and renal histological appearances. Possible complications include vascular thrombosis, infections, malnutrition and renal failure.

GB42 Persistent proteinuria or albuminuria

Persistent albuminuria >3mg/mmol creatinine or >30mg/day is regarded as abnormal, indicative and often the first manifestation of chronic kidney disease (KDOQI, KDIGO). In surveillance for CKD in “at risk” patients such as diabetics, urinalysis for albuminuria is recommended by most clinical practice guidelines. This diagnosis does not refer to intermittent proteinuria as in orthostatic or exercise induced proteinuria, nor to non-albuminuric proteinuria such as Bence Jones (immunoglobulin light chain) proteinuria.

Exclusions: Orthostatic proteinuria (MF96.0)

proteinuria NOS (MF96)

Gestational proteinuria without hypertension (JA22.0)

Bence Jones proteinuria (MF96.1)

Nephrotic syndrome (GB41)

albuminuria NOS (MF96)

GB42.0 Albuminuria, Grade A2

Presence of excessive albumin in the urine, indicating abnormal permeability glomerular filtration. Can be quantitated by either timed collections or spot urine samples with the concentration adjusted to the urine creatinine concentration to correct for variations in overall urine concentration. When persistent and of moderate or greater severity usually indicates overt glomerular disease such as caused by diabetic glomerulosclerosis, glomerulonephritis or amyloid.

Coding Note: Code aslo the casusing condition

GB42.1 Albuminuria, Grade A3

Presence of excessive albumin in the urine, indicating abnormal permeability glomerular filtration. Can be quantitated by either timed collections or spot urine samples with the concentration adjusted to the urine creatinine concentration to correct for variations in overall urine concentration. When persistent and of moderate or greater severity usually indicates overt glomerular disease such as caused by diabetic glomerulosclerosis, glomerulonephritis or amyloid.

Coding Note: Code aslo the casusing condition

GB42.Y Other specified persistent proteinuria or albuminuria

GB42.Z Persistent proteinuria or albuminuria, unspecified

GB4Y Other specified glomerular diseases

GB4Z Glomerular diseases, unspecified

Renal tubulo-interstitial diseases (BlockL2‑GB5)

Any disease characterised by pathological changes to the renal tubules and interstitial tissues.

Exclusions: pyeloureteritis cystica (GB90)

Coded Elsewhere: Renal tubulo-interstitial disorders due to toxoplasmoa gondii (1F57.Y)

Renal tubulo-interstitial disorders due to salmonella infection (1A09)

GB50 Acute tubulo-interstitial nephritis

A disease characterised by acute inflammation of, and damage to, tubules and the interstitium of the kidney, usually accompanied by acute renal failure (acute kidney injury). Histology shows acute inflammatory infiltrate in the interstitium with oedema and tubular cell necrosis, and often prominent eosinophils and plasma cells. Usually due to an allergic or immunological reaction to an identifiable allergen. Usually accompanied by acute renal failure which may be reversible if the allergen is withdrawn expeditiously with or without corticosteroid administration. Can lead to chronic tubulointerstitial nephritis, particularly if the allergen exposure is not short term. May be associated with other signs of an allergic reaction such as rash or fever.

GB51 Acute pyelonephritis

Acute inflammation of the renal pelvis and parenchyma due to bacterial infection. One of the commonest bacterial infections of adult women. Symptoms include fever, loin (kidney) pain, nausea and vomiting. Co-incident symptoms of acute cystitis with dysuria, frequency and haematuria may occur. Renal failure is not a feature unless there is septicaemia, hypotension or hypovolemia.

GB52 Acute tubular necrosis

Any condition of the kidney, caused by hypotension, hypoperfusion, ischaemia, hypoxia, or use of nephrotoxic drugs. These conditions are characterised by death of tubular epithelial cells and acute kidney injury. Confirmation is by identification of "muddy brown casts" of epithelial cells in a urine sample.

Coding Note: Code aslo the casusing condition

GB53 Acute renal papillary necrosis

A condition of the kidney, caused by ischaemia, liver disease, or analgesic nephropathy. This condition is characterised by death of single or multiple renal papillae, haematuria, flank pain, and tissue fragments in the urine. This condition may also present with fever and chills.

GB54 Tubulo-interstitial nephritis, not specified as acute or chronic

A disease characterised by inflammation of and damage to tubules or the interstitium of the kidney while sparing the glomeruli secondary to immune reaction or toxic agent.

Exclusions: calculous pyelonephritis (GB70)

GB55 Chronic tubulo-interstitial nephritis

A disease characterised by inflammation of and damage to tubules and/or the interstitium of the kidney, interstitial scarring, fibrosis and tubule atrophy resulting in progressive chronic renal insufficiency

Exclusions: calculous pyelonephritis (NFAD) (GB70)

Coded Elsewhere: Medullary sponge kidney (LB30.8)

Autosomal dominant polycystic kidney disease (GB81)

Hypophosphataemic rickets (5C63.22)

GB55.0 Balkan nephropathy

Balkan nephropathy is a form of interstitial nephritis characterised by a very localised geographic occurrence. It was first identified in the 1920s among several small, discrete communities along the Danube River and its major tributaries. Now thought to be due to chronic aristolochic acid ingestion (ingestion of Aristolochia clematitis seeds native to the Balkan region), though it has some differences from Chinese herbal nephropathy. This disease is characterised by renal insufficiency, proteinuria, tubulointerstitial nephritis, anaemia, weakness, copper discoloration of the skin, and may lead to end-stage renal disease within 5 years after onset.

Inclusions: Balkan endemic nephropathy

GB55.1 Nephropathy induced by heavy metals

A disease of the kidney, caused by exposure to heavy, nephrotoxic metals such as cadmium, lead, copper, and mercury. This disease is characterised by tubular damage, renal insufficiency, interstitial fibrosis, necrosis, or renal dysfunction. This disease may also present with hypertension, proteinuria, hyperuricaemia, aminoaciduria, or other symptoms characteristic of chronic kidney disease.

GB55.2 Chronic urate nephropathy

A condition characterised by deposition of urate crystals in the tubules and interstitium, partial or complete obstruction of the collecting ducts, renal pelvis, or ureter, hyperuricaemia disproportionate to the degree of renal insufficiency and decreased urate excretion. This condition may lead to inflammation, fibrosis, and renal failure.

GB55.Y Other specified chronic tubulo-interstitial nephritis

GB55.Z Chronic tubulo-interstitial nephritis, unspecified

GB56 Obstructive or reflux nephropathy

Distention of the pelvis and calices of the kidney with urine as a result of obstruction of the ureter or as a result of a vesicoureteral or vesicoureterorenal reflux of urine. Diffuse or focal cortical scarring and chronic tubulointerstitial nephritis may be present.

Exclusions: Calculus of kidney and ureter without hydronephrosis (BlockL2‑GB7)

Obstructive pyelonephritis (GB55)

GB56.0 Hydronephrosis with ureteropelvic junction obstruction

A condition caused by any obstruction in or stenosis of the ureteropelvic junction. This condition is characterised by distension of the pelvis and calyces of the kidney with a partial or complete obstructed flow of urine. This condition may present with flank pain, haematuria, pyuria, or hyperpyrexia.

