

MANAGING YOUR PATIENT EPISODES  
**IMPAIRMENT CLASSIFICATION**  
**EXPLANATION**



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**ORTHOPEDIC CARE TYPE**

*Note: The body part selected for episodes in the Orthopedic Care Type cues the appropriate survey into the system for completion. If Body Part is not selected with Orthopedic Care Type, the Generic Intake/Status Surveys are given.*

**Impairments for all Body Parts:**

	ICD9 Code(s)
Arthropathies	710-716
Spine Pathology	720-724
Muscle, Tendon + Soft Tissue Disorders	725-729
Osteo, Chondropathies & Acquired Musculoskeletal deformities	730-739
Fractures	800-829
Dislocations	830-839
Sprains / Strains	840-848
Wounds and Traumatic Amputation	870-879
Contusions	920-924
Crushing Injuries	925-929
Burns	940-949
Cancer	140-159
	160-165
	170-176
	179-208
	210-239
Post-surgical procedures: Musculoskeletal system	(*)
NOC-Musculoskeletal disorder (Not Otherwise Classified)	

**ORTHOPEDIC BODY PART**

- Shoulder
- Pelvis
- Hip
- Upper Leg
- Knee
- Lower Leg (w/o Knee)
- Ankle
- Foot
- Craniofacial
- Neck
- Ribs – Trunk
- Thoracic spine
- Lumbar spine
- Upper Arm
- Elbow
- Forearm
- Wrist
- Hand

(\*Use this impairment when the patient is presenting for care following a musculoskeletal surgical procedure. If selected, an additional field will open on the set up screen to select the type of surgical intervention from a drop down list. If the type of surgical intervention is not selected at the time the set-up is completed, this selection WILL BE REQUIRED at the time of the Staff Discharge.)

**Arthropathies**

Patients placed in this category should have conditions arising from diffuse inflammatory diseases of the connective

tissue and qualify for an ICD-9 code in the range of 710-716, including all subcategories. This category includes, but is not limited, to:

- Systemic Lupus
- Osteoarthroses
- Rheumatoid Arthritis

### *Spine Pathology*

Patients placed in this category should have conditions arising from acquired pathology of the spine and qualify for an ICD-9 code in the range of 720-724, including all subcategories. This category includes, but is not limited, to:

- Backache, unspecified
- Intervertebral disc
- Lumbago
- Sciatica
- Spondylosis
- Spinal stenosis
- Other

### *Muscle, Tendon + Soft Tissue Disorders*

Patients placed in this category should have conditions arising from acquired pathology of the muscle, tendon or soft tissue and qualify for an ICD-9 code in the range of 725-729, including all subcategories. This category includes, but is not limited, to:

- Adhesive capsulitis
- Rotator cuff syndrome
- Epicondylitis
- Tendonitis
- Bursitis
- Fibrositis
- Bone spur
- Synovitis, tenosynovitis
- Synovial cyst
- Ganglion
- Ruptures of tendon or synovium
- Fibromyalgia

### *Osteo Chondropathies & Acquired Musculoskeletal Deformities*

Patients placed in this category should have conditions arising from osteopathies, chondropathies and acquired musculoskeletal deformities and qualify for an ICD-9 code in the range of 730-739, including all subcategories. This category includes, but is not limited, to:

- Osteomyelitis, Periostitis
- Osteoitis
- Osteoporosis
- Bone cyst
- Malunion, non-union of fracture
- Chondromalacia
- Acquired deformities of extremities
- Acquired curvature of spine

## Fractures

Patients placed in this category should have conditions arising from fractures and qualify for an ICD-9 code in the range of 800-829, including all subcategories. Spinal cord injuries with spinal cord fracture should be excluded from this category.

## Dislocations

Patients placed in this category should have conditions arising from dislocation, including subluxation and displacement, but excluding congenital, pathological and recurrent dislocation, and qualify for an ICD-9 code in the range of 830-839, including all subcategories.

## Sprains / Strains

Patients placed in this category should have conditions arising from sprains and strains of joints and adjacent muscles and qualify for an ICD-9 code in the range of 840-848, including all subcategories.

## Wounds and Traumatic Amputation

Patients placed in this category should have conditions arising from open wounds covering more than one body part or a traumatic amputation of any part of the upper or lower extremity and qualify for an ICD-9 code in the range of 870-879, including all subcategories. Excludes surgical amputation.

