INTEGRATED SYSTEM CODES MANUAL

Published by
Chief Information Office
Robert Greenless, PhD.

IMPROVING COMMUNITY CARE THROUGH TECHNOLOGY

Originally Published in February, 2004
(Please see Table of Contents for updates of individual pages)
### TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Page</th>
<th>Topics</th>
<th>Date of Last Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Admission Necessity Code (Type of Admission)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Agency of Primary Responsibility (APR)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Age Category</td>
<td>7/1/2010</td>
</tr>
<tr>
<td>5</td>
<td>Authorization for Treatment of Minor</td>
<td>11/7/2011</td>
</tr>
<tr>
<td>7</td>
<td>Axis III - Physical Diagnosis</td>
<td>7/25/2012</td>
</tr>
<tr>
<td>26</td>
<td>Axis IV - Psychosocial &amp; Environmental Problems</td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Axis V - (GAF) Global Assessment of Functioning Scale</td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>Cities and Communities in L.A. County</td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Coordinator, SFPR</td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>Conservatorship/Court Status</td>
<td></td>
</tr>
<tr>
<td>34</td>
<td>Country Codes</td>
<td>7/2/2008</td>
</tr>
<tr>
<td>42</td>
<td>County Codes</td>
<td></td>
</tr>
<tr>
<td>43</td>
<td>DSM IV Diagnoses Codes in Alphabetical Order</td>
<td>9/13/2007</td>
</tr>
<tr>
<td>58</td>
<td>DSM IV Diagnoses Codes in Numerical Order</td>
<td>9/13/2007</td>
</tr>
<tr>
<td>73</td>
<td>Dual Diagnoses Codes</td>
<td>5/17/2011</td>
</tr>
<tr>
<td>75</td>
<td>Education Level</td>
<td></td>
</tr>
<tr>
<td>76</td>
<td>Employment Status</td>
<td></td>
</tr>
<tr>
<td>77</td>
<td>Ethnicity</td>
<td>4/10/2009</td>
</tr>
<tr>
<td>78</td>
<td>Evidence-Based Practices/Service Strategies/PEI Services</td>
<td>10/12/2011</td>
</tr>
<tr>
<td>80</td>
<td>Facility Type Codes</td>
<td>11/7/2011</td>
</tr>
<tr>
<td>81</td>
<td>Financial Responsibility</td>
<td></td>
</tr>
<tr>
<td>82</td>
<td>Gender</td>
<td></td>
</tr>
<tr>
<td>83</td>
<td>Handicap Indicator Codes</td>
<td></td>
</tr>
<tr>
<td>84</td>
<td>HMO/PHP</td>
<td></td>
</tr>
<tr>
<td>85</td>
<td>Insurance Type Code</td>
<td>3/22/2012</td>
</tr>
<tr>
<td>85</td>
<td>Intent of Service</td>
<td></td>
</tr>
<tr>
<td>86</td>
<td>Languages</td>
<td>7/1/2006</td>
</tr>
<tr>
<td>87</td>
<td>Late Codes (Delay Reason Codes)</td>
<td>4/17/2012</td>
</tr>
<tr>
<td>88</td>
<td>Legal Status</td>
<td>5/8/2007</td>
</tr>
<tr>
<td>96</td>
<td>Level of Care</td>
<td></td>
</tr>
<tr>
<td>99</td>
<td>Living Arrangement</td>
<td></td>
</tr>
<tr>
<td>100</td>
<td>Marital Status</td>
<td></td>
</tr>
<tr>
<td>101</td>
<td>Medication Monitoring Exception Messages</td>
<td></td>
</tr>
<tr>
<td>102</td>
<td>Mental Health District</td>
<td></td>
</tr>
<tr>
<td>103</td>
<td>Other Factors – Physical, Developmental, Substance Abuse</td>
<td></td>
</tr>
<tr>
<td>104</td>
<td>Operations Codes</td>
<td></td>
</tr>
<tr>
<td>104</td>
<td>Patient Status Code</td>
<td>3/21/2012</td>
</tr>
<tr>
<td>117</td>
<td>Place of Service (see “Service Location Codes”)</td>
<td>2/23/2009</td>
</tr>
<tr>
<td>105</td>
<td>Place of Birth</td>
<td></td>
</tr>
<tr>
<td>106</td>
<td>Point of Origin for Admission</td>
<td>3/21/2012</td>
</tr>
<tr>
<td>106</td>
<td>Primary Problem Area</td>
<td>1/4/2007</td>
</tr>
</tbody>
</table>
## TABLE OF CONTENTS (con’t.)

<table>
<thead>
<tr>
<th>Page</th>
<th>Topics</th>
<th>Date of Last Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>107</td>
<td>Program Area</td>
<td>7/1/2010</td>
</tr>
<tr>
<td>108</td>
<td>Referral In Codes</td>
<td>11/17/2006</td>
</tr>
<tr>
<td>112</td>
<td>Referral Out Codes</td>
<td>9/21/2006</td>
</tr>
<tr>
<td>116</td>
<td>Service Area/Bureau</td>
<td></td>
</tr>
<tr>
<td>117</td>
<td>Service Location Codes</td>
<td>2/23/2009</td>
</tr>
<tr>
<td>118</td>
<td>Service Recipient</td>
<td>7/1/2010</td>
</tr>
<tr>
<td>119</td>
<td>Source of Income</td>
<td></td>
</tr>
<tr>
<td>119</td>
<td>State Codes</td>
<td></td>
</tr>
<tr>
<td>120</td>
<td>Street Abbreviations</td>
<td></td>
</tr>
<tr>
<td>121</td>
<td>Supervisory Districts</td>
<td></td>
</tr>
<tr>
<td>121</td>
<td>Target Group</td>
<td></td>
</tr>
<tr>
<td>122</td>
<td>Taxonomy Codes</td>
<td>5/17/2011</td>
</tr>
<tr>
<td>133</td>
<td>Type of Admission (see “Admission Necessity Code”)</td>
<td>3/21/2012</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## ADMISSION NECESSITY CODE (TYPE OF ADMISSION)

Identifies the type or reason for the client’s admission into an acute care hospital.

<table>
<thead>
<tr>
<th>Code</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Emergency</td>
</tr>
<tr>
<td>2</td>
<td>Urgent</td>
</tr>
<tr>
<td>3</td>
<td>Elective</td>
</tr>
<tr>
<td>9</td>
<td>Information not Available</td>
</tr>
</tbody>
</table>

**NOTE:**
The above codes are only applicable to Inpatient Episodes.

## AGENCY OF PRIMARY RESPONSIBILITY (APR)

<table>
<thead>
<tr>
<th>Code</th>
<th>Agency of Primary Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Department of Children’s Services: Dependent and/or under Supervision of DCS (including Family Preservation)</td>
</tr>
<tr>
<td>2</td>
<td>Department of Probation: Ward</td>
</tr>
<tr>
<td>3</td>
<td>Department of Children’s Services: Dependent and/or under DCS Supervision; and School District: SEP eligible</td>
</tr>
<tr>
<td>4</td>
<td>Department of Probation: Ward; and School District: SEP eligible</td>
</tr>
<tr>
<td>5</td>
<td>School District: SEP eligible</td>
</tr>
<tr>
<td>6</td>
<td>School District: SED on IEP (not SEP)</td>
</tr>
<tr>
<td>7</td>
<td>None</td>
</tr>
</tbody>
</table>
### AGE CATEGORY

#### Age Categories for Community Outreach Services (COS) BEFORE July 1, 2008

<table>
<thead>
<tr>
<th>Code</th>
<th>Age Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>0 - 12</td>
</tr>
<tr>
<td>02</td>
<td>13 - 17</td>
</tr>
<tr>
<td>03</td>
<td>0 - 17</td>
</tr>
<tr>
<td>04</td>
<td>18 - 24</td>
</tr>
<tr>
<td>05</td>
<td>25 - 44</td>
</tr>
<tr>
<td>06</td>
<td>45 - 59</td>
</tr>
<tr>
<td>07</td>
<td>18 - 59</td>
</tr>
<tr>
<td>08</td>
<td>60+</td>
</tr>
<tr>
<td>09</td>
<td>Unknown</td>
</tr>
</tbody>
</table>

#### Age Categories for Community Outreach Services (COS) EFFECTIVE July 1, 2008

<table>
<thead>
<tr>
<th>Code</th>
<th>Age Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>0 - 15</td>
</tr>
<tr>
<td>11</td>
<td>16 - 25</td>
</tr>
<tr>
<td>12</td>
<td>26 - 59</td>
</tr>
<tr>
<td>08</td>
<td>60+</td>
</tr>
<tr>
<td>13</td>
<td>Multiple</td>
</tr>
<tr>
<td>09</td>
<td>Unknown</td>
</tr>
</tbody>
</table>
Authorization for Treatment of Minor is required to open an episode, i.e., if it is not entered, the computer will not accept the other episode information. All clients under 18 at admission must have a code indicating the source of authorization for their treatment. For clients 18 or older at admission, the field does not appear on the Episode screen. The field represents authority for treatment at time of admission only. Updating this field as status changes within an episode should not be done.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Parent</td>
<td>A father or mother who has legal custody authorizes treatment.</td>
</tr>
<tr>
<td>02</td>
<td>Juvenile Court W &amp; I 300A</td>
<td>Authorization by Juvenile Court due to determination minor did not have effective parental care or control.</td>
</tr>
<tr>
<td>03</td>
<td>Juvenile Court W &amp; I 300B</td>
<td>Authorization by Juvenile Court due to determination minor is destitute or not provided with necessities of life or a suitable home.</td>
</tr>
<tr>
<td>04</td>
<td>Juvenile Court W &amp; I 300C</td>
<td>Authorization by Juvenile Court due to determination minor is dangerous to the public because of a mental or physical deficiency, disorder or abnormality.</td>
</tr>
<tr>
<td>05</td>
<td>Juvenile Court W &amp; I 300D</td>
<td>Authorization by Juvenile Court due to determination minor has an unfit home due to neglect, cruelty, depravity or physical abuse by a parent or guardian.</td>
</tr>
<tr>
<td>06</td>
<td>Juvenile Court W &amp; I 300E</td>
<td>Authorization by Juvenile Court due to determination minor has been freed or relinquished for adoption for 12 months and no adoption petition has been granted.</td>
</tr>
<tr>
<td>07</td>
<td>Juvenile Court W &amp; I 300</td>
<td>For use when multiple W &amp; I 300s or a W &amp; I 300 (letter unknown) is the authorization.</td>
</tr>
<tr>
<td>08</td>
<td>Juvenile Court W &amp; I 601</td>
<td>Authorization by Juvenile Court due to determination minor is persistently disobedient or truant.</td>
</tr>
<tr>
<td>09</td>
<td>Juvenile Court W &amp; I 602</td>
<td>Authorization by Juvenile Court due to determination minor who has committed an adult-type crime will be adjudicated as a minor due to his/her age.</td>
</tr>
<tr>
<td>10</td>
<td>Juvenile Court W &amp; I 7023</td>
<td>Authorization by Juvenile Court due to determination minor is not guilty of an offense by reason of insanity.</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
<td>Definition</td>
</tr>
<tr>
<td>------</td>
<td>------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>11</td>
<td>Legal Guardian</td>
<td>Authorization by person other than a parent who has legal custody of minor.</td>
</tr>
<tr>
<td>12</td>
<td>Adoption Agency</td>
<td>Authorization by adoption agency which has become the guardian.</td>
</tr>
<tr>
<td>13</td>
<td>LPS Conservator</td>
<td>Authorization by a person responsible for the affairs of minor under jurisdiction of Lanterman-Petris-Short Act.</td>
</tr>
<tr>
<td>14</td>
<td>Emancipated Minor</td>
<td>Authorization by self, i.e., minor who is legally released from parental control or supervision.</td>
</tr>
<tr>
<td>15</td>
<td>Other</td>
<td>Other authorization not listed above.</td>
</tr>
<tr>
<td>16</td>
<td>Family Code Section 6924</td>
<td>Authorization by self, i.e. minor who is eligible to consent for services under Family Code Section 6924 criteria (danger to self/others or alleged victim of incest/child abuse).</td>
</tr>
<tr>
<td>17</td>
<td>Health &amp; Safety Code Section 124260</td>
<td>Authorization by self, i.e. minor who is eligible to consent for services under Health and Safety Code Section 124260 criteria (12 years or older and mature enough to participate) – Services are not claimable to Medi-Cal.</td>
</tr>
<tr>
<td>99</td>
<td>Unknown</td>
<td>A code for temporary use; the reason for authorization must be determined and entered as soon as possible.</td>
</tr>
</tbody>
</table>
# AXIS III- PHYSICAL DIAGNOSES

The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>001</td>
<td>CHOLERA</td>
</tr>
<tr>
<td>002</td>
<td>TYPHOID AND PARATYPHOID FEVERS</td>
</tr>
<tr>
<td>003</td>
<td>OTHER SALMONELLA INFECTIONS</td>
</tr>
<tr>
<td>004</td>
<td>SHigellosis</td>
</tr>
<tr>
<td>005</td>
<td>OTHER FOOD POISONING (BACTERIAL)</td>
</tr>
<tr>
<td>006</td>
<td>AMEBIASIS</td>
</tr>
<tr>
<td>007</td>
<td>OTHER PROTOZOAL INTESTINAL DISEASES</td>
</tr>
<tr>
<td>008</td>
<td>INTESTINAL INFECTIONS DUE TO OTHER ORGANISMS</td>
</tr>
<tr>
<td>009</td>
<td>ILL-DEFINED INTESTINAL INFECTIONS</td>
</tr>
<tr>
<td>010</td>
<td>PRIMARY TUBERCULOUS INFECTION</td>
</tr>
<tr>
<td>011</td>
<td>PULMONARY TUBERCULOSIS</td>
</tr>
<tr>
<td>012</td>
<td>OTHER RESPIRATORY TUBERCULOSIS</td>
</tr>
<tr>
<td>013</td>
<td>TUBERCULOSIS OF MENinges AND CENTRAL NERVOUS SYSTEM</td>
</tr>
<tr>
<td>014</td>
<td>TUBERCULOSIS OF INTESTINES, PERITONEUM, AND MESENTERIC</td>
</tr>
<tr>
<td>015</td>
<td>TUBERCULOSIS OF BONES AND JOINTS</td>
</tr>
<tr>
<td>016</td>
<td>TUBERCULOSIS OF GENITOURINARY SYSTEM</td>
</tr>
<tr>
<td>017</td>
<td>TUBERCULOSIS OF OTHER ORGANS</td>
</tr>
<tr>
<td>018</td>
<td>MILIARY TUBERCULOS</td>
</tr>
<tr>
<td>020</td>
<td>PLague</td>
</tr>
<tr>
<td>021</td>
<td>TULAREMIA</td>
</tr>
<tr>
<td>022</td>
<td>ANTHRAX</td>
</tr>
<tr>
<td>023</td>
<td>BRUCELLOSIS</td>
</tr>
<tr>
<td>024</td>
<td>GLANDERS</td>
</tr>
<tr>
<td>025</td>
<td>MELIODOSIS</td>
</tr>
<tr>
<td>026</td>
<td>RAT-BITE FEVER</td>
</tr>
<tr>
<td>027</td>
<td>OTHER ZOONOTIC BACTERIAL DISEASES</td>
</tr>
<tr>
<td>030</td>
<td>LEPROSY</td>
</tr>
<tr>
<td>031</td>
<td>DISEASES DUE TO OTHER MYCOBACTERIA</td>
</tr>
<tr>
<td>032</td>
<td>DIPHTHERIA</td>
</tr>
<tr>
<td>033</td>
<td>WHOOPING COUGH</td>
</tr>
<tr>
<td>034</td>
<td>STREPTOCOCCAL Sore Throat and Scarlet Fever</td>
</tr>
<tr>
<td>035</td>
<td>Erysipelas</td>
</tr>
<tr>
<td>036</td>
<td>MENINGOCOCCAL INFECTION</td>
</tr>
<tr>
<td>037</td>
<td>TETANUS</td>
</tr>
<tr>
<td>038</td>
<td>SEPTICEMIA</td>
</tr>
<tr>
<td>039</td>
<td>ACTINOMYCOTIC INFECTIONS</td>
</tr>
<tr>
<td>040</td>
<td>OTHER BACTERIAL DISEASES</td>
</tr>
<tr>
<td>041</td>
<td>BACTERIAL INFECTION IN CONDITIONS CLASSIFIED ELSEWHERE</td>
</tr>
<tr>
<td>042</td>
<td>HUMAN IMMUNODEFICIENCY VIRUS (HIV) DISEASE</td>
</tr>
<tr>
<td>045</td>
<td>ACUTE POLIOMYELITIS</td>
</tr>
<tr>
<td>046</td>
<td>SLOW VIRUS INFECTION OF CENTRAL NERVOUS SYSTEM</td>
</tr>
<tr>
<td>047</td>
<td>MENINGITIS DUE TO ENTEROVIRUS</td>
</tr>
<tr>
<td>048</td>
<td>OTHER ENTEROVIRUS DISEASES OF CENTRAL NERVOUS SYSTEM</td>
</tr>
<tr>
<td>049</td>
<td>OTHER NON-ARTHROPOD-BORNE VIRAL DISEASES</td>
</tr>
<tr>
<td>050</td>
<td>SMALLPOX</td>
</tr>
<tr>
<td>051</td>
<td>COWPOX AND PARAVACCINIA</td>
</tr>
<tr>
<td>052</td>
<td>CHICKENPOX</td>
</tr>
<tr>
<td>053</td>
<td>HERPES ZOSTER</td>
</tr>
<tr>
<td>054</td>
<td>HERPES SIMPLEX</td>
</tr>
<tr>
<td>055</td>
<td>MEASLES</td>
</tr>
<tr>
<td>056</td>
<td>RUBELLA</td>
</tr>
</tbody>
</table>
### AXIS III - PHYSICAL DIAGNOSES (con’t.)

The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>057</td>
<td>OTHER VIRAL EXANTHEMATA</td>
</tr>
<tr>
<td>060</td>
<td>YELLOW FEVER</td>
</tr>
<tr>
<td>061</td>
<td>DENGUE</td>
</tr>
<tr>
<td>062</td>
<td>MOSQUITO-BORNE VIRAL ENCEPHALITIS</td>
</tr>
<tr>
<td>063</td>
<td>TICK-BORNE VIRAL ENCEPHALITIS</td>
</tr>
<tr>
<td>064</td>
<td>VIRAL ENCEPHALITIS TRANSMITTED BY OTHER AND UNSPECIFIED</td>
</tr>
<tr>
<td>065</td>
<td>ARTHROPOD-BORNE HEMORRHAGIC FEVER</td>
</tr>
<tr>
<td>066</td>
<td>OTHER ARTHROPOD-BORNE VIRAL DISEASES</td>
</tr>
<tr>
<td>070</td>
<td>VIRAL HEPATITIS</td>
</tr>
<tr>
<td>071</td>
<td>RABIES</td>
</tr>
<tr>
<td>072</td>
<td>MUMPS</td>
</tr>
<tr>
<td>073</td>
<td>ORNITHOSIS</td>
</tr>
<tr>
<td>074</td>
<td>SPECIFIC DISEASES DUE TO COXSACKIE VIRUS</td>
</tr>
<tr>
<td>075</td>
<td>INFECTIOUS MONONUCLEOSIS</td>
</tr>
<tr>
<td>076</td>
<td>TRACHOMA</td>
</tr>
<tr>
<td>077</td>
<td>OTHER DISEASES OF CONJUNCTIVA DUE TO VIRUSES AND CHLAMYDIA</td>
</tr>
<tr>
<td>078</td>
<td>OTHER DISEASES DUE TO VIRUSES AND CHLAMYDIAE</td>
</tr>
<tr>
<td>079</td>
<td>VIRAL AND CHLAMYDIAL INFECTION</td>
</tr>
<tr>
<td>080</td>
<td>LOUSE-BORNE (EPIDEMIC) TYPHUS</td>
</tr>
<tr>
<td>081</td>
<td>OTHER TYPHUS</td>
</tr>
<tr>
<td>082</td>
<td>TICK-BORNE RICKETTSIOSES</td>
</tr>
<tr>
<td>083</td>
<td>OTHER RICKETTSIOSES</td>
</tr>
<tr>
<td>084</td>
<td>MALARIA</td>
</tr>
<tr>
<td>085</td>
<td>LEISHMANIASIS</td>
</tr>
<tr>
<td>086</td>
<td>TRYPANOSOMIASI</td>
</tr>
<tr>
<td>087</td>
<td>RELAPSING FEVER</td>
</tr>
<tr>
<td>088</td>
<td>OTHER ARTHROPOD-BORNE DISEASES</td>
</tr>
<tr>
<td>090</td>
<td>CONGENITAL SYPHILIS</td>
</tr>
<tr>
<td>091</td>
<td>EARLY SYPHILIS, SYMPTOMATIC</td>
</tr>
<tr>
<td>092</td>
<td>EARLY SYPHILIS, LATENT</td>
</tr>
<tr>
<td>093</td>
<td>CARDIOVASCULAR SYPHILIS</td>
</tr>
<tr>
<td>094</td>
<td>NEUROSYPHILIS</td>
</tr>
<tr>
<td>095</td>
<td>OTHER FORMS OF LATE SYPHILIS, WITH SYMPTOMS</td>
</tr>
<tr>
<td>096</td>
<td>LATE SYPHILIS, LATENT</td>
</tr>
<tr>
<td>097</td>
<td>OTHER AND UNSPECIFIED SYPHILIS</td>
</tr>
<tr>
<td>098</td>
<td>GONOCOCCAL INFECTIONS</td>
</tr>
<tr>
<td>099</td>
<td>OTHER VENEREAL DISEASES</td>
</tr>
<tr>
<td>100</td>
<td>LEPTOSPIROSIS</td>
</tr>
<tr>
<td>101</td>
<td>VINCENT'S ANGINA</td>
</tr>
<tr>
<td>102</td>
<td>YAWS</td>
</tr>
<tr>
<td>103</td>
<td>PINTA</td>
</tr>
<tr>
<td>104</td>
<td>OTHER SPIROCHETAL INFECTION</td>
</tr>
<tr>
<td>105</td>
<td>DERMATOPHYTOSI</td>
</tr>
<tr>
<td>111</td>
<td>DERMATOMYCOSIS, OTHER AND UNSPECIFIED</td>
</tr>
<tr>
<td>112</td>
<td>CANDIDIASIS</td>
</tr>
<tr>
<td>114</td>
<td>COCCIDIOIDOMYCOSIS</td>
</tr>
<tr>
<td>115</td>
<td>HISTOPLASMOsis</td>
</tr>
<tr>
<td>116</td>
<td>BLASTOMYCOTIC INFECTION</td>
</tr>
<tr>
<td>117</td>
<td>OTHER MYCOSES</td>
</tr>
<tr>
<td>118</td>
<td>OPPORTUNISTIC MYCOSES</td>
</tr>
<tr>
<td>120</td>
<td>SCHISTOSOMIASIS (BILHARZIASIS)</td>
</tr>
<tr>
<td>121</td>
<td>OTHER TREMATODE INFECTIONS</td>
</tr>
</tbody>
</table>
The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>122</td>
<td>ECHINOCOCCOSIS</td>
</tr>
<tr>
<td>123</td>
<td>OTHER CESTODE INFECTION</td>
</tr>
<tr>
<td>124</td>
<td>TRICHINOSIS</td>
</tr>
<tr>
<td>125</td>
<td>FILARIAL INFECTION AND DRACONTIASIS</td>
</tr>
<tr>
<td>126</td>
<td>ANCYLOSTOMIASIS AND NECATORIASIS</td>
</tr>
<tr>
<td>127</td>
<td>OTHER INTESTINAL HELMINTHIASES</td>
</tr>
<tr>
<td>128</td>
<td>OTHER AND UNSPECIFIED HELMINTHIASES</td>
</tr>
<tr>
<td>129</td>
<td>INTESTINAL PARASITISM, UNSPECIFIED</td>
</tr>
<tr>
<td>130</td>
<td>TOXOPLASMOSIS</td>
</tr>
<tr>
<td>131</td>
<td>TRICHOMEONIASIS</td>
</tr>
<tr>
<td>132</td>
<td>PEDICULOSIS AND PHTHIRUS INFESTATION</td>
</tr>
<tr>
<td>133</td>
<td>ACARIASIS</td>
</tr>
<tr>
<td>134</td>
<td>OTHER INFESTATION</td>
</tr>
<tr>
<td>135</td>
<td>SARCOCOCCOSIS</td>
</tr>
<tr>
<td>136</td>
<td>OTHER AND UNSPECIFIED INFECTIOUS AND PARASITIC DISEASES</td>
</tr>
<tr>
<td>137</td>
<td>LATE EFFECTS OF TUBERCULOSIS</td>
</tr>
<tr>
<td>138</td>
<td>LATE EFFECTS OF ACUTE POLIOMYELITIS</td>
</tr>
<tr>
<td>139</td>
<td>LATE EFFECTS OF OTHER INFECTIOUS AND PARASITIC DISEASES</td>
</tr>
<tr>
<td>140</td>
<td>MALIGNANT NEOPLASM OF LIP</td>
</tr>
<tr>
<td>141</td>
<td>MALIGNANT NEOPLASM OF TONGUE</td>
</tr>
<tr>
<td>142</td>
<td>MALIGNANT NEOPLASM OF MAJOR SALIVARY GLANDS</td>
</tr>
<tr>
<td>143</td>
<td>MALIGNANT NEOPLASM OF GUM</td>
</tr>
<tr>
<td>144</td>
<td>MALIGNANT NEOPLASM OF FLOOR OF MOUTH</td>
</tr>
<tr>
<td>145</td>
<td>MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED PARTS OF MOUTH</td>
</tr>
<tr>
<td>146</td>
<td>MALIGNANT NEOPLASM OF OROPHARYNX</td>
</tr>
<tr>
<td>147</td>
<td>MALIGNANT NEOPLASM OF NASOPHARYNX</td>
</tr>
<tr>
<td>148</td>
<td>MALIGNANT NEOPLASM OF HYPOPHARYNX</td>
</tr>
<tr>
<td>149</td>
<td>MALIGNANT NEOPLASM OF OTHER AND ILL-DEFINED SITES</td>
</tr>
<tr>
<td>150</td>
<td>MALIGNANT NEOPLASM OF ESOPHAGUS</td>
</tr>
<tr>
<td>151</td>
<td>MALIGNANT NEOPLASM OF STOMACH</td>
</tr>
<tr>
<td>152</td>
<td>MALIGNANT NEOPLASM OF SMALL INTESTINE, INCLUDING DUODENUM</td>
</tr>
<tr>
<td>153</td>
<td>MALIGNANT NEOPLASM OF COLON</td>
</tr>
<tr>
<td>154</td>
<td>MALIGNANT NEOPLASM OF RECTUM, RECTOSIGMOID JUNCTION</td>
</tr>
<tr>
<td>155</td>
<td>MALIGNANT NEOPLASM OF LIVER AND INTRAHEPATIC BILE DUCTS</td>
</tr>
<tr>
<td>156</td>
<td>MALIGNANT NEOPLASM OF GALLBLADDER AND EXTRAHEPATIC BILE DUCT</td>
</tr>
<tr>
<td>157</td>
<td>MALIGNANT NEOPLASM OF PANCREAS</td>
</tr>
<tr>
<td>158</td>
<td>MALIGNANT NEOPLASM OF RETROPERITONEUM AND PERITONEUM</td>
</tr>
<tr>
<td>159</td>
<td>MALIGNANT NEOPLASM OF OTHER AND ILL-DEFINED SITES</td>
</tr>
<tr>
<td>160</td>
<td>MALIGNANT NEOPLASM OF NASAL CAVITIES, MIDDLE EAR</td>
</tr>
<tr>
<td>161</td>
<td>MALIGNANT NEOPLASM OF LARYNX</td>
</tr>
<tr>
<td>162</td>
<td>MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG</td>
</tr>
<tr>
<td>163</td>
<td>MALIGNANT NEOPLASM OF PLEURA</td>
</tr>
<tr>
<td>164</td>
<td>MALIGNANT NEOPLASM OF THYMUS, HEART, AND MEDIASTINUM</td>
</tr>
<tr>
<td>165</td>
<td>MALIGNANT NEOPLASM OF OTHER AND ILL-DEFINED SITES</td>
</tr>
<tr>
<td>166</td>
<td>MALIGNANT NEOPLASM OF BONE AND ARTICULAR CARTILAGE</td>
</tr>
<tr>
<td>167</td>
<td>MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE</td>
</tr>
<tr>
<td>168</td>
<td>MALIGNANT MELANOMA OF SKIN</td>
</tr>
<tr>
<td>169</td>
<td>OTHER MALIGNANT NEOPLASM OF SKIN</td>
</tr>
<tr>
<td>170</td>
<td>MALIGNANT NEOPLASM OF FEMALE BREAST</td>
</tr>
<tr>
<td>171</td>
<td>MALIGNANT NEOPLASM OF MALE BREAST</td>
</tr>
<tr>
<td>172</td>
<td>KAPOSI'S SARCOMA</td>
</tr>
<tr>
<td>173</td>
<td>MALIGNANT NEOPLASM OF UTERUS, PART UNSPECIFIED</td>
</tr>
</tbody>
</table>
The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>180</td>
<td>MALIGNANT NEOPLASM OF CERVIX UTERI</td>
</tr>
<tr>
<td>181</td>
<td>MALIGNANT NEOPLASM OF PLACENTA</td>
</tr>
<tr>
<td>182</td>
<td>MALIGNANT NEOPLASM OF BODY OF UTERUS</td>
</tr>
<tr>
<td>183</td>
<td>MALIGNANT NEOPLASM OF OVARY AND OTHER UTERINE ADNEXA</td>
</tr>
<tr>
<td>184</td>
<td>MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED FEMALE GENITAL</td>
</tr>
<tr>
<td>185</td>
<td>MALIGNANT NEOPLASM OF PROSTATE</td>
</tr>
<tr>
<td>186</td>
<td>MALIGNANT NEOPLASM OF TESTIS</td>
</tr>
<tr>
<td>187</td>
<td>MALIGNANT NEOPLASM OF PENIS AND OTHER MALE GENITAL ORGANS</td>
</tr>
<tr>
<td>188</td>
<td>MALIGNANT NEOPLASM OF BLADDER</td>
</tr>
<tr>
<td>189</td>
<td>MALIGNANT NEOPLASM OF KIDNEY</td>
</tr>
<tr>
<td>190</td>
<td>MALIGNANT NEOPLASM OF EYE</td>
</tr>
<tr>
<td>191</td>
<td>MALIGNANT NEOPLASM OF BRAIN</td>
</tr>
<tr>
<td>192</td>
<td>MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED PARTS</td>
</tr>
<tr>
<td>193</td>
<td>MALIGNANT NEOPLASM OF THYROID GLAND</td>
</tr>
<tr>
<td>194</td>
<td>MALIGNANT NEOPLASM OF OTHER ENDOCRINE GLANDS</td>
</tr>
<tr>
<td>195</td>
<td>MALIGNANT NEOPLASM OF OTHER AND ILL-DEFINED SITES</td>
</tr>
<tr>
<td>196</td>
<td>SECONDARY AND UNSPECIFIED MALIGNANT NEOPLASM OF LYMPH NODE</td>
</tr>
<tr>
<td>197</td>
<td>SECONDARY MALIGNANT NEOPLASM OF RESPIRATORY AND DIGESTIVE</td>
</tr>
<tr>
<td>198</td>
<td>SECONDARY MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES</td>
</tr>
<tr>
<td>199</td>
<td>MALIGNANT NEOPLASM WITHOUT SPECIFICATION OF SITE</td>
</tr>
<tr>
<td>200</td>
<td>LYMPHOSARCOMA AND RETICULOSARCOMA</td>
</tr>
<tr>
<td>201</td>
<td>HODGKIN'S DISEASE</td>
</tr>
<tr>
<td>202</td>
<td>OTHER MALIGNANT NEOPLASMS OF LYMPHOID AND HISTIOCYTIC TISSUE</td>
</tr>
<tr>
<td>203</td>
<td>MULTIPLE MYELOMA AND IMMUNOPROLIFERATIVE NEOPLASMS</td>
</tr>
<tr>
<td>204</td>
<td>LYMPHOID LEUKEMIA</td>
</tr>
<tr>
<td>205</td>
<td>MYELOID LEUKEMIA</td>
</tr>
<tr>
<td>206</td>
<td>MONOCYTIC LEUKEMIA</td>
</tr>
<tr>
<td>207</td>
<td>OTHER SPECIFIED LEUKEMIA</td>
</tr>
<tr>
<td>208</td>
<td>LEUKEMIA OF UNSPECIFIED CELL TYPE</td>
</tr>
<tr>
<td>210</td>
<td>BENIGN NEOPLASM OF LIP, ORAL CAVITY, AND PHARYNX</td>
</tr>
<tr>
<td>211</td>
<td>BENIGN NEOPLASM OF OTHER PARTS OF DIGESTIVE SYSTEM</td>
</tr>
<tr>
<td>212</td>
<td>BENIGN NEOPLASM OF RESPIRATORY AND INTRATHORACIC ORGANS</td>
</tr>
<tr>
<td>213</td>
<td>BENIGN NEOPLASM OF BONE AND ARTIFICIAL CARTILAGE</td>
</tr>
<tr>
<td>214</td>
<td>LIPOMA</td>
</tr>
<tr>
<td>215</td>
<td>OTHER BENIGN NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE</td>
</tr>
<tr>
<td>216</td>
<td>BENIGN NEOPLASM OF SKIN</td>
</tr>
<tr>
<td>217</td>
<td>BENIGN NEOPLASM OF BREAST</td>
</tr>
<tr>
<td>218</td>
<td>UTERINE LEIOMYOMA</td>
</tr>
<tr>
<td>219</td>
<td>THER BENIGN NEOPLASM OF UTERUS</td>
</tr>
<tr>
<td>220</td>
<td>BENIGN NEOPLASM OF OVARY</td>
</tr>
<tr>
<td>221</td>
<td>BENIGN NEOPLASM OF OTHER FEMALE GENITAL ORGANS</td>
</tr>
<tr>
<td>222</td>
<td>BENIGN NEOPLASM OF MALE GENITAL ORGANS</td>
</tr>
<tr>
<td>223</td>
<td>BENIGN NEOPLASM OF KIDNEY AND OTHER URINARY ORGANS</td>
</tr>
<tr>
<td>224</td>
<td>BENIGN NEOPLASM OF EYE</td>
</tr>
<tr>
<td>225</td>
<td>BENIGN NEOPLASM OF BRAIN AND OTHER PARTS OF NERVOUS SYSTEM</td>
</tr>
<tr>
<td>226</td>
<td>BENIGN NEOPLASM OF THYROID GLANDS</td>
</tr>
<tr>
<td>227</td>
<td>BENIGN NEOPLASM OF OTHER ENDOCRINE GLANDS</td>
</tr>
<tr>
<td>228</td>
<td>HEMANGIOMA AND LYMPHANGIOMA, ANY SITE</td>
</tr>
<tr>
<td>229</td>
<td>BENIGN NEOPLASM OF OTHER AND UNSPECIFIED SITES</td>
</tr>
<tr>
<td>230</td>
<td>CARCINOMA IN SITU OF DIGESTIVE ORGANS</td>
</tr>
<tr>
<td>231</td>
<td>CARCINOMA IN SITU OF RESPIRATORY SYSTEM</td>
</tr>
<tr>
<td>232</td>
<td>CARCINOMA IN SITU OF SKIN</td>
</tr>
<tr>
<td>CODES</td>
<td>DESCRIPTION</td>
</tr>
<tr>
<td>-------</td>
<td>-------------</td>
</tr>
<tr>
<td>233</td>
<td>CARCINOMA IN SITU OF BREAST AND GENITOURINARY SYSTEM</td>
</tr>
<tr>
<td>234</td>
<td>CARCINOMA IN SITU OF OTHER AND UNSPECIFIED SITES</td>
</tr>
<tr>
<td>235</td>
<td>NEOPLASM OF UNCERTAIN BEHAVIOR OF DIGESTIVE AND RESPIRATORY</td>
</tr>
<tr>
<td>236</td>
<td>NEOPLASM OF UNCERTAIN BEHAVIOR OF GENITOURINARY ORGANS</td>
</tr>
<tr>
<td>237</td>
<td>NEOPLASM OF UNCERTAIN BEHAVIOR OF ENDOCRINE GLANDS</td>
</tr>
<tr>
<td>238</td>
<td>NEOPLASM OF UNCERTAIN BEHAVIOR OF OTHER</td>
</tr>
<tr>
<td>239</td>
<td>NEOPLASMS OF UNSPECIFIED NATURE</td>
</tr>
<tr>
<td>240</td>
<td>SIMPLE AND UNSPECIFIED GOITER</td>
</tr>
<tr>
<td>241</td>
<td>NONTOXIC NODULAR GOITER</td>
</tr>
<tr>
<td>242</td>
<td>THYROTOXICOSIS WITH OR WITHOUT GOITER</td>
</tr>
<tr>
<td>243</td>
<td>CONGENITAL HYPOTHYROIDISM</td>
</tr>
<tr>
<td>244</td>
<td>ACQUIRED HYPOTHYROIDISM</td>
</tr>
<tr>
<td>245</td>
<td>THYROIDITIS</td>
</tr>
<tr>
<td>246</td>
<td>OTHER DISORDERS OF THYROID</td>
</tr>
<tr>
<td>247</td>
<td>DIABETES MELLITUS</td>
</tr>
<tr>
<td>248</td>
<td>OTHER DISORDERS OF PANCREATIC INTERNAL SECRETION</td>
</tr>
<tr>
<td>249</td>
<td>DISORDERS OF PARATHYROID GLAND</td>
</tr>
<tr>
<td>250</td>
<td>DISORDERS OF THE PITUITARY GLAND</td>
</tr>
<tr>
<td>251</td>
<td>DISEASES OF THYMUS GLAND</td>
</tr>
<tr>
<td>252</td>
<td>DISORDERS OF ADRENAL GLANDS</td>
</tr>
<tr>
<td>253</td>
<td>OVARIAN DYSFUNCTION</td>
</tr>
<tr>
<td>254</td>
<td>TESTICULAR DYSFUNCTION</td>
</tr>
<tr>
<td>255</td>
<td>POLYGLANDULAR DYSFUNCTION AND RELATED DISORDERS</td>
</tr>
<tr>
<td>256</td>
<td>OTHER ENDOCRINE DISORDERS</td>
</tr>
<tr>
<td>257</td>
<td>KWASHIORKOR</td>
</tr>
<tr>
<td>258</td>
<td>NUTRITIONAL MARASMUS</td>
</tr>
<tr>
<td>259</td>
<td>OTHER SEVERE PROTEIN-CALORIE MALNUTRITION</td>
</tr>
<tr>
<td>260</td>
<td>OTHER AND UNSPECIFIED PROTEIN-CALORIE MALNUTRITION</td>
</tr>
<tr>
<td>261</td>
<td>VITAMIN A DEFICIENCY</td>
</tr>
<tr>
<td>262</td>
<td>THIAMINE AND NIAVIN DEFICIENCY STATES</td>
</tr>
<tr>
<td>263</td>
<td>DEFICIENCY OF B-COMPLEX COMPONENTS</td>
</tr>
<tr>
<td>264</td>
<td>ASCORBIC ACID DEFICIENCY</td>
</tr>
<tr>
<td>265</td>
<td>VITAMIN D DEFICIENCY</td>
</tr>
<tr>
<td>266</td>
<td>OTHER NUTRITIONAL DEFICIENCIES</td>
</tr>
<tr>
<td>267</td>
<td>DISORDERS OF AMINO-ACID TRANSPORT AND METABOLISM</td>
</tr>
<tr>
<td>268</td>
<td>DISORDERS OF CARBOHYDRATE TRANSPORT AND METABOLISM</td>
</tr>
<tr>
<td>269</td>
<td>DISORDERS OF LIPOID METABOLISM</td>
</tr>
<tr>
<td>270</td>
<td>DISORDERS OF PLASMA PROTEIN METABOLISM</td>
</tr>
<tr>
<td>271</td>
<td>GOUT</td>
</tr>
<tr>
<td>272</td>
<td>DISORDERS OF MINERAL METABOLISM</td>
</tr>
<tr>
<td>273</td>
<td>DISORDERS OF FLUID, ELECTROLYTE, AND ACID-BASE BALANCE</td>
</tr>
<tr>
<td>274</td>
<td>OTHER AND UNSPECIFIED DISORDERS OF METABOLISM</td>
</tr>
<tr>
<td>275</td>
<td>OBESITY AND OTHER HYPERALIMENTATION</td>
</tr>
<tr>
<td>276</td>
<td>DISORDERS INVOLVING THE IMMUNE MECHANISM</td>
</tr>
<tr>
<td>277</td>
<td>IRON DEFICIENCY ANEMIAS</td>
</tr>
<tr>
<td>278</td>
<td>OTHER DEFICIENCY ANEMIAS</td>
</tr>
<tr>
<td>279</td>
<td>HEREDITARY HEMOLYTIC ANEMIAS</td>
</tr>
<tr>
<td>280</td>
<td>ACQUIRED HEMOLYTIC ANEMIAS</td>
</tr>
<tr>
<td>281</td>
<td>APLASTIC ANEMIA</td>
</tr>
<tr>
<td>282</td>
<td>OTHER AND UNSPECIFIED ANEMIAS</td>
</tr>
<tr>
<td>283</td>
<td>COAGULATION DEFECTS</td>
</tr>
<tr>
<td>284</td>
<td>PURPURA AND OTHER HEMORRHAGIC CONDITIONS</td>
</tr>
<tr>
<td>285</td>
<td>DISEASES OF WHITE BLOOD CELLS</td>
</tr>
</tbody>
</table>
AXIS III- PHYSICAL DIAGNOSES (con’t.)