Exclusions: Congenital ureteropelvic junction occlusion (QJCB) (LB31.8)

Congenital hydronephrosis (LB31.0)

GB56.1 Hydronephrosis with ureteral obstruction

Intrinsic stenosis or stricture or extrinsic obstruction of the ureter, except at the ureteropelvic junction or at the ureteral orifice, causing distension of the pelvis and calices of the kidney with urine.

Exclusions: Congenital hydronephrosis (LB31.0)

GB56.2 Hydronephrosis with ureteral orifice obstruction

Dilatation of the renal pelvis and calyces associated with (and presumably due to ) obstruction of the ureter at the insertion into the bladder and hence ascending back pressure.

Exclusions: with infection (GB58)

GB56.3 Hydronephrosis due to bladder obstruction

A condition caused by an obstruction in the urinary bladder. It is characterised by distention of the pelvis and calices of one or both kidneys, and lack of free flow of urine from the kidney, and can lead to progressive atrophy of the kidney if untreated. The condition may also present with pain in the flank, haematuria, pyuria, or hyperpyrexia.

GB56.4 Other or unspecified hydronephrosis

This refers to distension and dilation of the renal pelvis and calyces in situations other than those coded elsewhere or when no additional details is available.

Exclusions: Pyonephrosis (GB58)

GB56.5 Hydronephrosis and reflux nephropathy with vesicoureteral or vesico-uretero-renal reflux

Distention of the pelvis and calices of the kidney with urine as a result of obstruction of the ureter not caused by strictures or stenoses of the ureter or by ureteral stones.

Exclusions: Congenital vesico-uretero-renal reflux (LB31.D)

Congenital hydronephrosis (LB31.0)

GB56.Y Other specified obstructive or reflux nephropathy

GB56.Z Obstructive or reflux nephropathy, unspecified

GB57 Nephrocalcinosis

A condition of the kidney, caused by previous inflammation or degeneration when accompanied by previous renal failure. This condition is characterised by renal lithiasis, or calcium-based deposition in the renal parenchyma. This condition may also present with infection, haematuria, anal colic, or decreased renal function. Confirmation is by abdominal medical imaging to determine location of deposits.

GB58 Pyonephrosis

A condition caused by complications subsequent to calyces, hydronephrosis, or pyelonephritis, or which may be idiopathic. This condition is characterised by a collection of pus in the renal pelvis, leading to distension of the kidney and possibly kidney failure.

GB59 Renal or perinephric abscess

A collection of purulent material in the kidney substance and/or around the kidneys. Usually due to bacterial infection. Minor: Origin Can be haematogenous or ascending infection

GB5Y Other specified renal tubulo-interstitial diseases

Coding Note: Code aslo the casusing condition

GB5Z Renal tubulo-interstitial diseases, unspecified

Coding Note: Code aslo the casusing condition

Kidney failure (BlockL2‑GB6)

Inability of the kidneys to adequately filter the blood of waste products, with a lower than normal glomerular filtration rate (GFR). Can be abrupt and potentially reversible (acute kidney injury) or persistent due to irreversible kidney damage (chronic kidney disease).

Exclusions: Hypertensive renal disease (BA02)

Coded Elsewhere: Renal failure following abortion, ectopic or molar pregnancy (JA05.4)

Congenital renal failure (KC01)

GB60 Acute kidney failure

An increase in serum creatinine by 0.3 mg/dl or greater within 48 hours; or Increase in serum creatinine by 1.5-fold or greater above baseline, which is known or presumed to have occurred within 7 days; or Urine volume less than 0.5 ml/kg/h for 6 hours or more.

Coding Note: Code aslo the casusing condition

Inclusions: nontraumatic acute kidney injury

Coded Elsewhere: Postpartum acute renal failure (JB44.4)

GB60.0 Acute kidney failure, stage 1

Rate of change of serum creatinine: Increase 1.5-1.9 times baseline within 7 days OR increase by 0.3 mg/dl increase within 48 h OR Magnitude of urine output: <0.5 ml/kg/h for 6-12 hours

Coding Note: Code aslo the casusing condition

Inclusions: Acute nontraumatic kidney injury, mild

GB60.1 Acute kidney failure, stage 2

Rate of change of serum creatinine: 2.0-2.9 times baseline OR Magnitude of urine output: <0.5 ml/kg/h for >= 12 hours

Coding Note: Code aslo the casusing condition

Inclusions: Acute nontraumatic kidney injury, moderate

GB60.2 Acute kidney failure, stage 3

Rate of change of serum creatinine: 3.0 times baseline OR increase to 4.0 mg/dl OR need for renal replacement therapy (i.e. dialysis) or for patients <18 years, decrease in GFR to <35 ml/min per 1.73 m2 OR Magnitude of urine output: <0.3 ml/kg/h for 24 hours OR anuria for >= 12 hours

Coding Note: Code aslo the casusing condition

Inclusions: Acute nontraumatic kidney injury, severe

GB60.Y Other specified acute kidney failure

Coding Note: Code aslo the casusing condition

GB60.Z Acute kidney failure, stage unspecified

Coding Note: Code aslo the casusing condition

GB61 Chronic kidney disease

GFR <60 or presence of kidney damage that is present for more than 3 months. Evidence of kidney damage can include structural abnormalities (imaging or histology), albuminuria above normal limits, urinary sediment abnormalities or electrolyte disturbances due to tubular disorders.

Coding Note: Code aslo the casusing condition

Inclusions: chronic renal failure

Chronic renal insufficiency

Exclusions: Hypertensive renal disease (BA02)

GB61.0 Chronic kidney disease, stage 1

Kidney damage with normal or increased GFR (>90 ml/min/1.73m²)

Coding Note: Code aslo the casusing condition

Inclusions: chronic renal failure, stage 1

GB61.1 Chronic kidney disease, stage 2

Kidney damage and GFR 60-89 ml/min/1.73m²

Coding Note: Code aslo the casusing condition

Inclusions: chronic renal failure, stage 2

GB61.2 Chronic kidney disease, stage 3a

GFR 45-59 ml/min/1.63m²

Coding Note: Code aslo the casusing condition

Inclusions: chronic renal failure, stage 3a

GB61.3 Chronic kidney disease, stage 3b

GFR 30-44 ml/min/1.73m²

Coding Note: Code aslo the casusing condition

Inclusions: chronic renal failure, stage 3b

GB61.4 Chronic kidney disease, stage 4

GFR (15-29 ml/min/1.73m²)

Coding Note: Code aslo the casusing condition

Inclusions: chronic renal failure, stage 4

GB61.5 Chronic kidney disease, stage 5

Kidney failure, GFR < 15 ml/min/1.73m²

Coding Note: Code aslo the casusing condition

Inclusions: chronic renal failure, stage 5

Coded Elsewhere: Albuminurica retinitis (9B65.Z)

GB61.Z Chronic kidney disease, stage unspecified

Coding Note: Code aslo the casusing condition

GB6Z Kidney failure, unspecified

Coding Note: Code aslo the casusing condition

Urolithiasis (BlockL2‑GB7)

A condition of the urinary system, caused by dehydration, decreased urine volume or fluid flow rates, or increased excretion of minerals such as calcium, oxalate, magnesium, cystine, and phosphate. This condition is characterised by the presence of calculi originating in the urinary system or are which are located within the urinary system. Confirmation is by abdominal radiography, or intravenous pyelography.