## Contusions

Patients placed in this category should have conditions arising from contusion with intact skin surface and qualify for an ICD-9 code in the range of 920-924, including all subcategories. This category includes, but is not limited to, bruises and hematoma without fracture or open wounds.

## Crushing Injuries

Patients placed in this category should have conditions arising from crushing injuries and qualify for an ICD-9 code in the range of 925-929, including all subcategories. Excludes concussion, fractures and intracranial injury.

## Burns

Patients placed in this category should have conditions arising from burns and qualify for an ICD-9 code in the range of 940-949, including all subcategories. Excludes sunburn and friction burns.

## Post-surgical procedures: Musculoskeletal System

Patients placed in this category should have conditions arising after a surgical procedure. This category includes, but is not limited, to:

- Amputation, replantation
- Arthrodesis
- Arthrotomy
- Arthroscopy
- Fracture / dislocation repair
- Grafts
- Manipulation
- Repair, revision and reconstruction

*Reminder: If the Post-Surgical Musculoskeletal System is selected as the impairment, you will be required to select the type of surgical intervention from the provided drop down list. If not selected at the time the set-up is completed, this selection WILL BE REQUIRED at the time of the Staff Discharge*

## Cancer

Patients placed in this category should have conditions characterized by uncontrolled growth and spread of abnormal cells and qualify for an ICD-9 code in the range of 140–159; 160-165; 170–176; 179–208; 210-239.

## NOC-musculoskeletal disorders

This category is for all disorders that qualify for ICD-9 codes not included in the above musculoskeletal categories.

### NEUROLOGICAL CARE TYPE

*Note: A body part should NOT be entered for Neurologic Care Type*

Impairment	ICD9 Code(s)
Endocrine, Metabolic, Immunity Disorders	250-259 270-279
Psychotic Conditions	290-299
Neurotic, Personality and Other Non-Psychotic Disorders	300-316
Inflammatory Diseases of the Nervous System	320-326
Degenerative CNS disorders	330-337
Multiple Sclerosis	340
Non Traumatic CNS Dysfunction	341-343 345-349
Cerebrovascular Disorders	430-438
Quadriplegic Syndromes	344.00 -.04 805.0-.1 806.01-.19 952.0
Paraplegic Syndromes	344.1 805.2-.7 806.2-.5 952.1-.4
Other Paralytic Syndromes	344.2 – 344.9
Peripheral nervous system disorders	350-359, 953-957
Vertigo	386 and or 781.2
Congenital anomalies	740-759
Brain Injury	800; 850-854
Complications + Unspecified Injuries	958-959
Post-Surgical Procedures: Nervous system	(**)
NOC-Neuromuscular disorder	

*(\*\*Use if patient is being seen post surgery intervention re: Nervous System procedure)*

## Endocrine, Metabolic and Immunity Disorders

Patients placed in this category should have conditions arising from dysfunction of the endocrine, metabolic and immunity systems and include ICD-9 codes in the 250-259 and the 270-279 range. This category includes, but is not limited to AIDS, diabetes, acromegaly, gigantism and cystic fibrosis.

## Psychotic Conditions

Patients placed in this category should have conditions arising from psychotic conditions and include ICD-9 codes in the 290-299 range. This category includes, but is not limited to senile dementia, infantile autism and pervasive developmental disorder.

### Neurotic, Personality and Other Non-Psychotic Disorders

Patients placed in this category should have conditions arising from psychotic conditions and include ICD-9 codes in the 300-316 range. This category includes, but is not limited to attention deficit disorder, specific (reading/speech/dyslexia), mixed development delay and speech disorders such as dyspraxia syndrome, neurotic dysphagia, receptive and expressive language disorders, reading disorder, learning deficit, . This category excludes infantile development delay.

### Inflammatory Diseases of the Nervous System

Patients placed in this category should have or had infectious diseases of the CNS and qualify for an ICD-9 code in the range of 320-326, including all subcategories. This category includes, but is not limited to:

- Encephalitis
- Intercranial abcess
- Interspinal abcess
- Meningitis
- Myelitis

### Degenerative CNS disorders

Patients placed in this category should have hereditary and degenerative diseases of the CNS and qualify for an ICD-9 code in the range of 330-337, including all subcategories. This category includes, but is not limited to:

- Alzheimer's
- Amyotrophic Lateral Sclerosis
- Anterior Horn disease
- Parkinsonism
- Post Polio Syndrome
- Reflex Sympathetic dystrophy

### Multiple Sclerosis

Patients placed in this category should have Multiple Sclerosis and qualify for an ICD9 code of 340.

