

# Guidance on Documentation and Coding for Amputation Status, Prosthetics and Artificial Limbs

## Overview: Amputation status (Z89)

Amputation status represents the absence of a limb that has been removed by trauma, medical illness or surgery. Amputation status must be addressed and reported annually to capture the condition. Documentation on the chart should include regular examinations of the extremities, the existence of any amputations (including level, laterality, and impact on the member's health (even stating the patient is coping well with amputation demonstrates adequate assessment)).

## Causes that lead to amputation

- Severe injury
- Serious burns
- Cancerous tumor involving the bone or muscle of the limb
- Serious infection that does not get better with antibiotics or other treatment
- Frostbite (severe)
- Damaged limb due to peripheral arterial disease
  - Resulting from diabetes and/or atherosclerosis

## Documentation guidance

According to the American Hospital Association (AHA) coding clinic Volume 4, Limb Status Code – Guidelines, “These codes are to be used to identify persons who are missing limbs due to trauma or surgical amputation and no current disease or residual exists at the amputation site.” To report a code to the highest level of specificity, the medical record should include pertinent details such as:

- Anatomical site and laterality
- Level of amputation (complete/partial)
- Presence of prosthetics
- Associated malignancies
- Complications and late effects
  - Gangrene
  - Phantom limb syndrome
- Underling conditions
  - Peripheral vascular disease
  - Diabetes
  - Atherosclerosis
- Complications when applicable
  - Deformity of joint
  - Surgical site injections
  - Hematoma
  - Necrosis
- Physical therapy
- For risk adjustment purposes, status conditions such as amputations need to be reported on an annual basis.

**Traumatic amputations** are typically reported from the hospital (inpatient, outpatient) at the time services are provided for the injury. For traumatic amputations and complications, please refer to ICD categories S00-T88. If no sequelae and no more treatment is being directed to the traumatic amputation, code as a status with category Z89.

**Acquired absence of the limb** codes are not to be reported for congenital absence of the limbs. Refer to the ICD-10-CM Alphabetical Index: Absence > By Site (Congenital).

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## ICD-10-CM Code information

### Coding amputation status

- Level of amputation (complete/partial)
- ICD-10-CM alphabetical index: absence > by Site (acquired)
- Category Z89 are the status codes for acquired absence of the limb

### Acquired Absence of Upper Limb

Codes in category Z89 describe post procedural and post-traumatic absence of a limb, when there are neither complications of the amputation nor treatment directed toward the site.

Use following as final digit to indicate laterality:

- 1: right
- 2: left
- 9: unspecified

**Z89.01x** Acquired absence of thumb.

**Z89.02x** Acquired absence of other finger(s).

- Excludes: acquired absence of thumb (Z89.01-)

**Z89.11x** Acquired absence of hand

**Z89.12x** Acquired absence of wrist

- Includes: Disarticulation at wrist

**Z89.51x** Acquired absence of leg, below knee

**Z89.52x** Acquired absence of knee

- Includes: Acquired absence of knee joint following explanation of knee joint prosthesis, with or without presence of antibiotic-impregnated cement spacer

**Z89.20x** Acquired absence of upper limb, unspecified level

- Includes: Acquired absence of arm

**Z89.21x** Acquired absence of upper limb, below elbow

**Z89.22x** Acquired absence of upper limb, above elbow

- Includes: Disarticulation at elbow

**Z89.23x** Acquired absence of shoulder

- Includes: Acquired absence of shoulder joint following explanation of shoulder joint prosthesis, with or without presence of antibiotic-impregnated cement spacer

### Acquired Absence of Lower Limb

**Z89.41x** Acquired absence of great toe

**Z89.42x** Acquired absence of other toe(s)

- Excludes: acquired absence of great toe (Z89.41-)

**Z89.43x** Acquired absence of foot

**Z89.44x** Acquired absence of ankle

- Includes: Disarticulation of ankle

**Z89.61x** Acquired absence of leg, above knee

- Includes: Acquired absence of leg not otherwise specified, disarticulation at knee

**Z89.62x** Acquired absence of hip

- Includes: Acquired absence of hip joint following explanation of hip joint prosthesis, disarticulation at the hip

## Overview: Prosthetics/Artificial limb

**Z44.00x** Encounter for fitting and adjustment of unspecified Artificial Arm

**Z44.01x** Encounter for fitting and adjustment of complete Artificial Arm

**Z44.02x** Encounter for fitting and adjustment of partial Artificial Arm

**Z44.10x** Encounter for fitting and adjustment of unspecified Artificial Leg

**Z44.11x** Encounter for fitting and adjustment of complete Artificial Arm

**Z44.12x** Encounter for fitting and adjustment of partial Artificial Arm

**Z97** Presence of other devices

- Excludes: complications of internal prosthetic devices, implants and grafts (T82-T85)
- Excludes: fitting and adjustment of prosthetic and other devices (Z44-Z46) presence of cerebrospinal fluid drainage device (Z98.2)

**Z97.10** Presence of artificial limb (complete) (partial), unspecified

**Z97.11** Presence of artificial right arm (complete) (partial)

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## Overview: Prosthetics/Artificial limb

- Z97.12** Presence of artificial left arm (complete) (partial)
- Z97.13** Presence of artificial right leg (complete)
- Z97.14** Presence of artificial left leg (complete) (partial)
- Z97.15** Presence of artificial arms, bilateral (complete) (partial)
- Z97.16** Presence of artificial legs, bilateral (complete) (partial)
- G54** Phantom limb syndrome
- G54.6** Phantom limb syndrome with pain
- G54.7** Phantom limb syndrome without pain
  - Includes: Phantom limb syndrome not otherwise specified

## References

- “ICD-10.” Centers for Medicare & Medicaid Services, CMS.gov. <http://www.cms.gov/medicare/coding/icd10>