Exclusions: Hyperoxaluria (5C51.2)

Hypercalciuria (MF98.0)

Crystalluria (BlockL2‑MF9)

Cystinuria (5C60.2)

GB70 Calculus of upper urinary tract

A condition of the urinary system, caused by dehydration, decreased urine volume or fluid flow rates, or increased excretion of minerals such as calcium, oxalate, magnesium, cystine, and phosphate. This condition is characterised by urinary calculi located in the upper urinary tract (renal papilla). This condition may present with haematuria, dysuria, or pain in the flank, lower abdomen, or groin. Confirmation is by abdominal radiography to determine the presence and location of calculi.

GB70.0 Calculus of kidney

A condition of the kidney, caused by dehydration, decreased urine volume or fluid flow rates, or increased excretion of minerals such as calcium, oxalate, magnesium, cystine, and phosphate. This condition is characterised by the urinary calculi located in the kidney, in renal calyces, or in the renal pelvis. This condition may present with haematuria, dysuria, or pain in the flank, lower abdomen, or groin. Confirmation is by abdominal radiography to determine the presence and location of calculi.

Inclusions: Renal calculus or stone

Stone in kidney

GB70.00 Staghorn calculus

A condition of the kidney, characterised by large, branched, struvite or calcium carbonate apatite calculi within the renal pelvis and extending into one or more caliceal extensions, and fever, haematuria, or flank pain, leading to renal failure and life-threatening sepsis. This condition may be associated with urinary tract infection. Confirmation is by imaging of the abdominal region.

GB70.0Y Other specified calculus of kidney

GB70.0Z Calculus of kidney, unspecified

GB70.1 Calculus of ureter

A condition of the ureter, caused by dehydration, decreased urine volume or fluid flow rates, or increased excretion of minerals such as calcium, oxalate, magnesium, cystine, and phosphate. This condition is characterised by urinary calculi located in the ureter, and may lead to renal colic. This condition may present with haematuria, dysuria, or pain in the flank, lower abdomen, groin, thighs, or genitalia. Confirmation is by abdominal radiography to determine the presence and location of calculi.

Inclusions: Ureteric stone

Ureteral calculus or stone

Stone in the ureter

GB70.Z Calculus of upper urinary tract, unspecified

GB71 Calculus of lower urinary tract

A condition of the urinary system, caused by dehydration, decreased urine volume or fluid flow rates, or increased excretion of minerals such as calcium, oxalate, magnesium, cystine, and phosphate. This condition is characterised by urinary calculi located in the lower urinary tract (urinary bladder and urethra). This condition may also present with haematuria, dysuria, or pain in the flank, lower abdomen, or groin. Confirmation is by abdominal radiography to determine the presence and location of calculi.

GB71.0 Calculus in bladder

A condition caused by dehydration, decreased urine volume or fluid flow rates, or increased excretion of minerals such as calcium, oxalate, magnesium, cystine, and phosphate. This condition is characterised by urinary calculi located in the bladder. This condition may also present with haematuria, dysuria, or pain in the flank, lower abdomen, or groin. Confirmation is by abdominal radiography, to determine the presence and location of calculi.

Inclusions: Urinary bladder stone

Exclusions: Calculus in a bowel segment for urinary diversion (e.g. neobladder, pouch) (NFBC) (GB71.2)

GB71.1 Calculus in urethra

A condition caused by dehydration, decreased urine volume or fluid flow rates, or increased excretion of minerals such as calcium, oxalate, magnesium, cystine, and phosphate. This condition is characterised by urinary calculi located in the urethra, where it may lead to renal colic. This condition may also present with haematuria, dysuria, or pain in the flank, lower abdomen, groin, thighs, or genitalia. Confirmation is by abdominal radiography to determine the presence and location of calculi.

Exclusions: Calculus of bowel segments for urinary diversion (GB71.2)

GB71.2 Calculus of bowel segments for urinary diversion

A condition caused by dehydration, decreased urine volume or fluid flow rates, or increased excretion of minerals such as calcium, oxalate, magnesium, cystine, and phosphate. This condition is characterised by urinary calculi located in the bowel segment for urinary diversion (ileal neobladder, ileal conduit, ileocaecal pouch). This condition may also present with haematuria, dysuria, or pain in the flank, lower abdomen, or groin. Confirmation is by abdominal radiography to determine the presence and location of calculi.

GB71.Z Calculus of lower urinary tract, unspecified

GB7Z Urolithiasis, unspecified

Cystic or dysplastic kidney disease (BlockL2‑GB8)

Any disease of the kidney, caused by determinants arising during the antenatal period or after birth. These diseases are characterised by pathological changes to one or both kidneys, and may manifest in other anatomical tissues.

Coded Elsewhere: Tuberous sclerosis (LD2D.2)

Noonan syndrome (LD2F.15)

Meckel-Gruber syndrome (LD2F.13)

Asphyxiating thoracic dystrophy (LD24.B1)

Multicystic renal dysplasia (LB30.9)

GB80 Nonfamilial nongenetic cystic kidney disease

Diseases where there are developmental anatomical or pathological changes in the renal substance not occurring in a familial distribution and not known to have a mono-genetic cause.

Coded Elsewhere: Medullary sponge kidney (LB30.8)

Multicystic renal dysplasia (LB30.9)

GB80.0 Simple renal cyst

A disease of the kidney, caused by obstruction of tubules, anaemia, or detachment of diverticula. This disease is characterised by the formation of thin-walled abnormal sacs filled with hypo-echogenic radiolucent fluid in the kidney. Confirmation is by imaging.

Inclusions: Bosniak 1 cyst

GB80.1 Complex renal cyst

Renal cyst with high attenuation or mixed contents, septate or thickened wall. May be subclassified by the Bosniak classification Bosniak 2-4 to indicate increasing likelihood of neoplasm.

GB80.2 Subscapular or perirenal urinoma

A disease of the kidney, caused by urinary obstruction such as calices in the kidney or ureter, or a breach of the integrity of the pelvis. This disease is characterised by an encapsulated collection of urine located in a fat-lined sac around the kidneys or in the retroperitoneum. Confirmation is by imaging.

GB80.Y Other specified nonfamilial nongenetic cystic kidney disease

GB80.Z Nonfamilial nongenetic cystic kidney disease, unspecified

GB81 Autosomal dominant polycystic kidney disease

Multiple cysts in both kidneys increasing in number and size from adolescence, associated with development of hypertension and chronic renal failure. Autosomal dominant familial pattern is usual and due to mutations on Chromosomes 16 and 4. Non-renal manifestations can include cysts in the liver and less commonly pancreas,. Cerebral arterial aneurysms with subarachnoid haemorrhage, and other non-renal vascular abnormalities can also occur.