The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>289</td>
<td>OTHER DISEASES OF BLOOD AND BLOOD-FORMING ORGANS</td>
</tr>
<tr>
<td>320</td>
<td>BACTERIAL MENINGITIS</td>
</tr>
<tr>
<td>321</td>
<td>MENINGITIS DUE TO OTHER ORGANISMS</td>
</tr>
<tr>
<td>322</td>
<td>MENINGITIS OF UNSPECIFIED CAUSE</td>
</tr>
<tr>
<td>323</td>
<td>ENCEPHALITIS, MYELITIS, AND ENCEPHALOMYELITIS</td>
</tr>
<tr>
<td>324</td>
<td>INTRACRANIAL AND INTRASPINAL ABSCESS</td>
</tr>
<tr>
<td>325</td>
<td>PHLEBITIS AND THROMBOPHLEBITIS OF INTRACRANIAL VENOUS SINU</td>
</tr>
<tr>
<td>326</td>
<td>LATE EFFECTS OF INTRACRANIAL ABSCESS OR PYOGENIC INFECTION</td>
</tr>
<tr>
<td>330</td>
<td>CEREBRAL DEGENERATIONS USUALLY MANIFEST IN CHILDHOOD</td>
</tr>
<tr>
<td>331</td>
<td>OTHER CEREBRAL DEGENERATIONS</td>
</tr>
<tr>
<td>332</td>
<td>PARKINSON'S DISEASE</td>
</tr>
<tr>
<td>333</td>
<td>OTHER EXTRAPYRAMIDAL DISEASE AND ABNORMAL MOVEMENT DISORDER</td>
</tr>
<tr>
<td>334</td>
<td>SPINOCEREBELLAR DISEASE</td>
</tr>
<tr>
<td>335</td>
<td>ANTERIOR HORN CELL DISEASE</td>
</tr>
<tr>
<td>336</td>
<td>OTHER DISEASES OF SPINAL CORD</td>
</tr>
<tr>
<td>337</td>
<td>DISORDERS OF THE AUTONOMIC NERVOUS SYSTEM</td>
</tr>
<tr>
<td>340</td>
<td>MULTIPLE SCLEROSIS</td>
</tr>
<tr>
<td>341</td>
<td>OTHER DEMYELINATING DISEASES OF CENTRAL NERVOUS SYSTEM</td>
</tr>
<tr>
<td>342</td>
<td>HEMIPLEGIA AND HEMIPARESIS</td>
</tr>
<tr>
<td>343</td>
<td>INFANTILE CEREBRAL PALSY</td>
</tr>
<tr>
<td>344</td>
<td>OTHER PARALYTIC SYNDROMES</td>
</tr>
<tr>
<td>345</td>
<td>EPILEPSY</td>
</tr>
<tr>
<td>346</td>
<td>MIGRAINE</td>
</tr>
<tr>
<td>348</td>
<td>OTHER CONDITIONS OF BRAIN</td>
</tr>
<tr>
<td>349</td>
<td>OTHER AND UNSPECIFIED DISORDERS OF THE NERVOUS SYSTEM</td>
</tr>
<tr>
<td>350</td>
<td>TRIGEMINAL NERVE DISORDERS</td>
</tr>
<tr>
<td>351</td>
<td>FACIAL NERVE DISORDERS</td>
</tr>
<tr>
<td>352</td>
<td>DISORDERS OF OTHER CRANIAL NERVES</td>
</tr>
<tr>
<td>353</td>
<td>NERVE ROOT AND PLEXUS DISORDERS</td>
</tr>
<tr>
<td>354</td>
<td>MONONEURITIS OF UPPER LIMB AND MONONEURITIS MULTIPLEX</td>
</tr>
<tr>
<td>355</td>
<td>MONONEURITIS OF LOWER LIMB AND UNSPECIFIED SITE</td>
</tr>
<tr>
<td>356</td>
<td>HEREDITARY AND IDIOPATHIC PERIPHERAL NEUROPATHY</td>
</tr>
<tr>
<td>357</td>
<td>INFLAMMATORY AND TOXIC NEUROPATHY</td>
</tr>
<tr>
<td>358</td>
<td>MYONEURAL DISORDERS</td>
</tr>
<tr>
<td>359</td>
<td>MUSCULAR DYSTROPHIES AND OTHER MYOPATHIES</td>
</tr>
<tr>
<td>360</td>
<td>DISORDERS OF THE GLOBE</td>
</tr>
<tr>
<td>361</td>
<td>RETINAL DETACHMENTS AND DEFECTS</td>
</tr>
<tr>
<td>362</td>
<td>OTHER RETINAL DISORDERS</td>
</tr>
<tr>
<td>363</td>
<td>CHORIORETINAL INFLAMMATIONS, SCARS, AND OTHER DISORDERS OF</td>
</tr>
<tr>
<td>364</td>
<td>DISORDERS OF IRIS AND CILIARY BODY</td>
</tr>
<tr>
<td>365</td>
<td>GLAUCOMA</td>
</tr>
<tr>
<td>366</td>
<td>CATARACT</td>
</tr>
<tr>
<td>367</td>
<td>DISORDERS OF REFRACTION AND ACCOMMODATION</td>
</tr>
<tr>
<td>368</td>
<td>VISUAL DISTURBANCES</td>
</tr>
<tr>
<td>369</td>
<td>BLINDNESS AND LOW VISION</td>
</tr>
<tr>
<td>370</td>
<td>KERATITIS</td>
</tr>
<tr>
<td>371</td>
<td>CORNEAL OPACITY AND OTHER DISORDERS OF CORNEA</td>
</tr>
<tr>
<td>372</td>
<td>DISORDERS OF CONJUNCTIVA</td>
</tr>
<tr>
<td>373</td>
<td>INFLAMMATION OF EYELIDS</td>
</tr>
<tr>
<td>374</td>
<td>OTHER DISORDERS OF EYELIDS</td>
</tr>
<tr>
<td>375</td>
<td>DISORDERS OF LACRIMAL SYSTEM</td>
</tr>
<tr>
<td>376</td>
<td>DISORDERS OF THE ORBIT</td>
</tr>
<tr>
<td>377</td>
<td>DISORDERS OF OPTIC NERVE AND VISUAL PATHWAYS</td>
</tr>
</tbody>
</table>
The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>378</td>
<td>STRABISMUS AND OTHER DISORDERS OF BINOCULAR EYE MOVEMENTS</td>
</tr>
<tr>
<td>379</td>
<td>OTHER DISORDERS OF EYE</td>
</tr>
<tr>
<td>380</td>
<td>DISORDERS OF EXTERNAL EAR</td>
</tr>
<tr>
<td>381</td>
<td>NONSUPPURATIVE OTITIS MEDIA AND EUSTACHIAN TUBE DISORDERS</td>
</tr>
<tr>
<td>382</td>
<td>SUPPURATIVE AND UNSPECIFIED OTITIS MEDIA</td>
</tr>
<tr>
<td>383</td>
<td>MASTOIDITIS AND RELATED CONDITIONS</td>
</tr>
<tr>
<td>384</td>
<td>OTHER DISORDERS OF TYPANIC MEMBRANE</td>
</tr>
<tr>
<td>385</td>
<td>OTHER DISORDERS OF MIDDLE EAR AND MASTOID</td>
</tr>
<tr>
<td>386</td>
<td>VERTIGO SYNDROMES AND OTHER DISORDERS OF VESTIBULAR</td>
</tr>
<tr>
<td>387</td>
<td>OTOSCLEROSIS</td>
</tr>
<tr>
<td>388</td>
<td>OTHER DISORDERS OF EAR</td>
</tr>
<tr>
<td>389</td>
<td>HEARING LOSS</td>
</tr>
<tr>
<td>390</td>
<td>RHEUMATIC FEVER WITHOUT MENTION OF HEART INVOLVEMENT</td>
</tr>
<tr>
<td>391</td>
<td>RHEUMATIC FEVER WITH HEART INVOLVEMENT</td>
</tr>
<tr>
<td>392</td>
<td>RHEUMATIC CHOREA</td>
</tr>
<tr>
<td>393</td>
<td>CHRONIC RHEUMATIC PERICARDITIS</td>
</tr>
<tr>
<td>394</td>
<td>DISEASES OF MITRAL VALVE</td>
</tr>
<tr>
<td>395</td>
<td>DISEASES OF AORTIC VALVE</td>
</tr>
<tr>
<td>396</td>
<td>DISEASES OF MITRAL AND AORTIC VALVES</td>
</tr>
<tr>
<td>397</td>
<td>DISEASES OF OTHER ENDOCARDIAL STRUCTURES</td>
</tr>
<tr>
<td>398</td>
<td>OTHER RHEUMATIC HEART DISEASE</td>
</tr>
<tr>
<td>401</td>
<td>ESSENTIAL HYPERTENSION</td>
</tr>
<tr>
<td>402</td>
<td>HYPERTENSIVE HEART DISEASE</td>
</tr>
<tr>
<td>403</td>
<td>HYPERTENSIVE RENAL DISEASE</td>
</tr>
<tr>
<td>404</td>
<td>HYPERTENSIVE HEART AND RENAL DISEASE</td>
</tr>
<tr>
<td>405</td>
<td>ECONDARY HYPERTENSION</td>
</tr>
<tr>
<td>410</td>
<td>ACUTE MYOCARDIAL INFARCTION</td>
</tr>
<tr>
<td>411</td>
<td>OTHER ACUTE AND SUBACUTE FORMS OF ISCHEMIC HEART DISEASE</td>
</tr>
<tr>
<td>412</td>
<td>OLD MYOCARDIAL INFARCTION</td>
</tr>
<tr>
<td>413</td>
<td>ANGINA PECTORIS</td>
</tr>
<tr>
<td>414</td>
<td>OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE</td>
</tr>
<tr>
<td>415</td>
<td>ACUTE PULMONARY HEART DISEASE</td>
</tr>
<tr>
<td>416</td>
<td>CHRONIC PULMONARY HEART DISEASE</td>
</tr>
<tr>
<td>417</td>
<td>OTHER DISEASES OF PULMONARY CIRCULATION</td>
</tr>
<tr>
<td>420</td>
<td>ACUTE PERICARDITIS</td>
</tr>
<tr>
<td>421</td>
<td>ACUTE AND SUBACUTE ENDOCARDITIS</td>
</tr>
<tr>
<td>422</td>
<td>ACUTE MYOCARDITIS</td>
</tr>
<tr>
<td>423</td>
<td>OTHER DISEASES OF PERICARDIUM</td>
</tr>
<tr>
<td>424</td>
<td>OTHER DISEASES OF ENDOCARDIUM</td>
</tr>
<tr>
<td>425</td>
<td>CARDIOMYOPATHY</td>
</tr>
<tr>
<td>426</td>
<td>CONDUCTION DISORDERS</td>
</tr>
<tr>
<td>427</td>
<td>CARDIAC DysRHYTHMIAS</td>
</tr>
<tr>
<td>428</td>
<td>HEART FAILURE</td>
</tr>
<tr>
<td>429</td>
<td>ILL-DEFINED DESCRIPTIONS AND COMPLICATIONS OF HEART DISEASE</td>
</tr>
<tr>
<td>430</td>
<td>SUBARACHNOID HEMORRHAGE</td>
</tr>
<tr>
<td>431</td>
<td>INTRACEREBRAL HEMORRHAGE</td>
</tr>
<tr>
<td>432</td>
<td>OTHER AND UNSPECIFIED INTRACRANIAL HEMORRHAGE</td>
</tr>
<tr>
<td>433</td>
<td>OCCLUSION AND STENOSIS OF PRECEREBRAL ARTERIES</td>
</tr>
<tr>
<td>434</td>
<td>OCCLUSION OF CEREBRAL ARTERIES</td>
</tr>
<tr>
<td>435</td>
<td>TRANSIENT CEREBRAL ISCHEMIA</td>
</tr>
<tr>
<td>436</td>
<td>ACUTE, BUT ILL-DEFINED, CEREBROVASCULAR DISEASE</td>
</tr>
<tr>
<td>437</td>
<td>OTHER AND ILL-DEFINED CEREBROVASCULAR DISEASE</td>
</tr>
<tr>
<td>438</td>
<td>LATE EFFECTS OF CEREBROVASCULAR DISEASE</td>
</tr>
</tbody>
</table>
### AXIS III-PHYSICAL DIAGNOSES (con’t.)

The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>440</td>
<td>ATHEROSCLEROSIS</td>
</tr>
<tr>
<td>441</td>
<td>AORTIC ANEURYSM AND DISSECTION</td>
</tr>
<tr>
<td>442</td>
<td>OTHER ANEURYSM</td>
</tr>
<tr>
<td>443</td>
<td>OTHER PERIPHERAL</td>
</tr>
<tr>
<td>444</td>
<td>ARTERIAL EMBOLISM AND THROMBOSIS</td>
</tr>
<tr>
<td>446</td>
<td>POLYARTERITIS NODOSA AND ALLIED CONDITIONS</td>
</tr>
<tr>
<td>447</td>
<td>OTHER DISORDERS OF ARTERIES AND ARTERIOLES</td>
</tr>
<tr>
<td>448</td>
<td>DISEASE OF CAPILLARIES</td>
</tr>
<tr>
<td>451</td>
<td>PHLEBITIS AND THROMBOPHLEBITIS</td>
</tr>
<tr>
<td>452</td>
<td>PORTAL VEIN THROMBOSIS</td>
</tr>
<tr>
<td>453</td>
<td>OTHER VENOUS EMBOLISM AND THROMBOSIS</td>
</tr>
<tr>
<td>454</td>
<td>VARICOSE VEINS OF LOWER EXTREMITIES</td>
</tr>
<tr>
<td>455</td>
<td>HEMORRHOIDS</td>
</tr>
<tr>
<td>456</td>
<td>VARICOSE VEINS OF OTHER SITES</td>
</tr>
<tr>
<td>457</td>
<td>NONINFECTIOUS DISORDERS OF LYMPHATIC CHANNELS</td>
</tr>
<tr>
<td>458</td>
<td>HYPOTENSION</td>
</tr>
<tr>
<td>459</td>
<td>OTHER DISORDERS OF CIRCULATORY SYSTEM</td>
</tr>
<tr>
<td>460</td>
<td>ACUTE NASOPHARYNGITIS (COMMON COLD)</td>
</tr>
<tr>
<td>461</td>
<td>ACUTE SINUSITIS</td>
</tr>
<tr>
<td>462</td>
<td>ACUTE PHARYNGITIS</td>
</tr>
<tr>
<td>463</td>
<td>ACUTE TONSILLITIS</td>
</tr>
<tr>
<td>464</td>
<td>ACUTE LARYNGITIS AND TRACHEITIS</td>
</tr>
<tr>
<td>465</td>
<td>ACUTE UPPER RESPIRATORY INFECTIONS OF MULTIPLE OR UNSPECIFIED SITES</td>
</tr>
<tr>
<td>466</td>
<td>ACUTE BRONCHITIS AND BRONCHIOLITIS</td>
</tr>
<tr>
<td>470</td>
<td>DEVIATED NASAL SEPTUM</td>
</tr>
<tr>
<td>471</td>
<td>NASAL POLYPS</td>
</tr>
<tr>
<td>472</td>
<td>CHRONIC PHARYNGITIS AND NASOPHARYNGITIS</td>
</tr>
<tr>
<td>473</td>
<td>CHRONIC SINUSITIS</td>
</tr>
<tr>
<td>474</td>
<td>CHRONIC DISEASE OF TONSILS AND ADENOIDS</td>
</tr>
<tr>
<td>475</td>
<td>PERITONSILLAR ABSCESS</td>
</tr>
<tr>
<td>476</td>
<td>CHRONIC LARYNGITIS AND LARYNGOTRACHEITIS</td>
</tr>
<tr>
<td>477</td>
<td>ALLERGIC RHINITIS</td>
</tr>
<tr>
<td>478</td>
<td>OTHER DISEASES OF UPPER RESPIRATORY TRACT</td>
</tr>
<tr>
<td>480</td>
<td>VIRAL PNEUMONIA</td>
</tr>
<tr>
<td>481</td>
<td>PNEUMOCOCCAL PNEUMONIA [STREPTOCOCCUS PNEUMONIAE PNEUMONIA]</td>
</tr>
<tr>
<td>482</td>
<td>OTHER BACTERIAL PNEUMONIA</td>
</tr>
<tr>
<td>483</td>
<td>PNEUMONIA DUE TO OTHER SPECIFIED ORGANISM</td>
</tr>
<tr>
<td>484</td>
<td>PNEUMONIA IN INFECTIOUS DISEASES CLASSIFIED ELSEWHERE</td>
</tr>
<tr>
<td>485</td>
<td>BRONCHOPNEUMONIA, ORGANISM UNSPECIFIED</td>
</tr>
<tr>
<td>486</td>
<td>PNEUMONIA, ORGANISM UNSPECIFIED</td>
</tr>
<tr>
<td>487</td>
<td>INFLUENZA</td>
</tr>
<tr>
<td>490</td>
<td>BRONCHITIS, NOT SPECIFIED AS ACUTE OR CHRONIC</td>
</tr>
<tr>
<td>491</td>
<td>CHRONIC BRONCHITIS</td>
</tr>
<tr>
<td>492</td>
<td>EMPHYSEMA</td>
</tr>
<tr>
<td>493</td>
<td>ASTHMA</td>
</tr>
<tr>
<td>494</td>
<td>BRONCHIECTASIS</td>
</tr>
<tr>
<td>495</td>
<td>EXTRINSIC ALLERGIC ALVEOLITIS</td>
</tr>
<tr>
<td>496</td>
<td>CHRONIC AIRWAY OBSTRUCTION, NOT ELSEWHERE CLASSIFIED</td>
</tr>
<tr>
<td>500</td>
<td>COAL WORKERS’ PNEUMOCONIOSIS</td>
</tr>
<tr>
<td>501</td>
<td>ASBESTOSIS</td>
</tr>
<tr>
<td>502</td>
<td>PNEUMOCONIOSIS DUE TO OTHER SILICA OR SILICATES</td>
</tr>
<tr>
<td>503</td>
<td>PNEUMOCONIOSIS DUE TO OTHER INORGANIC DUST</td>
</tr>
<tr>
<td>504</td>
<td>PNEUMONOPATHY DUE TO INHALATION OF OTHER DUST</td>
</tr>
</tbody>
</table>
### AXIS III-PHYSICAL DIAGNOSES (con’t.)

The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>505</td>
<td>PNEUMOCONIOSIS, UNSPECIFIED</td>
</tr>
<tr>
<td>506</td>
<td>RESPIRATORY CONDITIONS DUE TO CHEMICAL FUMES AND VAPORS</td>
</tr>
<tr>
<td>507</td>
<td>PNEUMONITIS DUE TO SOLIDS AND LIQUIDS</td>
</tr>
<tr>
<td>508</td>
<td>RESPIRATORY CONDITIONS DUE TO OTHER UNSPECIFIED EXTERNAL AGENTS</td>
</tr>
<tr>
<td>510</td>
<td>EMPYEMA</td>
</tr>
<tr>
<td>511</td>
<td>PLEURISY</td>
</tr>
<tr>
<td>512</td>
<td>PNEUMOTHORAX</td>
</tr>
<tr>
<td>513</td>
<td>ABSCESS OF LUNG AND MEDIASTINUM</td>
</tr>
<tr>
<td>514</td>
<td>PULMONARY CONGESTION AND HYPOSTASIS</td>
</tr>
<tr>
<td>515</td>
<td>POSTINFLAMMATORY PULMONARY FIBROSIS</td>
</tr>
<tr>
<td>516</td>
<td>OTHER ALVEOLAR AND PARIETOALVEOLAR PNEUMONOPATHY</td>
</tr>
<tr>
<td>517</td>
<td>LUNG INVOLVEMENT IN CONDITIONS CLASSIFIED ELSEWHERE</td>
</tr>
<tr>
<td>518</td>
<td>OTHER DISEASES OF LUNG</td>
</tr>
<tr>
<td>519</td>
<td>OTHER DISEASES OF RESPIRATORY SYSTEM</td>
</tr>
<tr>
<td>520</td>
<td>DISORDERS OF TOOTH DEVELOPMENT AND ERUPTION</td>
</tr>
<tr>
<td>521</td>
<td>DISEASES OF HARD TISSUES OF TEETH</td>
</tr>
<tr>
<td>522</td>
<td>DISEASES OF PULP AND PERIAPICAL TISSUES</td>
</tr>
<tr>
<td>523</td>
<td>GINGIVAL AND PERIODONTAL DISEASES</td>
</tr>
<tr>
<td>524</td>
<td>DENTOFACIAL ANOMALIES, INCLUDING MALOCCLUSION</td>
</tr>
<tr>
<td>525</td>
<td>OTHER DISEASES AND CONDITIONS OF THE TEETH</td>
</tr>
<tr>
<td>526</td>
<td>DISEASES OF THE JAWS</td>
</tr>
<tr>
<td>527</td>
<td>DISEASES OF THE SALIVARY GLANDS</td>
</tr>
<tr>
<td>528</td>
<td>DISEASES OF THE ORAL SOFT TISSUES, EXCLUDING LESIONS SPECIFIC FOR GIN</td>
</tr>
<tr>
<td>529</td>
<td>DISEASES AND OTHER CONDITIONS OF THE TONGUE</td>
</tr>
<tr>
<td>530</td>
<td>DISEASES OF ESOPHAGUS</td>
</tr>
<tr>
<td>531</td>
<td>GASTRIC ULCER</td>
</tr>
<tr>
<td>532</td>
<td>DUODENAL ULCER</td>
</tr>
<tr>
<td>533</td>
<td>PEPTIC ULCER, SITE UNSPECIFIED</td>
</tr>
<tr>
<td>534</td>
<td>GASTROJEJUNAL ULCER</td>
</tr>
<tr>
<td>535</td>
<td>GASTRITIS AND DUODENITIS</td>
</tr>
<tr>
<td>536</td>
<td>DISORDERS OF FUNCTION OF STOMACH</td>
</tr>
<tr>
<td>537</td>
<td>OTHER DISORDERS OF STOMACH AND DUODENUM</td>
</tr>
<tr>
<td>540</td>
<td>ACUTE APPENDICITIS</td>
</tr>
<tr>
<td>541</td>
<td>APPENDICITIS, UNQUALIFIED</td>
</tr>
<tr>
<td>542</td>
<td>OTHER APPENDICITIS</td>
</tr>
<tr>
<td>543</td>
<td>OTHER DISEASES OF APPENDIX</td>
</tr>
<tr>
<td>550</td>
<td>INGUINAL HERNIA</td>
</tr>
<tr>
<td>551</td>
<td>OTHER HERNIA OF ABDOMINAL CAVITY, WITH GANGRENE</td>
</tr>
<tr>
<td>552</td>
<td>OTHER HERNIA OF ABDOMINAL CAVITY, WITH OBSTRUCTION</td>
</tr>
<tr>
<td>553</td>
<td>OTHER HERNIA OF ABDOMINAL CAVITY WITHOUT MENTION OF OBSTRUCTION</td>
</tr>
<tr>
<td>555</td>
<td>REGIONAL ENTERITIS</td>
</tr>
<tr>
<td>556</td>
<td>ULCERATIVE ENTEROCOLITIS</td>
</tr>
<tr>
<td>557</td>
<td>VASCULAR INSUFFICIENCY OF INTESTINE</td>
</tr>
<tr>
<td>558</td>
<td>OTHER NONINFECTIOUS GASTROENTERITIS AND COLITIS</td>
</tr>
<tr>
<td>560</td>
<td>INTESTINAL OBSTRUCTION WITHOUT MENTION OF HERNIA</td>
</tr>
<tr>
<td>562</td>
<td>DIVERTICULA OF INTESTINE</td>
</tr>
<tr>
<td>564</td>
<td>FUNCTIONAL DIGESTIVE DISORDERS, NOT ELSEWHERE CLASSIFIED</td>
</tr>
<tr>
<td>565</td>
<td>ANAL FISSURE AND FISTULA</td>
</tr>
<tr>
<td>566</td>
<td>ABSCESS OF ANAL AND RECTAL REGIONS</td>
</tr>
<tr>
<td>567</td>
<td>PERITONITIS</td>
</tr>
<tr>
<td>568</td>
<td>OTHER DISORDERS OF PERITONEUM</td>
</tr>
<tr>
<td>569</td>
<td>OTHER DISORDERS OF INTESTINE</td>
</tr>
<tr>
<td>570</td>
<td>ACUTE AND SUBACUTE NECROSIS OF LIVER</td>
</tr>
</tbody>
</table>
The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>571</td>
<td>CHRONIC LIVER DISEASE AND CIRRHOSIS</td>
</tr>
<tr>
<td>572</td>
<td>LIVER ABSCESS AND SEQUELAE OF CHRONIC LIVER DISEASE</td>
</tr>
<tr>
<td>573</td>
<td>OTHER DISORDERS OF LIVER</td>
</tr>
<tr>
<td>574</td>
<td>CHOLELITHIASIS</td>
</tr>
<tr>
<td>575</td>
<td>OTHER DISORDERS OF GALLBLADDER</td>
</tr>
<tr>
<td>576</td>
<td>OTHER DISORDERS OF BILIARY TRACT</td>
</tr>
<tr>
<td>577</td>
<td>DISEASES OF PANCREAS</td>
</tr>
<tr>
<td>578</td>
<td>GASTROINTESTINAL HEMORRHAGE</td>
</tr>
<tr>
<td>579</td>
<td>INTESTINAL MALABSORPTION</td>
</tr>
<tr>
<td>580</td>
<td>ACUTE GLOMERULONEPHRITIS</td>
</tr>
<tr>
<td>581</td>
<td>NEPHROTIC SYNDROME</td>
</tr>
<tr>
<td>582</td>
<td>CHRONIC GLOMERULONEPHRITIS</td>
</tr>
<tr>
<td>583</td>
<td>NEPHRITIS AND NEPHROPATHY, NOT SPECIFIED AS ACUTE OR CHRONIC</td>
</tr>
<tr>
<td>584</td>
<td>ACUTE RENAL FAILURE</td>
</tr>
<tr>
<td>585</td>
<td>CHRONIC RENAL FAILURE</td>
</tr>
<tr>
<td>586</td>
<td>RENAL FAILURE, UNSPECIFIED</td>
</tr>
<tr>
<td>587</td>
<td>RENAL SCLEROSIS, UNSPECIFIED</td>
</tr>
<tr>
<td>588</td>
<td>DISORDERS RESULTING FROM IMPAIRED RENAL FUNCTION</td>
</tr>
<tr>
<td>589</td>
<td>SMALL KIDNEY OF UNKNOWN CAUSE</td>
</tr>
<tr>
<td>590</td>
<td>INFECTIONS OF KIDNEY</td>
</tr>
<tr>
<td>591</td>
<td>HYDRONEPHROSIS</td>
</tr>
<tr>
<td>592</td>
<td>CALCULUS OF KIDNEY AND URETER</td>
</tr>
<tr>
<td>593</td>
<td>OTHER DISORDERS OF KIDNEY AND URETER</td>
</tr>
<tr>
<td>594</td>
<td>CALCULUS OF LOWER URINARY TRACT</td>
</tr>
<tr>
<td>595</td>
<td>CYSTITIS</td>
</tr>
<tr>
<td>596</td>
<td>OTHER DISORDERS OF BLADDER</td>
</tr>
<tr>
<td>597</td>
<td>URETHRITIS, NOT SEXUALLY TRANSMITTED, AND URETHRAL SYNDROME</td>
</tr>
<tr>
<td>598</td>
<td>URETHRAL STRICUTURE</td>
</tr>
<tr>
<td>599</td>
<td>OTHER DISORDERS OF URETHRA AND URINARY TRACT</td>
</tr>
<tr>
<td>600</td>
<td>HYPERPLASIA OF PROSTATE</td>
</tr>
<tr>
<td>601</td>
<td>INFLAMMATORY DISEASES OF PROSTATE</td>
</tr>
<tr>
<td>602</td>
<td>OTHER DISORDERS OF PROSTATE</td>
</tr>
<tr>
<td>603</td>
<td>HYDROCELE</td>
</tr>
<tr>
<td>604</td>
<td>ORCHITIS AND EPIDIDYMITIS</td>
</tr>
<tr>
<td>605</td>
<td>REDUNDANT PREPUCE AND PHIMOSIS</td>
</tr>
<tr>
<td>606</td>
<td>INFERTILITY, MALE</td>
</tr>
<tr>
<td>607</td>
<td>DISORDERS OF PENIS</td>
</tr>
<tr>
<td>608</td>
<td>OTHER DISORDERS OF MALE GENITAL ORGANS</td>
</tr>
<tr>
<td>609</td>
<td>BENIGN MAMMARY DYSPLASIAS</td>
</tr>
<tr>
<td>610</td>
<td>OTHER DISORDERS OF BREAST</td>
</tr>
<tr>
<td>611</td>
<td>INFLAMMATORY DISEASE OF OVARY, FALLOPIAN TUBE, PELVIC CELLULAR TISSUE</td>
</tr>
<tr>
<td>615</td>
<td>INFLAMMATORY DISEASES OF UTERUS, EXCEPT CERVIX</td>
</tr>
<tr>
<td>616</td>
<td>INFLAMMATORY DISEASE OF CERVIX, VAGINA, AND VULVA</td>
</tr>
<tr>
<td>617</td>
<td>ENDOMETRIOSIS</td>
</tr>
<tr>
<td>618</td>
<td>GENITAL PROLAPSE619 FISTULA INVOLVING FEMALE GENITAL TRACT</td>
</tr>
<tr>
<td>620</td>
<td>NONINFLAMMATORY DISORDERS OF OVARY, FALLOPIAN TUBE</td>
</tr>
<tr>
<td>621</td>
<td>DISORDERS OF UTERUS, NOT ELSEWHERE CLASSIFIED</td>
</tr>
<tr>
<td>622</td>
<td>NONINFLAMMATORY DISORDERS OF CERVIX</td>
</tr>
<tr>
<td>623</td>
<td>NONINFLAMMATORY DISORDERS OF VAGINA</td>
</tr>
<tr>
<td>624</td>
<td>NONINFLAMMATORY DISORDERS OF VULVA AND PERINEUM</td>
</tr>
<tr>
<td>625</td>
<td>PAIN AND OTHER SYMPTOMS ASSOCIATED WITH FEMALE GENITAL ORGANS</td>
</tr>
<tr>
<td>626</td>
<td>DISORDERS OF MENSTRUATION AND OTHER ABNORMAL BLEEDING</td>
</tr>
</tbody>
</table>
### AXIS III - PHYSICAL DIAGNOSES (con’t.)