### Non Traumatic CNS Dysfunction

Patients placed in this category should have disorders of the CNS and qualify for an ICD-9 code in the range of 341-343 and 345-349, including all subcategories. This category includes, but is not limited to:

- Cerebral Palsy
- Epilepsy
- Migraine
- Other demyelinating CNS diseases
- Other conditions of the brain or nervous system
- Unspecified hemiplegia / hemiparesis
- Quadriparesis

### Cerebrovascular Disorders

Patients placed in this category should have conditions of cerebrovascular disease and qualify for an ICD-9 code in the range of 430-438, including all subcategories.

Included in this category are:

- Cerebral arterial hemorrhage
- Cerebral arterial occlusion
- Cerebral arterial ischemia
- Other cerebrovascular disease

Hemiplegia affecting right or left side

Other Paralytic syndromes

This category includes, but is not limited to other causes of speech disorders such as:

Dysphagia

Dysarthria

Slurred speech

### Quadriplegic Syndromes

Patients placed in this category should have disorders of the nervous system and qualify for an ICD-9 code in the range of 344.00 – 344.04, or 805.0-805.1, or 806.01-806.19 or 952.0 including all subcategories. This category includes, but is not limited to other causes of quadriplegic syndromes such as inflammatory disease, congenital anomalies, peripheral nervous system disorders, cancer, tumors, aneurisms, etc.

### Paraplegic Syndromes

Patients placed in this category should have disorders of the CNS and qualify for an ICD-9 code in the range of 344.1, or 805.2-805.7, or 806.2-806.5 or 952.1-952.4 including all subcategories. This category includes, but is not limited, to other causes of paraplegic syndromes such as inflammatory disease, congenital anomalies, peripheral nervous system disorders, cancer, tumors, aneurisms, etc.

### Other Paralytic Syndromes

Patients placed in this category should possess these conditions without further specifications or with unspecified cause and qualify for an ICD-9 code of 344.2 – 344.9, including all subcategories. This category includes, but is not limited, to:

Cauda equina syndrome

Monoplegia

Other paralytic syndromes, specified or unspecified

*Also included in this category should be other causes of paralytic syndromes such as cancer, tumors, aneurisms, etc.*

### Peripheral nervous system disorders / injuries

Patients placed in this category should have a disorder or injury of the peripheral nervous system and qualify for an ICD-9 code in the range of 350-359 or 953-957, including all subcategories. This category includes, but is not limited, to:

Cranial Nerve Disorder

Erb's Palsy

Guillain - Barre

Muscular Dystrophy

Nerve root / Plexus Disorder

Polyneuropathy

Brachial Plexus Injury

Cervical rib

Thoracic Outlet syndrome

Scalenus Anticus

Phantom limb

### Vertigo

Patients placed in this category should have a vertiginous syndrome, other disorders of the vestibular system or ataxic or staggering gait conditions and qualify for an ICD-9 codes 386 and or 781.2, including all subcategories, if any.

### Congenital anomalies

Patients placed in this category should have conditions arising from congenital conditions and qualify for an ICD-9 code in the range of 740-759, including all subcategories. This category includes, but is not limited, to:

Spina Bifida  
 Congenital cystic lung  
 Cleft Palate  
 Down’s syndrome  
 Other congenital anomalies of pulmonary, circulatory, vascular or musculoskeletal systems.  
 Infantile development delay

**Brain Injury**

Patients placed in this category should have conditions arising from intracranial injury with or without fracture to the skull and qualify for an ICD-9 code in the range of 800 and/or 850-854, including all subcategories. This category includes, but is not limited, to:

Open and closed skull fracture with Brain injury  
 Concussion  
 Cerebral laceration and contusion  
 Specified or unspecified intracranial hemorrhage  
 Other intracranial injury

**Complications & Unspecified Injuries**

Patients placed in this category should have conditions arising from traumatic complications and unspecified injuries and qualify for an ICD-9 code in the range of 958-959, including all subcategories.

**Post-surgical procedures: Nervous system**

Patients placed in this category should have conditions arising after a surgical procedure with surgical procedure codes included in the neuro care type paired with V58.72. This category includes, but is not limited, to:

Craniotomy  
 Aneurysm  
 Repair  
 CSF shunt  
 Spine or spinal cord  
 Neuroplasty (neurolysis or nerve decompression)

**NOC-Neuromuscular disorder**

This category is for all disorders that qualify for ICD-9 codes not included in the above categories.