GB82 Autosomal dominant tubulointerstitial disease

Nonglomerular, autosomal dominant kidney diseases characterised by progressive tubulointerstitial fibrosis and progression to end-stage renal disease. Currently there are 4 known genetic defects - in oromudulin, mucin-1, renin and hepatocyte nuclear factor 1-ß. The last is associated with Maturity-Onset Diabetes of the Young (MODY) and thus is classified as MODY-5.

Coded Elsewhere: Medullary sponge kidney (LB30.8)

MODY 5 syndrome (5A13.6)

GB83 Nephronophthisis

Autosomal recessive disease characterised by polyuria, polydipsia, enuresis and chronic kidney disease with end stage renal failure occurring between birth and late adolescence depending on the NPHP gene involved. Extra-renal manifestations occur with associated multisystem genetic disorders (e.g. Senior-Loken, Cogan, Joubert)

GB8Y Other specified cystic or dysplastic kidney disease

GB8Z Cystic or dysplastic kidney disease, unspecified

GB90 Certain specified disorders of kidney or ureter

Any disorder characterised by pathological changes to the kidney or ureter.

Coding Note: Code aslo the casusing condition

Exclusions: Urolithiasis (BlockL2‑GB7)

Coded Elsewhere: Macroscopic changes of size of the kidney (MF54)

Ureteral fistula (GC04.2)

Postinterventional ischemia or infarction of kidney (GC7B)

Diabetic nephropathy (GB61.Z)

Renal late syphilis (1A62.2Y)

Disorders of kidney or ureter in tuberculosis (1B1Y)

GB90.0 Nephroptosis

Enhanced mobility of the kidney, resulting in ptosis when the patient is upright. More common on the right, associated with a longer renal artery, and debatably associated with fibromuscular hyperplasia and hypertension.

GB90.1 Hydroureter

A condition caused by obstruction, stricture, or stenosis of the ureter, which may be due to prostatic hypertrophy, carcinoma, retroperitoneal or pelvic neoplasms, calculi, or a congenital anomaly. This condition is characterised by distention of the ureter with urine.

Exclusions: Congenital primary megaureter (LB31.1)

GB90.2 Ureteral kinking or deviation without obstruction

A condition characterised by a sharp twist, curve, or other deviation in the length of the ureter, but without an obstructed flow of urine.

Inclusions: Kinking of the ureter without hydronephrosis

Exclusions: with infection (GB58)

congenital ureteric stenosis (LB31.8)

GB90.3 Ischaemia or infarction of kidney

Exclusions: Atherosclerosis of renal artery (BD40.2)

Goldblatt kidney (BD40.2)

Congenital renal artery stenosis (LA90.40)

GB90.4 Renal tubular function disorders

Disorders primarily due to abnormalities of renal tubular resorption or secretion.

Coded Elsewhere: Cystinuria (5C60.2)

Nephrogenic syndrome of inappropriate antidiuresis (5A60.20)

Nephrogenic syndrome of inappropriate antidiuresis (5A60.20)

GB90.40 Hypotonia-cystinuria type 1

This is a rare syndrome including neonatal and infantile hypotonia and failure to thrive, cystinuria type 1, nephrolithiasis, growth retardation due to growth hormone deficiency, and minor facial dysmorphism due to a homozygous deletion of two contiguous genes on chromosome 2: SLC3A1 and PREP (2p21).

Coded Elsewhere: Hypotonia-cystinuria syndrome (5C60.Y)

GB90.41 Pseudohypoaldosteronism type 1

Pseudohypoaldosteronism type 1 (PHA1) are rare forms of mineralocorticoid resistance. PHA1 presents in the newborn with renal salt wasting, failure to thrive and dehydration. Two clinical forms have been described: i) a renal form (renal PHA1) that improves with age and in which mineralocorticoid resistance is restricted to the kidney, and ii) a generalised severe form (generalised PHA1) that persists into adulthood and in which mineralocorticoid resistance is systemic and salt loss occurs in multiple organs. Inheritance can be autosomal recessive (arPHA1) which is more severe and persistent than the autosomal dominant form (AdPHA1)

GB90.42 Fanconi syndrome

Disorder associated with generalised dysfunction of the proximal tubule expressed as amino-aciduria, low molecular weight proteinuria, polyuria with sodium and potassium wasting, hyper-phosphaturia (hence bone disease), renal tubular acidosis, glycosuria and hypercalciuria.

Coded Elsewhere: Oculocerebrorenal syndrome (5C60.0)

GB90.43 Bartter syndrome

Bartter syndrome is a genetic renal tubular disease characterised by the association of hypokalaemic alkalosis, increased levels of plasma renin and aldosterone, low blood pressure and vascular resistance to angiotensin II. Two forms of the disease can be distinguished according to clinical criteria: an antenatal or infantile Bartter syndrome (most patients with genotypes I, II and IV), characterised by polyhydramnios, premature delivery, polyuria, dehydration, hypercalciuria and nephrocalcinosis; and classical Bartter syndrome (mostly patients with genotype III, but also some type IV patients), manifesting as polyuria-polydipsia in infancy-childhood through to adulthood, dehydration and a variable delay in the height-weight growth curve.

GB90.44 Renal tubular acidosis

Conditions characterised by failure of the kidney to excrete acids, or to lose bicarbonate into the urine, which causes the blood to become too acidic. Characteristically hyperchloremic acidosis (low anion gap metabolic acidosis) . Has several forms and many causes.

Coded Elsewhere: Osteopetrosis with renal tubular acidosis (LD24.10)

GB90.45 Renal glycosuria

Glycosuria (glucose in the urine) at normal blood glucose levels due to inadequate renal tubular resorption. Can be due to above normal glomerular filtration as in pregnancy or occurs residual nephrons in renal failure, or reduced tubular resorption.

GB90.46 Tubular disorders of sodium or potassium transport

Abnormalities of the renal tubules resorptive or secretory functions, inherited or acquired.

Exclusions: Fanconi syndrome (GB90.42)

GB90.47 Aminoaciduria

Conditions in which amino acids are found in the urine either due to over-production (high blood levels) or failure of tubular resorption

GB90.48 Disorders of calcium or phosphate excretion

Conditions in which renal excretion of calcium and / or phosphate is deranged.

Coded Elsewhere: Pseudohypoparathyroidism (5A50.1)

Hypophosphataemic rickets (5C63.22)

GB90.49 Renal hypocalciuria

A condition of the kidney, caused by renal tubular retention, low dietary calcium intake, or abnormalities in calcium absorption and may be associated with thiazide diuretic intake, Gitelmans disease, or familial hypocalciuric hypercalcaemia. This condition is characterised by a decrease in the level of calcium in the urine.

Coded Elsewhere: Familial hypocalciuric hypercalcaemia (5A51.2)

Acquired hypocalciuric hypercalcemia (5A51.Y)

GB90.4A Nephrogenic diabetes insipidus

Nephrogenic diabetes insipidus is a condition in which the kidney tubules respond poorly to pituitary secreted anti-diuretic hormone, resulting in a failure to concentrate the urine, and water loss. Polyuria with dilute urine and polydypsia (excessive thirst) are present. It can be congenital or acquired with many causes. The congenital forms may be attributed to vasopressin receptor or aquaporin -2 defects. They are characterised by polyuria with polydipsia, recurrent bouts of fever, constipation, and acute hypernatraemic dehydration after birth that may cause neurological sequelae.