The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>627</td>
<td>MENOPAUSAL AND POSTMENOPAUSAL DISORDERS</td>
</tr>
<tr>
<td>628</td>
<td>INFERTILITY, FEMALE</td>
</tr>
<tr>
<td>629</td>
<td>OTHER DISORDERS OF FEMALE GENITAL ORGANS</td>
</tr>
<tr>
<td>630</td>
<td>HYDATIDIFORM MOLE</td>
</tr>
<tr>
<td>631</td>
<td>OTHER ABNORMAL PRODUCT OF CONCEPTION</td>
</tr>
<tr>
<td>632</td>
<td>MISSED ABORTION</td>
</tr>
<tr>
<td>633</td>
<td>ECTOPIC PREGNANCY</td>
</tr>
<tr>
<td>634</td>
<td>SPONTANEOUS ABORTION</td>
</tr>
<tr>
<td>635</td>
<td>LEGALLY INDUCED ABORTION</td>
</tr>
<tr>
<td>636</td>
<td>ILLEGAL ABORTION</td>
</tr>
<tr>
<td>637</td>
<td>UNSPECIFIED ABORTION</td>
</tr>
<tr>
<td>638</td>
<td>FAILED ATTEMPTED ABORTION</td>
</tr>
<tr>
<td>639</td>
<td>COMPLICATIONS FOLLOWING ABORTION AND ECTOPIC/MOLAR PREGNANCIES</td>
</tr>
<tr>
<td>640</td>
<td>HEMORRHAGE IN EARLY PREGNANCY</td>
</tr>
<tr>
<td>641</td>
<td>ANTEPARTUM HEMORRHAGE, ABRUPTIO PLACENTAE, AND PLACENTA PREVIA</td>
</tr>
<tr>
<td>642</td>
<td>HYPERTENSION COMPLICATING PREGNANCY</td>
</tr>
<tr>
<td>643</td>
<td>EXCESSIVE VOMITING IN PREGNANCY</td>
</tr>
<tr>
<td>644</td>
<td>EARLY OR THREATENED LABOR</td>
</tr>
<tr>
<td>645</td>
<td>PROLONGED PREGNANCY</td>
</tr>
<tr>
<td>646</td>
<td>OTHER COMPLICATIONS OF PREGNANCY, NOT ELSEWHERE CLASSIFIED</td>
</tr>
<tr>
<td>647</td>
<td>INFECTIOUS AND PARASITIC CONDITIONS IN THE MOTHER</td>
</tr>
<tr>
<td>648</td>
<td>OTHER CURRENT CONDITIONS IN THE MOTHER CLASSIFIABLE ELSEWHERE</td>
</tr>
<tr>
<td>649</td>
<td>NORMAL DELIVERY</td>
</tr>
<tr>
<td>650</td>
<td>MULTIPLE GESTATION</td>
</tr>
<tr>
<td>651</td>
<td>MALPOSITION AND MALPRESENTATION OF FETUS</td>
</tr>
<tr>
<td>652</td>
<td>DISPROPORTION IN PREGNANCY, LABOR, AND DELIVERY</td>
</tr>
<tr>
<td>653</td>
<td>ABNORMALITY OF ORGANS AND SOFT TISSUES OF PELVIS</td>
</tr>
<tr>
<td>654</td>
<td>KNOWN OR SUSPECTED FETAL ABNORMALITY AFFECTING MGMT. OF MOTHER</td>
</tr>
<tr>
<td>655</td>
<td>OTHER FETAL AND PLACENTAL PROBLEMS AFFECTING MGMT. OF MOTHER</td>
</tr>
<tr>
<td>656</td>
<td>POLYHYDRAMNIOS</td>
</tr>
<tr>
<td>657</td>
<td>OTHER PROBLEMS ASSOCIATED WITH AMNIOTIC CAVITY AND MEMBRANES</td>
</tr>
<tr>
<td>658</td>
<td>OTHER INDICATIONS FOR CARE OR INTERVENTION RELATED TO LABOR</td>
</tr>
<tr>
<td>659</td>
<td>OUTFLOW OF AMNIONIC FLUID</td>
</tr>
<tr>
<td>660</td>
<td>OBSTRUCTED LABOR</td>
</tr>
<tr>
<td>661</td>
<td>ABNORMALITY OF FORCES OF LABOR</td>
</tr>
<tr>
<td>662</td>
<td>LONG LABOR</td>
</tr>
<tr>
<td>663</td>
<td>UMBILICAL CORD COMPLICATIONS DURING LABOR AND DELIVERY</td>
</tr>
<tr>
<td>664</td>
<td>TRAUMA TO PERINEUM AND VULVA DURING DELIVERY</td>
</tr>
<tr>
<td>665</td>
<td>OTHER OBSTETRICAL TRAUMA</td>
</tr>
<tr>
<td>666</td>
<td>POSTPARTUM HEMORRHAGE</td>
</tr>
<tr>
<td>667</td>
<td>RETAINED PLACENTA OR MEMBRANES, WITHOUT HEMORRHAGE</td>
</tr>
<tr>
<td>668</td>
<td>COMPLICATIONS OF THE ADMINISTRATION OF ANESTHETIC</td>
</tr>
<tr>
<td>669</td>
<td>OTHER COMPLICATIONS OF LABOR AND DELIVERY</td>
</tr>
<tr>
<td>670</td>
<td>MAJOR PUERPERAL INFECTION</td>
</tr>
<tr>
<td>671</td>
<td>VENOUS COMPLICATIONS IN PREGNANCY AND THE PUERPERIUM</td>
</tr>
<tr>
<td>672</td>
<td>PYREXIA OF UNKNOWN ORIGIN DURING THE PUERPERIUM</td>
</tr>
<tr>
<td>673</td>
<td>OBSTETRICAL PULMONARY EMBOLISM</td>
</tr>
<tr>
<td>674</td>
<td>OTHER AND UNSPECIFIED COMPLICATIONS OF THE PUERPERIUM</td>
</tr>
<tr>
<td>675</td>
<td>INFECTIONS OF THE BREAST AND NIPPLE ASSOCIATED WITH CHILDBIRTH</td>
</tr>
<tr>
<td>676</td>
<td>OTHER DISORDERS OF THE BREAST ASSOCIATED WITH CHILDBIRTH</td>
</tr>
<tr>
<td>677</td>
<td>LATE EFFECT OF COMPLICATION OF PREGNANCY, CHILDBIRTH</td>
</tr>
<tr>
<td>678</td>
<td>CARBUNCLE AND FURUNCLE</td>
</tr>
</tbody>
</table>
The codes are applicable to the Episode Screen

**CODES**  **DESCRIPTION**

681  CELLULITIS AND ABSCESS OF FINGER AND TOE
682  OTHER CELLULITIS AND ABSCESS
683  ACUTE LYMPHADENITIS
684  IMPETIGO
685  PILOINDAL CYST
686  OTHER LOCAL INFECTIONS OF SKIN AND SUBCUTANEOUS TISSUE
690  ERYTHEMATOUSQUAMOUS DERMATOSIS
691  ATOPIC DERMATITIS AND RELATED CONDITIONS
692  CONTACT DERMATITIS AND OTHER ECZEMA
693  DERMATITIS DUE TO SUBSTANCES TAKEN INTERNALLY
694  BULLOUS DERMATOSES
695  ERYTHEMATOUS CONDITIONS
696  PSORIASIS AND SIMILAR DISORDERS
697  LICHEN
698  PRURITUS AND RELATED CONDITIONS
700  CORNS AND CALLOSITIES
701  OTHER HYPERTROPHIC AND ATROPHIC CONDITIONS OF SKIN
702  OTHER DERMATOSES
703  DISEASES OF NAIL
704  DISEASES OF HAIR AND HAIR FOLLICLES
705  DISORDERS OF SWEAT GLANDS
706  DISEASES OF SEBACEOUS GLANDS
707  CHRONIC ULCER OF SKIN
708  URTICARIA
709  OTHER DISORDERS OF SKIN AND SUBCUTANEOUS TISSUE
710  DIFFUSE DISEASES OF CONNECTIVE TISSUE
711  ARTHROPATHY ASSOCIATED WITH INFECTIONS
712  CRYSTAL ARTHROPATHIES
713  ARTHROPATHY ASSOCIATED WITH OTHER DISORDERS CLASSIFIED ELSEWHERE
714  RHEUMATOID ARTHRITIS AND OTHER INFLAMMATORY POLYARTHROPATHIES
715  OSTEOARTHRITIS AND ALLIED DISORDERS
716  OTHER AND UNSPECIFIED ARTHROPATHIES
717  INTERNAL DERANGEMENT OF KNEE
718  OTHER DERANGEMENT OF JOINT
719  OTHER AND UNSPECIFIED DISORDERS OF JOINT
720  ANKYLOSING SPONDYLITIS AND OTHER INFLAMMATORY SPONDYLOPATHIES
721  SPONDYLITIS AND ALLIED DISORDERS
722  INTERVERTEBRAL DISC DISORDERS
723  OTHER DISORDERS OF CERVICAL REGION
724  OTHER AND UNSPECIFIED DISORDERS OF BACK
725  POLYMYALGIA RHEUMATICA
726  PERIPHERAL ENTHESOPATHIES AND ALLIED SYNDROMES
727  OTHER DISORDERS OF SYNOVIAL, TENDON, AND BURSA
728  DISORDERS OF MUSCLE, LIGAMENT, AND FASCIA
729  OTHER DISORDERS OF SOFT TISSUES
730  OSTEOMYELITIS, PERIODITIS, AND OTHER INFECTIONS INVOLVING BONE
731  OSTEITIS DEFORMANS/OSTEOPATHIES ASSOCIATED WITH OTHER DISORDERS
732  OSTEochondropathies
733  OTHER DISORDERS OF BONE AND CARTILAGE
734  FLAT FOOT
735  ACQUIRED DEFORMITIES OF TOE
736  OTHER ACQUIRED DEFORMITIES OF LIMBS
737  CURVATURE OF SPINE
### Codes Description

<table>
<thead>
<tr>
<th>Codes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>738</td>
<td>Other Acquired Musculoskeletal Deformity</td>
</tr>
<tr>
<td>739</td>
<td>Nonallopathic Lesions, Not Elsewhere Classified</td>
</tr>
<tr>
<td>740</td>
<td>Anencephalus and Similar Anomalies</td>
</tr>
<tr>
<td>741</td>
<td>Spina Bifida</td>
</tr>
<tr>
<td>742</td>
<td>Other Congenital Anomalies of Nervous System</td>
</tr>
<tr>
<td>743</td>
<td>Congenital Anomalies of Eye</td>
</tr>
<tr>
<td>744</td>
<td>Congenital Anomalies of Ear, Face, and Neck</td>
</tr>
<tr>
<td>745</td>
<td>Bulbus Cordis Anomalies and Anomalies of Cardiac Septal Closure</td>
</tr>
<tr>
<td>746</td>
<td>Other Congenital Anomalies of Heart</td>
</tr>
<tr>
<td>747</td>
<td>Other Congenital Anomalies of Circulatory System</td>
</tr>
<tr>
<td>748</td>
<td>Congenital Anomalies of Respiratory System</td>
</tr>
<tr>
<td>749</td>
<td>Cleft Palate and Cleft Lip</td>
</tr>
<tr>
<td>750</td>
<td>Other Congenital Anomalies of Upper Alimentary Tract</td>
</tr>
<tr>
<td>751</td>
<td>Other Congenital Anomalies of Digestive System</td>
</tr>
<tr>
<td>752</td>
<td>Congenital Anomalies of Genital Organs</td>
</tr>
<tr>
<td>753</td>
<td>Congenital Anomalies of Urinary System</td>
</tr>
<tr>
<td>754</td>
<td>Certain Congenital Musculoskeletal Deformities</td>
</tr>
<tr>
<td>755</td>
<td>Other Congenital Anomalies of Limbs</td>
</tr>
<tr>
<td>756</td>
<td>Other Congenital Musculoskeletal Anomalies</td>
</tr>
<tr>
<td>757</td>
<td>Congenital Anomalies of the Integument</td>
</tr>
<tr>
<td>758</td>
<td>Chromosomal Anomalies</td>
</tr>
<tr>
<td>759</td>
<td>Other and Unspecified Congenital Anomalies</td>
</tr>
<tr>
<td>760</td>
<td>Fetus or Newborn Affected by Maternal Conditions</td>
</tr>
<tr>
<td>761</td>
<td>Fetus/Newborn Affected by Maternal Complications of Pregnancy</td>
</tr>
<tr>
<td>762</td>
<td>Fetus or Newborn Affected by Complications of Placenta &amp; Cord</td>
</tr>
<tr>
<td>763</td>
<td>Fetus or Newborn Affected by Other Complications of Labor</td>
</tr>
<tr>
<td>764</td>
<td>Slow Fetal Growth and Fetal Malnutrition</td>
</tr>
<tr>
<td>765</td>
<td>Disorders Relating to Short Gestation and Low Birthweight</td>
</tr>
<tr>
<td>766</td>
<td>Disorders Relating to Long Gestation and High Birthweight</td>
</tr>
<tr>
<td>767</td>
<td>Birth Trauma</td>
</tr>
<tr>
<td>768</td>
<td>Intrauterine Hypoxia and Birth Asphyxia</td>
</tr>
<tr>
<td>769</td>
<td>Respiratory Distress Syndrome in Newborn</td>
</tr>
<tr>
<td>770</td>
<td>Other Respiratory Conditions of Fetus and Newborn</td>
</tr>
<tr>
<td>771</td>
<td>Infections Specific to the Perinatal Period</td>
</tr>
<tr>
<td>772</td>
<td>Fetal and Neonatal Hemorrhage</td>
</tr>
<tr>
<td>773</td>
<td>Hemolytic Disease of Fetus or Newborn, Due to Isoimmunization</td>
</tr>
<tr>
<td>774</td>
<td>Other Perinatal Jaundice</td>
</tr>
<tr>
<td>775</td>
<td>Endocrine/Metabolic Disturbances Specific to the Fetus/Newborn</td>
</tr>
<tr>
<td>776</td>
<td>Hematological Disorders of Fetus and Newborn</td>
</tr>
<tr>
<td>777</td>
<td>Perinatal Disorders of Digestive System</td>
</tr>
<tr>
<td>778</td>
<td>Conditions Involving the Integument and Temperature Regulation</td>
</tr>
<tr>
<td>779</td>
<td>Other and Ill-Defined Conditions Originating in the Perinatal Period</td>
</tr>
<tr>
<td>780</td>
<td>General Symptoms</td>
</tr>
<tr>
<td>781</td>
<td>Symptoms Involving Nervous and Musculoskeletal Systems</td>
</tr>
<tr>
<td>782</td>
<td>Symptoms Involving Skin and Other Integumentary Tissue</td>
</tr>
<tr>
<td>783</td>
<td>Symptoms Concerning Nutrition, Metabolism, and Development</td>
</tr>
<tr>
<td>784</td>
<td>Symptoms Involving Head and Neck</td>
</tr>
<tr>
<td>785</td>
<td>Symptoms Involving Cardiovascular System</td>
</tr>
<tr>
<td>786</td>
<td>Symptoms Involving Respiratory System and Other Chest Symptoms</td>
</tr>
<tr>
<td>787</td>
<td>Symptoms Involving Digestive System</td>
</tr>
</tbody>
</table>
The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>788</td>
<td>SYMPTOMS INVOLVING URINARY SYSTEM</td>
</tr>
<tr>
<td>789</td>
<td>OTHER SYMPTOMS INVOLVING ABDOMEN AND PELVIS</td>
</tr>
<tr>
<td>790</td>
<td>NONSPECIFIC FINDINGS ON EXAMINATION OF BLOOD</td>
</tr>
<tr>
<td>791</td>
<td>NONSPECIFIC FINDINGS ON EXAMINATION OF URINE</td>
</tr>
<tr>
<td>792</td>
<td>NONSPECIFIC ABNORMAL FINDINGS IN OTHER BODY SUBSTANCES</td>
</tr>
<tr>
<td>793</td>
<td>NONSPECIFIC ABNORMAL FINDINGS ON RADIOLOGICAL</td>
</tr>
<tr>
<td>794</td>
<td>NONSPECIFIC ABNORMAL RESULTS OF FUNCTION STUDIES</td>
</tr>
<tr>
<td>795</td>
<td>NONSPECIFIC ABNORMAL HISTOLOGICAL AND IMMUNOLOGICAL FINDINGS</td>
</tr>
<tr>
<td>796</td>
<td>OTHER NONSPECIFIC ABNORMAL FINDINGS</td>
</tr>
<tr>
<td>797</td>
<td>SENILITY WITHOUT MENTION OF PSYCHOSIS</td>
</tr>
<tr>
<td>798</td>
<td>SUDDEN DEATH, CAUSE UNKNOWN</td>
</tr>
<tr>
<td>799</td>
<td>OTHER ILL-DEFINED AND UNKNOWN CAUSES OF MORBIDITY AND MORTALITY</td>
</tr>
<tr>
<td>800</td>
<td>FRACTURE OF VAULT OF SKULL</td>
</tr>
<tr>
<td>801</td>
<td>FRACTURE OF BASE OF SKULL</td>
</tr>
<tr>
<td>802</td>
<td>FRACTURE OF FACE BONES</td>
</tr>
<tr>
<td>803</td>
<td>OTHER AND UNQUALIFIED SKULL FRACTURES</td>
</tr>
<tr>
<td>804</td>
<td>MULTIPLE FRACTURES INVOLVING SKULL OR FACE WITH OTHER BONES</td>
</tr>
<tr>
<td>805</td>
<td>FRACTURE OF VERTEBRAL COLUMN WITHOUT MENTION OF SPINAL CORD INJ.</td>
</tr>
<tr>
<td>806</td>
<td>FRACTURE OF VERTEBRAL COLUMN WITH SPINAL CORD INJURY</td>
</tr>
<tr>
<td>807</td>
<td>FRACTURE OF RIB(S), STERNUM, LARYNX, AND TRACHEA</td>
</tr>
<tr>
<td>808</td>
<td>FRACTURE OF PELVIS</td>
</tr>
<tr>
<td>809</td>
<td>ILL-DEFINED FRACTURES OF BONES OF TRUNK</td>
</tr>
<tr>
<td>810</td>
<td>FRACTURE OF CLAVICLE</td>
</tr>
<tr>
<td>811</td>
<td>FRACTURE OF SCAPULA</td>
</tr>
<tr>
<td>812</td>
<td>FRACTURE OF HUMERUS</td>
</tr>
<tr>
<td>813</td>
<td>FRACTURE OF RADIUS AND ULNA</td>
</tr>
<tr>
<td>814</td>
<td>FRACTURE OF CARPAL BONE(S)</td>
</tr>
<tr>
<td>815</td>
<td>FRACTURE OF METACARPAL BONE(S)</td>
</tr>
<tr>
<td>816</td>
<td>FRACTURE OF ONE OR MORE PHALANGES OF HAND</td>
</tr>
<tr>
<td>817</td>
<td>MULTIPLE FRACTURES OF HAND BONES</td>
</tr>
<tr>
<td>818</td>
<td>ILL-DEFINED FRACTURES OF UPPER LIMB</td>
</tr>
<tr>
<td>819</td>
<td>MULTIPLE FRACTURES INVOLVING BOTH UPPER LIMBS</td>
</tr>
<tr>
<td>820</td>
<td>FRACTURE OF NECK OF FEMUR</td>
</tr>
<tr>
<td>821</td>
<td>FRACTURE OF OTHER AND UNSPECIFIED PARTS OF FEMUR</td>
</tr>
<tr>
<td>822</td>
<td>FRACTURE OF PATELLA</td>
</tr>
<tr>
<td>823</td>
<td>FRACTURE OF TIBIA AND FIBULA</td>
</tr>
<tr>
<td>824</td>
<td>FRACTURE OF ANKLE</td>
</tr>
<tr>
<td>825</td>
<td>FRACTURE OF ONE OR MORE TARSAL AND METATARSAL BONES</td>
</tr>
<tr>
<td>826</td>
<td>FRACTURE OF ONE OR MORE PHALANGES OF FOOT</td>
</tr>
<tr>
<td>827</td>
<td>OTHER, MULTIPLE, AND ILL-DEFINED FRACTURES OF LOWER LIMB</td>
</tr>
<tr>
<td>828</td>
<td>MULTIPLE FRACTURES INVOLVING BOTH LOWER LIMBS</td>
</tr>
<tr>
<td>829</td>
<td>FRACTURE OF UNSPECIFIED BONES</td>
</tr>
<tr>
<td>830</td>
<td>DISLOCATION OF JAW</td>
</tr>
<tr>
<td>831</td>
<td>DISLOCATION OF SHOULDER</td>
</tr>
<tr>
<td>832</td>
<td>DISLOCATION OF ELBOW</td>
</tr>
<tr>
<td>833</td>
<td>DISLOCATION OF WRIST</td>
</tr>
<tr>
<td>834</td>
<td>DISLOCATION OF FINGER</td>
</tr>
<tr>
<td>835</td>
<td>DISLOCATION OF HIP</td>
</tr>
<tr>
<td>836</td>
<td>DISLOCATION OF KNEE</td>
</tr>
<tr>
<td>837</td>
<td>DISLOCATION OF ANKLE</td>
</tr>
<tr>
<td>838</td>
<td>DISLOCATION OF FOOT</td>
</tr>
<tr>
<td>839</td>
<td>OTHER, MULTIPLE, AND ILL-DEFINED DISLOCATIONS</td>
</tr>
</tbody>
</table>
### AXIS III- PHYSICAL DIAGNOSES (con’t.)

The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>840</td>
<td>SPRAINS AND STRAINS OF SHOULDER AND UPPER ARM</td>
</tr>
<tr>
<td>841</td>
<td>SPRAINS AND STRAINS OF ELBOW AND FOREARM</td>
</tr>
<tr>
<td>842</td>
<td>SPRAINS AND STRAINS OF WRIST AND HAND</td>
</tr>
<tr>
<td>843</td>
<td>SPRAINS AND STRAINS OF HIP AND THIGH</td>
</tr>
<tr>
<td>844</td>
<td>SPRAINS AND STRAINS OF KNEE AND LEG</td>
</tr>
<tr>
<td>845</td>
<td>SPRAINS AND STRAINS OF ANKLE AND FOOT</td>
</tr>
<tr>
<td>846</td>
<td>SPRAINS AND STRAINS OF SACROILIAC REGION</td>
</tr>
<tr>
<td>847</td>
<td>SPRAINS AND STRAINS OF OTHER AND UNSPECIFIED PARTS OF BACK</td>
</tr>
<tr>
<td>848</td>
<td>OTHER AND ILL-DEFINED SPRAINS AND STRAINS</td>
</tr>
<tr>
<td>850</td>
<td>CONCUSSION</td>
</tr>
<tr>
<td>851</td>
<td>CEREBRAL LACERATION AND CONTUSION</td>
</tr>
<tr>
<td>852</td>
<td>SUBARACHNOID, SUBDURAL, AND EXTRADURAL HEMORRHAGE</td>
</tr>
<tr>
<td>853</td>
<td>OTHER AND UNSPECIFIED INTRACRANIAL HEMORRHAGE FOLLOWING INJURY</td>
</tr>
<tr>
<td>854</td>
<td>INTRACRANIAL INJURY OF OTHER AND UNSPECIFIED NATURE</td>
</tr>
<tr>
<td>860</td>
<td>TRAUMATIC PNEUMOTHORAX AND HEMOTHORAX</td>
</tr>
<tr>
<td>861</td>
<td>INJURY TO HEART AND LUNG</td>
</tr>
<tr>
<td>862</td>
<td>INJURY TO OTHER AND UNSPECIFIED INTRATHORACIC ORGANS</td>
</tr>
<tr>
<td>863</td>
<td>INJURY TO GASTROINTESTINAL TRACT</td>
</tr>
<tr>
<td>864</td>
<td>INJURY TO LIVER</td>
</tr>
<tr>
<td>865</td>
<td>INJURY TO SPLEEN</td>
</tr>
<tr>
<td>866</td>
<td>INJURY TO KIDNEY</td>
</tr>
<tr>
<td>867</td>
<td>INJURY TO PELVIC ORGANS</td>
</tr>
<tr>
<td>868</td>
<td>INJURY TO OTHER INTRA-ABDOMINAL ORGANS</td>
</tr>
<tr>
<td>869</td>
<td>INTERNAL INJURY TO UNSPECIFIED OR ILL-DEFINED ORGANS</td>
</tr>
<tr>
<td>870</td>
<td>OPEN WOUND OF OCULAR ADNEXA</td>
</tr>
<tr>
<td>871</td>
<td>OPEN WOUND OF EYEBALL</td>
</tr>
<tr>
<td>872</td>
<td>OPEN WOUND OR EAR</td>
</tr>
<tr>
<td>873</td>
<td>OTHER OPEN WOUND OF HEAD</td>
</tr>
<tr>
<td>874</td>
<td>OPEN WOUND OF NECK</td>
</tr>
<tr>
<td>875</td>
<td>OPEN WOUND OF CHEST (WALL)</td>
</tr>
<tr>
<td>876</td>
<td>OPEN WOUND OF BACK</td>
</tr>
<tr>
<td>877</td>
<td>OPEN WOUND OF BUTTOCK</td>
</tr>
<tr>
<td>878</td>
<td>OPEN WOUND OF GENITAL ORGANS (EXTERNAL), INC. TRAUMATIC AMPUTATION</td>
</tr>
<tr>
<td>879</td>
<td>OPEN WOUND OF OTHER AND UNSPECIFIED SITES, EXCEPT LIMBS</td>
</tr>
<tr>
<td>880</td>
<td>OPEN WOUND OF SHOULDER AND UPPER ARM</td>
</tr>
<tr>
<td>881</td>
<td>OPEN WOUND OF ELBOW, FOREARM, AND WRIST</td>
</tr>
<tr>
<td>882</td>
<td>OPEN WOUND OF HAND EXCEPT FINGER(S) ALONE</td>
</tr>
<tr>
<td>883</td>
<td>OPEN WOUND OF FINGER(S)</td>
</tr>
<tr>
<td>884</td>
<td>MULTIPLE AND UNSPECIFIED OPEN WOUND OF UPPER LIMB</td>
</tr>
<tr>
<td>885</td>
<td>TRAUMATIC AMPUTATION OF THUMB (COMPLETE) (PARTIAL)</td>
</tr>
<tr>
<td>886</td>
<td>TRAUMATIC AMPUTATION OF THER FINGER(S) (COMPLETE) (PARTIAL)</td>
</tr>
<tr>
<td>887</td>
<td>TRAUMATIC AMPUTATION OF ARM AND HAND (COMPLETE) (PARTIAL)</td>
</tr>
<tr>
<td>890</td>
<td>OPEN WOUND OF HIP AND THIGH</td>
</tr>
<tr>
<td>891</td>
<td>OPEN WOUND OF KNEE, LEG (EXCEPT THIGH), AND ANKLE</td>
</tr>
<tr>
<td>892</td>
<td>OPEN WOUND OF FOOT EXCEPT TOE(S) ALONE</td>
</tr>
<tr>
<td>893</td>
<td>OPEN WOUND OF TOE(S)</td>
</tr>
<tr>
<td>894</td>
<td>MULTIPLE AND UNSPECIFIED OPEN WOUND OF LOWER LIMB</td>
</tr>
<tr>
<td>895</td>
<td>TRAUMATIC AMPUTATION OF TOE(S) (COMPLETE) (PARTIAL)</td>
</tr>
<tr>
<td>896</td>
<td>TRAUMATIC AMPUTATION OF FOOT (COMPLETE) (PARTIAL)</td>
</tr>
<tr>
<td>897</td>
<td>TRAUMATIC AMPUTATION OF LEG(S) (COMPLETE) (PARTIAL)</td>
</tr>
<tr>
<td>900</td>
<td>INJURY TO BLOOD VESSELS OF HEAD AND NECK</td>
</tr>
<tr>
<td>901</td>
<td>INJURY TO BLOOD VESSELS OF THORAX</td>
</tr>
</tbody>
</table>
The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>902</td>
<td>INJURY TO BLOOD VESSELS OF ABDOMEN AND PELVIS</td>
</tr>
<tr>
<td>903</td>
<td>INJURY TO BLOOD VESSELS OF UPPER EXTREMITY</td>
</tr>
<tr>
<td>904</td>
<td>INJURY TO BLOOD VESSELS OF LOWER EXTREMITY AND UNSPECIFIED SITES</td>
</tr>
<tr>
<td>905</td>
<td>LATE EFFECTS OF MUSCULOSKELETAL AND CONNECTIVE TISSUE INJURIES</td>
</tr>
<tr>
<td>906</td>
<td>LATE EFFECTS OF INJURIES TO SKIN AND SUBCUTANEOUS TISSUES</td>
</tr>
<tr>
<td>907</td>
<td>LATE EFFECTS OF INJURIES TO THE NERVOUS SYSTEM</td>
</tr>
<tr>
<td>908</td>
<td>LATE EFFECTS OF OTHER AND UNSPECIFIED INJURIES</td>
</tr>
<tr>
<td>909</td>
<td>LATE EFFECTS OF OTHER AND UNSPECIFIED EXTERNAL CAUSES</td>
</tr>
<tr>
<td>910</td>
<td>SUPERFICIAL INJURY OF FACE, NECK, AND SCALP EXCEPT EYE</td>
</tr>
<tr>
<td>911</td>
<td>SUPERFICIAL INJURY OF TRUNK</td>
</tr>
<tr>
<td>912</td>
<td>SUPERFICIAL INJURY OF SHOULDER AND UPPER ARM</td>
</tr>
<tr>
<td>913</td>
<td>SUPERFICIAL INJURY OF ELBOW, FOREARM, AND WRIST</td>
</tr>
<tr>
<td>914</td>
<td>SUPERFICIAL INJURY OF HAND(S) EXCEPT FINGER(S) ALONE</td>
</tr>
<tr>
<td>915</td>
<td>SUPERFICIAL INJURY OF FINGER(S)</td>
</tr>
<tr>
<td>916</td>
<td>SUPERFICIAL INJURY OF HIP, THIGH, LEG, AND ANKLE</td>
</tr>
<tr>
<td>917</td>
<td>SUPERFICIAL INJURY OF FOOT AND TOE(S)</td>
</tr>
<tr>
<td>918</td>
<td>SUPERFICIAL INJURY OF EYE AND ADNEXA</td>
</tr>
<tr>
<td>919</td>
<td>SUPERFICIAL INJURY OF OTHER, MULTIPLE, AND UNSPECIFIED SITES</td>
</tr>
<tr>
<td>920</td>
<td>CONTUSION OF FACE, SCALP, AND NECK EXCEPT EYE(S)</td>
</tr>
<tr>
<td>921</td>
<td>CONTUSION OF EYE AND ADNEXA</td>
</tr>
<tr>
<td>922</td>
<td>CONTUSION OF TRUNK</td>
</tr>
<tr>
<td>923</td>
<td>CONTUSION OF UPPER LIMB</td>
</tr>
<tr>
<td>924</td>
<td>CONTUSION OF LOWER LIMB AND OF OTHER AND UNSPECIFIED SITES</td>
</tr>
<tr>
<td>925</td>
<td>CRUSHING INJURY OF FACE, SCALP, AND NECK</td>
</tr>
<tr>
<td>926</td>
<td>CRUSHING INJURY OF TRUNK</td>
</tr>
<tr>
<td>927</td>
<td>CRUSHING INJURY OF UPPER LIMB</td>
</tr>
<tr>
<td>928</td>
<td>CRUSHING INJURY OF LOWER LIMB</td>
</tr>
<tr>
<td>929</td>
<td>CRUSHING INJURY OF MULTIPLE AND UNSPECIFIED SITES</td>
</tr>
<tr>
<td>930</td>
<td>FOREIGN BODY ON EXTERNAL EYE</td>
</tr>
<tr>
<td>931</td>
<td>FOREIGN BODY IN EAR</td>
</tr>
<tr>
<td>932</td>
<td>FOREIGN BODY IN NOSE</td>
</tr>
<tr>
<td>933</td>
<td>FOREIGN BODY IN PHARYNX AND LARYNX</td>
</tr>
<tr>
<td>934</td>
<td>FOREIGN BODY IN TRACHEA, BRONCHUS, AND LUNG</td>
</tr>
<tr>
<td>935</td>
<td>FOREIGN BODY IN MOUTH, ESOPHAGUS, AND STOMACH</td>
</tr>
<tr>
<td>936</td>
<td>FOREIGN BODY IN INTESTINE AND COLON</td>
</tr>
<tr>
<td>937</td>
<td>FOREIGN BODY IN ANUS AND RECTUM</td>
</tr>
<tr>
<td>938</td>
<td>FOREIGN BODY IN DIGESTIVE SYSTEM, UNSPECIFIED</td>
</tr>
<tr>
<td>939</td>
<td>FOREIGN BODY IN GENITOURINARY TRACT</td>
</tr>
<tr>
<td>940</td>
<td>BURN CONFINED TO EYE AND ADNEXA</td>
</tr>
<tr>
<td>941</td>
<td>BURN OF FACE, HEAD, AND NECK</td>
</tr>
<tr>
<td>942</td>
<td>BURN OF TRUNK</td>
</tr>
<tr>
<td>943</td>
<td>BURN OF UPPER LIMB, EXCEPT WRIST AND HAND</td>
</tr>
<tr>
<td>944</td>
<td>BURN OF WRIST(S) AND HAND(S)</td>
</tr>
<tr>
<td>945</td>
<td>BURN OF LOWER LIMB(S)</td>
</tr>
<tr>
<td>946</td>
<td>BURNS OF MULTIPLE SPECIFIED SITES</td>
</tr>
<tr>
<td>947</td>
<td>BURN OF INTERNAL ORGANS</td>
</tr>
<tr>
<td>948</td>
<td>BURNS CLASSIFIED ACCORDING TO EXTENT OF BODY SURFACE INVOLVED</td>
</tr>
<tr>
<td>949</td>
<td>URN, UNSPECIFIED SITE</td>
</tr>
<tr>
<td>950</td>
<td>INJURY TO OPTIC NERVE AND PATHWAYS</td>
</tr>
<tr>
<td>951</td>
<td>INJURY TO OTHER CRANIAL NERVE(S)</td>
</tr>
<tr>
<td>952</td>
<td>SPINAL CORD INJURY WITHOUT EVIDENCE OF SPINAL BONE INJURY</td>
</tr>
<tr>
<td>953</td>
<td>INJURY TO NERVE ROOTS AND SPINAL PLEXUS</td>
</tr>
</tbody>
</table>
### AXIS III - PHYSICAL DIAGNOSES (con’t.)