**CARDIOVASCULAR CARE TYPE**

*Note: A body part should not be entered for Cardiovascular Care Type*

<b>Impairment</b>	<b>ICD-9 Code(s)</b>
Rheumatic and Heart Disease	390-429
Cerebrovascular Disorders	430-438
Diseases of Arteriel System	440-448
Diseases Of Veins and Lymphatics	451-459
Lung Disease	460-519

**Rheumatic And Heart Disease**

Patients placed in this category should have conditions of rheumatic and heart disease and qualify for an ICD-9 code in the range of 390-429, including all subcategories. Included in this category are:

Acute and Chronic Rheumatic Disease  
Hypertensive Disease  
Ischemic Heart Disease  
Pulmonary Heart Disease  
Other Heart Disease

### Cerebrovascular Disorders

Patients placed in this category should have conditions of cerebrovascular disease and qualify for an ICD-9 code in the range of 430-438, including all subcategories. Included in this category are:

Cerebellar arterial hemorrhage  
Cerebellar arterial occlusion  
Cerebellar arterial ischemia  
Other cerebrovascular disease  
Hemiplegia affecting right or left side  
Other Paralytic syndromes

*This category includes, but is not limited, to other causes of speech disorders such as dysphagia, dysarthria, slurred speech, etc.*

### Diseases of Arteriel System

Patients placed in this category should have conditions of cerebrovascular disease and qualify for an ICD-9 code in the range of 440-448, including all subcategories. Included in this category are:

Atherosclerosis  
Aneurysms  
Peripheral Vascular Disorders  
Embolisms and Thrombosis

### Diseases of Veins and Lymphatics

Patients placed in this category should have conditions of cerebrovascular disease and qualify for an ICD-9 code in the range of 451-459, including all subcategories. Included in this category are:

Phlebitis  
Thrombophlebitis  
Disorders of the Lyphatic Channels

### Lung Disease

Patients placed in this category should have conditions arising from any disease or disorder that impairs the function of the lungs, including obstructive and restrictive lung diseases, and qualify for an ICD-9 code in the range of 460 – 519. This category includes, but is not limited to:

Chronic Obstructive Pulmonary Disease (COPD)  
Emphysema  
Asthma  
Bronchiectasis  
Pulmonary fibrosis  
Lung cancer  
Pneumonia



## PELVIC FLOOR DYSFUNCTION CARE TYPE

*Note: A body part should not be entered for Pelvic Floor Care Type*

### Urinary Incontinence

Patients placed in this category should have conditions characterized by involuntary or accidental loss of urine. This category includes, but is not limited to:

- Nocturnal enuresis
- Overflow incontinence
- Stress incontinence
- Transient urinary incontinence
- Urge incontinence

### Failure to store – Bowel

Patients placed in this category should have conditions characterized by the loss of bowel control, resulting in involuntary passage of feces.

### Failure to empty – urinary retention

Patients placed in this category should have conditions characterized by the need to urinate frequently, but failure to empty the bladder completely.

### Failure to empty – bowel constipation

Patients placed in this category should have conditions characterized by an acute or chronic condition in which bowel movements occur less often than usual or consist of hard, dry stools that are painful or difficult to pass.

### Other Urinary or Bowel Dysfunctions

Patients placed in this category include frequency, urgency, urine or bowel straining, nocturia, and painful elimination.

### Pelvic Floor Pain

Patients placed in this category include vaginismus, dyspareunia, levator ani syndrome, coccydynia, proctalgia fugax, interstitial cystitis, vulvadynia, prostatitis, pelvic floor tension myalgia and pain in pelvis, groin, and lower abdomen.

### Supportive Dysfunction

Patient placed in this category include cystocele, rectocele, enterocele, and uterine prolapsed.

## INDUSTRIAL CARE TYPE

***Use ONLY if patient is being treated in a WORK HARDENING or WORK CONDITIONING PROGRAM***

Body Part and Impairments available follow the outline for Orthopedic Care Type

## PAIN MANAGEMENT CARE TYPE

***Use ONLY if patient is being treated in a MULTIDISCIPLINARY PAIN MANAGEMENT PROGRAM***

Body Parts available following the outline for Orthopedic Care Type. All Impairments are available for this Care Type.