Exclusions: Central diabetes insipidus (5A61.5)

GB90.4Y Other specified renal tubular function disorders

GB90.4Z Renal tubular function disorders, unspecified

GB90.Y Other specified disorders of kidney or ureter

Coding Note: Code aslo the casusing condition

Certain specified diseases of urinary system (BlockL2‑GC0)

Exclusions: Infections of genitourinary tract in pregnancy (JA62)

Urolithiasis (BlockL2‑GB7)

Coded Elsewhere: Urinary incontinence (MF50.2)

Tuberculosis of kidney or ureter (1B12.5)

Tuberculosis of bladder (1B12.5)

GC00 Cystitis

A condition of the bladder, caused by infection, reaction to pharmacological agents, exposure to radiation therapy, or potential irritants. This condition is characterised by inflammation of the urinary bladder, dysuria, pollakiuria, fever, or flank pain.

Exclusions: Prostatocystitis (GA91.2)

Coded Elsewhere: Infections of bladder in pregnancy (JA62.1)

GC00.0 Trigonitis

A condition of the bladder that is frequently idiopathic. This condition is characterised by inflammation of the nonkeratinizing squamous metaplasia in the trigone region of the bladder.

GC00.1 Infectious cystitis

Inflammation of the urinary bladder caused by microbes

Exclusions: tuberculous cystitis (NHEA) (1B12.5)

bladder disorder in schistosomiasis [bilharziasis] (NHEB) (1F86.0)

GC00.2 Contracted urinary bladder

A condition characterised by inflammation of the urinary bladder that may lead to progressive shrinkage, fibrosis, contraction, and irreversible end-stage disease with high urination frequency.

GC00.3 Interstitial cystitis

A condition characterised by inflammation of the urinary bladder and ureters. This condition may be associated with a malformation of, or injury to, the bladder epithelium, infection with toxins, an autoimmune reaction, or an allergy. This condition may also present with Hunner ulcers diffuse glomerulations affecting all quadrants of the bladder mucosa, mild to severe chronic bladder pressure, bladder pain, urgency to urinate, and low volumes of urine.

GC00.Y Other specified cystitis

GC00.Z Cystitis, unspecified

GC01 Other disorders of bladder

Any disorder characterised by pathological changes to the urinary bladder.

Exclusions: Cystocele (GC40.0)

hernia or prolapse of bladder, female (GC40.0)

Calculus in bladder (GB71.0)

Coded Elsewhere: Bladder pain (MF52)

GC01.0 Bladder neck obstruction

A condition of the bladder, caused by congenital or acquired abnormalities that impair the muscles that connect the bladder to the urethra. This condition is characterised by obstruction of the bladder neck and constricted opening during urination. This condition may also present with pelvic pain, pollakiuria, incontinence, or incomplete bladder emptying. Confirmation is by video urodynamics to observe the obstruction as the bladder fills and voids.

GC01.1 Vesical fistula, not elsewhere classified

A condition caused by medical intervention, trauma, inflammation, infection, cancer, or congenital factors. This condition is characterised by the formation of an abnormal passage between the urinary bladder and the skin, bowel, vagina, uterus, or rectum, and suprapubic pain, frequency, dysuria, or tenesmus.

Coded Elsewhere: Vesicovaginal fistula (GC04.10)

GC01.2 Diverticulum of bladder

A condition of the bladder, caused by congenital or acquired obstruction to the bladder outlet, a bladder dysfunction following a nerve injury, or a prior bladder surgery. This condition is characterised by balloon-like protrusions on the bladder lining, leading to an area of weakness in the bladder wall. This condition may be asymptomatic, or present with recurrent bladder infections, difficulty urinating, or abdominal fullness. Confirmation is by contrast radiography or cystoscopy.

Exclusions: Congenital diverticulum of urinary bladder (LB31.4)

Urachal diverticulum (LB03.0)

Hutch-diverticulum (LB31.4)

GC01.3 Rupture of bladder, nontraumatic

A condition of the bladder, caused by determinants not attributable to wound or injury. This condition is characterised by rupture of the bladder.

GC01.4 Neuromuscular dysfunction of bladder, not elsewhere classified

Exclusions: Functional urinary incontinence (MF50.23)

neurogenic bladder due to cauda equina syndrome (8B40)

due to spinal cord lesion (ND51)

Urinary incontinence associated with pelvic organ prolapse (GC40.5)

GC01.Y Other specified disorders of bladder

GC01.Z Disorder of bladder, unspecified

GC02 Urethritis and urethral syndrome

A condition of the urethra, caused by non-infectious factors such as trauma, allergies, anatomical malformations, or scarring and adhesions following a medical intervention. This condition is characterised by inflammation of the urethra, chronic recurrent urinary tract infections without bacterial growth, and pyuria.

Exclusions: urethrotrigonitis (GC00.0)

urethritis in diseases with a predominantly sexual mode of transmission (BlockL1‑1A6)

Reiter disease (FA11.2)

Coded Elsewhere: Infections of urethra in pregnancy (JA62.2)

GC02.0 Urethral abscess

A condition of the urethra, caused by an obstruction to the periurethral glands that is commonly the result of frequent infection. This condition is characterised by a focal accumulation of purulent material within or on the urethral tissue.

Exclusions: Urethral caruncle (GC07)

GC02.1 Nonspecific urethritis

Urethral inflammation for which a specific sexually transmitted infective cause, in particular gonococcal or chlamydial infection, has not been identified. It typically presents in males with dysuria, urethral discharge, itching or urinary urgency. It can occur following urinary tract infection or genital trauma. Historically, before chlamydia infection could be easily identified, chlamydial urethritis was labeled "non-specific".

Exclusions: Chlamydial infection of lower genitourinary tract (1A81.0)

Chlamydial urethritis (1A81.0)

Gonococcal genitourinary infection (1A70)

GC02.Y Other specified urethritis and urethral syndrome

GC02.Z Urethritis and urethral syndrome, unspecified

GC03 Urethral stricture

Stenosis of the urethra accompanied by fibrosis and scarring of the spongiosal body

Coded Elsewhere: Postprocedural urethral stricture (GC72)

GC04 Fistula of the genitourinary tract

Any condition caused by trauma, medical intervention, infection, cancer, or congenital factors. This condition is characterised by the formation of an abnormal passage between any two locations within the genitourinary tract.

Coded Elsewhere: Fistula of intestinal segments used for urinary diversion (GC01.1)

GC04.0 Urethral fistula

A condition of the urethra, caused by surgery, infection, trauma, or congenital factors. This condition is characterised by the formation of an abnormal passage between the urethra and adjacent organs or surfaces.

Coded Elsewhere: Urethrovaginal fistula (GC04.14)

GC04.1 Fistulae involving female genital tract

Any condition characterised by the formation of an abnormal passage between the genital tract and another organ, or between a genital organ and an adjacent organ or surface.