The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>954</td>
<td>INJURY TO OTHER NERVE (S) OF TRUNK, EXCLUDING SHOULDER/PELVIC</td>
</tr>
<tr>
<td>955</td>
<td>INJURY TO PERIPHERAL NERVE (S) OF SHOULDER GIRDLE AND UPPER LIMB</td>
</tr>
<tr>
<td>956</td>
<td>INJURY TO PERIPHERAL NERVE (S) OF PELVIC GIRDLE AND LOWER LIMB</td>
</tr>
<tr>
<td>957</td>
<td>INJURY TO OTHER AND UNSPECIFIED NERVES</td>
</tr>
<tr>
<td>958</td>
<td>CERTAIN EARLY COMPLICATIONS OF TRAUMA</td>
</tr>
<tr>
<td>959</td>
<td>INJURY, OTHER AND UNSPECIFIED</td>
</tr>
<tr>
<td>960</td>
<td>POISONING BY ANTIBIOTICS</td>
</tr>
<tr>
<td>961</td>
<td>POISONING BY OTHER ANTI-INFECTIVES</td>
</tr>
<tr>
<td>962</td>
<td>POISONING BY HORMONES AND SYNTHETIC SUBSTITUTES</td>
</tr>
<tr>
<td>963</td>
<td>POISONING BY PRIMARILLY SYSTEMIC AGENTS</td>
</tr>
<tr>
<td>964</td>
<td>POISONING BY AGENTS PRIMARILY AFFECTING BLOOD CONSTITUENTS</td>
</tr>
<tr>
<td>965</td>
<td>POISONING BY ANALGESICS, ANTIPYRETICS, AND ANTI-RHEUMATICS</td>
</tr>
<tr>
<td>966</td>
<td>POISONING BY ANTICONVULSANTS AND ANTI-PARKINSONISM DRUGS</td>
</tr>
<tr>
<td>967</td>
<td>POISONING BY SEDATIVES AND HYPNOTICS</td>
</tr>
<tr>
<td>968</td>
<td>POISONING BY OTHER CENTRAL NERVOUS SYST. DEPRESSANTS/ANESTHETICS</td>
</tr>
<tr>
<td>969</td>
<td>POISONING BY PSYCHOTROPIC AGENTS</td>
</tr>
<tr>
<td>970</td>
<td>POISONING BY CENTRAL NERVOUS SYSTEM STIMULANTS</td>
</tr>
<tr>
<td>971</td>
<td>POISONING BY DRUGS AFFECTING THE AUTONOMIC NERVOUS SYSTEM</td>
</tr>
<tr>
<td>972</td>
<td>POISONING BY AGENTS PRIMARILY AFFECTING THE CARDIOVASCULAR SYSTEM</td>
</tr>
<tr>
<td>973</td>
<td>POISONING BY AGENTS PRIMARILY AFFECTING THE GASTROINTESTINAL SYST.</td>
</tr>
<tr>
<td>974</td>
<td>POISONING BY WATER, MINERAL, AND URIC ACID METABOLISM DRUGS</td>
</tr>
<tr>
<td>975</td>
<td>POISONING BY AGENTS PRIMARILY ON THE SMOOTH/SKELETAL MUSCLES</td>
</tr>
<tr>
<td>976</td>
<td>POISONING BY AGENTS PRIMARILY AFFECTING SKIN AND MUCOUS MEMBRANE, OPHTHALMOLOGICAL, OTORHINOLARYNGOLOGICAL, AND DENTAL DRUGS</td>
</tr>
<tr>
<td>977</td>
<td>POISONING BY OTHER AND UNSPECIFIED DRUGS AND MEDICINAL SUBSTANCES</td>
</tr>
<tr>
<td>978</td>
<td>POISONING BY BACTERIAL VACCINES</td>
</tr>
<tr>
<td>979</td>
<td>POISONING BY OTHER VACCINES AND BIOLOGICAL SUBSTANCES</td>
</tr>
<tr>
<td>980</td>
<td>TOXIC EFFECT OF ALCOHOL</td>
</tr>
<tr>
<td>981</td>
<td>TOXIC EFFECT OF PETROLEUM PRODUCTS</td>
</tr>
<tr>
<td>982</td>
<td>TOXIC EFFECT OF SOLVENTS OTHER THAN PETROLEUM-BASED</td>
</tr>
<tr>
<td>983</td>
<td>TOXIC EFFECT OF CORROSIVE AROMATICS, ACIDS, AND CAUSTIC ALKALIS</td>
</tr>
<tr>
<td>984</td>
<td>TOXIC EFFECT OF LEAD AND ITS Compounds (INCLUDING FUMES)</td>
</tr>
<tr>
<td>985</td>
<td>TOXIC EFFECT OF OTHER METALS</td>
</tr>
<tr>
<td>986</td>
<td>TOXIC EFFECT OF CARBON MONOXIDE</td>
</tr>
<tr>
<td>987</td>
<td>TOXIC EFFECT OF OTHER GASES, FUMES, OR VAPORS</td>
</tr>
<tr>
<td>988</td>
<td>TOXIC EFFECT OF NOXIOUS SUBSTANCES EATEN AS FOOD</td>
</tr>
<tr>
<td>989</td>
<td>TOXIC EFFECT OF OTHER SUBSTANCES, CHIEFLY NONMEDICINAL</td>
</tr>
<tr>
<td>990</td>
<td>EFFECTS OF RADIATION, UNSPECIFIED</td>
</tr>
<tr>
<td>991</td>
<td>EFFECTS OF REDUCED TEMPERATURE</td>
</tr>
<tr>
<td>992</td>
<td>EFFECTS OF HEAT AND LIGHT</td>
</tr>
<tr>
<td>993</td>
<td>EFFECTS OF AIR PRESSURE</td>
</tr>
<tr>
<td>994</td>
<td>EFFECTS OF OTHER EXTERNAL CAUSES</td>
</tr>
<tr>
<td>995</td>
<td>CERTAIN ADVERSE EFFECTS NOT ELSEWHERE CLASSIFIED</td>
</tr>
<tr>
<td>996</td>
<td>COMPLICATIONS PECULIAR TO CERTAIN SPECIFIED PROCEDURES</td>
</tr>
<tr>
<td>997</td>
<td>COMPLICATIONS AFFECTING SPECIFIED BODY SYSTEM</td>
</tr>
<tr>
<td>998</td>
<td>OTHER COMPLICATIONS OF PROCEDURES, NOT ELSEWHERE CLASSIFIED</td>
</tr>
<tr>
<td>999</td>
<td>COMPLICATIONS OF MEDICAL CARE, NOT ELSEWHERE CLASSIFIED</td>
</tr>
<tr>
<td>V01</td>
<td>CONTACT WITH OR EXPOSURE TO COMMUNICABLE DISEASES</td>
</tr>
<tr>
<td>V02</td>
<td>CARRIER OR SUSPECTED CARRIER OF INFECTIOUS DISEASES</td>
</tr>
<tr>
<td>V03</td>
<td>NEED FOR PROPHYLACTIC VACCINATION/INOCULATION-BACTERIAL DISEASES</td>
</tr>
<tr>
<td>V04</td>
<td>NEED FOR PROPHYLACTIC VACCINATION/INOCULATION AGAINST CERTAIN VIRAL DISEASES</td>
</tr>
<tr>
<td>V05</td>
<td>NEED FOR OTHER PROPHYLACTIC VACCINATION AND INOCULATION-SINGLE</td>
</tr>
</tbody>
</table>
## AXIS III- PHYSICAL DIAGNOSES (con’t.)

The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>V06</td>
<td>NEED FOR PROPHYLACTIC VACCINATION AND INOCULATION</td>
</tr>
<tr>
<td>V07</td>
<td>NEED FOR ISOLATION AND OTHER PROPHYLACTIC MEASURES</td>
</tr>
<tr>
<td>V08</td>
<td>ASYMPTOMATIC HUMAN IMMUNODEFICIENCY VIRUS (HIV) INFECTION STATUS</td>
</tr>
<tr>
<td>V09</td>
<td>INFECTION WITH DRUG-RESISTANT MICROORGANISMS</td>
</tr>
<tr>
<td>V10</td>
<td>PERSONAL HISTORY OF MALIGNANT NEOPLASM</td>
</tr>
<tr>
<td>V11</td>
<td>PERSONAL HISTORY OF MENTAL DISORDER</td>
</tr>
<tr>
<td>V12</td>
<td>PERSONAL HISTORY OF CERTAIN OTHER DISEASES</td>
</tr>
<tr>
<td>V13</td>
<td>PERSONAL HISTORY OF OTHER DISEASES</td>
</tr>
<tr>
<td>V14</td>
<td>PERSONAL HISTORY OF ALLERGY TO MEDICINAL AGENTS</td>
</tr>
<tr>
<td>V15</td>
<td>OTHER PERSONAL HISTORY PRESENTING HAZARDS TO HEALTH</td>
</tr>
<tr>
<td>V16</td>
<td>FAMILY HISTORY OF MALIGNANT NEOPLASM</td>
</tr>
<tr>
<td>V17</td>
<td>FAMILY HISTORY OF CERTAIN CHRONIC DISABLING DISEASES</td>
</tr>
<tr>
<td>V18</td>
<td>FAMILY HISTORY OF CERTAIN OTHER SPECIFIC CONDITIONS</td>
</tr>
<tr>
<td>V19</td>
<td>FAMILY HISTORY OF OTHER CONDITIONS</td>
</tr>
<tr>
<td>V20</td>
<td>HEALTH SUPERVISION OF INFANT OR CHILD</td>
</tr>
<tr>
<td>V21</td>
<td>CONSTITUTIONAL STATES IN DEVELOPMENT</td>
</tr>
<tr>
<td>V22</td>
<td>NORMAL PREGNANCY</td>
</tr>
<tr>
<td>V23</td>
<td>SUPERVISION OF HIGH-RISK PREGNANCY</td>
</tr>
<tr>
<td>V24</td>
<td>POSTPARTUM CARE AND EXAMINATION</td>
</tr>
<tr>
<td>V25</td>
<td>ENCOUNTER FOR CONTRACEPTIVE MANAGEMENT</td>
</tr>
<tr>
<td>V26</td>
<td>PROCREATIVE MANAGEMENT</td>
</tr>
<tr>
<td>V27</td>
<td>OUTCOME OF DELIVERY</td>
</tr>
<tr>
<td>V28</td>
<td>ANTENATAL SCREENING</td>
</tr>
<tr>
<td>V29</td>
<td>OBSERVATION/EVALUATION OF NEWBORN FOR SUSPECTED CONDITIONS</td>
</tr>
<tr>
<td>V30</td>
<td>SINGLE LIVEBORN</td>
</tr>
<tr>
<td>V31</td>
<td>TWIN BIRTH, MATE LIVEBORN</td>
</tr>
<tr>
<td>V32</td>
<td>TWIN BIRTH, MATE STILLBORN</td>
</tr>
<tr>
<td>V33</td>
<td>TWIN BIRTH, UNSPECIFIED WHETHER MATE LIVEBORN OR STILLBORN</td>
</tr>
<tr>
<td>V34</td>
<td>OTHER MULTIPLE BIRTH (THREE OR MORE), MATES ALL LIVEBORN</td>
</tr>
<tr>
<td>V35</td>
<td>OTHER MULTIPLE BIRTH (THREE OR MORE), MATES ALL STILLBORN</td>
</tr>
<tr>
<td>V36</td>
<td>OTHER MULTIPLE BIRTH (THREE OR MORE), MATES LIVEBORN AND STILLBORN</td>
</tr>
<tr>
<td>V37</td>
<td>OTHER MULTIPLE BIRTH (THREE OR MORE), UNSPECIFIED WHETHER MATE LIVEBORN OR STILLBORN</td>
</tr>
<tr>
<td>V38</td>
<td>LIVEBORN, UNSPECIFIED WHETHER SINGLE, TWIN, OR MULTIPLE</td>
</tr>
<tr>
<td>V39</td>
<td>MENTAL AND BEHAVIORAL PROBLEMS</td>
</tr>
<tr>
<td>V40</td>
<td>PROBLEMS WITH SPECIAL SENSES AND OTHER SPECIAL FUNCTIONS</td>
</tr>
<tr>
<td>V41</td>
<td>ORGAN OR TISSUE REPLACED BY TRANSPLANT</td>
</tr>
<tr>
<td>V42</td>
<td>ORGAN OR TISSUE REPLACED BY OTHER MEANS</td>
</tr>
<tr>
<td>V43</td>
<td>ARTIFICIAL OPENING STATUS</td>
</tr>
<tr>
<td>V44</td>
<td>OTHER POSTSURGICAL STATES</td>
</tr>
<tr>
<td>V45</td>
<td>OTHER DEPENDENCE ON MACHINES</td>
</tr>
<tr>
<td>V46</td>
<td>OTHER PROBLEMS WITH INTERNAL ORGANS</td>
</tr>
<tr>
<td>V47</td>
<td>PROBLEMS WITH HEAD, NECK, AND TRUNK</td>
</tr>
<tr>
<td>V48</td>
<td>OTHER CONDITIONS INFLUENCING HEALTH STATUS</td>
</tr>
<tr>
<td>V50</td>
<td>ELECTIVE SURGERGY FOR PURPOSES OTHER THAN REMEDYING HEALTH STATES</td>
</tr>
<tr>
<td>V51</td>
<td>AFTERCARE INVOLVING THE USE OF PLASTIC SURGERY</td>
</tr>
<tr>
<td>V52</td>
<td>FITTING AND ADJUSTMENT OF PROSTHETIC DEVICE AND IMPLANT</td>
</tr>
<tr>
<td>V53</td>
<td>FITTING AND ADJUSTMENT OF OTHER DEVICE</td>
</tr>
<tr>
<td>V54</td>
<td>OTHER ORTHOPEDIC AFTERCARE</td>
</tr>
<tr>
<td>V55</td>
<td>ATTENTION TO ARTIFICIAL OPENINGS</td>
</tr>
<tr>
<td>V56</td>
<td>ENCOUNTER FOR DIALYSIS AND DIALYSIS CATHETER CARE</td>
</tr>
<tr>
<td>V57</td>
<td>CARE INVOLVING USE OF REHABILITATION PROCEDURES</td>
</tr>
<tr>
<td>V58</td>
<td>ENCOUNTER FOR OTHER/UNSPECIFIED PROCEDURES AND AFTERCARE</td>
</tr>
</tbody>
</table>
The codes are applicable to the Episode Screen

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>V59</td>
<td>DONORS</td>
</tr>
<tr>
<td>V60</td>
<td>HOUSING, HOUSEHOLD, AND ECONOMIC CIRCUMSTANCES</td>
</tr>
<tr>
<td>V61</td>
<td>OTHER FAMILY CIRCUMSTANCES</td>
</tr>
<tr>
<td>V62</td>
<td>OTHER PSYCHOSOCIAL CIRCUMSTANCES</td>
</tr>
<tr>
<td>V63</td>
<td>UNAVAILABILITY OF OTHER MEDICAL FACILITIES FOR CARE</td>
</tr>
<tr>
<td>V64</td>
<td>PERSONS ENCOUNTERING HEALTH SERVICES FOR SPECIFIC PROCEDURES</td>
</tr>
<tr>
<td>V65</td>
<td>OTHER PERSONS SEEKING CONSULTATION WITHOUT COMPLAINT OR SICKNESS</td>
</tr>
<tr>
<td>V66</td>
<td>CONVALESCENCE AND PALLIATIVE CARE</td>
</tr>
<tr>
<td>V67</td>
<td>FOLLOW-UP EXAMINATION</td>
</tr>
<tr>
<td>V68</td>
<td>ENCOUNTERS FOR ADMINISTRATIVE PURPOSES</td>
</tr>
<tr>
<td>V69</td>
<td>PROBLEMS RELATED TO LIFESTYLE</td>
</tr>
<tr>
<td>V70</td>
<td>GENERAL MEDICAL EXAMINATION</td>
</tr>
<tr>
<td>V71</td>
<td>OBSERVATION AND EVALUATION FOR SUSPECTED CONDITIONS NOT FOUND</td>
</tr>
<tr>
<td>V72</td>
<td>SPECIAL INVESTIGATIONS AND EXAMINATIONS</td>
</tr>
<tr>
<td>V73</td>
<td>SPECIAL SCREENING EXAMINATION FOR VIRAL AND CHLAMYDIAL DISEASES</td>
</tr>
<tr>
<td>V74</td>
<td>SPECIAL SCREENING EXAMS FOR BACTERIAL AND SPIROCHETAL DISEASES</td>
</tr>
<tr>
<td>V75</td>
<td>SPECIAL SCREENING EXAMINATION FOR OTHER INFECTIOUS DISEASES</td>
</tr>
<tr>
<td>V76</td>
<td>SPECIAL SCREENING FOR MALIGNANT NEOPLASM</td>
</tr>
<tr>
<td>V77</td>
<td>SPECIAL SCREENING FOR ENDOCRINE, NUTRITIONAL, METABOLIC, AND IMMUNITY DISORDERS</td>
</tr>
<tr>
<td>V78</td>
<td>SPECIAL SCREENING FOR DISORDERS OF BLOOD/BLOOD-FORMING ORGANS</td>
</tr>
<tr>
<td>V79</td>
<td>SPECIAL SCREENING FOR MENTAL DISORDERS/DEVELOPMENTAL HANDICAPS</td>
</tr>
<tr>
<td>V80</td>
<td>SPECIAL SCREENING FOR NEUROLOGICAL, EYE, AND EAR DISEASES</td>
</tr>
<tr>
<td>V81</td>
<td>SPECIAL SCREENING FOR CARDIOVASCULAR, RESPIRATORY, AND GENITOURINARY DISEASES</td>
</tr>
<tr>
<td>V82</td>
<td>SPECIAL SCREENING FOR OTHER CONDITIONS</td>
</tr>
</tbody>
</table>
### AXIS IV: PSYCHOSOCIAL AND ENVIRONMENTAL PROBLEMS

**NOTE:**
*Report at admission, annually thereafter, and at formal discharge.*

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Problems with primary support group</td>
</tr>
<tr>
<td>02</td>
<td>Problems related to the social environment</td>
</tr>
<tr>
<td>03</td>
<td>Educational problems</td>
</tr>
<tr>
<td>04</td>
<td>Occupational problems</td>
</tr>
<tr>
<td>05</td>
<td>Housing problems</td>
</tr>
<tr>
<td>06</td>
<td>Economic problems</td>
</tr>
<tr>
<td>07</td>
<td>Problems with access to health care services</td>
</tr>
<tr>
<td>08</td>
<td>Problems related to interaction with the legal system/crime</td>
</tr>
<tr>
<td>09</td>
<td>Other psychosocial and environmental problems</td>
</tr>
<tr>
<td>00</td>
<td>Inadequate information</td>
</tr>
</tbody>
</table>
**AXIS V (GAF) GLOBAL ASSESSMENT OF FUNCTIONING SCALE**

Axis V permits the clinician to indicate his or her overall judgment of a person’s psychological, social, and occupational functioning.

**NOTE:**
*Report at admission, annually thereafter, and at formal discharge.*

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>98-91</td>
<td>Superior functioning in a wide range of activities, life’s problems never seem to get out of hand, is sought out by others because of his or her many positive qualities. No symptoms.</td>
</tr>
<tr>
<td>90-81</td>
<td>Absent or minimal symptoms (e.g., mild anxiety before an exam), good functioning in all areas, interested and involved in a wide range of activities, socially effective, generally satisfied with life, no more than everyday problems or concerns (e.g., an occasional argument with family members). <strong>GAF rating of 80 or above should seldom be used at admission.</strong></td>
</tr>
<tr>
<td>80-71</td>
<td>If symptoms are present, they are transient and expectable reactions to psychosocial stressors (e.g., difficulty concentrating after family argument), no more than slight impairment in social, occupational, or school functioning (e.g., temporarily falling behind in school work).</td>
</tr>
<tr>
<td>70-61</td>
<td>Some mild symptoms (e.g., depressed mood and mild insomnia) or some difficulty in social, occupational, or school functioning (e.g., occasional truancy, or theft within the household), but generally functioning pretty well, has some meaningful interpersonal relationships.</td>
</tr>
<tr>
<td>60-51</td>
<td>Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) or moderate difficulty in social, occupational, or school functioning (e.g., few friends, conflicts with co-workers)</td>
</tr>
<tr>
<td>50-41</td>
<td>Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) or any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).</td>
</tr>
<tr>
<td>40-31</td>
<td>Some impairment in reality testing or communication (e.g., speech is at times obscure, illogical or irrelevant) or major impairment in several areas, such as work or school, family relations, judgment, thinking or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home, and is failing at school).</td>
</tr>
</tbody>
</table>
### AXIS V (GAF) GLOBAL ASSESSMENT OF FUNCTIONING SCALE (con’t.)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>30-21</td>
<td>Behavior is considerably influenced by delusions or hallucinations or serious impairment in communication or judgment (e.g., sometimes incoherent, acts grossly inappropriately, suicidal preoccupation) or inability to function in almost all areas (e.g., stays in bed all day, no job, home, or friends).</td>
</tr>
<tr>
<td>20-11</td>
<td>Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death, frequently violent, manic excitement) or occasionally fails to maintain minimal personal hygiene (e.g., smears feces) or gross impairment in communication (e.g., largely incoherent/mute).</td>
</tr>
<tr>
<td>10-1</td>
<td>Persistent danger of severely hurting self or others (e.g., recurrent violence) or persistent inability to maintain minimal personal hygiene or serious suicidal act with clear expectation of death.</td>
</tr>
<tr>
<td>0</td>
<td>Inadequate information.</td>
</tr>
<tr>
<td>City*/Community</td>
<td>City*/Community</td>
</tr>
<tr>
<td>-------------------------</td>
<td>-------------------------</td>
</tr>
<tr>
<td>Acton</td>
<td>Calabasas</td>
</tr>
<tr>
<td>Agoura</td>
<td>Calabasas Park</td>
</tr>
<tr>
<td>Agoura Hills*</td>
<td>Canoga Park</td>
</tr>
<tr>
<td>Agua Dulce</td>
<td>Canyon Country</td>
</tr>
<tr>
<td>Alhambra*</td>
<td>Carson*</td>
</tr>
<tr>
<td>Almondale</td>
<td>Castaic</td>
</tr>
<tr>
<td>Alpine</td>
<td>Caswell</td>
</tr>
<tr>
<td>Altadena</td>
<td>Century City</td>
</tr>
<tr>
<td>Antelope Acres</td>
<td>Cerritos*</td>
</tr>
<tr>
<td>Arcadia*</td>
<td>Charter Oak</td>
</tr>
<tr>
<td>Arleta</td>
<td>Chatsworth</td>
</tr>
<tr>
<td>Artesia*</td>
<td>City of Commerce*</td>
</tr>
<tr>
<td>Athens</td>
<td>City of Industry*</td>
</tr>
<tr>
<td>Atwater</td>
<td>Claremont*</td>
</tr>
<tr>
<td>Avalon</td>
<td>Compton*</td>
</tr>
<tr>
<td>Azusa*</td>
<td>Cornell</td>
</tr>
<tr>
<td>Baldwin Hills</td>
<td>Covina*</td>
</tr>
<tr>
<td>Baldwin Park*</td>
<td>Cudahy*</td>
</tr>
<tr>
<td>Bassett</td>
<td>Culver City*</td>
</tr>
<tr>
<td>Bell*</td>
<td>Del Sur</td>
</tr>
<tr>
<td>Bellflower*</td>
<td>Del Valle</td>
</tr>
<tr>
<td>Bell Gardens*</td>
<td>Denis</td>
</tr>
<tr>
<td>Belmont Shore</td>
<td>Diamond Bar</td>
</tr>
<tr>
<td>Beverly Glen</td>
<td>Dominguez</td>
</tr>
<tr>
<td>Beverly Hills*</td>
<td>Dominguez Hills</td>
</tr>
<tr>
<td>Big Pines</td>
<td>Downey*</td>
</tr>
<tr>
<td>Bouquet Canyon</td>
<td>Duarte*</td>
</tr>
<tr>
<td>Boyle Heights</td>
<td></td>
</tr>
<tr>
<td>Bradbury*</td>
<td></td>
</tr>
<tr>
<td>Brentwood</td>
<td></td>
</tr>
<tr>
<td>Burbank*</td>
<td></td>
</tr>
</tbody>
</table>
## Cities* and Communities in Los Angeles County (con’t.)

<table>
<thead>
<tr>
<th>City*/Community</th>
<th>City*/Community</th>
<th>City*/Community</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hermosa Beach*</td>
<td>Malibu Estates</td>
<td>Pinetree</td>
</tr>
<tr>
<td>Hidden Hills*</td>
<td>Malibu</td>
<td>Vista Playa Del Rey</td>
</tr>
<tr>
<td>Hi Vista</td>
<td>Manhattan Beach*</td>
<td>Pomona*</td>
</tr>
<tr>
<td>Hollywood</td>
<td>Marina Del Rey</td>
<td>Portuguese Bend</td>
</tr>
<tr>
<td>Huntington Park*</td>
<td>Mar Vista</td>
<td></td>
</tr>
<tr>
<td>Hyde Park</td>
<td>Maywood</td>
<td>Quartz Hill</td>
</tr>
<tr>
<td></td>
<td>Mint Canyon</td>
<td></td>
</tr>
<tr>
<td>Industry*</td>
<td>Miraleste</td>
<td>Rancho Dominiquez</td>
</tr>
<tr>
<td>Inglewood*</td>
<td>Mission Hills</td>
<td>Rancho Palos Verdes*</td>
</tr>
<tr>
<td>Irwindale*</td>
<td>Monrovia*</td>
<td>Ravena</td>
</tr>
<tr>
<td></td>
<td>Montebello*</td>
<td>Redman</td>
</tr>
<tr>
<td>Kagel Canyon</td>
<td>Monte Nido</td>
<td>Redondo Beach*</td>
</tr>
<tr>
<td></td>
<td>Monterey Park</td>
<td>Reseda</td>
</tr>
<tr>
<td>La Canada Flintridge*</td>
<td>Montrose</td>
<td>Rialto</td>
</tr>
<tr>
<td>La Crescenta</td>
<td>Mt Olympus</td>
<td>Rolling Hills*</td>
</tr>
<tr>
<td>La Habra</td>
<td>Mt Washington</td>
<td>Rolling Hills Estates*</td>
</tr>
<tr>
<td>La Habra Heights*</td>
<td>Mt Wilson</td>
<td>Roosevelt</td>
</tr>
<tr>
<td>La Mirada*</td>
<td></td>
<td>Rosemead</td>
</tr>
<tr>
<td>La Puente*</td>
<td>Neenach</td>
<td>Rowland Heights</td>
</tr>
<tr>
<td>Ladera Heights</td>
<td>Newhall</td>
<td></td>
</tr>
<tr>
<td>Lake Hughes</td>
<td>North Hollywood</td>
<td>San Dimas*</td>
</tr>
<tr>
<td>Lake View Terrace</td>
<td>North Hills</td>
<td>San Fernando*</td>
</tr>
<tr>
<td>Lake Los Angeles</td>
<td>North Long Beac(h)</td>
<td>San Gabriel*</td>
</tr>
<tr>
<td>Lakewood*</td>
<td>Northridge</td>
<td>San Marino*</td>
</tr>
<tr>
<td>Lancaster*</td>
<td>Norwalk*</td>
<td>San Pedro</td>
</tr>
<tr>
<td>La Verne*</td>
<td></td>
<td>Santa Fe Springs*</td>
</tr>
<tr>
<td>Lawndale*</td>
<td>Oban</td>
<td>Santa Monica*</td>
</tr>
<tr>
<td>Lennox</td>
<td>Ocean Park</td>
<td>Santiago</td>
</tr>
<tr>
<td>Lincoln Heights</td>
<td>Olive View</td>
<td>Saugus</td>
</tr>
<tr>
<td>Little Rock</td>
<td>Pacific Palisades</td>
<td>Sawtelle</td>
</tr>
<tr>
<td>Llano</td>
<td>Pacoima</td>
<td>Sepulveda</td>
</tr>
<tr>
<td>Lomita*</td>
<td>Pallett</td>
<td>Sherman Oaks</td>
</tr>
<tr>
<td>Long Beach*</td>
<td>Palmdale*</td>
<td>Sierra Madre*</td>
</tr>
<tr>
<td>Long View</td>
<td>Palms</td>
<td>Signal Hill*</td>
</tr>
<tr>
<td>Los Angeles*</td>
<td>Palos Verdes Estates*</td>
<td>Silver Lake</td>
</tr>
<tr>
<td>Los Feliz</td>
<td>Panorama City</td>
<td>South El Monte*</td>
</tr>
<tr>
<td>Los Nietos</td>
<td>Paramount*</td>
<td>South Gate*</td>
</tr>
<tr>
<td>Lynwood*</td>
<td>Pasadena</td>
<td>South Pasadena*</td>
</tr>
<tr>
<td></td>
<td>Pear Blossom</td>
<td>South San Gabriel</td>
</tr>
</tbody>
</table>
# CITIES* AND COMMUNITIES IN LOS ANGELES COUNTY (cont.)

<table>
<thead>
<tr>
<th>City*/Community</th>
<th>City*/Community</th>
<th>City*/Community</th>
</tr>
</thead>
<tbody>
<tr>
<td>Malibu Lake</td>
<td>Pearland</td>
<td>Studio City</td>
</tr>
<tr>
<td>Malibu</td>
<td>Pico Rivera*</td>
<td>Sulphur Springs</td>
</tr>
<tr>
<td>Summit</td>
<td>Verdugo City</td>
<td></td>
</tr>
<tr>
<td>Sunland</td>
<td>Vernon*</td>
<td></td>
</tr>
<tr>
<td>Sun Valley</td>
<td>Viewpark</td>
<td></td>
</tr>
<tr>
<td>Sylmar</td>
<td>Vincent</td>
<td></td>
</tr>
<tr>
<td>Tarzana</td>
<td>Walnut*</td>
<td></td>
</tr>
<tr>
<td>Temple City*</td>
<td>Westlake</td>
<td></td>
</tr>
<tr>
<td>Terminal Island</td>
<td>Westlake Village*</td>
<td></td>
</tr>
<tr>
<td>Toluca Lake</td>
<td>West Los Angeles*</td>
<td></td>
</tr>
<tr>
<td>Topanga</td>
<td>Whittier*</td>
<td></td>
</tr>
<tr>
<td>Torrance*</td>
<td>Willowbrook</td>
<td></td>
</tr>
<tr>
<td>Tujunga</td>
<td>Wilmington</td>
<td></td>
</tr>
<tr>
<td>Universal City</td>
<td>Winnetka</td>
<td></td>
</tr>
<tr>
<td>Valencia</td>
<td>Windsor Hills</td>
<td></td>
</tr>
<tr>
<td>Valinda</td>
<td>Woodland Hills</td>
<td></td>
</tr>
<tr>
<td>Val Verde</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Valyermo</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Van Nuys</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vasquez Rocks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Venice</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Verdugo City</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vernon*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Viewpark</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**COORDINATOR, SFPR**

<table>
<thead>
<tr>
<th>Field</th>
<th>Description/Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Manager I.D.</td>
<td>SFPR Case Manager I.D. Number. This is a seven digit staff identification number. For DMH/DHS providers, enter County Employee staff number; for contract providers, enter I.D. number generated by your agency. The number entered must be established in the Staff file.</td>
</tr>
<tr>
<td>Name: Last, First</td>
<td>Enter the SFPR case manager’s last and first name. The Client Face Sheet states last or first name is “Not a data entry field,” which means that, although you document the information on the Client Face Sheet, the data entry operator does not have to key in the information. Online, these fields are system generated from the case manager’s staff code.</td>
</tr>
<tr>
<td>Area Code and Phone Number</td>
<td>Enter area code and phone number of the SFPR Case Manager.</td>
</tr>
<tr>
<td>Provider Number</td>
<td>Enter the four digit provider number of the SFPR case manager’s work location.</td>
</tr>
<tr>
<td>Provider Name</td>
<td>Enter the provider name. The Client Face Sheet states provider name is “Not a data entry field,” which means that, although you document the information on the Client Face Sheet, the data entry operator does not have to key in the information. Online, this field is system generated from the provider number.</td>
</tr>
<tr>
<td>Level</td>
<td>Enter the case management level of care being provided. <strong>Valid codes are I, II, or III.</strong></td>
</tr>
<tr>
<td>Cycle Date</td>
<td>This field is system generated from the Coordination Plan Screen (CPS1).</td>
</tr>
</tbody>
</table>
CONSERVATORSHIP/COURT STATUS

Identifies whether or not the client has a conservatorship or juvenile court status.

**NOTE:**
*R报 at admission, annually thereafter, and at formal discharge.*

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
</table>
| A    | Temporary Conservatorship (W&I Code, Section 5353)  
Permanent Conservatorship |
| B    | Lanterman-Petris-Short (W&I Code, Section 5358) |
| C    | Murphy (W&I Code, Section 5008) |
| D    | Probate (Probate Code, Division 4, Section 1400) |
| E    | PC 2974 (Penal Code, Section 2974) |
| F    | Representative Payee Without Conservatorship (W&I Code, Section 5686) |
| G    | Juvenile Court, Dependent of the Court (W&I Code, Section 300) |
| H    | Juvenile Court, Ward – Status Offender (W&I Code, Section 601) |
| I    | Juvenile Court, Ward – Juvenile Offender (W&I Code, Section 602) |
| J    | Not Applicable |
| U    | Unknown, Not Reported |
### COUNTRY CODES

<table>
<thead>
<tr>
<th>Code</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>AA</td>
<td>Aruba</td>
</tr>
<tr>
<td>AC</td>
<td>Antigua and Barbuda</td>
</tr>
<tr>
<td>AF</td>
<td>Afghanistan</td>
</tr>
<tr>
<td>AG</td>
<td>Algeria</td>
</tr>
<tr>
<td>AJ</td>
<td>Azerbaijan</td>
</tr>
<tr>
<td>AL</td>
<td>Albania</td>
</tr>
<tr>
<td>AM</td>
<td>Armenia</td>
</tr>
<tr>
<td>AN</td>
<td>Andorra Islands</td>
</tr>
<tr>
<td>AO</td>
<td>Angola</td>
</tr>
<tr>
<td>AQ</td>
<td>American Samoa</td>
</tr>
<tr>
<td>AR</td>
<td>Argentina</td>
</tr>
<tr>
<td>AS</td>
<td>Australia</td>
</tr>
<tr>
<td>AT</td>
<td>Ashmore and Cartier Islands</td>
</tr>
<tr>
<td>AU</td>
<td>Austria</td>
</tr>
<tr>
<td>AV</td>
<td>Anguilla</td>
</tr>
<tr>
<td>AY</td>
<td>Antarctica</td>
</tr>
<tr>
<td>BA</td>
<td>Bahrain</td>
</tr>
<tr>
<td>BB</td>
<td>Barbados</td>
</tr>
<tr>
<td>BC</td>
<td>Botswana</td>
</tr>
<tr>
<td>BD</td>
<td>Bermuda</td>
</tr>
<tr>
<td>BE</td>
<td>Belgium</td>
</tr>
<tr>
<td>BF</td>
<td>The Bahamas</td>
</tr>
<tr>
<td>BG</td>
<td>Bangladesh</td>
</tr>
<tr>
<td>BH</td>
<td>Belize</td>
</tr>
<tr>
<td>BK</td>
<td>Bosnia and Herzegovia</td>
</tr>
<tr>
<td>BL</td>
<td>Bolivia</td>
</tr>
<tr>
<td>BM</td>
<td>Burma</td>
</tr>
<tr>
<td>BN</td>
<td>Benin</td>
</tr>
<tr>
<td>BO</td>
<td>Belarus</td>
</tr>
<tr>
<td>BP</td>
<td>Soloman Islands</td>
</tr>
<tr>
<td>BQ</td>
<td>Navassa Island</td>
</tr>
<tr>
<td>BR</td>
<td>Brazil</td>
</tr>
<tr>
<td>BS</td>
<td>Bassas Da India</td>
</tr>
<tr>
<td>BT</td>
<td>Bhutan</td>
</tr>
<tr>
<td>BU</td>
<td>Bulgaria</td>
</tr>
<tr>
<td>BV</td>
<td>Bouvet Island</td>
</tr>
<tr>
<td>BX</td>
<td>Brunei</td>
</tr>
<tr>
<td>BY</td>
<td>Burundi</td>
</tr>
</tbody>
</table>
### COUNTRY CODES (con’t.)

<table>
<thead>
<tr>
<th>Code</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>CA</td>
<td>Canada</td>
</tr>
<tr>
<td>CB</td>
<td>Cambodia</td>
</tr>
<tr>
<td>CD</td>
<td>Chad</td>
</tr>
<tr>
<td>CE</td>
<td>Sri Lanka</td>
</tr>
<tr>
<td>CF</td>
<td>Congo</td>
</tr>
<tr>
<td>CG</td>
<td>Zaire</td>
</tr>
<tr>
<td>CH</td>
<td>China</td>
</tr>
<tr>
<td>CI</td>
<td>Chile</td>
</tr>
<tr>
<td>CJ</td>
<td>Cayman Islands</td>
</tr>
<tr>
<td>CK</td>
<td>Cocos (Keeling) Islands</td>
</tr>
<tr>
<td>CM</td>
<td>Cameroon</td>
</tr>
<tr>
<td>CN</td>
<td>Comoros</td>
</tr>
<tr>
<td>CO</td>
<td>Colombia</td>
</tr>
<tr>
<td>CQ</td>
<td>Northern Mariana Islands</td>
</tr>
<tr>
<td>CR</td>
<td>Coral Sea Islands</td>
</tr>
<tr>
<td>CS</td>
<td>Costa Rica</td>
</tr>
<tr>
<td>CT</td>
<td>Central African Republic</td>
</tr>
<tr>
<td>CU</td>
<td>Cuba</td>
</tr>
<tr>
<td>CV</td>
<td>Cape Verde</td>
</tr>
<tr>
<td>CW</td>
<td>Cook Islands</td>
</tr>
<tr>
<td>CY</td>
<td>Cyprus</td>
</tr>
<tr>
<td>DA</td>
<td>Denmark</td>
</tr>
<tr>
<td>DJ</td>
<td>Djibouti</td>
</tr>
<tr>
<td>DO</td>
<td>Dominica</td>
</tr>
<tr>
<td>DQ</td>
<td>Jarvis Island</td>
</tr>
<tr>
<td>DR</td>
<td>Dominican Republic</td>
</tr>
<tr>
<td>EC</td>
<td>Ecuador</td>
</tr>
<tr>
<td>EG</td>
<td>Egypt</td>
</tr>
<tr>
<td>EI</td>
<td>Ireland</td>
</tr>
<tr>
<td>EK</td>
<td>Equatorial Guinea</td>
</tr>
<tr>
<td>EN</td>
<td>Estonia</td>
</tr>
<tr>
<td>ER</td>
<td>Eritrea</td>
</tr>
<tr>
<td>ES</td>
<td>El Salvador</td>
</tr>
<tr>
<td>ET</td>
<td>Ethiopia</td>
</tr>
<tr>
<td>EU</td>
<td>Europa Island</td>
</tr>
<tr>
<td>EZ</td>
<td>Czech Republic</td>
</tr>
</tbody>
</table>
## COUNTRY CODES (con’t.)