GC04.10 Vesicovaginal fistula

A condition of the bladder and vagina, caused by and subsequent to childbirth, trauma, hysterectomy, medical intervention, infections, bladder calculi, endometriosis, cone biopsy, or congenital factors. This condition is characterised by the formation of an abnormal passage between the urinary bladder and the vagina, leading to the continuous involuntary discharge of urine into the vagina.

GC04.11 Fistula of small intestine to vagina

Exclusions: Obstetric Fistula (GC04.1)

GC04.12 Fistula of large intestine to vagina

A condition of the large intestine and vagina, caused by damage to the tissue due to childbirth, an inflammatory bowel disease, radiation treatment, cancer, or a complication following pelvic surgery. This condition is characterised by the formation of an abnormal passage between any part of the large bowel and the vagina. This condition may also present with leakage of bowel contents (faeces or gas) through the vagina.

Exclusions: Obstetric Fistula (GC04.1)

Coded Elsewhere: Rectovaginal fistula (GC04.16)

GC04.13 Female genital tract-skin fistulae

A condition of the genital system, caused by damage to the tissue between the genital tract and the skin. This condition is characterised by the formation of an abnormal passage between the genital tract and the skin.

Exclusions: Obstetric Fistula (GC04.1)

GC04.14 Urethrovaginal fistula

This refers to the abnormal connection or passageway between the female urethra and the vagina without further specification.

GC04.15 Combined urethrovesicovaginal fistula

A condition of the bladder, urethra, and vagina, caused by and subsequent to childbirth, trauma, hysterectomy, medical intervention, infection, bladder calculi, endometriosis, cone biopsy, or congenital factors. This condition is characterised by the formation of an abnormal passage between the urinary bladder, urethra, and the vagina, not otherwise specified.

Inclusions: Urethrovesicovaginal fistula

GC04.16 Rectovaginal fistula

A condition of the rectum and vagina, caused by childbirth, trauma, Crohn's disease, medical intervention, or infection. This condition is characterised by the formation of an abnormal passage between the rectum and the vagina, not otherwise specified.

GC04.17 Vesicouterine fistula with severe scar or extensive tissue loss

This is a condition characterised by the presence of extensive amounts of fibrous tissue (fibrosis) that have replaced normal tissue associated with a vesicouterine fistula.

GC04.18 Other combined urinary fistula with severe scar or extensive tissue loss

Any other condition characterised by the presence of extensive amounts of fibrous tissue (fibrosis) that have replaced normal tissue associated with any other abnormal connection or passageway between any two locations within the urinary tract which do not normally connect.

GC04.19 Combined urinary and rectal fistula including cloaca with severe scar or extensive tissue loss

A condition characterised by the presence of extensive amounts of fibrous tissue (fibrosis) that have replaced normal tissue associated with an abnormal connection or passageway between the rectum, including cloaca, and a location within the urinary system.

GC04.1A Vaginal stenosis or gynatresia related to obstetric fistula

A condition of the vagina, caused by congenital or acquired factors. The congenital condition is caused by Mayer-Kustner-Hauser syndrome. The acquired condition is caused by severe or failed childbirth or medical intervention to repair a fistula. This condition is characterised by an abnormal narrowing and foreshortening of the vagina. Confirmation is by pelvic examination.

GC04.1Y Other specified fistulae involving female genital tract

GC04.1Z Fistulae involving female genital tract, unspecified

GC04.2 Ureteral fistula

Abnormal passage or communication between the ureter and another body organ or cavity or the body surface.

GC04.Y Other specified fistula of the genitourinary tract

GC04.Z Fistula of the genitourinary tract, unspecified

GC05 Prolapsed urethral mucosa

A condition characterised by a circular protrusion of the distal urethra mucosa through the external urethral meatus. This condition may be associated with congenital or acquired abnormalities such as weakened pelvic floor structures, trauma, or separation of the longitudinal and circular-oblique smooth muscle layers. This condition is commonly asymptomatic in adolescents, or presents with vaginal bleeding and difficulty urinating in postmenopausal individuals.

Inclusions: prolapse of urethra

Exclusions: Female urethrocele (GC40.0)

GC06 Urethral diverticulum

A disease of the urethra, caused by an obstruction to the periurethral glands due to subsequent to frequent infection, or congenitally. This disease is characterised by a localised protrusion of the urethra into the anterior vaginal wall, consisting mostly of fibrous tissue. This disease may also present with urinary frequency, urgency, and dysuria. Confirmation is by imaging to determine the extent and location of the diverticulum.

GC07 Urethral caruncle

A condition characterised by small, focal, benign, pink or red polypoid masses of the distal urethral mucosa, which may become painful, bloody, and deep red in colour. This condition may be associated with urogenital atrophy due to estrogen deficiency, and may be aggravated by chronic irritation of urethral mucosa exposure. This condition typically affects postmenopausal women.

GC08 Urinary tract infection, site not specified

Coded Elsewhere: Urinary tract infection following delivery (JB40.3)

Neonatal urinary tract infection (KA65.2)

Pyuria associated with urinary tract infection (MF97)

GC08.0 Urinary tract infection, site not specified, due to Escherichia coli

GC08.1 Urinary tract infection, site not specified, due to Klebsiella pneumoniae

GC08.2 Urinary tract infection, site not specified, due to Proteus

A disease of the urinary tract, caused by an infection with the gram-negative bacteria Proteus. In females, this disease is characterised by dysuria, pyuria, or pollakiuria; in males, this disease may present with urethral discharge. Transmission is unknown. Confirmation is by identification of Proteus in a urinary sample.

GC08.Y Urinary tract infection, site not specified due to other agent

GC08.Z Urinary tract infection, site and agent not specified

GC0Y Other diseases of urinary system

GC2Z Diseases of the urinary system, unspecified

Other conditions of the genitourinary system (BlockL1‑GC4)

Any disorder characterised by pathological changes to the genitourinary system.

Female pelvic floor dysfunction (BlockL2‑GC4)

Any condition affecting females, caused by an altered or lack of function of the female pelvic floor. These conditions are characterised by weakened or tightened pelvic floor muscles, or an impairment of the sacroiliac joint, lower back, coccyx, or hip joint.

Coded Elsewhere: Rectal prolapse (DB31.2)

GC40 Pelvic organ prolapse

The descent of one or more of the anterior vaginal wall, posterior vaginal wall, the uterus (cervix), or the apex of the vagina (vaginal vault) or cuff scar after hysterectomy.