<table>
<thead>
<tr>
<th>Code</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>FG</td>
<td>French Guiana</td>
</tr>
<tr>
<td>FI</td>
<td>Finland</td>
</tr>
<tr>
<td>FJ</td>
<td>Fiji</td>
</tr>
<tr>
<td>FK</td>
<td>Falkland Islands (Islas Malvinas)</td>
</tr>
<tr>
<td>FM</td>
<td>Federated States of Micronesia</td>
</tr>
<tr>
<td>FO</td>
<td>Faroe Island</td>
</tr>
<tr>
<td>FP</td>
<td>French Polynesia</td>
</tr>
<tr>
<td>FQ</td>
<td>Baker Island</td>
</tr>
<tr>
<td>FR</td>
<td>France</td>
</tr>
<tr>
<td>FS</td>
<td>French Southern and Antarctic Lands</td>
</tr>
<tr>
<td>GA</td>
<td>Gambia</td>
</tr>
<tr>
<td>GB</td>
<td>Gabon</td>
</tr>
<tr>
<td>GG</td>
<td>Georgia</td>
</tr>
<tr>
<td>GH</td>
<td>Ghana</td>
</tr>
<tr>
<td>GI</td>
<td>Gibraltar</td>
</tr>
<tr>
<td>GJ</td>
<td>Grenada</td>
</tr>
<tr>
<td>GK</td>
<td>Guernsey</td>
</tr>
<tr>
<td>GL</td>
<td>Greenland</td>
</tr>
<tr>
<td>GM</td>
<td>Germany</td>
</tr>
<tr>
<td>GO</td>
<td>Glorioso Islands</td>
</tr>
<tr>
<td>GP</td>
<td>Guadeloupe</td>
</tr>
<tr>
<td>GQ</td>
<td>Guam</td>
</tr>
<tr>
<td>GR</td>
<td>Greece</td>
</tr>
<tr>
<td>GT</td>
<td>Guatemala</td>
</tr>
<tr>
<td>GV</td>
<td>Guinea</td>
</tr>
<tr>
<td>GY</td>
<td>Guyana</td>
</tr>
<tr>
<td>GZ</td>
<td>Gaza Strip</td>
</tr>
<tr>
<td>HA</td>
<td>Haiti</td>
</tr>
<tr>
<td>HK</td>
<td>Hong Kong</td>
</tr>
<tr>
<td>HM</td>
<td>Heard Island and McDonald Islands</td>
</tr>
<tr>
<td>HO</td>
<td>Honduras</td>
</tr>
<tr>
<td>HQ</td>
<td>Howland Island</td>
</tr>
<tr>
<td>HR</td>
<td>Croatia</td>
</tr>
<tr>
<td>HU</td>
<td>Hungary</td>
</tr>
</tbody>
</table>
### COUNTRY CODES (con’t.)

<table>
<thead>
<tr>
<th>Code</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>IC</td>
<td>= Iceland</td>
</tr>
<tr>
<td>ID</td>
<td>= Indonesia</td>
</tr>
<tr>
<td>IM</td>
<td>= Isle of Man</td>
</tr>
<tr>
<td>IN</td>
<td>= India</td>
</tr>
<tr>
<td>IO</td>
<td>= British Indian Ocean Territory</td>
</tr>
<tr>
<td>IP</td>
<td>= Clipperton Island</td>
</tr>
<tr>
<td>IR</td>
<td>= Iran</td>
</tr>
<tr>
<td>IS</td>
<td>= Israel</td>
</tr>
<tr>
<td>IT</td>
<td>= Italy</td>
</tr>
<tr>
<td>IV</td>
<td>= Cote D’Ivoire</td>
</tr>
<tr>
<td>IZ</td>
<td>= Iraq</td>
</tr>
<tr>
<td>JA</td>
<td>= Japan</td>
</tr>
<tr>
<td>JE</td>
<td>= Jersey</td>
</tr>
<tr>
<td>JM</td>
<td>= Jamaica</td>
</tr>
<tr>
<td>JN</td>
<td>= Jan Maye</td>
</tr>
<tr>
<td>JO</td>
<td>= Jordan</td>
</tr>
<tr>
<td>JQ</td>
<td>= Johnston Atoll</td>
</tr>
<tr>
<td>JU</td>
<td>= Juan De Nova Island</td>
</tr>
<tr>
<td>KE</td>
<td>= Kenya</td>
</tr>
<tr>
<td>KG</td>
<td>= Kyrgyzstan</td>
</tr>
<tr>
<td>KN</td>
<td>= Korea, Democratic People’s Republic Of</td>
</tr>
<tr>
<td>KQ</td>
<td>= Kingman Reef</td>
</tr>
<tr>
<td>KR</td>
<td>= Kiribati</td>
</tr>
<tr>
<td>KS</td>
<td>= Korea, Republic of</td>
</tr>
<tr>
<td>KT</td>
<td>= Christmas Island</td>
</tr>
<tr>
<td>KU</td>
<td>= Kuwait</td>
</tr>
<tr>
<td>KZ</td>
<td>= Kazakhstan</td>
</tr>
<tr>
<td>LA</td>
<td>= Laos</td>
</tr>
<tr>
<td>LE</td>
<td>= Lebanon</td>
</tr>
<tr>
<td>LG</td>
<td>= Latvia</td>
</tr>
<tr>
<td>LH</td>
<td>= Lithuania</td>
</tr>
<tr>
<td>LI</td>
<td>= Liberia</td>
</tr>
<tr>
<td>LO</td>
<td>= Slovakiasi Slovenia</td>
</tr>
<tr>
<td>LQ</td>
<td>= Palmyra Atoll</td>
</tr>
<tr>
<td>LS</td>
<td>= Liechtenstein</td>
</tr>
<tr>
<td>LT</td>
<td>= Lesotho</td>
</tr>
<tr>
<td>LU</td>
<td>= Luxembourg</td>
</tr>
<tr>
<td>LY</td>
<td>= Libya</td>
</tr>
<tr>
<td>Code</td>
<td>Country</td>
</tr>
<tr>
<td>------</td>
<td>----------------</td>
</tr>
<tr>
<td>MA</td>
<td>Madagascar</td>
</tr>
<tr>
<td>MB</td>
<td>Martinique</td>
</tr>
<tr>
<td>MC</td>
<td>Macau</td>
</tr>
<tr>
<td>MD</td>
<td>Moldova</td>
</tr>
<tr>
<td>MF</td>
<td>Mayotte</td>
</tr>
<tr>
<td>MG</td>
<td>Mongolia</td>
</tr>
<tr>
<td>MH</td>
<td>Montserrat</td>
</tr>
<tr>
<td>MI</td>
<td>Malawi</td>
</tr>
<tr>
<td>MK</td>
<td>Macedonia</td>
</tr>
<tr>
<td>ML</td>
<td>Mali</td>
</tr>
<tr>
<td>MN</td>
<td>Monaco</td>
</tr>
<tr>
<td>MO</td>
<td>Morocco</td>
</tr>
<tr>
<td>MP</td>
<td>Mauritius</td>
</tr>
<tr>
<td>MQ</td>
<td>Midway Islands</td>
</tr>
<tr>
<td>MR</td>
<td>Mauritania</td>
</tr>
<tr>
<td>MT</td>
<td>Malta</td>
</tr>
<tr>
<td>MU</td>
<td>Oman</td>
</tr>
<tr>
<td>MV</td>
<td>Maldives</td>
</tr>
<tr>
<td>MW</td>
<td>Montenegro</td>
</tr>
<tr>
<td>MX</td>
<td>Mexico</td>
</tr>
<tr>
<td>MY</td>
<td>Malaysia</td>
</tr>
<tr>
<td>MZ</td>
<td>Mozambique</td>
</tr>
<tr>
<td>NC</td>
<td>New Caledonia</td>
</tr>
<tr>
<td>NE</td>
<td>Niue</td>
</tr>
<tr>
<td>NF</td>
<td>Norfolk Island</td>
</tr>
<tr>
<td>NG</td>
<td>Niger</td>
</tr>
<tr>
<td>NH</td>
<td>Vanuatu</td>
</tr>
<tr>
<td>NI</td>
<td>Nigeria</td>
</tr>
<tr>
<td>NL</td>
<td>Netherlands</td>
</tr>
<tr>
<td>NO</td>
<td>Norway</td>
</tr>
<tr>
<td>NP</td>
<td>Nepal</td>
</tr>
<tr>
<td>NR</td>
<td>Nauru</td>
</tr>
<tr>
<td>NS</td>
<td>Suriname</td>
</tr>
<tr>
<td>NT</td>
<td>Netherlands Antilles</td>
</tr>
<tr>
<td>NU</td>
<td>Nicaragua</td>
</tr>
<tr>
<td>NZ</td>
<td>New Zealand</td>
</tr>
</tbody>
</table>
### COUNTRY CODES (cont.)

<table>
<thead>
<tr>
<th>Code</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>PA</td>
<td>Paraguay</td>
</tr>
<tr>
<td>PC</td>
<td>Pitcairn Islands</td>
</tr>
<tr>
<td>PE</td>
<td>Peru</td>
</tr>
<tr>
<td>PF</td>
<td>Paracel Islands</td>
</tr>
<tr>
<td>PG</td>
<td>Spratly Islands</td>
</tr>
<tr>
<td>PK</td>
<td>Pakistan</td>
</tr>
<tr>
<td>PL</td>
<td>Poland</td>
</tr>
<tr>
<td>PM</td>
<td>Panama</td>
</tr>
<tr>
<td>PO</td>
<td>Portugal</td>
</tr>
<tr>
<td>PP</td>
<td>Papua New Guinea</td>
</tr>
<tr>
<td>PS</td>
<td>Palau</td>
</tr>
<tr>
<td>PU</td>
<td>Guinea-Bissau</td>
</tr>
<tr>
<td>QA</td>
<td>Qatar</td>
</tr>
<tr>
<td>RE</td>
<td>Reunion</td>
</tr>
<tr>
<td>RM</td>
<td>Marshall Islands</td>
</tr>
<tr>
<td>RO</td>
<td>Romania</td>
</tr>
<tr>
<td>RP</td>
<td>Philippines</td>
</tr>
<tr>
<td>RQ</td>
<td>Puerto Rico</td>
</tr>
<tr>
<td>RS</td>
<td>Russia</td>
</tr>
<tr>
<td>RW</td>
<td>Rwanda</td>
</tr>
<tr>
<td>SA</td>
<td>Saudi Arabia</td>
</tr>
<tr>
<td>SB</td>
<td>St. Pierre and Miquelon</td>
</tr>
<tr>
<td>SC</td>
<td>St. Kitts and Nevis</td>
</tr>
<tr>
<td>SE</td>
<td>Seychelles</td>
</tr>
<tr>
<td>SF</td>
<td>South Africa</td>
</tr>
<tr>
<td>SG</td>
<td>Senegal</td>
</tr>
<tr>
<td>SH</td>
<td>St. Helena</td>
</tr>
<tr>
<td>SL</td>
<td>Sierra Leone</td>
</tr>
<tr>
<td>SM</td>
<td>San Marino</td>
</tr>
<tr>
<td>SN</td>
<td>Singapore</td>
</tr>
<tr>
<td>SO</td>
<td>Somalia</td>
</tr>
<tr>
<td>SP</td>
<td>Spain</td>
</tr>
<tr>
<td>SR</td>
<td>Serbia</td>
</tr>
<tr>
<td>ST</td>
<td>St. Lucia</td>
</tr>
<tr>
<td>SU</td>
<td>Sudan</td>
</tr>
<tr>
<td>SV</td>
<td>Svalbard</td>
</tr>
<tr>
<td>SW</td>
<td>Sweden</td>
</tr>
</tbody>
</table>
### COUNTRY CODES (con’t.)

<table>
<thead>
<tr>
<th>Code</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>SX</td>
<td>South Georgia and the South Sandwich Islands</td>
</tr>
<tr>
<td>SY</td>
<td>Syria</td>
</tr>
<tr>
<td>SZ</td>
<td>Switzerland</td>
</tr>
<tr>
<td>TC</td>
<td>United Arab Emirates</td>
</tr>
<tr>
<td>TD</td>
<td>Trinidad and Tobago</td>
</tr>
<tr>
<td>TE</td>
<td>Tromelin Island</td>
</tr>
<tr>
<td>TH</td>
<td>Thailand</td>
</tr>
<tr>
<td>TI</td>
<td>Tajikistan</td>
</tr>
<tr>
<td>TK</td>
<td>Turks and Caicos Islands</td>
</tr>
<tr>
<td>TL</td>
<td>Tokelau</td>
</tr>
<tr>
<td>TN</td>
<td>Tonga</td>
</tr>
<tr>
<td>TO</td>
<td>Togo</td>
</tr>
<tr>
<td>TP</td>
<td>Sao Tome and Principe</td>
</tr>
<tr>
<td>TS</td>
<td>Tunisia</td>
</tr>
<tr>
<td>TU</td>
<td>Turkey</td>
</tr>
<tr>
<td>TV</td>
<td>Tuvalu</td>
</tr>
<tr>
<td>TW</td>
<td>Taiwan</td>
</tr>
<tr>
<td>TX</td>
<td>Turkmenistan</td>
</tr>
<tr>
<td>TZ</td>
<td>Tanzania</td>
</tr>
<tr>
<td>UG</td>
<td>Uganda</td>
</tr>
<tr>
<td>UK</td>
<td>United Kingdom</td>
</tr>
<tr>
<td>UP</td>
<td>Ukraine</td>
</tr>
<tr>
<td>US</td>
<td>United States</td>
</tr>
<tr>
<td>UV</td>
<td>Burkina</td>
</tr>
<tr>
<td>UY</td>
<td>Uruguay</td>
</tr>
<tr>
<td>UZ</td>
<td>Uzbekistan</td>
</tr>
<tr>
<td>VC</td>
<td>St. Vicent and the Grenadines</td>
</tr>
<tr>
<td>VE</td>
<td>Venezuela</td>
</tr>
<tr>
<td>VI</td>
<td>British Virgin Islands</td>
</tr>
<tr>
<td>VM</td>
<td>Vietnam</td>
</tr>
<tr>
<td>VQ</td>
<td>Virgin Islands</td>
</tr>
<tr>
<td>VT</td>
<td>Vatican City</td>
</tr>
<tr>
<td>Code</td>
<td>Country</td>
</tr>
<tr>
<td>------</td>
<td>-------------------</td>
</tr>
<tr>
<td>WA</td>
<td>= Namibia</td>
</tr>
<tr>
<td>WE</td>
<td>= West Bank</td>
</tr>
<tr>
<td>WF</td>
<td>= Wallis and Futuna</td>
</tr>
<tr>
<td>WI</td>
<td>= Western Sahara</td>
</tr>
<tr>
<td>WQ</td>
<td>= Wake Island</td>
</tr>
<tr>
<td>WS</td>
<td>= Western Samoa</td>
</tr>
<tr>
<td>WZ</td>
<td>= Swaziland</td>
</tr>
<tr>
<td>YM</td>
<td>= Yemen</td>
</tr>
<tr>
<td>ZA</td>
<td>= Zambia</td>
</tr>
<tr>
<td>ZI</td>
<td>= Zimbabwe</td>
</tr>
</tbody>
</table>
### COUNTY CODES

<table>
<thead>
<tr>
<th>Code</th>
<th>County</th>
<th>Code</th>
<th>County</th>
<th>Code</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Alameda</td>
<td>21</td>
<td>Marin</td>
<td>41</td>
<td>San Mateo</td>
</tr>
<tr>
<td>2</td>
<td>Alpine</td>
<td>22</td>
<td>Mariposa</td>
<td>42</td>
<td>Santa Barbara</td>
</tr>
<tr>
<td>3</td>
<td>Amador</td>
<td>23</td>
<td>Mendocino</td>
<td>43</td>
<td>Santa Clara</td>
</tr>
<tr>
<td>4</td>
<td>Butte</td>
<td>24</td>
<td>Merced</td>
<td>44</td>
<td>Santa Cruz</td>
</tr>
<tr>
<td>5</td>
<td>Calaveras</td>
<td>25</td>
<td>Modoc</td>
<td>45</td>
<td>Shasta</td>
</tr>
<tr>
<td>6</td>
<td>Colusa</td>
<td>26</td>
<td>Mono</td>
<td>46</td>
<td>Sierra</td>
</tr>
<tr>
<td>7</td>
<td>Contra Costa</td>
<td>27</td>
<td>Monterey</td>
<td>47</td>
<td>Siskiyou</td>
</tr>
<tr>
<td>8</td>
<td>Del Norte</td>
<td>28</td>
<td>Napa</td>
<td>48</td>
<td>Solano</td>
</tr>
<tr>
<td>9</td>
<td>El Dorado</td>
<td>29</td>
<td>Nevada</td>
<td>49</td>
<td>Sonoma</td>
</tr>
<tr>
<td>10</td>
<td>Fresno</td>
<td>30</td>
<td>Orange</td>
<td>50</td>
<td>Stanislaus</td>
</tr>
<tr>
<td>11</td>
<td>Glenn</td>
<td>31</td>
<td>Placer</td>
<td>51</td>
<td>Sutter</td>
</tr>
<tr>
<td>12</td>
<td>Humboldt</td>
<td>32</td>
<td>Plumas</td>
<td>52</td>
<td>Tehama</td>
</tr>
<tr>
<td>13</td>
<td>Imperial</td>
<td>33</td>
<td>Riverside</td>
<td>53</td>
<td>Trinity</td>
</tr>
<tr>
<td>14</td>
<td>Inyo</td>
<td>34</td>
<td>Sacramento</td>
<td>54</td>
<td>Tulare</td>
</tr>
<tr>
<td>15</td>
<td>Kern</td>
<td>35</td>
<td>San Benito</td>
<td>55</td>
<td>Tuolumne</td>
</tr>
<tr>
<td>16</td>
<td>Kings</td>
<td>36</td>
<td>San Bernardino</td>
<td>56</td>
<td>Ventura</td>
</tr>
<tr>
<td>17</td>
<td>Lake</td>
<td>37</td>
<td>San Diego</td>
<td>57</td>
<td>Yolo</td>
</tr>
<tr>
<td>18</td>
<td>Lassen</td>
<td>38</td>
<td>San Francisco</td>
<td>58</td>
<td>Yuba</td>
</tr>
<tr>
<td>19</td>
<td>Los Angeles</td>
<td>39</td>
<td>San Joaquin</td>
<td>59</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Madera</td>
<td>40</td>
<td>San Luis Obispo</td>
<td>60</td>
<td>Foreign Country</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>63</td>
<td>Sutter/Yuba</td>
</tr>
<tr>
<td>96</td>
<td>Unknown</td>
<td>65</td>
<td>Berkeley City</td>
<td>66</td>
<td>Tri-City</td>
</tr>
<tr>
<td>97</td>
<td>Transient (No formal residence)</td>
<td>66</td>
<td>Tri-City</td>
<td></td>
<td></td>
</tr>
<tr>
<td>98</td>
<td>Other State</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### DSM IV Diagnoses Codes - Alphabetical Listing

NOS = Not Otherwise Specified

<table>
<thead>
<tr>
<th>Codes</th>
<th>Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>995.81</td>
<td>Abuse of Adult (if focus of attention is on victim)</td>
</tr>
<tr>
<td>V62.3</td>
<td>Academic Problem</td>
</tr>
<tr>
<td>V62.4</td>
<td>Acculturation Problem</td>
</tr>
<tr>
<td>309.9</td>
<td>Adjustment Disorder Unspecified</td>
</tr>
<tr>
<td>309.28</td>
<td>Adjustment Disorder W/Anxiety and Depressed Mood</td>
</tr>
<tr>
<td>309.4</td>
<td>Adjustment Disorder W/Mixed Disturbance Emotion and Conduct</td>
</tr>
<tr>
<td>309.24</td>
<td>Adjustment Disorder with Anxiety</td>
</tr>
<tr>
<td>309.0</td>
<td>Adjustment Disorder with Depressed Mood</td>
</tr>
<tr>
<td>309.3</td>
<td>Adjustment Disorder with Disturbance of Conduct</td>
</tr>
<tr>
<td>V71.01</td>
<td>Adult Antisocial Behavior</td>
</tr>
<tr>
<td>995.2</td>
<td>Adverse Effects of Medication NOS</td>
</tr>
<tr>
<td>780.9</td>
<td>Age-Related Cognitive Decline</td>
</tr>
<tr>
<td>300.22</td>
<td>Agoraphobia Without History of Panic Disorder</td>
</tr>
<tr>
<td>305.00</td>
<td>Alcohol Abuse</td>
</tr>
<tr>
<td>291.0</td>
<td>Alcohol Intoxication/Alcohol Withdrawal Delirium</td>
</tr>
<tr>
<td>303.90</td>
<td>Alcohol Dependence</td>
</tr>
<tr>
<td>303.00</td>
<td>Alcohol Intoxication</td>
</tr>
<tr>
<td>291.9</td>
<td>Alcohol Related Disorder NOS</td>
</tr>
<tr>
<td>291.89</td>
<td>Alcohol Induced Anxiety, Mood, Sleep Disorders/Sexual Dysfunction</td>
</tr>
</tbody>
</table>
### DSM IV Diagnoses Codes - Alphabetical Listing (con’t.)

<table>
<thead>
<tr>
<th>Codes</th>
<th>Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>291.1</td>
<td>Alcohol-Induced Persisting Amnestic Disorder</td>
</tr>
<tr>
<td>291.2</td>
<td>Alcohol-Induced Persisting Dementia</td>
</tr>
<tr>
<td>291.3</td>
<td>Alcohol-Induced Psychotic Disorder With Hallucinations</td>
</tr>
<tr>
<td>291.5</td>
<td>Alcohol-Induced Psychotic Disorder, With Delusions</td>
</tr>
<tr>
<td>291.81</td>
<td>Alcohol Withdrawal</td>
</tr>
<tr>
<td>294.0</td>
<td>Amnestic Disorder Due to ... (Indicate Medical Condition)</td>
</tr>
<tr>
<td>294.8</td>
<td>Amnestic Disorder NOS/Dementia NOS</td>
</tr>
<tr>
<td>305.70</td>
<td>Amphetamine Abuse</td>
</tr>
<tr>
<td>304.40</td>
<td>Amphetamine Dependence</td>
</tr>
<tr>
<td>307.1</td>
<td>Anorexia Nervosa</td>
</tr>
<tr>
<td>301.7</td>
<td>Antisocial Personality Disorder</td>
</tr>
<tr>
<td>293.84</td>
<td>Anxiety Disorder Due to General Medical Condition</td>
</tr>
<tr>
<td>300.00</td>
<td>Anxiety Disorder NOS</td>
</tr>
<tr>
<td>314.01</td>
<td>Attention-Deficit/Hyperactivity Disorder, Combined Type or Hyperactive Impulse Type</td>
</tr>
<tr>
<td>314.9</td>
<td>Attention-Deficit/Hyperactivity Disorder NOS</td>
</tr>
<tr>
<td>314.00</td>
<td>Attention-Deficit/Hyperactivity Disorder, Predominantly Inattentive Type</td>
</tr>
<tr>
<td>299.00</td>
<td>Autistic Disorder</td>
</tr>
<tr>
<td>301.82</td>
<td>Avoidant Personality Disorder</td>
</tr>
<tr>
<td>V62.82</td>
<td>Bereavement</td>
</tr>
<tr>
<td>296.80</td>
<td>Bipolar Disorder NOS</td>
</tr>
</tbody>
</table>
### DSM IV Diagnoses Codes - Alphabetical Listing (cont.)

<table>
<thead>
<tr>
<th>Codes</th>
<th>Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>296.40</td>
<td>Bipolar I Disorder, MRE, Hypomanic/Manic, Unspecified</td>
</tr>
<tr>
<td>296.43</td>
<td>Bipolar I Disorder, MRE Manic, Severe W/O Psychotic Features</td>
</tr>
<tr>
<td>296.44</td>
<td>Bipolar I Disorder, MRE Manic, Severe With Psychotic Features</td>
</tr>
<tr>
<td>296.56</td>
<td>Bipolar I Disorder, MRE, Depressed, In Full Remission</td>
</tr>
<tr>
<td>296.55</td>
<td>Bipolar I Disorder, MRE, Depressed, In Partial Remission</td>
</tr>
<tr>
<td>296.51</td>
<td>Bipolar I Disorder, MRE, Depressed, Mild</td>
</tr>
<tr>
<td>296.52</td>
<td>Bipolar I Disorder, MRE, Depressed, Moderate</td>
</tr>
<tr>
<td>296.53</td>
<td>Bipolar I Disorder, MRE, Depressed, Severe W/O Psychotic Features</td>
</tr>
<tr>
<td>296.54</td>
<td>Bipolar I Disorder, MRE, Depressed, Severe With Psychotic Features</td>
</tr>
<tr>
<td>296.50</td>
<td>Bipolar I Disorder, MRE, Depressed, Unspecified</td>
</tr>
<tr>
<td>296.56</td>
<td>Bipolar I Disorder, MRE, Manic, In Full Remission</td>
</tr>
<tr>
<td>296.45</td>
<td>Bipolar I Disorder, MRE, Manic, In Partial Remission</td>
</tr>
<tr>
<td>296.41</td>
<td>Bipolar I Disorder, MRE, Manic, Mild</td>
</tr>
<tr>
<td>296.42</td>
<td>Bipolar I Disorder, MRE, Manic, Moderate</td>
</tr>
<tr>
<td>296.66</td>
<td>Bipolar I Disorder, MRE, Mixed, In Full Remission</td>
</tr>
<tr>
<td>296.65</td>
<td>Bipolar I Disorder, MRE, Mixed, In Partial Remission</td>
</tr>
<tr>
<td>296.61</td>
<td>Bipolar I Disorder, MRE, Mixed, Mild</td>
</tr>
<tr>
<td>296.62</td>
<td>Bipolar I Disorder, MRE, Mixed, Moderate</td>
</tr>
<tr>
<td>296.63</td>
<td>Bipolar I Disorder, MRE, Mixed, Severe W/O Psychotic Features</td>
</tr>
<tr>
<td>296.64</td>
<td>Bipolar I Disorder, MRE, Mixed, Severe With Psychotic Features</td>
</tr>
</tbody>
</table>
### DSM IV Diagnoses Codes - Alphabetic Listing (con’t.)

<table>
<thead>
<tr>
<th>Codes</th>
<th>Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>296.60</td>
<td>Bipolar I Disorder, MRE, Mixed, Unspecified</td>
</tr>
<tr>
<td>296.7</td>
<td>Bipolar I Disorder, MRE, Unspecified</td>
</tr>
<tr>
<td>296.01</td>
<td>Bipolar I Disorder, Single Manic Episode, Mild</td>
</tr>
<tr>
<td>296.02</td>
<td>Bipolar I Disorder, Single Manic Episode, Moderate</td>
</tr>
<tr>
<td>296.00</td>
<td>Bipolar I Disorder, Single Manic Episode, Unspecified</td>
</tr>
<tr>
<td>296.06</td>
<td>Bipolar I Disorder, SME, In Full Remission</td>
</tr>
<tr>
<td>296.05</td>
<td>Bipolar I Disorder, SME, In Partial Remission</td>
</tr>
<tr>
<td>296.03</td>
<td>Bipolar I Disorder, SME, Severe W/O Psychotic Features</td>
</tr>
<tr>
<td>296.04</td>
<td>Bipolar I Disorder, SME, Severe With Psychotic Features</td>
</tr>
<tr>
<td>296.89</td>
<td>Bipolar II Disorder</td>
</tr>
<tr>
<td>V62.89</td>
<td>Borderline Intellectual Functioning (for Axis II)</td>
</tr>
<tr>
<td>301.83</td>
<td>Borderline Personality Disorder</td>
</tr>
<tr>
<td>780.59</td>
<td>Breathing-Related Sleep Disorder/Sleep Disorder Mixed Type Due to/Sleep Disorder Parasomnia Type Due to (Indicate Medical Condition)</td>
</tr>
<tr>
<td>298.8</td>
<td>Brief Psychotic Disorder</td>
</tr>
<tr>
<td>307.51</td>
<td>Bulimia Nervosa</td>
</tr>
<tr>
<td>305.90</td>
<td>Caffeine Intoxication/Inhalant Abuse/Other (or unknown)Substance Abuse/Phencyclidine Abuse</td>
</tr>
<tr>
<td>305.20</td>
<td>Cannabis Abuse</td>
</tr>
<tr>
<td>304.30</td>
<td>Cannabis Dependence</td>
</tr>
<tr>
<td>293.89</td>
<td>Catatonic Disorder Due to a General Medical Condition</td>
</tr>
</tbody>
</table>
### DSM IV Diagnoses Codes - Alphabetic Listing (con’t.)

<table>
<thead>
<tr>
<th>Codes</th>
<th>Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>V71.02</td>
<td>Child or Adolescent Antisocial Behavior</td>
</tr>
<tr>
<td>299.10</td>
<td>Childhood Disintegrative Disorder</td>
</tr>
<tr>
<td>307.22</td>
<td>Chronic Motor or Vocal Tic Disorder</td>
</tr>
<tr>
<td>307.45</td>
<td>Circadian Rhythm Sleep Disorder</td>
</tr>
<tr>
<td>305.60</td>
<td>Cocaine Abuse</td>
</tr>
<tr>
<td>304.20</td>
<td>Cocaine Dependence</td>
</tr>
<tr>
<td>294.9</td>
<td>Cognitive Disorders NOS</td>
</tr>
<tr>
<td>307.9</td>
<td>Communication Disorder NOS</td>
</tr>
<tr>
<td>312.82</td>
<td>Conduct Disorder, Adolescent-Onset Type</td>
</tr>
<tr>
<td>312.81</td>
<td>Conduct Disorder, Childhood-Onset Type</td>
</tr>
<tr>
<td>312.89</td>
<td>Conduct Disorder, Unspecified Onset</td>
</tr>
<tr>
<td>300.11</td>
<td>Conversion Disorder</td>
</tr>
<tr>
<td>301.13</td>
<td>Cyclothymic Disorder</td>
</tr>
<tr>
<td>293.0</td>
<td>Delirium Due to ... (Indicate Medical Condition)</td>
</tr>
<tr>
<td>780.09</td>
<td>Delirium NOS</td>
</tr>
<tr>
<td>297.1</td>
<td>Delusional Disorder</td>
</tr>
<tr>
<td>290.10</td>
<td>Dementia Due to Creutzfeldt-Jakob/Pick’s Disease</td>
</tr>
<tr>
<td>294.1</td>
<td>Dementia Due to Medical Disorder/HIV Disease</td>
</tr>
<tr>
<td>290.13</td>
<td>Dementia of Alzheimer’s Depressed Mood early onset</td>
</tr>
<tr>
<td>290.21</td>
<td>Dementia of Alzheimer’s Depressed Mood late onset</td>
</tr>
</tbody>
</table>
### DSM IV Diagnoses Codes - Alphabetical Listing (con’t.)

<table>
<thead>
<tr>
<th>Codes</th>
<th>Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>290.0</td>
<td>Dementia of Alzheimer’s Uncomplicated late onset</td>
</tr>
<tr>
<td>290.11</td>
<td>Dementia of Alzheimer’s W/Delirium early onset</td>
</tr>
<tr>
<td>290.12</td>
<td>Dementia of Alzheimer’s W/Delusions early onset</td>
</tr>
<tr>
<td>290.3</td>
<td>Dementia of Alzheimer’s W/Delirium late onset</td>
</tr>
<tr>
<td>290.20</td>
<td>Dementia of Alzheimer’s W/Delusions late onset</td>
</tr>
<tr>
<td>301.6</td>
<td>Dependent Personality Disorder</td>
</tr>
<tr>
<td>300.6</td>
<td>Depersonalization Disorder</td>
</tr>
<tr>
<td>311</td>
<td>Depressive Disorder NOS</td>
</tr>
<tr>
<td>315.4</td>
<td>Developmental Coordination Disorder</td>
</tr>
<tr>
<td>799.9</td>
<td>Diagnosis Deferred (code invalid as Secondary/Axis II Diagnosis)</td>
</tr>
<tr>
<td>313.9</td>
<td>Disorder of Infancy, Childhood, or Adolescence NOS</td>
</tr>
<tr>
<td>315.2</td>
<td>Disorder of Written Expression</td>
</tr>
<tr>
<td>312.9</td>
<td>Disruptive Behavior Disorder NOS</td>
</tr>
<tr>
<td>300.12</td>
<td>Dissociative Amnesia</td>
</tr>
<tr>
<td>300.15</td>
<td>Dissociative Disorder NOS</td>
</tr>
<tr>
<td>300.13</td>
<td>Dissociative Fugue</td>
</tr>
<tr>
<td>300.14</td>
<td>Dissociative Identity Disorder</td>
</tr>
<tr>
<td>292.81</td>
<td>Drug Induced Delirium</td>
</tr>
<tr>
<td>292.89</td>
<td>Drug Induced Disorder NEC</td>
</tr>
<tr>
<td>292.84</td>
<td>Drug Induced Mood Disorder</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>---------</td>
<td>-----------------------------------------------------------------</td>
</tr>
<tr>
<td>292.83</td>
<td>Drug Induced Persisting Amnestic Disorder</td>
</tr>
<tr>
<td>292.82</td>
<td>Drug Induced Persisting Dementia</td>
</tr>
<tr>
<td>292.11</td>
<td>Drug Induced Psychotic Disorder, With Delusions</td>
</tr>
<tr>
<td>292.12</td>
<td>Drug Induced Psychotic Disorder, With Hallucinations</td>
</tr>
<tr>
<td>292.9</td>
<td>Drug Related Disorder NOS</td>
</tr>
<tr>
<td>292.0</td>
<td>Drug Withdrawal</td>
</tr>
<tr>
<td>302.76</td>
<td>Dyspareunia (Not Due to a Medical Condition)</td>
</tr>
<tr>
<td>307.47</td>
<td>Dyssomnia NOS/Nightmare Disorder/Parasomnia NOS</td>
</tr>
<tr>
<td>300.4</td>
<td>Dysthymic Disorder</td>
</tr>
<tr>
<td>307.50</td>
<td>Eating Disorder NOS</td>
</tr>
<tr>
<td>787.6</td>
<td>Encopresis W/Constipation and Overflow Incontinence</td>
</tr>
<tr>
<td>307.7</td>
<td>Encopresis, W/O Constipation and Overflow Incontinence</td>
</tr>
<tr>
<td>307.6</td>
<td>Enuresis (Not Due to a General Medical Condition)</td>
</tr>
<tr>
<td>302.4</td>
<td>Exhibitionism</td>
</tr>
<tr>
<td>315.31</td>
<td>Expressive Language Disorder</td>
</tr>
<tr>
<td>300.19</td>
<td>Factitious Disorder</td>
</tr>
<tr>
<td>300.16</td>
<td>Factitious Disorder W/Predominant Psychological Signs</td>
</tr>
<tr>
<td>307.59</td>
<td>Feeding Disorder of Infancy or Early Childhood</td>
</tr>
<tr>
<td>625.0</td>
<td>Female Dyspareunia Due to ... (Indicate Medical Condition)</td>
</tr>
<tr>
<td>302.73</td>
<td>Female Orgasmic Disorder</td>
</tr>
</tbody>
</table>
### DSM IV Diagnoses Codes - Alphabetical Listing (con’t.)

<table>
<thead>
<tr>
<th>Codes</th>
<th>Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>302.72</td>
<td>Female Sexual Desire Disorder/Male Erectile Disorder</td>
</tr>
<tr>
<td>625.8</td>
<td>Female Hypoactive Sexual Desire/Female Sexual Dysfunction Due to (Indicate Medical Condition)</td>
</tr>
<tr>
<td>302.81</td>
<td>Fetishism</td>
</tr>
<tr>
<td>302.89</td>
<td>Frotteurism</td>
</tr>
<tr>
<td>302.6</td>
<td>Gender Identity Disorder in Children/Gender Identity Disorder NOS</td>
</tr>
<tr>
<td>302.85</td>
<td>Gender Identity Disorder in Adolescents or Adults</td>
</tr>
<tr>
<td>300.02</td>
<td>Generalized Anxiety Disorder</td>
</tr>
<tr>
<td>305.30</td>
<td>Hallucinogen Abuse</td>
</tr>
<tr>
<td>304.50</td>
<td>Hallucinogen Dependence</td>
</tr>
<tr>
<td>301.50</td>
<td>Histrionic Personality Disorder</td>
</tr>
<tr>
<td>302.71</td>
<td>Hypoactive Sexual Desire Disorder</td>
</tr>
<tr>
<td>300.7</td>
<td>Hypochondriasis/Body Dysmorphic Disorder</td>
</tr>
<tr>
<td>313.82</td>
<td>Identity Problem</td>
</tr>
<tr>
<td>312.30</td>
<td>Impulse-Control Disorder NOS</td>
</tr>
<tr>
<td>312.34</td>
<td>Intermittent Explosive Disorder</td>
</tr>
<tr>
<td>312.32</td>
<td>Kleptomania</td>
</tr>
<tr>
<td>315.31</td>
<td>Language Disorder</td>
</tr>
<tr>
<td>315.9</td>
<td>Learning Disorder NOS</td>
</tr>
<tr>
<td>296.33</td>
<td>Major Depressive Disorder, Recurrent, Severe W/O Psychotic Features</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>---------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>296.34</td>
<td>Major Depressive Disorder, Recurrent, Severe with Psychotic Features</td>
</tr>
<tr>
<td>296.36</td>
<td>Major Depressive Disorder, Recurrent, In Full Remission</td>
</tr>
<tr>
<td>296.35</td>
<td>Major Depressive Disorder, Recurrent, In Partial Remission</td>
</tr>
<tr>
<td>296.31</td>
<td>Major Depressive Disorder, Recurrent, Mild</td>
</tr>
<tr>
<td>296.32</td>
<td>Major Depressive Disorder, Recurrent, Moderate</td>
</tr>
<tr>
<td>296.30</td>
<td>Major Depressive Disorder, Recurrent, Unspecified</td>
</tr>
<tr>
<td>296.23</td>
<td>Major Depressive Disorder, SE, Severe W/O Psychotic Features</td>
</tr>
<tr>
<td>296.24</td>
<td>Major Depressive Disorder, SE, Severe With Psychotic Features</td>
</tr>
<tr>
<td>296.26</td>
<td>Major Depressive Disorder, Single Episode, In Full Remission</td>
</tr>
<tr>
<td>296.25</td>
<td>Major Depressive Disorder, Single Episode, In Partial Remission</td>
</tr>
<tr>
<td>296.21</td>
<td>Major Depressive Disorder, Single Episode, Mild</td>
</tr>
<tr>
<td>296.22</td>
<td>Major Depressive Disorder, Single Episode, Moderate</td>
</tr>
<tr>
<td>296.20</td>
<td>Major Depressive Disorder, Single Episode, Unspecified</td>
</tr>
<tr>
<td>607.84</td>
<td>Male Erectile Disorder Due to ... (Indicate Medical Condition)</td>
</tr>
<tr>
<td>302.74</td>
<td>Male Orgasmic Disorder</td>
</tr>
<tr>
<td>608.89</td>
<td>Male Dyspareunia/Male Hypoatcie Sexual Desire/Male Sexual Dysfunction Due to…..(Indicate Medical Condition)</td>
</tr>
<tr>
<td>V65.2</td>
<td>Malingering</td>
</tr>
<tr>
<td>315.1</td>
<td>Mathematics Disorder</td>
</tr>
<tr>
<td>333.90</td>
<td>Medication-Induced Movement Disorder NOS</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>--------</td>
<td>-------------------------------------------------------------</td>
</tr>
<tr>
<td>333.1</td>
<td>Medication-Induced Postural Tremor</td>
</tr>
<tr>
<td>293.9</td>
<td>Mental Disorder NOS Due to ... (Indicate Medical Condition)</td>
</tr>
<tr>
<td>317</td>
<td>Mild Mental Retardation</td>
</tr>
<tr>
<td>315.32</td>
<td>Mixed Receptive-Expressive Language Disorder</td>
</tr>
<tr>
<td>318.0</td>
<td>Moderate Mental Retardation</td>
</tr>
<tr>
<td>293.83</td>
<td>Mood Disorder Due to ... (Indicate Medical Condition)</td>
</tr>
<tr>
<td>296.90</td>
<td>Mood disorder NOS</td>
</tr>
<tr>
<td>301.81</td>
<td>Narcissistic Personality Disorder</td>
</tr>
<tr>
<td>347</td>
<td>Narcolepsy</td>
</tr>
<tr>
<td>995.52</td>
<td>Neglect of Child</td>
</tr>
<tr>
<td>V61.21</td>
<td>Neglect/Physical Abuse/Sexual Abuse of Child</td>
</tr>
<tr>
<td>333.92</td>
<td>Neuroleptic Malignant Syndrome</td>
</tr>
<tr>
<td>333.99</td>
<td>Neuroleptic-Induced Acute Akathisia</td>
</tr>
<tr>
<td>333.7</td>
<td>Neuroleptic-Induced Acute Dystonia</td>
</tr>
<tr>
<td>332.1</td>
<td>Neuroleptic-Induced Parkinsonism</td>
</tr>
<tr>
<td>333.82</td>
<td>Neuroleptic-Induced Tardive Dyskinesis</td>
</tr>
<tr>
<td>305.10</td>
<td>Nicotine Dependence</td>
</tr>
<tr>
<td>V71.09</td>
<td>No Diagnosis/No Mental Disorder (code invalid as Secondary/Axis III Diagnosis)</td>
</tr>
<tr>
<td>V15.81</td>
<td>Noncompliance With Treatment</td>
</tr>
<tr>
<td>300.3</td>
<td>Obsessive-Compulsive Disorder</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>-----------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>301.4</td>
<td>Obsessive-Compulsive Personality Disorder</td>
</tr>
<tr>
<td>V62.2</td>
<td>Occupational Problem</td>
</tr>
<tr>
<td>305.50</td>
<td>Opioid Abuse</td>
</tr>
<tr>
<td>304.0</td>
<td>Opioid Dependence</td>
</tr>
<tr>
<td>313.81</td>
<td>Oppositional Defiant Disorder</td>
</tr>
<tr>
<td>304.90</td>
<td>Other (or unknown) Substance Dependence</td>
</tr>
<tr>
<td>307.89</td>
<td>Pain Disorder Associated W/Psychological and Medical</td>
</tr>
<tr>
<td>307.80</td>
<td>Pain Disorder Associated With Psychological Factors</td>
</tr>
<tr>
<td>300.21</td>
<td>Panic Disorder With Agoraphobia</td>
</tr>
<tr>
<td>300.01</td>
<td>Panic Disorder Without Agoraphobia</td>
</tr>
<tr>
<td>301.0</td>
<td>Paranoid Personality Disorder</td>
</tr>
<tr>
<td>302.9</td>
<td>Paraphilia NOS/Sexual Disorder NOS</td>
</tr>
<tr>
<td>V61.20</td>
<td>Parent-Child Relational Problem</td>
</tr>
<tr>
<td>312.31</td>
<td>Pathological Gambling</td>
</tr>
<tr>
<td>302.2</td>
<td>Pedophilia</td>
</tr>
<tr>
<td>310.1</td>
<td>Personality Change Due to General Medical Condition</td>
</tr>
<tr>
<td>301.9</td>
<td>Personality Disorder NOS</td>
</tr>
<tr>
<td>299.80</td>
<td>Pervasive Development Disorder NOS/Asperger’s Disorder/Rett’s Disorder</td>
</tr>
<tr>
<td>304.60</td>
<td>Phencyclidine Dependent and Inhalant Dependence</td>
</tr>
<tr>
<td>315.39</td>
<td>Phonological Disorder</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>--------</td>
<td>-----------------------------------------------------------------</td>
</tr>
<tr>
<td>995.81</td>
<td>Physical Abuse of Adult (focus on victim)</td>
</tr>
<tr>
<td>995.54</td>
<td>Physical Abuse of Child (focus on victim)</td>
</tr>
<tr>
<td>V62.83</td>
<td>Physical/Sexual Abuse of Adult (by non-partner)</td>
</tr>
<tr>
<td>V61.12</td>
<td>Physical/Sexual Abuse of Adult (by partner) (code invalid as of 1/1/97)</td>
</tr>
<tr>
<td>307.52</td>
<td>Pica</td>
</tr>
<tr>
<td>304.80</td>
<td>Polysubstance Dependence</td>
</tr>
<tr>
<td>309.81</td>
<td>Post-Traumatic Stress Disorder</td>
</tr>
<tr>
<td>302.75</td>
<td>Premature Ejaculation</td>
</tr>
<tr>
<td>307.44</td>
<td>Primary Hypersomnia/Hypersomnia related to (Axis I/II Disorder)</td>
</tr>
<tr>
<td>307.42</td>
<td>Primary Insomnia/Insomnia Related to (Axis I/II Disorder)</td>
</tr>
<tr>
<td>318.2</td>
<td>Profound Mental Retardation</td>
</tr>
<tr>
<td>293.81</td>
<td>Psychotic Disorder Due to ... (Indicate Medical Condition) Delusions</td>
</tr>
<tr>
<td>293.82</td>
<td>Psychotic Disorder Due to ... (Indicate Medical Condition) With Hallucinations</td>
</tr>
<tr>
<td>298.9</td>
<td>Psychotic Disorder NOS</td>
</tr>
<tr>
<td>312.33</td>
<td>Pyromania</td>
</tr>
<tr>
<td>313.89</td>
<td>Reactive Attachment Disorder of Infancy or Early Childhood</td>
</tr>
<tr>
<td>315.00</td>
<td>Reading Disorder</td>
</tr>
<tr>
<td>V62.81</td>
<td>Relational Problem NOS</td>
</tr>
<tr>
<td>V61.9</td>
<td>Relational Problem Related to a Mental Disorder or General Medical Condition</td>
</tr>
<tr>
<td>V62.89</td>
<td>Religious or Spiritual Problem/Phase of Life Problem (for Axis I)</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>-------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>307.53</td>
<td>Rumination Disorder</td>
</tr>
<tr>
<td>295.70</td>
<td>Schizoaffective Disorder</td>
</tr>
<tr>
<td>301.20</td>
<td>Schizoid Personality Disorder</td>
</tr>
<tr>
<td>295.20</td>
<td>Schizophrenia, Catatonic Type</td>
</tr>
<tr>
<td>295.10</td>
<td>Schizophrenia, Disorganized Type</td>
</tr>
<tr>
<td>295.30</td>
<td>Schizophrenia, Paranoid Type</td>
</tr>
<tr>
<td>295.60</td>
<td>Schizophrenia, Residual Type</td>
</tr>
<tr>
<td>295.90</td>
<td>Schizophrenia, Undifferentiated Type</td>
</tr>
<tr>
<td>295.40</td>
<td>Schizophreniform Disorder</td>
</tr>
<tr>
<td>301.22</td>
<td>Schizotypal Personality Disorder</td>
</tr>
<tr>
<td>305.40</td>
<td>Sedative, Hypnotic, or Anxiolytic Abuse</td>
</tr>
<tr>
<td>304.10</td>
<td>Sedative, Hypnotic, or Anxiolytic Dependence</td>
</tr>
<tr>
<td>313.23</td>
<td>Selective Mutism</td>
</tr>
<tr>
<td>309.21</td>
<td>Separation Anxiety Disorder</td>
</tr>
<tr>
<td>318.1</td>
<td>Severe Mental Retardation</td>
</tr>
<tr>
<td>995.83</td>
<td>Sexual Abuse of Adult (focus on victim)</td>
</tr>
<tr>
<td>V61.12</td>
<td>Sexual Abuse of Adult (by partner)</td>
</tr>
<tr>
<td>995.53</td>
<td>Sexual Abuse of Child (focus on victim)</td>
</tr>
<tr>
<td>302.79</td>
<td>Sexual Aversion Disorder</td>
</tr>
<tr>
<td>302.70</td>
<td>Sexual Dysfunction NOS</td>
</tr>
<tr>
<td>302.83</td>
<td>Sexual Masochism</td>
</tr>
<tr>
<td>302.84</td>
<td>Sexual Sadism</td>
</tr>
</tbody>
</table>
## DSM IV Diagnoses Codes - Alphabetical Listing (con't.)

<table>
<thead>
<tr>
<th>Codes</th>
<th>Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>297.3</td>
<td>Shared Psychotic Disorder</td>
</tr>
<tr>
<td>307.46</td>
<td>Sleep Terror Disorder/ Sleepwalking Disorder</td>
</tr>
<tr>
<td>780.54</td>
<td>Sleep Disorder Due to ... (Indicate Medical Condition), Hypersomnia Type</td>
</tr>
<tr>
<td>780.52</td>
<td>Sleep Disorder Due to ... (Indicate Medical Condition), Insomnia Type</td>
</tr>
<tr>
<td>300.23</td>
<td>Social Phobia</td>
</tr>
<tr>
<td>300.81</td>
<td>Somatization Disorder</td>
</tr>
<tr>
<td>300.82</td>
<td>Somatoform Disorder NOS and Undifferentiated Somatoform Disorder</td>
</tr>
<tr>
<td>300.29</td>
<td>Specific Phobia</td>
</tr>
<tr>
<td>316</td>
<td>(Specified Psychological Factor) Affecting (Indicate Medical Condition)</td>
</tr>
<tr>
<td>307.3</td>
<td>Stereotypic Movement Disorder</td>
</tr>
<tr>
<td>307.0</td>
<td>Stuttering</td>
</tr>
<tr>
<td>307.20</td>
<td>Tic Disorder NOS</td>
</tr>
<tr>
<td>307.23</td>
<td>Tourette's Disorder</td>
</tr>
<tr>
<td>307.21</td>
<td>Transient Tic Disorder</td>
</tr>
<tr>
<td>302.3</td>
<td>Transvestic Fetishism</td>
</tr>
<tr>
<td>312.39</td>
<td>Trichotillomania</td>
</tr>
<tr>
<td>300.9</td>
<td>Unspecified Mental Disorder (Non-psychotic)</td>
</tr>
<tr>
<td>319</td>
<td>Unspecified Mental Retardation</td>
</tr>
<tr>
<td>306.51</td>
<td>Vagismus (Not Due to a General Medical Condition)</td>
</tr>
<tr>
<td>290.40</td>
<td>Vascular Dementia, Uncomplicated</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>---------</td>
<td>------------------------------------------------</td>
</tr>
<tr>
<td>290.41</td>
<td>Vascular Dementia, With Delirium</td>
</tr>
<tr>
<td>290.42</td>
<td>Vascular Dementia, With Delusions</td>
</tr>
<tr>
<td>290.43</td>
<td>Vascular Dementia, With Depressed Mood</td>
</tr>
<tr>
<td>302.82</td>
<td>Voyeurism</td>
</tr>
</tbody>
</table>
### DSM IV Diagnoses Codes - Numerical Listing

NOS = Not Otherwise Specified

<table>
<thead>
<tr>
<th>Codes</th>
<th>Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>290.0</td>
<td>Dementia of Alzheimer’s Uncomplicated late onset</td>
</tr>
<tr>
<td>290.10</td>
<td>Dementia due to Creutzfeldt-Jakob/Pick’s Disease</td>
</tr>
<tr>
<td>290.11</td>
<td>Dementia of Alzheimer’s W/Delirium early onset</td>
</tr>
<tr>
<td>290.12</td>
<td>Dementia of Alzheimer’s W/Delusions early onset</td>
</tr>
<tr>
<td>290.13</td>
<td>Dementia of Alzheimer’s Depressed Mood early onset</td>
</tr>
<tr>
<td>290.20</td>
<td>Dementia of Alzheimer’s W/Delusions late onset</td>
</tr>
<tr>
<td>290.21</td>
<td>Dementia of Alzheimer’s Depressed Mood late onset</td>
</tr>
<tr>
<td>290.3</td>
<td>Dementia of Alzheimer’s W/Delirium late onset</td>
</tr>
<tr>
<td>290.40</td>
<td>Vascular Dementia, Uncomplicated</td>
</tr>
<tr>
<td>290.41</td>
<td>Vascular Dementia, With Delirium</td>
</tr>
<tr>
<td>290.42</td>
<td>Vascular Dementia, With Delusions</td>
</tr>
<tr>
<td>290.43</td>
<td>Vascular Dementia, With Depressed Mood</td>
</tr>
<tr>
<td>291.0</td>
<td>Alcohol Intoxication/Alcohol Withdrawal Delirium</td>
</tr>
<tr>
<td>291.1</td>
<td>Alcohol-Induced Persisting Amnestic Disorder</td>
</tr>
<tr>
<td>291.2</td>
<td>Alcohol-Induced Persisting Dementia</td>
</tr>
<tr>
<td>291.3</td>
<td>Alcohol-Induced Psychotic Disorder, With Hallucinations</td>
</tr>
<tr>
<td>291.5</td>
<td>Alcohol-Induced Psychotic Disorder, With Delusions</td>
</tr>
<tr>
<td>291.81</td>
<td>Alcohol Withdrawal</td>
</tr>
<tr>
<td>291.89</td>
<td>Alcohol-Induced Anxiety, Mood, Sleep Disorders/Sexual Dysfunction</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>--------</td>
<td>------------------------------------------------------------</td>
</tr>
<tr>
<td>291.9</td>
<td>Alcohol Related Disorder NOS</td>
</tr>
<tr>
<td>292.0</td>
<td>Drug Withdrawal</td>
</tr>
<tr>
<td>292.11</td>
<td>Drug Induced Psychotic Disorder, With Delusions</td>
</tr>
<tr>
<td>292.12</td>
<td>Drug Induced Psychotic Disorder, With Hallucinations</td>
</tr>
<tr>
<td>292.81</td>
<td>Drug Induced Delirium</td>
</tr>
<tr>
<td>292.82</td>
<td>Drug Induced Persisting Dementia</td>
</tr>
<tr>
<td>292.83</td>
<td>Drug Induced Persisting Amnestic Disorder</td>
</tr>
<tr>
<td>292.84</td>
<td>Drug Induced Mood Disorder</td>
</tr>
<tr>
<td>292.89</td>
<td>Drug Induced Disorder NEC</td>
</tr>
<tr>
<td>292.9</td>
<td>Drug Related Disorder NOS</td>
</tr>
<tr>
<td>293.0</td>
<td>Delirium Due to ... (Indicate Medical Condition)</td>
</tr>
<tr>
<td>293.81</td>
<td>Psychotic Disorder Due to ... (Indicate Medical Condition) Delusions</td>
</tr>
<tr>
<td>293.82</td>
<td>Psychotic Disorder Due to ... (Indicate Medical Condition) With Hallucinations</td>
</tr>
<tr>
<td>293.83</td>
<td>Mood Disorder Due to ... (Indicate Medical Condition)</td>
</tr>
<tr>
<td>293.84</td>
<td>Anxiety Disorder Due to General Medical Condition</td>
</tr>
<tr>
<td>293.89</td>
<td>Catatonic Disorder Due to General Medical Condition</td>
</tr>
<tr>
<td>293.9</td>
<td>Mental Disorder NOS Due to ... (Indicate Medical Condition)</td>
</tr>
<tr>
<td>294.0</td>
<td>Amnestic Disorder Due to ... (Indicate Medical Condition)</td>
</tr>
<tr>
<td>294.1</td>
<td>Dementia Due to Medical Disorder/HIV Disease</td>
</tr>
<tr>
<td>294.8</td>
<td>Amnestic Disorder NOS/Dementia NOS</td>
</tr>
</tbody>
</table>
## DSM IV Diagnoses Codes - Numerical Listing (con't.)

<table>
<thead>
<tr>
<th>Codes</th>
<th>Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>294.9</td>
<td>Cognitive Disorders NOS</td>
</tr>
<tr>
<td>295.10</td>
<td>Schizophrenia, Disorganized Type</td>
</tr>
<tr>
<td>295.20</td>
<td>Schizophrenia, Catatonic Type</td>
</tr>
<tr>
<td>295.30</td>
<td>Schizophrenia, Paranoid Type</td>
</tr>
<tr>
<td>295.40</td>
<td>Schizophreniform Disorder</td>
</tr>
<tr>
<td>295.60</td>
<td>Schizophrenia, Residual Type</td>
</tr>
<tr>
<td>295.70</td>
<td>Schizoaffective Disorder</td>
</tr>
<tr>
<td>295.90</td>
<td>Schizophrenia, Undifferentiated Type</td>
</tr>
<tr>
<td>296.00</td>
<td>Bipolar I Disorder, Single Manic Episode, Unspecified</td>
</tr>
<tr>
<td>296.01</td>
<td>Bipolar I Disorder, Single Manic Episode, Mild</td>
</tr>
<tr>
<td>296.02</td>
<td>Bipolar I Disorder, Single Manic Episode, Moderate</td>
</tr>
<tr>
<td>296.03</td>
<td>Bipolar I Disorder, SME, Severe W/O Psychotic Features</td>
</tr>
<tr>
<td>296.04</td>
<td>Bipolar I Disorder, SME, Severe With Psychotic Features</td>
</tr>
<tr>
<td>296.05</td>
<td>Bipolar I Disorder, SME, In Partial Remission</td>
</tr>
<tr>
<td>296.06</td>
<td>Bipolar I Disorder, SME, In Full Remission</td>
</tr>
<tr>
<td>296.20</td>
<td>Major Depressive Disorder, Single Episode, Unspecified</td>
</tr>
<tr>
<td>296.21</td>
<td>Major Depressive Disorder, Single Episode, Mild</td>
</tr>
<tr>
<td>296.22</td>
<td>Major Depressive Disorder, Single Episode, Moderate</td>
</tr>
<tr>
<td>296.23</td>
<td>Major Depressive Disorder, SE, Severe W/O Psychotic Features</td>
</tr>
<tr>
<td>296.24</td>
<td>Major Depressive Disorder, SE, Severe With Psychotic Features</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>---------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>296.25</td>
<td>Major Depressive Disorder, Single Episode, In Partial Remission</td>
</tr>
<tr>
<td>296.26</td>
<td>Major Depressive Disorder, Single Episode, In Full Remission</td>
</tr>
<tr>
<td>296.30</td>
<td>Major Depressive Disorder, Recurrent, Unspecified</td>
</tr>
<tr>
<td>296.31</td>
<td>Major Depressive Disorder, Recurrent, Mild</td>
</tr>
<tr>
<td>296.32</td>
<td>Major Depressive Disorder, Recurrent, Moderate</td>
</tr>
<tr>
<td>296.33</td>
<td>Major Depressive Disorder, Rec, Severe W/O Psychotic Features</td>
</tr>
<tr>
<td>296.34</td>
<td>Major Depressive Disorder, Rec, Severe With Psychotic Features</td>
</tr>
<tr>
<td>296.35</td>
<td>Major Depressive Disorder, Recurrent, In Partial Remission</td>
</tr>
<tr>
<td>296.36</td>
<td>Major Depressive Disorder, Recurrent, In Full Remission</td>
</tr>
<tr>
<td>296.40</td>
<td>Bipolar I Disorder, MRE, Hypomanic/Manic, Unspecified</td>
</tr>
<tr>
<td>296.41</td>
<td>Bipolar I Disorder, MRE, Manic, Mild</td>
</tr>
<tr>
<td>296.42</td>
<td>Bipolar I Disorder, MRE, Manic, Moderate</td>
</tr>
<tr>
<td>296.43</td>
<td>Bipolar I Disorder, MRE Manic, Severe W/O Psychotic Features</td>
</tr>
<tr>
<td>296.44</td>
<td>Bipolar I Disorder, MRE Manic, Severe With Psychotic Features</td>
</tr>
<tr>
<td>296.45</td>
<td>Bipolar I Disorder, MRE, Manic, In Partial Remission</td>
</tr>
<tr>
<td>296.46</td>
<td>Bipolar I Disorder, MRE, Manic, In Full Remission</td>
</tr>
<tr>
<td>296.50</td>
<td>Bipolar I Disorder, MRE, Depressed, Unspecified</td>
</tr>
<tr>
<td>296.51</td>
<td>Bipolar I Disorder, MRE, Depressed, Mild</td>
</tr>
<tr>
<td>296.52</td>
<td>Bipolar I Disorder, MRE, Depressed, Moderate</td>
</tr>
<tr>
<td>296.53</td>
<td>Bipolar I Disorder, MRE, Depressed, Severe W/O Psychotic Features</td>
</tr>
</tbody>
</table>
### DSM IV Diagnoses Codes - Numerical Listing (con't.)

<table>
<thead>
<tr>
<th>Codes</th>
<th>Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>296.54</td>
<td>Bipolar I Disorder, MRE, Depressed, Severe With Psychotic Features</td>
</tr>
<tr>
<td>296.55</td>
<td>Bipolar I Disorder, MRE, Depressed, In Partial Remission</td>
</tr>
<tr>
<td>296.56</td>
<td>Bipolar I Disorder, MRE, Depressed, In Full Remission</td>
</tr>
<tr>
<td>296.60</td>
<td>Bipolar I Disorder, MRE, Mixed, Unspecified</td>
</tr>
<tr>
<td>296.61</td>
<td>Bipolar I Disorder, MRE, Mixed, Mild</td>
</tr>
<tr>
<td>296.62</td>
<td>Bipolar I Disorder, MRE, Mixed, Moderate</td>
</tr>
<tr>
<td>296.63</td>
<td>Bipolar I Disorder, MRE, Mixed, Severe W/O Psychotic Features</td>
</tr>
<tr>
<td>296.64</td>
<td>Bipolar I Disorder, MRE, Mixed, Severe With Psychotic Features</td>
</tr>
<tr>
<td>296.65</td>
<td>Bipolar I Disorder, MRE, Mixed, In Partial Remission</td>
</tr>
<tr>
<td>296.66</td>
<td>Bipolar I Disorder, MRE, Mixed, In Full Remission</td>
</tr>
<tr>
<td>296.7</td>
<td>Bipolar I Disorder, MRE, Unspecified</td>
</tr>
<tr>
<td>296.80</td>
<td>Bipolar Disorder NOS</td>
</tr>
<tr>
<td>296.89</td>
<td>Bipolar II Disorder</td>
</tr>
<tr>
<td>296.90</td>
<td>Mood Disorder NOS</td>
</tr>
<tr>
<td>297.1</td>
<td>Delusional Disorder</td>
</tr>
<tr>
<td>297.3</td>
<td>Shared Psychotic Disorder</td>
</tr>
<tr>
<td>298.8</td>
<td>Brief Psychotic Disorder</td>
</tr>
<tr>
<td>298.9</td>
<td>Psychotic Disorder NOS</td>
</tr>
<tr>
<td>299.0</td>
<td>Autistic Disorder</td>
</tr>
<tr>
<td>299.10</td>
<td>Childhood Disintegrative Disorder</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>---------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>299.80</td>
<td>Pervasive Developmental Disorder NOS/Asperger’s Disorder/Rett’s Disorder</td>
</tr>
<tr>
<td>300.00</td>
<td>Anxiety Disorder NOS</td>
</tr>
<tr>
<td>300.01</td>
<td>Panic Disorder Without Agoraphobia</td>
</tr>
<tr>
<td>300.02</td>
<td>Generalized Anxiety Disorder</td>
</tr>
<tr>
<td>300.11</td>
<td>Conversion Disorder</td>
</tr>
<tr>
<td>300.12</td>
<td>Dissociative Amnesia</td>
</tr>
<tr>
<td>300.13</td>
<td>Dissociative Fugue</td>
</tr>
<tr>
<td>300.14</td>
<td>Dissociative Identity Disorder</td>
</tr>
<tr>
<td>300.15</td>
<td>Dissociative Disorder NOS</td>
</tr>
<tr>
<td>300.16</td>
<td>Factitious Disorder W/Predominant Psychological Signs</td>
</tr>
<tr>
<td>300.19</td>
<td>Factitious Disorder</td>
</tr>
<tr>
<td>300.21</td>
<td>Panic Disorder With Agoraphobia</td>
</tr>
<tr>
<td>300.22</td>
<td>Agoraphobia Without History of Panic Disorder</td>
</tr>
<tr>
<td>300.23</td>
<td>Social Phobia</td>
</tr>
<tr>
<td>300.29</td>
<td>Specific Phobia</td>
</tr>
<tr>
<td>300.3</td>
<td>Obsessive-Compulsive Disorder</td>
</tr>
<tr>
<td>300.4</td>
<td>Dysthymic Disorder</td>
</tr>
<tr>
<td>300.6</td>
<td>Depersonalization Disorder</td>
</tr>
<tr>
<td>300.7</td>
<td>Hypochondriasis/Body Dysmorphic Disorder</td>
</tr>
<tr>
<td>300.81</td>
<td>Somatization Disorder</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>--------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>300.82</td>
<td>Somatoform Disorder NOS and Undifferentiated Somatoform Disorder</td>
</tr>
<tr>
<td>300.9</td>
<td>Unspecified Mental Disorder (Non-psychotic)</td>
</tr>
<tr>
<td>301.0</td>
<td>Paranoid Personality Disorder</td>
</tr>
<tr>
<td>301.13</td>
<td>Cyclothymic Disorder</td>
</tr>
<tr>
<td>301.20</td>
<td>Schizoid Personality Disorder</td>
</tr>
<tr>
<td>301.22</td>
<td>Schizotypal Personality Disorder</td>
</tr>
<tr>
<td>301.4</td>
<td>Obsessive-Compulsive Personality Disorder</td>
</tr>
<tr>
<td>301.50</td>
<td>Histrionic Personality Disorder</td>
</tr>
<tr>
<td>301.6</td>
<td>Dependent Personality Disorder</td>
</tr>
<tr>
<td>301.7</td>
<td>Antisocial Personality Disorder</td>
</tr>
<tr>
<td>301.81</td>
<td>Narcissistic Personality Disorder</td>
</tr>
<tr>
<td>301.82</td>
<td>Avoidant Personality Disorder</td>
</tr>
<tr>
<td>301.83</td>
<td>Borderline Personality Disorder</td>
</tr>
<tr>
<td>301.9</td>
<td>Personality Disorder NOS</td>
</tr>
<tr>
<td>302.2</td>
<td>Pedophilia</td>
</tr>
<tr>
<td>302.3</td>
<td>Transvestic Fetishism</td>
</tr>
<tr>
<td>302.4</td>
<td>Exhibitionism</td>
</tr>
<tr>
<td>302.6</td>
<td>Gender Identity Disorder in Children/Gender Identity Disorder NOS</td>
</tr>
<tr>
<td>302.70</td>
<td>Sexual Dysfunction NOS</td>
</tr>
<tr>
<td>302.71</td>
<td>Hypoactive Sexual Desire Disorder</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>---------</td>
<td>------------------------------------------------------------</td>
</tr>
<tr>
<td>302.72</td>
<td>Female Sexual Desire Disorder/Male Erectile Disorder</td>
</tr>
<tr>
<td>302.73</td>
<td>Female Orgasmic Disorder</td>
</tr>
<tr>
<td>302.74</td>
<td>Male Orgasmic Disorder</td>
</tr>
<tr>
<td>302.75</td>
<td>Premature Ejaculation</td>
</tr>
<tr>
<td>302.76</td>
<td>Dyspareunia (Not Due to a Medical Condition)</td>
</tr>
<tr>
<td>302.79</td>
<td>Sexual Aversion Disorder</td>
</tr>
<tr>
<td>302.81</td>
<td>Fetishism</td>
</tr>
<tr>
<td>302.82</td>
<td>Voyeurism</td>
</tr>
<tr>
<td>302.83</td>
<td>Sexual Masochism</td>
</tr>
<tr>
<td>302.84</td>
<td>Sexual Sadism</td>
</tr>
<tr>
<td>302.85</td>
<td>Gender Identity Disorder in Adolescents or Adults</td>
</tr>
<tr>
<td>302.89</td>
<td>Frotteurism</td>
</tr>
<tr>
<td>302.9</td>
<td>Paraphilia NOS/Sexual Disorder NOS</td>
</tr>
<tr>
<td>303.00</td>
<td>Alcohol Intoxication</td>
</tr>
<tr>
<td>303.90</td>
<td>Alcohol Dependence</td>
</tr>
<tr>
<td>304.00</td>
<td>Opioid Dependence</td>
</tr>
<tr>
<td>304.10</td>
<td>Sedative, Hypnotic, or Anxiolytic Dependence</td>
</tr>
<tr>
<td>304.20</td>
<td>Cocaine Dependence</td>
</tr>
<tr>
<td>304.30</td>
<td>Cannabis Dependence</td>
</tr>
<tr>
<td>304.40</td>
<td>Amphetamine Dependence</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>-----------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>304.50</td>
<td>Hallucinogen Dependence</td>
</tr>
<tr>
<td>304.60</td>
<td>Phencyclidine Dependence and Inhalant Dependence</td>
</tr>
<tr>
<td>304.80</td>
<td>Poly-substance Dependence</td>
</tr>
<tr>
<td>304.90</td>
<td>Other (or unknown) Substance Dependence</td>
</tr>
<tr>
<td>305.00</td>
<td>Alcohol Abuse</td>
</tr>
<tr>
<td>305.10</td>
<td>Nicotine Dependence</td>
</tr>
<tr>
<td>305.20</td>
<td>Cannabis Abuse</td>
</tr>
<tr>
<td>305.30</td>
<td>Hallucinogen Abuse</td>
</tr>
<tr>
<td>305.40</td>
<td>Sedative, Hypnotic, or Anxiolytic Abuse</td>
</tr>
<tr>
<td>305.50</td>
<td>Opioid Abuse</td>
</tr>
<tr>
<td>305.60</td>
<td>Cocaine Abuse</td>
</tr>
<tr>
<td>305.70</td>
<td>Amphetamine Abuse</td>
</tr>
<tr>
<td>305.90</td>
<td>Caffeine Intoxication/Inhalant Abuse/Other (or unknown)Substance Abuse/Phencyclidine Abuse</td>
</tr>
<tr>
<td>306.51</td>
<td>Vaginismus (Not Due to a General Medical Condition)</td>
</tr>
<tr>
<td>307.0</td>
<td>Stuttering</td>
</tr>
<tr>
<td>307.1</td>
<td>Anorexia Nervosa</td>
</tr>
<tr>
<td>307.20</td>
<td>Tic Disorder NOS</td>
</tr>
<tr>
<td>307.21</td>
<td>Transient Tic Disorder</td>
</tr>
<tr>
<td>307.22</td>
<td>Chronic Motor or Vocal Tic Disorder</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>--------</td>
<td>-------------------------------------------------------------</td>
</tr>
<tr>
<td>307.23</td>
<td>Tourette’s Disorder</td>
</tr>
<tr>
<td>307.3</td>
<td>Stereotypic Movement Disorder</td>
</tr>
<tr>
<td>307.42</td>
<td>Primary Insomnia/Insomnia Related to (Axis I/II Disorder)</td>
</tr>
<tr>
<td>307.44</td>
<td>Primary Hypersomnia/Hypersomnia related to (Axis I/II Disorder)</td>
</tr>
<tr>
<td>307.45</td>
<td>Circadian Rhythm Sleep Disorder</td>
</tr>
<tr>
<td>307.46</td>
<td>Sleep Terror Disorder/ Sleepwalking Disorder</td>
</tr>
<tr>
<td>307.47</td>
<td>Dyssomnia NOS/Nightmare Disorder/Parasomnia NOS</td>
</tr>
<tr>
<td>307.50</td>
<td>Eating Disorder NOS</td>
</tr>
<tr>
<td>307.51</td>
<td>Bulimia Nervosa</td>
</tr>
<tr>
<td>307.52</td>
<td>Pica</td>
</tr>
<tr>
<td>307.53</td>
<td>Rumination Disorder</td>
</tr>
<tr>
<td>307.59</td>
<td>Feeding Disorder of Infancy or Early Childhood</td>
</tr>
<tr>
<td>307.6</td>
<td>Enuresis (Not Due to a General Medical Condition)</td>
</tr>
<tr>
<td>307.7</td>
<td>Encopresis, W/O Constipation and Overflow Incontinence</td>
</tr>
<tr>
<td>307.80</td>
<td>Pain Disorder Associated With Psychological Factors</td>
</tr>
<tr>
<td>307.89</td>
<td>Pain Disorder Associated W/Psychological and Medical</td>
</tr>
<tr>
<td>307.9</td>
<td>Communication Disorder NOS</td>
</tr>
<tr>
<td>308.3</td>
<td>Acute Stress Disorder</td>
</tr>
<tr>
<td>309.0</td>
<td>Adjustment Disorder With Depressed Mood</td>
</tr>
<tr>
<td>309.21</td>
<td>Separation Anxiety Disorder</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>-------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>309.24</td>
<td>Adjustment Disorder With Anxiety</td>
</tr>
<tr>
<td>309.28</td>
<td>Adjustment Disorder W/Anxiety and Depressed Mood</td>
</tr>
<tr>
<td>309.3</td>
<td>Adjustment Disorder With Disturbance of Conduct</td>
</tr>
<tr>
<td>309.4</td>
<td>Adjustment Disorder W/Mixed Disturbance Emotion &amp; Conduct</td>
</tr>
<tr>
<td>309.81</td>
<td>Post-Traumatic Stress Disorder</td>
</tr>
<tr>
<td>309.9</td>
<td>Adjustment Disorder Unspecified</td>
</tr>
<tr>
<td>310.1</td>
<td>Personality Change Due to General Med Condition</td>
</tr>
<tr>
<td>311</td>
<td>Depressive Disorder NOS</td>
</tr>
<tr>
<td>312.30</td>
<td>Impulse-Control Disorder NOS</td>
</tr>
<tr>
<td>312.31</td>
<td>Pathological Gambling</td>
</tr>
<tr>
<td>312.32</td>
<td>Kleptomania</td>
</tr>
<tr>
<td>312.33</td>
<td>Pyromania</td>
</tr>
<tr>
<td>312.34</td>
<td>Intermittent Explosive Disorder</td>
</tr>
<tr>
<td>312.39</td>
<td>Trichotillomania</td>
</tr>
<tr>
<td>312.81</td>
<td>Conduct Disorder, Childhood-Onset Type</td>
</tr>
<tr>
<td>312.82</td>
<td>Conduct Disorder, Adolescent-Onset Type</td>
</tr>
<tr>
<td>312.89</td>
<td>Conduct Disorder, Unspecified Onset</td>
</tr>
<tr>
<td>312.9</td>
<td>Disruptive Behavior Disorder NOS</td>
</tr>
<tr>
<td>313.23</td>
<td>Selective Mutism</td>
</tr>
<tr>
<td>313.81</td>
<td>Oppositional Defiant Disorder</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>-----------</td>
<td>----------------------------------------------------------------</td>
</tr>
<tr>
<td>313.82</td>
<td>Identity Problem</td>
</tr>
<tr>
<td>313.89</td>
<td>Reactive Attachment Disorder of Infancy or Early Childhood</td>
</tr>
<tr>
<td>313.9</td>
<td>Disorder of Infancy, Childhood, or Adolescence NOS</td>
</tr>
<tr>
<td>314.00</td>
<td>Attention-Deficit/Hyperactivity Disorder, Predominantly Inattentive Type</td>
</tr>
<tr>
<td>314.01</td>
<td>Attention-Deficit/Hyperactivity Disorder, Combined Type or Hyperactive Impulse Type</td>
</tr>
<tr>
<td>314.9</td>
<td>Attention-Deficit/Hyperactivity Disorder NOS</td>
</tr>
<tr>
<td>315.00</td>
<td>Reading Disorder</td>
</tr>
<tr>
<td>315.1</td>
<td>Mathematics Disorder</td>
</tr>
<tr>
<td>315.2</td>
<td>Disorder of Written Expression</td>
</tr>
<tr>
<td>315.31</td>
<td>Expressive Language Disorder</td>
</tr>
<tr>
<td>315.32</td>
<td>Mixed Receptive-Expressive Language Disorder</td>
</tr>
<tr>
<td>315.39</td>
<td>Phonological Disorder</td>
</tr>
<tr>
<td>315.4</td>
<td>Developmental Coordination disorder</td>
</tr>
<tr>
<td>315.9</td>
<td>Learning Disorder NOS</td>
</tr>
<tr>
<td>316</td>
<td>(Specified Psychological Factor) Affecting (Indicate Medical Condition)</td>
</tr>
<tr>
<td>317</td>
<td>Mild Mental Retardation</td>
</tr>
<tr>
<td>318.0</td>
<td>Moderate Mental Retardation</td>
</tr>
<tr>
<td>318.1</td>
<td>Severe Mental Retardation</td>
</tr>
<tr>
<td>318.2</td>
<td>Profound Mental Retardation</td>
</tr>
<tr>
<td>319</td>
<td>Unspecified Mental Retardation</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>-------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>332.1</td>
<td>Neuroleptic-Induced Parkinsonism</td>
</tr>
<tr>
<td>333.1</td>
<td>Medication-Induced Postural Tremor</td>
</tr>
<tr>
<td>333.7</td>
<td>Narcoleptic-Induced Acute Dystonia</td>
</tr>
<tr>
<td>333.82</td>
<td>Narcoleptic-Induced Tardive Dyskinesia</td>
</tr>
<tr>
<td>333.90</td>
<td>Medication-Induced Movement Disorder NOS</td>
</tr>
<tr>
<td>333.92</td>
<td>Narcoleptic Malignant Syndrome</td>
</tr>
<tr>
<td>333.99</td>
<td>Neuroleptic-Induced Acute Akathisia</td>
</tr>
<tr>
<td>347</td>
<td>Narcolepsy</td>
</tr>
<tr>
<td>607.84</td>
<td>Male Erectile Disorder Due to … (Indicate Medical Condition)</td>
</tr>
<tr>
<td>608.89</td>
<td>Male Dyspareunia/Male Hypoactive Sexual Desire/Male Sexual Dysfunction Due</td>
</tr>
<tr>
<td></td>
<td>to…..(Indicate Medical Condition)</td>
</tr>
<tr>
<td>625.0</td>
<td>Female Dyspareunia Due to … (Indicate Medical Condition)</td>
</tr>
<tr>
<td>625.8</td>
<td>Female Hypoactive Sexual Desire/Female Sexual Dysfunction Due to (Indicate</td>
</tr>
<tr>
<td></td>
<td>Medical Condition)</td>
</tr>
<tr>
<td>780.09</td>
<td>Delirium NOS</td>
</tr>
<tr>
<td>780.52</td>
<td>Sleep Disorder Due to … (Indicate Medical Condition), Insomnia Type</td>
</tr>
<tr>
<td>780.54</td>
<td>Sleep Disorder Due to … (Indicate Medical Condition), Hypersonnia Type</td>
</tr>
<tr>
<td>780.59</td>
<td>Breathing-Related Sleep Disorder/Sleep Disorder Mixed Type Due to/Sleep</td>
</tr>
<tr>
<td></td>
<td>Disorder Parasomnia Type Due to (Indicate Medical Condition)</td>
</tr>
<tr>
<td>780.9</td>
<td>Age-Related Cognitive Decline</td>
</tr>
<tr>
<td>787.6</td>
<td>Encopresis W/Constipation and Overflow Incontinence</td>
</tr>
<tr>
<td>799.9</td>
<td>Diagnosis Deferred (code invalid as Secondary/Axis II Diagnosis)</td>
</tr>
</tbody>
</table>
### DSM IV Diagnoses Codes - Numerical Listing (con't.)