Exclusions: Obstructed labour due to abnormality of maternal pelvic organs (JB05.5)

Maternal care for other abnormalities of gravid uterus (JA84)

GC40.0 Prolapse of anterior vaginal wall

GC40.00 Incomplete anterior vaginal wall prolapse

Most distal prolapse is 1cm or less proximal or distal to the hymen

GC40.01 Complete anterior vaginal wall prolapse

GC40.0Z Prolapse of anterior vaginal wall, unspecified

GC40.1 Prolapse of posterior vaginal wall

GC40.10 Incomplete posterior vaginal wall prolapse

GC40.11 Complete posterior vaginal wall prolapse

GC40.1Z Prolapse of posterior vaginal wall, unspecified

GC40.2 Prolapse of the vaginal apex

GC40.20 Incomplete apical vaginal wall prolapse

GC40.21 Complete apical vaginal wall prolapse

GC40.2Z Prolapse of the vaginal apex, unspecified

GC40.3 Uterovaginal prolapse

GC40.30 Incomplete uterovaginal prolapse

A condition caused by weakness, damage, or stretching of the ligaments between the uterus and the vaginal wall, typically subsequent to childbirth. This condition is characterised by stage 1 descensus of the uterus into the vagina, leading to a bulge and distal prolapse greater than 1 centimetre above the hymen or stage 2 descensus with distal prolapse of 1 centimetre or less proximal or distal to the hymen. This condition is may also present with urinary incontinence, sensation of heaviness in the pelvis, or difficulty urinating.

Exclusions: Incomplete uterine prolapse with anterior vaginal wall prolapse (GC40.31)

Incomplete uterine prolapse with posterior vaginal wall prolapse (GC40.32)

Incomplete uterine prolapse with anterior and posterior vaginal wall prolapse (GC40.33)

GC40.31 Incomplete uterine prolapse with anterior vaginal wall prolapse

A condition characterised by the displacement of the uterus from its normal position into the vaginal area in association with herniation of the bladder into the vagina due to tearing of the tough fibrous wall between a woman's bladder and her vagina (the pubovesical fascia).

GC40.32 Incomplete uterine prolapse with posterior vaginal wall prolapse

A condition characterised by the displacement of the uterus from its normal position into the vaginal area in association with herniation of the rectum into the vagina, due to a tear in the rectovaginal septum (which is normally a tough, fibrous, sheet-like divider between the rectum and vagina).

GC40.33 Incomplete uterine prolapse with anterior and posterior vaginal wall prolapse

A condition characterised by the displacement of the uterus from its normal position into the vaginal area in association with herniation of both the bladder and the rectum into the vagina, due to tears in the tough fibrous wall between a woman's bladder and her vagina (the pubovesical fascia) and in the rectovaginal septum, a tough, fibrous, sheet-like divider between the rectum and vagina.

GC40.34 Complete uterovaginal prolapse

A condition caused by weakness, damage, or stretching of the ligaments between the uterus and the vaginal wall, typically subsequent to childbirth. This condition is characterised by stage 3 descensus of the uterus into the vagina, leading to a bulge and distal prolapse greater than 1 centimetre below the hymen or stage 4 descensus with complete eversion of the total length of the genital tract. This condition may also present with urinary incontinence, sensation of heaviness in the pelvis, or difficulty urinating.

GC40.35 Complete uterine prolapse with anterior vaginal wall prolapse

A condition characterised by the displacement of the uterus from its normal position to at least one cm below the hymen, possibly up to complete eversion of the female genital tract, in association with herniation of the bladder into the vagina due to tearing of the tough fibrous wall between a woman's bladder and her vagina (the pubovesical fascia).

GC40.36 Complete uterine prolapse with posterior vaginal wall prolapse

A condition characterised by the displacement of the uterus from its normal position to at least one cm below the hymen, possibly up to complete eversion of the female genital tract, in association with herniation of the rectum into the vagina, due to a tear in the rectovaginal septum (which is normally a tough, fibrous, sheet-like divider between the rectum and vagina).

GC40.37 Complete uterine prolapse with anterior and posterior vaginal wall prolapse

A condition characterised by the displacement of the uterus from its normal position to at least one cm below the hymen, possibly up to complete eversion of the female genital tract, in association with herniation of both the bladder and the rectum into the vagina, due to tears in the tough fibrous wall between a woman's bladder and her vagina (the pubovesical fascia) and in the rectovaginal septum, a tough, fibrous, sheet-like divider between the rectum and vagina.

GC40.3Z Uterovaginal prolapse, unspecified

GC40.4 Pelvic floor muscle disruption

A condition caused by damage or trauma to the muscles of the pelvic floor. This condition is characterised by weakness and dysfunction of the muscle.

GC40.40 Levator avulsion from symphysis pubis

A condition caused by damage or trauma to the pelvic floor, leading to the detachment of the levator ani muscle fibres from the symphysis pubis. This condition is characterised by weakness and dysfunction of the muscle.

GC40.4Y Other specified pelvic floor muscle disruption

GC40.4Z Pelvic floor muscle disruption, unspecified

GC40.5 Urinary incontinence associated with pelvic organ prolapse

A condition of the urinary system, caused by the abnormal displacement of one or more pelvic organs. This condition is characterised by the involuntary loss of urine. Confirmation is by urinalysis.

GC40.50 Stress Incontinence associated with pelvic organ prolapse

A condition of the urinary system, caused by weakness of the pelvic floor muscles and an increase in intra-abdominal pressure, leading to pressure on the bladder. This condition is characterised by a shift in the position of the urethra allowing urine to pass easily, and urinary incontinence when coughing, laughing, sneezing, exercising, or other physical activities that increase intra-abdominal pressure.

GC40.51 Urge incontinence associated with pelvic organ prolapse

A condition of the urinary system, caused by detrusor dysfunction. This condition is characterised by urinary incontinence that accompanies detrusor hyperreflexia when a specific bladder volume is reached, leakage of urine, lack of urge to urinate, or lack of awareness of bladder filling.

GC40.52 Mixed urinary incontinence associated with pelvic organ prolapse

A condition of the urinary system, caused by detrusor overactivity and impaired urethral function. This condition is characterised by a mix of stress and urge incontinence symptoms including involuntary loss of urine, urinary urgency, urinary frequency, or urinary incontinence when coughing, laughing, sneezing, exercising, or other physical activities that increase intra-abdominal pressure.

GC40.53 Overflow incontinence associated with pelvic organ prolapse

A condition of the urinary system, caused by the incomplete emptying of urine from the bladder and an acontractile detrusor muscle. This condition is characterised by urinary incontinence and leakage of urine in small volumes. This condition may be associated with obstruction, weak bladder muscles, injury, pharmacological use, diabetes mellitus, nerve damage or nervous system dysfunction.

GC40.54 Urinary incontinence, not otherwise specified with pelvic organ prolapse

GC40.6 Functional bladder disorders associated with pelvic organ prolapse

Any condition characterised by urinary postponement, stress incontinence, urge incontinence, urinary urgency, or urinary incontinence, or dysfunctional urinary voiding. These conditions are associated with abnormal displacement of one or more pelvic organs.

Exclusions: Diurnal enuresis (6C00.1)

Enuresis (6C00)

Nocturnal and diurnal enuresis (6C00.2)

Nocturnal enuresis (6C00.0)

Coded Elsewhere: Absent or diminished bladder sensation associated with pelvic organ prolapse (GC50.10)

GC40.60 Overactive bladder associated with pelvic organ prolapse

A condition of the bladder, caused by impaired kidney function, dysfunctional or absent nerve innervation, involuntary contraction of the bladder muscles, diabetes, pharmacological use, or infection. This condition is characterised by a sudden urge to urinate, urinary frequency, and urge incontinence. This condition may also present with nocturia.