<table>
<thead>
<tr>
<th>Codes</th>
<th>Diagnoses</th>
</tr>
</thead>
<tbody>
<tr>
<td>995.5</td>
<td>Abuse of Child (if focus of attention is on victim) (code invalid as of 12/31/96)</td>
</tr>
<tr>
<td>995.52</td>
<td>Neglect of Child (focus on victim)</td>
</tr>
<tr>
<td>995.53</td>
<td>Sexual Abuse of Child (focus on Victim)</td>
</tr>
<tr>
<td>995.54</td>
<td>Physical Abuse of Child (focus on victim)</td>
</tr>
<tr>
<td>995.81</td>
<td>Physical Abuse of Adult (focus on victim)</td>
</tr>
<tr>
<td>995.83</td>
<td>Sexual Abuse of Adult (focus on victim)</td>
</tr>
<tr>
<td>V15.81</td>
<td>Noncompliance With Treatment</td>
</tr>
<tr>
<td>V61.1</td>
<td>Partner Relational Problems (code invalid as of 12/31/96)</td>
</tr>
<tr>
<td>V61.10</td>
<td>Partner Relations Problems</td>
</tr>
<tr>
<td>V61.12</td>
<td>Physical/Sexual Abuse of Adult (by partner)</td>
</tr>
<tr>
<td>V61.20</td>
<td>Parent-Child Relational Problem</td>
</tr>
<tr>
<td>V61.21</td>
<td>Neglect/Physical Abuse/Sexual Abuse of Child</td>
</tr>
<tr>
<td>V61.8</td>
<td>Sibling Relational Problem</td>
</tr>
<tr>
<td>V61.9</td>
<td>Relational Problem Related to a Mental Disorder or General Medical Condition</td>
</tr>
<tr>
<td>V62.2</td>
<td>Occupational Problem</td>
</tr>
<tr>
<td>V62.3</td>
<td>Academic Problem</td>
</tr>
<tr>
<td>V62.4</td>
<td>Acculturation Problem</td>
</tr>
<tr>
<td>V62.81</td>
<td>Relational Problem NOS</td>
</tr>
<tr>
<td>V62.82</td>
<td>Bereavement</td>
</tr>
<tr>
<td>Codes</td>
<td>Diagnoses</td>
</tr>
<tr>
<td>--------</td>
<td>----------------------------------------------------</td>
</tr>
<tr>
<td>V62.83</td>
<td>Physical or Sexual Abuse of Adult (by non-partner)</td>
</tr>
<tr>
<td>V62.89</td>
<td>Religious or Spiritual Problem/Phase of Life Problem (for Axis I)</td>
</tr>
<tr>
<td>V62.89</td>
<td>Borderline Intellectual Functioning (for Axis II)</td>
</tr>
<tr>
<td>V65.2</td>
<td>Malingering</td>
</tr>
<tr>
<td>V71.01</td>
<td>Adult Antisocial Behavior</td>
</tr>
<tr>
<td>V71.02</td>
<td>Child or Adolescent Antisocial Behavior</td>
</tr>
<tr>
<td>V71.09</td>
<td>No Diagnosis (code invalid as Secondary/Axis III Diagnosis)</td>
</tr>
</tbody>
</table>
### DUAL DIAGNOSES CODES FOR SUBSTANCE ABUSE

**NOTE:**
*Report at admission, annually thereafter, and at discharge.*

<table>
<thead>
<tr>
<th>“DUAL” Codes</th>
<th>Dual Diagnosis Description</th>
<th>DSM IV Codes Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>30xAL 30uAL</td>
<td>Alcohol</td>
<td>303.00 Alcohol Intoxication</td>
</tr>
<tr>
<td></td>
<td></td>
<td>303.90 Alcohol Dependence (Includes remission)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>305.0 Alcohol Abuse</td>
</tr>
<tr>
<td>30xAM 30uAM</td>
<td>Amphetamine</td>
<td>292.89 Amphetamine or other similarly acting Sympathomimetic intoxication or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>305.70 Abuse or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>304.40 Dependence (includes remission)</td>
</tr>
<tr>
<td>30xMJ 30uMJ</td>
<td>Cannabis</td>
<td>292.89 Cannabis (Marijuana or Hashish) Intoxication Or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>305.20 Abuse or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>304.30 Independence (includes remission)</td>
</tr>
<tr>
<td>30xCO 30uCO</td>
<td>Cocaine</td>
<td>292.89 Cocaine Intoxication</td>
</tr>
<tr>
<td></td>
<td></td>
<td>305.60 Cocaine Abuse</td>
</tr>
<tr>
<td></td>
<td></td>
<td>304.20 Cocaine Dependence (includes remission)</td>
</tr>
<tr>
<td>30xHA 30uHA</td>
<td>Hallucinogen</td>
<td>292.89 Hallucinogen, Phencyclidine (PCP) or Similarly acting Arcyclohexylamine Intoxication or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>305.30 Abuse or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>304.50 Dependence (includes remission)</td>
</tr>
<tr>
<td>30xIN 30uIN</td>
<td>Inhalants</td>
<td>292.89 Inhalant Intoxication or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>305.90 Abuse or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>304.60 Dependence (includes remission)</td>
</tr>
<tr>
<td>30xSO 30uSO</td>
<td>Sedatives</td>
<td>292.89 Sedative, Hypnotic or Anxiolytic Intoxication Opioids Or</td>
</tr>
</tbody>
</table>
### DUAL DIAGNOSES CODES FOR SUBSTANCE ABUSE (con’t)

<table>
<thead>
<tr>
<th>“DUAL” Codes</th>
<th>Dual Diagnosis Description</th>
<th>DSM IV Codes Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>305.40</td>
<td>Abuse or Dependence (includes remission)</td>
<td></td>
</tr>
<tr>
<td>304.10</td>
<td>Dependence (includes remission)</td>
<td></td>
</tr>
<tr>
<td>292.89</td>
<td>Opioid Intoxication or</td>
<td></td>
</tr>
<tr>
<td>305.50</td>
<td>Abuse or Dependence (includes remission)</td>
<td></td>
</tr>
<tr>
<td>304.00</td>
<td>Dependence (includes remission)</td>
<td></td>
</tr>
<tr>
<td>30xPS 30uPS</td>
<td>Poly-substance Use Dependence (includes remission)</td>
<td></td>
</tr>
<tr>
<td>30xNO</td>
<td>No use of or history of psychoactive substances that interferes with the mental disorder and adaptive functioning.</td>
<td></td>
</tr>
</tbody>
</table>

**NOTE:**

**X Codes:** The Dual Diagnosis codes under (x) are to be used for clients who meet the DSM IV criteria for psychoactive substance intoxication, abuse, and dependence (includes remission).

**U Codes:** The Dual Diagnosis codes under (u) are to be used to report clients with psychoactive substance use which interferes with their mental disorder and adaptive functioning.
EDUCATIONAL LEVEL - HIGHEST GRADE COMPLETED

**NOTE:**
*Report at admission, annually thereafter, and at formal discharge.*

<table>
<thead>
<tr>
<th>Code</th>
<th>Educational Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>First grade</td>
</tr>
<tr>
<td>02</td>
<td>Second grade</td>
</tr>
<tr>
<td>03</td>
<td>Third grade</td>
</tr>
<tr>
<td>04</td>
<td>Fourth grade</td>
</tr>
<tr>
<td>05</td>
<td>Fifth grade</td>
</tr>
<tr>
<td>06</td>
<td>Sixth grade</td>
</tr>
<tr>
<td>07</td>
<td>Seventh grade</td>
</tr>
<tr>
<td>08</td>
<td>Eighth grade</td>
</tr>
<tr>
<td>09</td>
<td>Ninth grade</td>
</tr>
<tr>
<td>10</td>
<td>Tenth grade</td>
</tr>
<tr>
<td>11</td>
<td>Eleventh grade</td>
</tr>
<tr>
<td>12</td>
<td>Twelfth grade</td>
</tr>
<tr>
<td>13</td>
<td>Freshman college level</td>
</tr>
<tr>
<td>14</td>
<td>Sophomore college level (No degree)</td>
</tr>
<tr>
<td>15</td>
<td>Junior college level (No degree)</td>
</tr>
<tr>
<td>16</td>
<td>Senior college level (No degree)</td>
</tr>
<tr>
<td>17</td>
<td>Associate of Arts degree</td>
</tr>
<tr>
<td>18</td>
<td>Bachelor of Arts degree</td>
</tr>
<tr>
<td>19</td>
<td>Master’s degree</td>
</tr>
<tr>
<td>20</td>
<td>Doctorate degree</td>
</tr>
<tr>
<td>21</td>
<td>Completed vocational training with high school diploma</td>
</tr>
<tr>
<td>22</td>
<td>Completed vocational training without high school diploma</td>
</tr>
<tr>
<td>98</td>
<td>None</td>
</tr>
<tr>
<td>99</td>
<td>Unknown</td>
</tr>
</tbody>
</table>
NOTE:
*Report at admission, annually thereafter, and at formal discharge.*

<table>
<thead>
<tr>
<th>Code</th>
<th>Employment Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>FC</td>
<td>Full-time competitive employment (salaried)</td>
</tr>
<tr>
<td>PC</td>
<td>Part-time competitive employment (salaried)</td>
</tr>
<tr>
<td>FN</td>
<td>Full-time noncompetitive employment (sheltered workshop)</td>
</tr>
<tr>
<td>PN</td>
<td>Part-time noncompetitive employment (sheltered workshop)</td>
</tr>
<tr>
<td>CW</td>
<td>CalWORKS (Welfare to Work)</td>
</tr>
<tr>
<td>GW</td>
<td>GROW (General Relief Opportunity For Work (Welfare to Work))</td>
</tr>
<tr>
<td>HM</td>
<td>Homemaker</td>
</tr>
<tr>
<td>ST</td>
<td>Student</td>
</tr>
<tr>
<td>UE</td>
<td>Unemployed</td>
</tr>
<tr>
<td>RT</td>
<td>Retired</td>
</tr>
<tr>
<td>OT</td>
<td>Other</td>
</tr>
<tr>
<td>UN</td>
<td>Unknown</td>
</tr>
</tbody>
</table>
# ETHNICITY CODES

<table>
<thead>
<tr>
<th>Code</th>
<th>Ethnicity Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>White</td>
</tr>
<tr>
<td>02</td>
<td>Black</td>
</tr>
</tbody>
</table>
| 03   | Hispanic – Indicate ethnic background or region of origin:  
  - Mexico  
  - Central America  
  - South America  
  - Cuba  
  - Puerto Rico  
  - Other  |
| 04   | American Indian or Alaska Native - Specify tribe from the list below:  
  - Assiniboine  
  - Apache  
  - Blackfeet  
  - Cahuilla  
  - Cherokee  
  - Choctaw  
  - Chumash  
  - Dieguneno  
  - Gabrieleno  
  - Apache  
  - Hoopa  
  - Kumeyaay  
  - Karuk  
  - Luiseno  
  - Maidu  
  - MeWuk  
  - Mission  
  - Modoc  
  - Assiniboine  
  - Mono  
  - Paiute  
  - Pima  
  - Pit River  
  - Pomo  
  - Serreno  
  - Shasta  
  - Sioux  
  - Smith River  
  - Tohono O’Odham  
  - Tolowa  
  - Wintun  
  - Yaqui  |
| 05   | Chinese               |
| 06   | Japanese              |
| 07   | Filipino              |
| 09   | Other Non-White (e.g. Arabs, Iraqi, Turks) |
| 10   | Korean                |
| 11   | Indochinese           |
| 12   | Amerasian             |
| 13   | Cambodian             |
| 14   | Samoan                |
| 15   | Asian Indian          |
| 16   | Hawaiian Native       |
| 17   | Guamanian             |
| 18   | Laotian               |
| 19   | Vietnamese            |
| 20   | Other Black           |
| 21   | Other White           |
| 26   | Other                 |
| 27   | Hmong                 |
| 28   | Mien                  |
| 29   | Other Asian           |
| 30   | Other Pacific Islander|
| 99   | Unknown/Not Reported  |
For each service, at least one EBP/SS code must be chosen from either Option 1 or Option 2. Codes may NOT be combined from Option 1 and Option 2 for a single service.

**Option 1 Codes:**
Choose one (1) of the following two codes any time a client is not receiving an Evidence-Based Practice (EBP) or the service is not a Service Strategy.

If either of the following codes is chosen, no additional codes should be selected for the service:
- 00 = No EBP/SS No Evidence-Based Practice/Service Strategy
- 99 = UK EBP/SS Unknown Evidence-Based Practice/Service Strategy

**Option 2 Codes (DO NOT select any codes in this Option if you have already used Option 1):**
Under this option, you may choose one of the following:
- One (1) Evidence-Based Practice (EBP) and no Service Strategies; or
- One (1) Evidence-Based Practice and up to two (2) Service Strategies (SS) or
- Up to three (3) Service Strategies (SS)

**Evidence-Based Practices (EBPs): Only One EBP Code May Be Selected**

<table>
<thead>
<tr>
<th>Code</th>
<th>Code Abbrv.</th>
<th>Code Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>EBP ACT</td>
<td>Assertive Community Treatment</td>
</tr>
<tr>
<td>10</td>
<td>EBP MST</td>
<td>Multisystemic Therapy (both PEI and non-PEI)</td>
</tr>
<tr>
<td>11</td>
<td>EBP FFT</td>
<td>Functional Family Therapy (both PEI and non-PEI)</td>
</tr>
<tr>
<td>2A</td>
<td>Brf Strat FamTher</td>
<td>Brief Strategic Family Therapy</td>
</tr>
<tr>
<td>2B</td>
<td>CPP Child-Prnt Ther</td>
<td>Child-Parent Psychotherapy (CPP)</td>
</tr>
<tr>
<td>2C</td>
<td>CBITS</td>
<td>Cognitive Behavioral Intervention for Trauma in Schools (CBITS)</td>
</tr>
<tr>
<td>2F</td>
<td>DTOI-Dep Treat QI</td>
<td>Depression Treatment Quality Improvement Intervention</td>
</tr>
<tr>
<td>2J</td>
<td>Group CBT Maj Dep</td>
<td>Group CBT for Major Depression</td>
</tr>
<tr>
<td>2K</td>
<td>IMPACT-MHIP</td>
<td>Improving Mood-Promoting Access to Collaborative Treatment (IMPACT-MHIP)</td>
</tr>
<tr>
<td>2L</td>
<td>Incredible Years</td>
<td>Incredible Years (IY)</td>
</tr>
<tr>
<td>2M</td>
<td>IPT Depression</td>
<td>Interpersonal Psychotherapy for Depression (IPT)</td>
</tr>
<tr>
<td>2P</td>
<td>Multidim Fam Ther</td>
<td>Multidimensional Family Therapy</td>
</tr>
<tr>
<td>2R</td>
<td>PCIT</td>
<td>Parent-Child Interaction Therapy (PCIT)</td>
</tr>
<tr>
<td>2S</td>
<td>PEARLS</td>
<td>Program to Encourage Active, Rewarding Lives for Seniors (PEARLS)</td>
</tr>
<tr>
<td>2T</td>
<td>Prolong Exp PTSD</td>
<td>Prolonged Exposure for PTSD (PE-PTSD)</td>
</tr>
<tr>
<td>2V</td>
<td>Strengthen Famili</td>
<td>Strengthening Families</td>
</tr>
<tr>
<td>2W</td>
<td>Trauma Foc CBT</td>
<td>Trauma Focused CBT (TF_CBT)</td>
</tr>
<tr>
<td>2Y</td>
<td>Triple P</td>
<td>Triple P Positive Parenting Program</td>
</tr>
<tr>
<td>2Z</td>
<td>PATHS</td>
<td>Promoting Alternative Thinking Strategies (PATHS)</td>
</tr>
<tr>
<td>3B</td>
<td>Caring Our Famili</td>
<td>Caring for Our Families</td>
</tr>
<tr>
<td>3D</td>
<td>GLBT Champs</td>
<td>GLBT Champs</td>
</tr>
<tr>
<td>3E</td>
<td>LIFE Program</td>
<td>Loving Intervention for Family Enrichment (LIFE) Program</td>
</tr>
<tr>
<td>3L</td>
<td>Reflect Parenting</td>
<td>Reflective Parenting Program</td>
</tr>
<tr>
<td>3M</td>
<td>UCLA Ties</td>
<td>UCLA Ties Transition Model</td>
</tr>
<tr>
<td>3P</td>
<td>Mindful Parenting</td>
<td>Mindful Parenting</td>
</tr>
<tr>
<td>4A</td>
<td>ART-Aggress Replc</td>
<td>Aggression Replacement Training (ART)</td>
</tr>
<tr>
<td>4B</td>
<td>Altnativ for Fmly</td>
<td>Alternatives for Families/Abuse Focused CBT (AF-CBT)</td>
</tr>
<tr>
<td>4D</td>
<td>CORS-Crisis Recov</td>
<td>Crisis Oriented Recovery Services</td>
</tr>
<tr>
<td>4E</td>
<td>EDIPP</td>
<td>Early Detection and Intervention for the Prevention of Psychosis (EDIPP)</td>
</tr>
<tr>
<td>4K</td>
<td>MAP-Mng Adap Prac</td>
<td>Managing and Adapting Practice (MAP)</td>
</tr>
<tr>
<td>4N</td>
<td>Seeking Safety</td>
<td>Seeking Safety</td>
</tr>
<tr>
<td>4R</td>
<td>FOCUS</td>
<td>Families Over Coming Under Stress</td>
</tr>
<tr>
<td>4S</td>
<td>PST</td>
<td>Problem Solving Treatment (PST)</td>
</tr>
</tbody>
</table>
### Evidence-Based Practices (EBPs): Only One EBP Code May Be Selected (Con’t)

<table>
<thead>
<tr>
<th>Code</th>
<th>Code Abbrev.</th>
<th>Code Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>7A</td>
<td>START</td>
<td>School Threat Assessment Response Team (START)</td>
</tr>
<tr>
<td>7B</td>
<td>Stigma-Discrim</td>
<td>Stigma and Discrimination</td>
</tr>
<tr>
<td>7C</td>
<td>Suicid Prev Hotln</td>
<td>Suicide Prevention Hotline</td>
</tr>
<tr>
<td>7D</td>
<td>PC Latina Youth</td>
<td>Pacific Clinic’s Latina Youth Program</td>
</tr>
<tr>
<td>7E</td>
<td>HlthCarePtnr+60</td>
<td>Health Care Partners +60</td>
</tr>
<tr>
<td>7F</td>
<td>Suicide Prev Spec</td>
<td>Suicide Prevention Specialist Team</td>
</tr>
<tr>
<td>7G</td>
<td>OA Primary Care</td>
<td>Older Adult Primary Care Partnership</td>
</tr>
<tr>
<td>7H</td>
<td>Prtnr Hosp Aftrcre</td>
<td>Partnership with Hospitals for aftercare</td>
</tr>
<tr>
<td>7J</td>
<td>Surviv Supp Grp</td>
<td>Support Group for Survivors and Bereaved</td>
</tr>
<tr>
<td>7K</td>
<td>Trng Comm Partner</td>
<td>Training Community Partners</td>
</tr>
<tr>
<td>7L</td>
<td>Prtnr Law Enforce</td>
<td>Partnerships with Law Enforcement and First Responders</td>
</tr>
<tr>
<td>7M</td>
<td>Onlin Suicide Prev</td>
<td>Distant and On-Line Learning for Suicide Prevention</td>
</tr>
<tr>
<td>7N</td>
<td>SchBase MH PEI OE</td>
<td>School-based Targeted MH Prevention and Early Intervention–Outreach &amp; Engagement</td>
</tr>
<tr>
<td>7P</td>
<td>PEERS</td>
<td>PEERS – Embracing Empowerment and Resilience Support Network</td>
</tr>
<tr>
<td>7Q</td>
<td>ESI - MH Consult</td>
<td>Early Screening, Identification and Mental Health Consultation</td>
</tr>
<tr>
<td>7R</td>
<td>Prtnr Student Ach</td>
<td>Partners in Student Achievement</td>
</tr>
<tr>
<td>8A</td>
<td>Cog Beh Therapy</td>
<td>Individual Cognitive Behavioral Therapy (CBT)</td>
</tr>
<tr>
<td>8B</td>
<td>Dialec Beh Therapy</td>
<td>Dialectical Behavior Therapy</td>
</tr>
</tbody>
</table>

### Service Strategies

<table>
<thead>
<tr>
<th>Code</th>
<th>Code Abbrev.</th>
<th>Code Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>50</td>
<td>SS Peer &amp;/or Fam</td>
<td>Peer and/or Family Delivered Services</td>
</tr>
<tr>
<td>51</td>
<td>SS Psy/Edu</td>
<td>Psychoeducation</td>
</tr>
<tr>
<td>52</td>
<td>SS Fam/Sup</td>
<td>Family Support</td>
</tr>
<tr>
<td>53</td>
<td>SS Sup/Edu</td>
<td>Supportive Education</td>
</tr>
<tr>
<td>54</td>
<td>SS Ptnr LawEnf</td>
<td>Delivered in Partnership with Law Enforcement (includes courts, probation, etc.)</td>
</tr>
<tr>
<td>55</td>
<td>SS Ptnr HlthCare</td>
<td>Delivered in Partnership with Health Care</td>
</tr>
<tr>
<td>56</td>
<td>SS Ptnr SocSvcs</td>
<td>Delivered in Partnership with Social Services</td>
</tr>
<tr>
<td>57</td>
<td>SS Ptnr SubAbuse</td>
<td>Delivered in Partnership with Substance Abuse Services</td>
</tr>
<tr>
<td>58</td>
<td>SS Integ Aging</td>
<td>Integrated Services for Mental Health and Aging</td>
</tr>
<tr>
<td>59</td>
<td>SS Integrated DD</td>
<td>Integrated Services for Mental Health and Developmental Disability</td>
</tr>
<tr>
<td>60</td>
<td>SS Eth-Spc.</td>
<td>Ethnic-Specific Service Strategy</td>
</tr>
<tr>
<td>61</td>
<td>SS Age-Spc.</td>
<td>Age-Specific Service Strategy</td>
</tr>
</tbody>
</table>

For instructions regarding the use of the codes and appropriate combinations of codes, please go to the following link: [http://dmh.lacounty.gov/hipaa/CR48.html](http://dmh.lacounty.gov/hipaa/CR48.html)

**Note:**
- For the purposes of this document, EBPs will also include Community-Defined Evidence (CDE), Promising/Pilot Practices (PP) and Other and is categorized as a Program.
## FACILITY TYPE CODES

<table>
<thead>
<tr>
<th>Codes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>Hospital Inpatient (Including Medicare Part A)</td>
</tr>
<tr>
<td>12</td>
<td>Hospital Inpatient (Medicare Part B only)</td>
</tr>
<tr>
<td>18</td>
<td>Hospital – Swing Beds</td>
</tr>
<tr>
<td>21</td>
<td>Skilled Nursing Inpatient (Including Medicare Part A)</td>
</tr>
<tr>
<td>22</td>
<td>Skilled Nursing Inpatient (Medicare Part B only)</td>
</tr>
<tr>
<td>28</td>
<td>Skilled Nursing – Swing Beds</td>
</tr>
<tr>
<td>41</td>
<td>Religious Non-Medical Health Care Institutions – Hospital Inpatient</td>
</tr>
<tr>
<td>65</td>
<td>Intermediate Care – Level I</td>
</tr>
<tr>
<td>66</td>
<td>Intermediate Care – Level II</td>
</tr>
<tr>
<td>86</td>
<td>Residential Facility</td>
</tr>
<tr>
<td>89</td>
<td>Special Facility – Other</td>
</tr>
</tbody>
</table>
NOTE:
All payment sources available to the client must be indicated. Do not omit “County” funds when combined with other sources of payment.

County
Short-Doyle/Medi-Cal
Client or Family
Medicare*
Champus
Insurance and other Third Party
HMO/PHP
Unknown

*If Medicare is indicated as a Financial Responsibility (“Y”), a Medicare number is then required. The first digit may be numeric or alpha and the following eight digits are numeric. The last three digits may be alpha or numeric according to the number found on the client’s Medicare card.
## GENDER

<table>
<thead>
<tr>
<th>Codes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>Male</td>
</tr>
<tr>
<td>F</td>
<td>Female</td>
</tr>
<tr>
<td>O</td>
<td>Other – Includes gender changes, undetermined gender and live birth with congenital abnormalities which obscure gender identification.</td>
</tr>
<tr>
<td>U</td>
<td>Unknown/Not Reported – Indicates that the gender of the client was not available.</td>
</tr>
</tbody>
</table>
## HANDICAP INDICATOR CODES

<table>
<thead>
<tr>
<th>Code</th>
<th>Handicap</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>Not physically disabled/no significant disability</td>
</tr>
<tr>
<td>01</td>
<td>Blindness or severe visual impairment</td>
</tr>
<tr>
<td>02</td>
<td>Deafness or severe hearing impairment</td>
</tr>
<tr>
<td>03</td>
<td>Speech impairment</td>
</tr>
<tr>
<td>04</td>
<td>Physical impairment (e.g., mobility impairment, chronic diseases, etc.)</td>
</tr>
<tr>
<td>05</td>
<td>Developmental disabilities (e.g., learning disabilities, epilepsy, etc.)</td>
</tr>
<tr>
<td>12</td>
<td>Blindness and deafness</td>
</tr>
<tr>
<td>13</td>
<td>Blindness and speech impairment</td>
</tr>
<tr>
<td>14</td>
<td>Blindness and physical impairment</td>
</tr>
<tr>
<td>15</td>
<td>Blindness and developmentally disabled</td>
</tr>
<tr>
<td>16</td>
<td>Blindness and conditions other than those listed in codes 12 through 15</td>
</tr>
<tr>
<td>23</td>
<td>Deafness and speech impairment</td>
</tr>
<tr>
<td>24</td>
<td>Deafness and physical impairment</td>
</tr>
<tr>
<td>25</td>
<td>Deafness and developmentally disabled</td>
</tr>
<tr>
<td>26</td>
<td>Deafness and conditions other than those listed in codes 23 through 25</td>
</tr>
<tr>
<td>34</td>
<td>Speech impairment and physical impairment</td>
</tr>
<tr>
<td>35</td>
<td>Speech impairment and developmentally disabled</td>
</tr>
<tr>
<td>36</td>
<td>Speech impairment and conditions other than those listed in codes 34 and 35</td>
</tr>
<tr>
<td>45</td>
<td>Physical impairment and developmentally disabled</td>
</tr>
<tr>
<td>46</td>
<td>Physical impairment and conditions other than developmentally disabled</td>
</tr>
<tr>
<td>56</td>
<td>Developmentally disabled and other</td>
</tr>
<tr>
<td>57</td>
<td>Development disabilities/Multiple physical disabilities</td>
</tr>
<tr>
<td>06</td>
<td>Physical disability other than any of the above</td>
</tr>
</tbody>
</table>
### HANDICAP INDICATOR CODES (con’t.)