GC40.6Y Other specified functional bladder disorders associated with pelvic organ prolapse

GC40.6Z Functional bladder disorders associated with pelvic organ prolapse, unspecified

GC40.Z Pelvic organ prolapse, unspecified

GC41 Anorectal dysfunction associated with pelvic organ prolapse

Any condition characterised by abnormal or absent function of the anus and rectum and dysfunctional defecation or flatus. These conditions are associated with abnormal displacement of one or more pelvic organs.

GC42 Sexual dysfunction associated with pelvic organ prolapse

A condition affecting women, characterised by difficulties experienced in the sensations or function of the genital system during normal sexual activity. This condition is associated with abnormal displacement of the vagina, introitus, or pelvic floor tissues.

GC42.0 Diminished sensation due to vaginal or introital laxity

A condition characterised by decreased or absent feeling due to decreased muscle tone in the vaginal muscles or at the vaginal opening (introitus).

GC42.1 Obstructed intercourse

A condition of the genital system, caused by obstruction or blockage in the vaginal canal, or hypertonicity of the vaginal muscles. This condition is characterised by the inability to engage in vaginal sexual intercourse.

GC4Z Female pelvic floor dysfunction, unspecified

GC50 Functional bladder disorders, not otherwise specified

Any other condition characterised by symptoms that include overactive bladder syndrome, voiding postponement, stress incontinence, giggle incontinence, and dysfunctional voiding in children, without further specification.

Exclusions: Diurnal enuresis (6C00.1)

Nocturnal and diurnal enuresis (6C00.2)

Enuresis (6C00)

Nocturnal enuresis (6C00.0)

GC50.0 Overactive bladder

A urological condition characterised by urgency and frequency, as well as the potential for nocturia, which may or may not be accompanied by incontinence.

Exclusions: Diurnal enuresis (6C00.1)

Nocturnal and diurnal enuresis (6C00.2)

Enuresis (6C00)

Nocturnal enuresis (6C00.0)

Coded Elsewhere: Overactive bladder associated with pelvic organ prolapse (GC40.60)

GC50.1 Absent or diminished bladder sensation

A condition of the bladder, caused by lack of muscle tone, dysfunctional or absent innervation, or chronic obstruction. This condition is characterised by a large, dilated bladder and incomplete bladder emptying.

GC50.10 Absent or diminished bladder sensation associated with pelvic organ prolapse

GC50.1Y Other specified absent or diminished bladder sensation

GC50.1Z Absent or diminished bladder sensation, unspecified

GC50.Y Other specified functional bladder disorders, not otherwise specified

GC50.Z Functional bladder disorders, not otherwise specified, unspecified

GC51 Female Genital Mutilation

A condition caused by procedures or other interventions for non-medical purposes. This condition is characterised by the partial or total removal of the external female genitalia or other injury to the female genital organs.

Exclusions: Traumatic amputation of entire vulva (NB93.24)

Traumatic amputation of part of vulva (NB93.25)

GC51.0 Female Genital Mutilation Type 1

Vulvar abnormality caused by partial or total removal of the clitoris and/or the prepuce (clitoridectomy).

GC51.00 Female Genital Mutilation Type 1a

Removal of the clitoral hood or prepuce only.

GC51.01 Female Genital Mutilation Type 1b

Removal of the clitoris with the prepuce.

GC51.0Z Female Genital Mutilation Type 1, unspecified

GC51.1 Female Genital Mutilation Type 2

Vulvar abnormality caused by partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (excision).

GC51.10 Female Genital Mutilation Type 2a

Removal of the labia minora only.

GC51.11 Female Genital Mutilation Type 2b

Partial or total removal of the clitoris and the labia minora.

GC51.12 Female Genital Mutilation Type 2c

Partial or total removal of the clitoris, the labia minora and the labia majora.

GC51.1Z Female Genital Mutilation Type 2, unspecified

GC51.2 Female Genital Mutilation Type 3

Vulvar/vaginal abnormality caused by narrowing of the vaginal orifice with a covering seal, as a result from cutting and appositioning the labia minora and/or the labia majora, with or without excision of the clitoris (infibulation).

GC51.20 Female Genital Mutilation Type 3a

Removal and apposition of the labia minora.

GC51.21 Female Genital Mutilation Type 3b

Removal and apposition of the labia majora.

GC51.2Z Female Genital Mutilation Type 3, unspecified

GC51.3 Female Genital Mutilation Type 4

All other harmful procedures to the female genitalia for non-medical purposes, for example: pricking, piercing, incising, scraping and cauterization.

GC51.Z Female Genital Mutilation, unspecified

Postprocedural disorders of genitourinary system (BlockL1‑GC7)

Any disorder caused by or subsequent to any intervention of the genitourinary system.

Exclusions: Irradiation cystitis (GC00)

States associated with artificial menopause (GA30.3)

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

GC70 Postoperative adhesions of vagina

A condition caused by or subsequent to any vaginal surgery or intervention. This condition is characterised by fibrous bands of scar tissue between the intravaginal tissues (intravaginal adhesions). This condition may also present with pelvic pain and dyspareunia.

GC71 Prolapse of vaginal vault after hysterectomy

A condition of the vagina, caused by or subsequent to hysterectomy. This condition is characterised by descensus of the vaginal vault that may also lead to weakening of the vaginal walls.

GC72 Postprocedural urethral stricture

Urethral stricture caused by catheterization, transurethral manipulations (e.g. transurethral resections), urethral instillations, or irradiation exposure

GC73 Postprocedural pelvic peritoneal adhesions

A condition caused by or subsequent to any pelvic intervention leading to damage and inflammation of the peritoneum. This condition is characterised by fibrous bands of scar tissue and abnormal connection between pelvic organs or tissues. This condition may also present with pelvic pain or bowel obstruction.

Exclusions: Endometriosis (GA10)

GC74 Malfunction or complication of external stoma of urinary tract

A condition caused by a surgically created opening connecting the urinary tract to the external environment. This condition is characterised by dysfunction or decreased function of the incision.

Exclusions: Postsurgical leak (NE81.3)

GC75 Malfunction of the afferent segment of a continent urinary pouch

A condition characterised by the dysfunction or lack of function of a surgically created urine reservoir within the body, specifically along the path by which urine enters the pouch.

GC76 Malfunction of the efferent segment of a continent urinary pouch

A condition characterised by the dysfunction or lack of function of a surgically created urine reservoir within the body, specifically along the path by which urine exits the pouch.

GC77 Postprocedural nonmenstrual uterine bleeding

Uterine bleeding occurring after procedure (i.e. uterine surgery, induced abortion, …)

GC78 Postprocedural acute female pelvic inflammatory disease

GC79 Disorders of breast reduction

GC7A Disorders of breast augmentation

A group of disorders that may arise in concert with or subsequent to the surgical placement of breast implants.

GC7B Postinterventional ischemia or infarction of kidney

This refers to a restriction in blood supply to tissues of the kidney due to a health care intervention causing a shortage of oxygen and glucose needed for cellular metabolism resulting in the death of kidney tissue cells.

GC8Y Other specified diseases of the genitourinary system

GC8Z Diseases of the genitourinary system, unspecified