<table>
<thead>
<tr>
<th>Code</th>
<th>Handicap</th>
</tr>
</thead>
<tbody>
<tr>
<td>60</td>
<td>No physical or mental disability</td>
</tr>
<tr>
<td>80</td>
<td>Mental Disability</td>
</tr>
<tr>
<td>81</td>
<td>Mental Disability/Blindness</td>
</tr>
<tr>
<td>82</td>
<td>Mental Disability/Deafness</td>
</tr>
<tr>
<td>83</td>
<td>Mental Disability/Speech Impairment</td>
</tr>
<tr>
<td>84</td>
<td>Mental Disability/Physical Impairment</td>
</tr>
<tr>
<td>85</td>
<td>Mental Disability/Developmental Disability</td>
</tr>
<tr>
<td>87</td>
<td>Mental Disability/Multiple Physical Disabilities</td>
</tr>
<tr>
<td>99</td>
<td>Unknown</td>
</tr>
</tbody>
</table>

### HMO/PHP

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>LA Care</td>
</tr>
<tr>
<td>B</td>
<td>Blue Cross of California – California Care</td>
</tr>
<tr>
<td>C</td>
<td>Care 1st</td>
</tr>
<tr>
<td>D</td>
<td>Maxicare</td>
</tr>
<tr>
<td>E</td>
<td>Tower Health Plan</td>
</tr>
<tr>
<td>F</td>
<td>United Health Plan</td>
</tr>
<tr>
<td>G</td>
<td>Community Health Plan</td>
</tr>
<tr>
<td>H</td>
<td>Kaiser</td>
</tr>
<tr>
<td>I</td>
<td>Foundation Health</td>
</tr>
<tr>
<td>J</td>
<td>Friendly Hills</td>
</tr>
<tr>
<td>K</td>
<td>Molina</td>
</tr>
<tr>
<td>L</td>
<td>Universal Health</td>
</tr>
<tr>
<td>M</td>
<td>Blue Shield</td>
</tr>
<tr>
<td>N</td>
<td>Health Net</td>
</tr>
<tr>
<td>O</td>
<td>United Health Care</td>
</tr>
<tr>
<td>Y</td>
<td>PAP</td>
</tr>
<tr>
<td>Z</td>
<td>Not currently enrolled in a HMO*</td>
</tr>
</tbody>
</table>

* It is not necessary to use this code for clients who are not enrolled in a health plan. This code is needed to replace a code that was previously applied, but the client is no longer enrolled in a health plan.
### INSURANCE TYPE CODE

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>Medicare Secondary Working Aged Beneficiary or Spouse with Employer Group Health Plan</td>
</tr>
<tr>
<td>13</td>
<td>Medicare Secondary End-Stage Renal Disease Beneficiary in the Mandated Coordination Period with an Employer’s Group Health Plan</td>
</tr>
<tr>
<td>14</td>
<td>Medicare Secondary, No–fault Insurance including Auto is Primary</td>
</tr>
<tr>
<td>15</td>
<td>Medicare Secondary Worker’s Compensation</td>
</tr>
<tr>
<td>16</td>
<td>Medicare Secondary Public Health Service (PHS) or Other Federal Agency</td>
</tr>
<tr>
<td>41</td>
<td>Medicare Secondary Black Lung</td>
</tr>
<tr>
<td>42</td>
<td>Medicare Secondary Veteran’s Administration</td>
</tr>
<tr>
<td>43</td>
<td>Medicare Secondary Disabled Beneficiary Under Age 65 with Large Group Health Plan</td>
</tr>
<tr>
<td>47</td>
<td>Medicare Secondary, Other Liability Insurance is Primary</td>
</tr>
</tbody>
</table>

### INTENT OF SERVICE

<table>
<thead>
<tr>
<th>Code</th>
<th>Description/Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Assessment Services are provided to assess the client’s impairment level and/or problem areas of functioning and, if treatment for improvement or maintenance is appropriate, to refer the client to a unit where these services are available. <strong>Where an evaluation is done as part of the treatment process, the intent of service is improvement or maintenance.</strong></td>
</tr>
<tr>
<td>2</td>
<td>Improvement Services are provided to improve the current level of functioning of the client.</td>
</tr>
<tr>
<td>3</td>
<td>Maintenance Services are provided primarily to stabilize the client’s present level of functioning.</td>
</tr>
</tbody>
</table>

**NOTE:**
Where improvement and maintenance services are being provided by the same unit and only one admission document is to be used, the intent of service is improvement.
## Integrated System Codes Manual

### LANGUAGES

<table>
<thead>
<tr>
<th>Code</th>
<th>Language</th>
<th>Code</th>
<th>Language</th>
<th>Code</th>
<th>Language</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>Afghan, Pashto, Pusho</td>
<td>40</td>
<td>Hungarian</td>
<td>59</td>
<td>Romanian</td>
</tr>
<tr>
<td>20</td>
<td>Afrikaans</td>
<td>41</td>
<td>Ibonese</td>
<td>60</td>
<td>Russian</td>
</tr>
<tr>
<td>17</td>
<td>American Sign</td>
<td>42</td>
<td>Igorot</td>
<td>61</td>
<td>Serbo-Croatian</td>
</tr>
<tr>
<td>21</td>
<td>Arabic</td>
<td>43</td>
<td>Italian</td>
<td>62</td>
<td>Singhalese</td>
</tr>
<tr>
<td>18</td>
<td>Armenian</td>
<td>44</td>
<td>Ilocano or Iloko</td>
<td>63</td>
<td>Swahili</td>
</tr>
<tr>
<td>23</td>
<td>Bengali</td>
<td>45</td>
<td>Ilongot</td>
<td>64</td>
<td>Swedish</td>
</tr>
<tr>
<td>24</td>
<td>Bulgarian</td>
<td>46</td>
<td>Konkani</td>
<td>65</td>
<td>Taiwanese</td>
</tr>
<tr>
<td>25</td>
<td>Burman or Burmese</td>
<td>47</td>
<td>Lao</td>
<td>66</td>
<td>Telegu</td>
</tr>
<tr>
<td>26</td>
<td>Calo</td>
<td>48</td>
<td>Lingala or Ngala</td>
<td>67</td>
<td>Thai</td>
</tr>
<tr>
<td>27</td>
<td>Cambodian</td>
<td>49</td>
<td>Lithuanian</td>
<td>68</td>
<td>Tonga</td>
</tr>
<tr>
<td>06</td>
<td>Cantonese</td>
<td>50</td>
<td>Marathi</td>
<td>69</td>
<td>Turkish or Ottoman</td>
</tr>
<tr>
<td>28</td>
<td>Cebuano</td>
<td>51</td>
<td>Mandarin</td>
<td>71</td>
<td>Ukranian</td>
</tr>
<tr>
<td>07</td>
<td>Chinese, other</td>
<td>52</td>
<td>Pakistani</td>
<td>70</td>
<td>Urdu</td>
</tr>
<tr>
<td>29</td>
<td>Choctaw</td>
<td>53</td>
<td>Pangasinan</td>
<td>12</td>
<td>Vietnamese</td>
</tr>
<tr>
<td>30</td>
<td>Creole</td>
<td>54</td>
<td>Other Sign</td>
<td>72</td>
<td>Visayan</td>
</tr>
<tr>
<td>31</td>
<td>Czech</td>
<td>55</td>
<td>Other Non-English</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Danish</td>
<td>56</td>
<td>Polish</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>Dutch</td>
<td>57</td>
<td>Portuguese</td>
<td></td>
<td></td>
</tr>
<tr>
<td>35</td>
<td>Greek</td>
<td>58</td>
<td>Punjabi</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Hebrew</td>
<td>59</td>
<td>Romanian</td>
<td></td>
<td></td>
</tr>
<tr>
<td>37</td>
<td>Hindi</td>
<td>60</td>
<td>Russian</td>
<td></td>
<td></td>
</tr>
<tr>
<td>38</td>
<td>Hindustani</td>
<td>61</td>
<td>Serbo-Croatian</td>
<td></td>
<td></td>
</tr>
<tr>
<td>39</td>
<td>Hmong</td>
<td>62</td>
<td>Singhalese</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Filipino, Tagalog</td>
<td>63</td>
<td>Swahili</td>
<td>64</td>
<td>Swedish</td>
</tr>
<tr>
<td>14</td>
<td>Yiddish</td>
<td>65</td>
<td>Taiwanese</td>
<td>66</td>
<td>Telegu</td>
</tr>
<tr>
<td>15</td>
<td>French</td>
<td>67</td>
<td>Thai</td>
<td>68</td>
<td>Tonga</td>
</tr>
<tr>
<td>22</td>
<td>Farsi</td>
<td>69</td>
<td>Turkish or Ottoman</td>
<td>70</td>
<td>Urdu</td>
</tr>
<tr>
<td>16</td>
<td>German</td>
<td>71</td>
<td>Ukranian</td>
<td>72</td>
<td>Visayan</td>
</tr>
<tr>
<td>98</td>
<td>Unknown/Not Reported</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Confidential</td>
<td>86</td>
<td>Published by: DMH – CIO</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Confidential
These codes are required when a claim is submitted late (past contracted date of filing limitations) and any of the codes below apply.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Proof of Eligibility Unknown or Unavailable</td>
</tr>
<tr>
<td>2</td>
<td>Litigation <em>(not accepted by the State)</em></td>
</tr>
<tr>
<td>3</td>
<td>Authorization Delays <em>(FFS 2 providers – Do not use)</em></td>
</tr>
<tr>
<td>4#</td>
<td>Delay in Certifying Provider <em>(FFS 2 providers – Do not use)</em></td>
</tr>
<tr>
<td>5</td>
<td>Delay in Supplying Billing Forms <em>(not accepted by the State)</em></td>
</tr>
<tr>
<td>6</td>
<td>Delay in Delivery of Custom-made Appliances <em>(not accepted by the State)</em></td>
</tr>
<tr>
<td>7</td>
<td>Third Party Processing Delay <em>(FFS 2 providers – Do not use)</em></td>
</tr>
<tr>
<td>8</td>
<td>Delay in Eligibility Determination</td>
</tr>
<tr>
<td>9</td>
<td>Original Claim Rejected or Denied Due to a Reason Unrelated to the Billing Limitation Rules</td>
</tr>
<tr>
<td>10*</td>
<td>Administration Delay in the Prior Approval Process <em>(not accepted by the State)</em></td>
</tr>
<tr>
<td>11</td>
<td>Other</td>
</tr>
</tbody>
</table>

# Only for authorized providers when their Medi-Cal certification has been delayed and they submit late claims via Direct Data Entry (DDE)

* The State is presently clarifying the conditions for this late code which will be made available upon receipt from the State *(refer to RMD Bulletins: NGA 09-015 and DMH 09-016)* *(not accepted by the State)* – Do not use any of these codes.
## LEGAL STATUS

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0702.3</td>
<td>Minor not guilty by reason of insanity. Court ordered evaluation. (W &amp; I)</td>
</tr>
<tr>
<td>0717.0</td>
<td>Juvenile Court placement. (W &amp; I)</td>
</tr>
<tr>
<td>1001.2</td>
<td>Admission by court to DD services only for non-LPS State Hospital. (PC)</td>
</tr>
<tr>
<td>1026.0</td>
<td>Adult not guilty by reason of insanity. (PC)</td>
</tr>
<tr>
<td>1026.2</td>
<td>Restoration of sanity. Application for release from treatment. A code used for discharge. (PC)</td>
</tr>
<tr>
<td>1026.3</td>
<td>Placed on outpatient status pursuant to 1026.2. (PC)</td>
</tr>
<tr>
<td>1026.4</td>
<td>Escape on 1026; to be imprisoned; discharge code. (PC)</td>
</tr>
<tr>
<td>1201.0</td>
<td>Found insane before judgment and admitted to State Hospital. (PC)</td>
</tr>
<tr>
<td>1364.0</td>
<td>Convicted sex offender/Department of Corrections; sex offense against person under age 14. Code for admission/discharge from State Hospital. (PC)</td>
</tr>
<tr>
<td>1368.0</td>
<td>Court determination of mental competence to stand trial (to be used with reference code 80). (PC)</td>
</tr>
<tr>
<td>1369.0</td>
<td>Trial on issue of mental competence for DD. Court ordered hold. Evaluation to determine competency to stand trial. (PC)</td>
</tr>
<tr>
<td>1370.0</td>
<td>Incompetent to stand trial (Title 18). Resolution of competency. Committed or dismissed. (PC)</td>
</tr>
<tr>
<td>1370.1</td>
<td>DD placement for non-LPS treatment. Incompetent to stand trial. (PC)</td>
</tr>
<tr>
<td>1370.3</td>
<td>Placement of 1370.0 on outpatient status from State Hospital (Title 15, Sec 1600). (PC)</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>--------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>1370.4</td>
<td>Conditions for court ordered conservator/outpatient supervisor proceedings prior to 1370.3. (PC)</td>
</tr>
<tr>
<td>1370.7</td>
<td>Court ordered treatment incompetent mentally disordered. (PC1370.a.1)</td>
</tr>
<tr>
<td>1370.8</td>
<td>Court ordered evaluation prior to PC 1370.a.1 above. (PC 1370.a.2)</td>
</tr>
<tr>
<td>1370.9</td>
<td>Court ordered transfer of incompetent MD defendant to local program. (PC 1370.a.3)</td>
</tr>
<tr>
<td>1372.1</td>
<td>Competency regained. Defendant returned to court. Code used for discharge. (PC 1372.c)</td>
</tr>
<tr>
<td>1372.5</td>
<td>Recommitted by court. Extended incompetent to stand trial of MD defendant. (PC 1372.e)</td>
</tr>
<tr>
<td>1374.0</td>
<td>Competency of 1370.3 regained. A discharge code; defendant returned to court pursuant to 1372. (PC)</td>
</tr>
<tr>
<td>1600.0</td>
<td>Outpatient treatment of judicially committed. (PC 1026.0)</td>
</tr>
<tr>
<td>1601.0</td>
<td>Court granted or denied outpatient status pursuant to 1600. (PC)</td>
</tr>
<tr>
<td>1602.0</td>
<td>Forensic evaluation of 1601.0 MDO for outpatient. (PC)</td>
</tr>
<tr>
<td>603.0</td>
<td>Placement of PC 1601.0 on outpatient status. (PC)</td>
</tr>
<tr>
<td>1604.2</td>
<td>Recommendation for outpatient status of PC 1602 or PC 1603. (PC1604.b)</td>
</tr>
<tr>
<td>1604.3</td>
<td>To outpatient status on court approval. (PC 1604.d)</td>
</tr>
<tr>
<td>1606.0</td>
<td>Annual review MDO on outpatient status. (PC)</td>
</tr>
<tr>
<td>1607.0</td>
<td>Regained competency/no longer 1370, 1026, 6316, MDSO, or 2964. (PC)</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>----------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>1608.0</td>
<td>Request for revocation of 1604.d above. (PC)</td>
</tr>
<tr>
<td>1609.0</td>
<td>Reconfinement on 1604d/11602 or1026.2. (PC)</td>
</tr>
<tr>
<td>1610.0</td>
<td>Temporary admission pursuant to PC 1608 or PC 1609, pending court revocation of PC1026, MDSO, or 1370. (PC)</td>
</tr>
<tr>
<td>1611.0</td>
<td>Temporary admission of MD PC 1026 on parole. (PC - Repealed in 1984)</td>
</tr>
<tr>
<td>1612.0</td>
<td>Same as 1026.2. A discharge code - restrictions on release for treatment. (PC)</td>
</tr>
<tr>
<td>1614.0</td>
<td>Same as former PC 1026.1, PC 1374, and W &amp; I 6325.1a. Person ordered to undergo outpatient treatment. (PC)</td>
</tr>
<tr>
<td>1615.0</td>
<td>Conditional Release Program (CONREP) for W &amp; I 5709.8 for judicially committed patients. (PC)</td>
</tr>
<tr>
<td>1753.0</td>
<td>Youth Authority Observation (YOA). (W &amp; I)</td>
</tr>
<tr>
<td>1756.0</td>
<td>Youth Authority Certification (YAC) for State Hospital Admission and discharge. (W &amp; I)</td>
</tr>
<tr>
<td>2684.0</td>
<td>Department of Corrections prisoner certification for DD/MD treatment in State Hospital. (PC)</td>
</tr>
<tr>
<td>2692.0</td>
<td>Housing/care/treatment of inmates with AIDS. (PC)</td>
</tr>
<tr>
<td>2960.0</td>
<td>Dept. of Corrections prisoner evaluation and provision for appropriate mental treatment. (PC)</td>
</tr>
<tr>
<td>2962.0</td>
<td>Mentally Disordered (MD) parolees referred from Department of Corrections. (PC)</td>
</tr>
<tr>
<td>2964.0</td>
<td>MD parolees rehospitalized from outpatient. (PC)</td>
</tr>
</tbody>
</table>
### LEGAL STATUS (con’t.)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2968.0</td>
<td>Parolees’ mental disorder in remission and treatment discontinued. (PC)</td>
</tr>
<tr>
<td>2970.0</td>
<td>Former parolees referred from Superior Court for continued involuntary treatment for one year. (PC)</td>
</tr>
<tr>
<td>2972.0</td>
<td>Recommitted parolee under PC 2962 or PC 2970. (PC)</td>
</tr>
<tr>
<td>2974.0</td>
<td>MD inmate/parolee commitment to State Hospital. (PC)</td>
</tr>
<tr>
<td>3701.0</td>
<td>Insane prisoner under death penalty. (PC)</td>
</tr>
<tr>
<td>3702.0</td>
<td></td>
</tr>
<tr>
<td>3703.0</td>
<td></td>
</tr>
<tr>
<td>4011.6</td>
<td>MI jail prisoner transfer for involuntary admissions (72-hr eval). And for return to penal facility. (PC)</td>
</tr>
<tr>
<td>4011.8</td>
<td>MI jail prisoner transfer for voluntary admission to 72-hr facility. And for return to jail. (PC)</td>
</tr>
<tr>
<td>4653.0</td>
<td>DD admitted to non-LPS State Hospital. Upon discharge, referral to regional center. (W &amp; I)</td>
</tr>
<tr>
<td>4800.0</td>
<td>DD (non LPS) administrative hold on judicial review by writ of habeas corpus. (W &amp; I)</td>
</tr>
<tr>
<td>4803.0</td>
<td>DD (non LPS) Regional Center certification and recommendation for community care facility. (W &amp; I)</td>
</tr>
<tr>
<td>4825.0</td>
<td>DD (non LPS) voluntary adult. May leave hospital at any time. (W &amp; I)</td>
</tr>
<tr>
<td>5008.2</td>
<td>Murphy’s MD conservatorship - incompetent to stand trial, felon, violent - relative to 5350.0. (W &amp; I)</td>
</tr>
<tr>
<td>050.0</td>
<td>Court ordered observation. Same as 5554 and 5206.0. Repealed in 1967. (W &amp; I)</td>
</tr>
<tr>
<td>5128.0</td>
<td>Civil commitment of MI. See 8050-8053. Repealed in 1967. (W &amp; I)</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>---------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>5150.0</td>
<td>2-hr MD detention. Act of taking into custody/placing into treatment at 72-hr facility. (W &amp; I)</td>
</tr>
<tr>
<td>5151.0</td>
<td>72-hr MD detention and treatment - actually only defines the 72-hr period. (W &amp; I)</td>
</tr>
<tr>
<td>5152.0</td>
<td>Release from 72-hr detention and referral to care/treatment on voluntary basis or conservator appointed. (W &amp; I)</td>
</tr>
<tr>
<td>5170.0</td>
<td>72-hr detention of MD inebriate. (W &amp; I)</td>
</tr>
<tr>
<td>5171.0</td>
<td>Same as 5150.0 only for inebriate. (W &amp; I)</td>
</tr>
<tr>
<td>5172.0</td>
<td>Same as 5152.0 only for inebriate. (W &amp; I)</td>
</tr>
<tr>
<td>5172.1</td>
<td>Voluntary 72-hr MD inebriate.</td>
</tr>
<tr>
<td>5200.0</td>
<td>Court ordered 72-hr evaluation of MD. (W &amp;I)</td>
</tr>
<tr>
<td>5206.0</td>
<td>Court ordered 72-hr evaluation by petition. Old W &amp; I 5050.0. (W &amp;I)</td>
</tr>
<tr>
<td>5208.0</td>
<td>Serving of petition and order for 72-hour evaluation. (W &amp; I)</td>
</tr>
<tr>
<td>5213.0</td>
<td>Same as 5151.0 - defines 72-hour. (W &amp; I)</td>
</tr>
<tr>
<td>5225.0</td>
<td>Court ordered eval of MD Alcohol/Drug. (W &amp; I)</td>
</tr>
<tr>
<td>5230.0</td>
<td>Same as 5170.0 (impairment by chronic alcoholism) (W &amp; I)</td>
</tr>
<tr>
<td>5250.0</td>
<td>14-day certification for treatment for mental disorder or chronic alcoholism. (W &amp; I)</td>
</tr>
<tr>
<td>5250.1</td>
<td>Unconditional release from 14-day intensive treatment. (W &amp; I)</td>
</tr>
<tr>
<td>5256.5</td>
<td>Termination of involuntary detention for mental disorder or chronic alcoholism. (W &amp; I)</td>
</tr>
<tr>
<td>5256.6</td>
<td>14-day certification - same as 5250.0. (W &amp; I)</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>----------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>5257.0</td>
<td>Termination of involuntary MD or chronic alcoholism commitment. (W &amp; I)</td>
</tr>
<tr>
<td>5260.0</td>
<td>Added 14 days for suicidal persons. (W &amp; I)</td>
</tr>
<tr>
<td>5270.1</td>
<td>Gravely disable. 30 day extension of involuntary psychiatric treatment beyond 14 day certification. (W &amp; I)</td>
</tr>
<tr>
<td>5300.0</td>
<td>Added 180 days for persons who are serious threat of physical harm to others. (W &amp; I)</td>
</tr>
<tr>
<td>5301.0</td>
<td>Petition for post-certification. (W &amp; I)</td>
</tr>
<tr>
<td>5303.0</td>
<td>Due process and trial pursuant to 5301. (W &amp; I)</td>
</tr>
<tr>
<td>5304.0</td>
<td>Added 180 day post-certification after petition trial. (W &amp; I)</td>
</tr>
<tr>
<td>5305.0</td>
<td>Placed on outpatient status pursuant to 5300.0. (W &amp; I)</td>
</tr>
<tr>
<td>5308.0</td>
<td>Temporary admission post certification. Revocation of outpatient status under W&amp;I 5306.5 or 5307, confined to State Hospital or treatment facility. (W &amp; I)</td>
</tr>
<tr>
<td>5309.0</td>
<td>Release from involuntary hospital treatment. (W&amp;I)</td>
</tr>
<tr>
<td>5352.0</td>
<td>Recommend and petition for conservatorship. (W &amp; I)</td>
</tr>
<tr>
<td>5352.1</td>
<td>Court established temporary conservatorship not to exceed 30 days pursuant to 5354. (W &amp; I)</td>
</tr>
<tr>
<td>5352.3</td>
<td>3 day extension of 14 day certification pending temporary conservatorship (see 5352.1). (W &amp;I)</td>
</tr>
<tr>
<td>5353.0</td>
<td>Temporary conservatorship pending determination of conservatorship. (W &amp; I)</td>
</tr>
<tr>
<td>5358.0</td>
<td>Rules governing conservatee’s placement in treatment. (W &amp; I)</td>
</tr>
<tr>
<td>5358.5</td>
<td>Conservatee taken into custody by conservator. (W &amp; I)</td>
</tr>
</tbody>
</table>
**Integrated System Codes Manual**

**LEGAL STATUS (con’t.)**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>5359.0</td>
<td>Alternative placement for conservatee. (W &amp; I)</td>
</tr>
<tr>
<td>5361.0</td>
<td>Termination and reappointment of conservator. (W &amp; I)</td>
</tr>
<tr>
<td>5366.1</td>
<td>Detention for 72-hr evaluation pursuant to 5150 detention for 180 days evaluation and pursuant to 6000 to 6019. (W &amp; I)</td>
</tr>
<tr>
<td>5585.5</td>
<td>72-hr involuntary commitment of minors for eval and treatment of dangerous MDs who refuse voluntary treatment. (W5585.5)</td>
</tr>
<tr>
<td>6000.0</td>
<td>VOLUNTARY admission of MD. (W &amp; I)</td>
</tr>
<tr>
<td>6316.0</td>
<td>MDSO treatment and observation. (W &amp; I)</td>
</tr>
<tr>
<td>6316.1</td>
<td>MDSO maximum confinement equal maximum prison term possible for the felony or misdemeanor. (W &amp; I)</td>
</tr>
<tr>
<td>6316.2</td>
<td>MDSO return to court. Confinement longer than 6316.1. (W &amp; I)</td>
</tr>
<tr>
<td>6316.3</td>
<td>Court ordered transfer of MDSO between State and County. (W &amp; I)</td>
</tr>
<tr>
<td>6325.0</td>
<td>Certification as to recovery (or not) of MDSO on outpatient status. Return to court. (W &amp; I)</td>
</tr>
<tr>
<td>6325.1</td>
<td>MDSO temporary State Hospital admission. (W &amp; I)</td>
</tr>
<tr>
<td>6325.8</td>
<td>Recovery of 6325. (W &amp; I 6325.a)</td>
</tr>
<tr>
<td>6325.9</td>
<td>Still a danger of 6325. (W &amp; I 6325.b)</td>
</tr>
<tr>
<td>6327.0</td>
<td>Court ordered hearing. Disposition of MDSO under treatment. Return to court or recommitment to treatment. (W &amp; I)</td>
</tr>
<tr>
<td>6500.0</td>
<td>Dangerous MR committed by court. (W &amp; I)</td>
</tr>
<tr>
<td>6500.1</td>
<td>Same as 6500.0 and renumbered as such in 1978. (W &amp; I)</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>------</td>
<td>-------------</td>
</tr>
<tr>
<td>6506.0</td>
<td>Court ordered hold pending hearing on custody, care and treatment funding pursuant to 6503. (W &amp; I)</td>
</tr>
<tr>
<td>6509.0</td>
<td>Court ordered commitment of MR dangerous to self and others. May be non-resident pursuant to 4461. (W &amp; I)</td>
</tr>
<tr>
<td>6551.0</td>
<td>Juvenile Court 72-hr observation to determine MD or MR and certification for 14 days treatment of mental disorder. (W &amp; I)</td>
</tr>
<tr>
<td>6552.0</td>
<td>Juvenile ward of court voluntary application for mental health services. (W &amp; I)</td>
</tr>
<tr>
<td>7226.0</td>
<td>MDO military personnel admission to State Hospital. (W &amp; I)</td>
</tr>
<tr>
<td>7302.0</td>
<td>State Hospital transfer. (W &amp; I)</td>
</tr>
<tr>
<td>7325.0</td>
<td>Apprehended judicially committed escapees. (W &amp; I)</td>
</tr>
<tr>
<td>7329.0</td>
<td>Arrest of non-California resident escapees. (W &amp; I)</td>
</tr>
<tr>
<td>7361.0</td>
<td>Unrecovered judicially committed patient court ordered discharge from State Hospital. (W &amp; I)</td>
</tr>
<tr>
<td>7362.0</td>
<td>Patient discharged by State Hospital. Not a proper case for treatment, or is DD or chronic harmless MD. May or may not be judicially committed. (W &amp; I)</td>
</tr>
<tr>
<td>7375.0</td>
<td>Temporary admission of PC 1026. (W &amp; I 7573.0)</td>
</tr>
<tr>
<td>7375.3</td>
<td>Admission pending parole relocation. (W &amp; I 7573.f.3)</td>
</tr>
<tr>
<td>7375.4</td>
<td>Admission pending parole relocation. (W &amp; I 7573.f.4)</td>
</tr>
<tr>
<td>7375.9</td>
<td>Temporary admission of PC 1026, NGI (not guilty by reason of insanity) adult. (W &amp; I TANGI)</td>
</tr>
<tr>
<td>999.9</td>
<td>Unknown.</td>
</tr>
</tbody>
</table>
There are five levels of case management services that are driven by the assessed needs of the individual client. It is understood that at some time clients may need services at all levels.

**LEVEL I**

**Stable/Maintenance**
Includes clients with a mental health problem that is neither acute nor serious and persistent or which is unclear.

**LEVEL II**

**Brief**
Includes clients with an acute disorder, which responds to a relatively brief clinical intervention without the need for intensive rehabilitation services.

**LEVEL III**

**Intensive**
Includes clients with serious and persistent mental illness who need rehabilitative services, especially case management to achieve the desired level of functioning. Also included are clients experiencing their first acute episode of severe mental illness.

**LEVEL IV**

**Identified ISR**
Includes clients who meet the criteria for Intensive Service Recipients (i.e., individuals that have been hospitalized six or more times during a rolling twelve-month period).

**LEVEL V**

**Enrolled ISR**
Would include all clients who are ISRs and have been enrolled in an ISR program.

**MILESTONES OF RECOVERY SCALE**

There are eight levels of Milestones of Recovery Scale (MORS). The scale measures degree of client recovery based on three underlying assumptions: Their level of risk, their level of engagement with mental health system and their level of skills and supports.

1. **“Extreme risk”** - These individuals are frequently and recurrently dangerous to themselves or others for prolonged periods. They are frequently taken to hospitals and/or jails or are institutionalized in the state hospital or an IMD. They are unable to function well enough to meet their basic needs even with assistance. It is extremely unlikely that they can be served safely in the community.
2. “High risk/not engaged” - These individuals often are disruptive and are often taken to hospitals and/or jails. They usually have high symptom distress. They are often homeless and may be actively abusing drugs or alcohol and experiencing negative consequences from it. They may have a serious co-occurring medical condition (e.g., HIV, diabetes) or other disability which they are not actively managing. They often engage in high-risk behaviors (e.g., unsafe sex, sharing needles, wandering the streets at night, exchanging sex for drugs or money, fighting, selling drugs, stealing, etc.). They may not believe they have a mental illness and tend to refuse psychiatric medications. They experience great difficulty making their way in the world and are not self-supportive in any way. They are not participating voluntarily in ongoing mental health treatment or are very uncooperative toward mental health providers.

3. “High risk/engaged” – These individuals differ from group 2 only in that they are participating voluntarily and cooperating in ongoing mental health treatment. They are still experiencing high distress and disruption and are low functioning and not self-supportive in any way.

4. “Poorly coping/not engaged” – These individuals are not disruptive. They are generally not a danger to self or others and it is unusual for them to be taken to hospitals and/or jails. They may have moderate to high symptom distress. They may use drugs or alcohol which may be causing moderate but intermittent disruption in their lives. They may not think they have a mental illness and are unlikely to be taking psychiatric medications. They may have deficits in several activities of daily living and need a great deal of support. They are not participating voluntarily in ongoing mental health treatment and/or are very uncooperative toward mental health providers.

5. “Poorly coping/engaged” – These individuals differ from group 4 only in that they are voluntarily participating and cooperating in ongoing mental health treatment. They may use drugs or alcohol which may be causing moderate but intermittent disruption in their lives. They are generally not a danger to self or others and it is unusual for them to be taken to hospitals and/or jails. They may have moderate to high symptom distress. They are not functioning well and require a great deal of support.

6. “Coping/rehabilitating” – These individuals are abstinent or have minimal impairment from drugs or alcohol. They are rarely being taken to hospitals and almost never being taken to jail. They are managing their symptom distress usually, though not always, through medication. They are actively setting and pursuing some quality of life goals and have begun the process of establishing “non-disabled” roles. They often need substantial support and guidance but they aren’t necessarily compliant with mental health providers. They may be productive in some meaningful roles, but they are not necessarily working or going to school. They may be “testing the employment or education waters,” but this group also includes individuals who have “retired.” That is, currently they express little desire to take on (and may actively resist) the increased responsibilities of work or school, but they are more or less content and satisfied with their lives.
7. “Early Recovery” – These individuals are actively managing their mental health treatment to the extent that mental health staff rarely need to anticipate or respond to problems with them. Like group 6, they are rarely using hospitals and are not being taken to jails. Like group 6, they are abstinent or have minimal impairment from drugs or alcohol and they are managing their symptom distress. With minimal support from staff, they are setting, pursuing and achieving many quality of life goals (e.g., work and education) and have established roles in the greater (non-disabled) community. They are actively managing any physical health disabilities or disorders they may have (e.g., HIV, diabetes). They are functioning in many life areas and are very self-supporting or productive in meaningful roles. They usually have a well-defined social support network including friends and/or family.

8. “Advanced Recovery” – These individuals differ from group 7 in that they are completely self-supporting. If they are receiving any public benefits, they are generally restricted to Medicaid or some other form of health benefits or health insurance because their employer does not provide health insurance. While they may still identify themselves as having a mental illness, they are no longer psychiatrically disabled. They are basically indistinguishable from their non-disabled neighbor.
### LIVING ARRANGEMENT

**NOTE:**

*Report at admission, annually thereafter, and at formal discharge.*

- The data elements of Admission and Discharge Living Arrangement are intended to capture the client’s usual place of residence. Codes 14, 15, and 16 “No identifiable residence,” are to be used to indicate that the client is homeless. In general, anyone who is in a homeless shelter or is eligible for entry into a shelter and has no place else to go should be coded as No Identifiable Residence “(homeless)”.

<table>
<thead>
<tr>
<th>Code</th>
<th>Living Arrangement Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Lives alone in house or apartment</td>
</tr>
<tr>
<td>02</td>
<td>Lives with immediate family: spouse, parents, and/or children</td>
</tr>
<tr>
<td>03</td>
<td>Lives with extended family: i.e., relatives</td>
</tr>
<tr>
<td>04</td>
<td>Lives with friend but not unmarried partner</td>
</tr>
<tr>
<td>05</td>
<td>Lives with unmarried partner</td>
</tr>
<tr>
<td>06</td>
<td>Lives with foster family (children’s code)</td>
</tr>
<tr>
<td>07</td>
<td>Small community residential facility (long term, short term, onsite, offsite) of 6 or less</td>
</tr>
<tr>
<td>08</td>
<td>Large community residential facility of 7 or more</td>
</tr>
<tr>
<td>09</td>
<td>Skilled nursing home/Intermediate Care Facility (SNF/ICF)</td>
</tr>
<tr>
<td>10</td>
<td>Community hospital or psychiatric health facility (acute hospital or non-hospital acute)</td>
</tr>
<tr>
<td>11</td>
<td>State Hospital</td>
</tr>
<tr>
<td>12</td>
<td>Justice related facility; e.g., Juvenile Hall, Community Correctional Facility, CYA Home, Jail Inpatient</td>
</tr>
<tr>
<td>13</td>
<td>Group quarters; e.g., Dorm, Barracks, Migrant Camp, YMCA</td>
</tr>
<tr>
<td>14*</td>
<td>No identifiable residence - Alone. A street person</td>
</tr>
<tr>
<td>15*</td>
<td>No identifiable residence - lives with relative (street person, has no residence in shelter)</td>
</tr>
<tr>
<td>16*</td>
<td>No identifiable residence - lives with non-relatives, friend, or unmarried partner</td>
</tr>
<tr>
<td>17</td>
<td>Other - Alone in other formal residence, hotel temporary accommodations, etc.</td>
</tr>
<tr>
<td>18</td>
<td>Other - Lives with relative in other formal residence, hotel temporary accommodations, etc.</td>
</tr>
<tr>
<td>19</td>
<td>Other - Lives with non-relative-friend in other formal residence, hotel temporary accommodations, etc.</td>
</tr>
<tr>
<td>20</td>
<td>Other - Lives with non-relative-unmarried partner in other formal residence, hotel temporary accommodations, etc.</td>
</tr>
<tr>
<td>21</td>
<td>Supervised independent living (adult) - Alone</td>
</tr>
<tr>
<td>22</td>
<td>Supervised independent living (adult) - Lives with friend(s)</td>
</tr>
<tr>
<td>99</td>
<td>Unknown - Living arrangement is not known</td>
</tr>
<tr>
<td>Code</td>
<td>Marital Status</td>
</tr>
<tr>
<td>------</td>
<td>--------------------------------------</td>
</tr>
<tr>
<td>1</td>
<td>Never married</td>
</tr>
<tr>
<td>2</td>
<td>Now married (includes common-law)</td>
</tr>
<tr>
<td>3</td>
<td>Widowed</td>
</tr>
<tr>
<td>4</td>
<td>Dissolved (includes divorced, annulled)</td>
</tr>
<tr>
<td>5</td>
<td>Separated</td>
</tr>
<tr>
<td>9</td>
<td>Unknown</td>
</tr>
</tbody>
</table>
## MEDICATION MONITORING EXCEPTION MESSAGES

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>unusual medication for diagnosis</td>
<td>Review or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Auth Req</td>
</tr>
<tr>
<td>02</td>
<td>principle diagnosis not SD acceptable</td>
<td>Auth Req</td>
</tr>
<tr>
<td>03-06</td>
<td>inactive codes</td>
<td></td>
</tr>
<tr>
<td>07*</td>
<td>unusual medication dosage for age of patient</td>
<td>Review</td>
</tr>
<tr>
<td>08</td>
<td>unusual medication for age of patient</td>
<td>Review or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Auth Req</td>
</tr>
<tr>
<td>09</td>
<td>unusual medication</td>
<td>Auth Req</td>
</tr>
<tr>
<td>10*</td>
<td>drug type duplication</td>
<td>Auth Req</td>
</tr>
<tr>
<td>11</td>
<td>definite drug allergy/serious side effect</td>
<td>Auth Req</td>
</tr>
<tr>
<td>12*</td>
<td>overlapping supply</td>
<td>Auth Req</td>
</tr>
<tr>
<td>13</td>
<td>administered more than 60 days past order date</td>
<td>Review</td>
</tr>
<tr>
<td>14</td>
<td>medication order discontinued</td>
<td>Review</td>
</tr>
</tbody>
</table>

**Auth Req** (Authorization Required): a prescription cannot be filled until it has been reviewed and approved.

**Review** (prior to renewal): a prescription can be filled, but the same prescription cannot be renewed nor can a new prescription for the same medication be entered into the system until the original prescription has been reviewed and approved.

- Authorizer is Prescriber
These codes are applicable to the Directory of Providers and reports.

<table>
<thead>
<tr>
<th>Code</th>
<th>Mental Health District</th>
</tr>
</thead>
<tbody>
<tr>
<td>ARC</td>
<td>Arcadia</td>
</tr>
<tr>
<td>AV</td>
<td>Avalon</td>
</tr>
<tr>
<td>CD</td>
<td>Compton-Downey</td>
</tr>
<tr>
<td>EC</td>
<td>El Camino</td>
</tr>
<tr>
<td>ELA</td>
<td>East Los Angeles</td>
</tr>
<tr>
<td>EV</td>
<td>East Valley</td>
</tr>
<tr>
<td>HLY</td>
<td>Hollywood</td>
</tr>
<tr>
<td>LBH</td>
<td>Long Beach-Harbor</td>
</tr>
<tr>
<td>LP</td>
<td>La Puente Valley</td>
</tr>
<tr>
<td>MET</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>NC</td>
<td>North County</td>
</tr>
<tr>
<td>NE</td>
<td>Northeast</td>
</tr>
<tr>
<td>RH</td>
<td>Rio Hondo</td>
</tr>
<tr>
<td>SB</td>
<td>South Bay</td>
</tr>
<tr>
<td>SMW</td>
<td>Santa Monica West</td>
</tr>
<tr>
<td>SNT</td>
<td>San Antonio</td>
</tr>
<tr>
<td>SV</td>
<td>Sierra Vista</td>
</tr>
<tr>
<td>TRC</td>
<td>Tri-City Mental Health Authority</td>
</tr>
<tr>
<td>WBK</td>
<td>Willowbrook</td>
</tr>
<tr>
<td>WC</td>
<td>West Central</td>
</tr>
<tr>
<td>WV</td>
<td>West Valley</td>
</tr>
<tr>
<td>NA</td>
<td>Not Applicable</td>
</tr>
</tbody>
</table>
### OTHER FACTORS AFFECTING MENTAL HEALTH

#### Physical Health Disorders

**PURPOSE:**
Indicates if physical health disorders affect the mental health of the client.

**NOTE:**
*Report at admission, annually thereafter, and at formal discharge.*

<table>
<thead>
<tr>
<th>Codes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td>Yes</td>
</tr>
<tr>
<td>N</td>
<td>No</td>
</tr>
<tr>
<td>U</td>
<td>Unknown, Not Reported</td>
</tr>
</tbody>
</table>

#### Developmental Disabilities

**PURPOSE:**
Indicates if developmental disabilities affect the mental health of the client.

**NOTE:**
*Report at admission, annually thereafter, and at formal discharge.*

<table>
<thead>
<tr>
<th>Codes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td>Yes</td>
</tr>
<tr>
<td>N</td>
<td>No</td>
</tr>
<tr>
<td>U</td>
<td>Unknown, Not Reported</td>
</tr>
</tbody>
</table>

#### Dual Diagnosis

**PURPOSE:**
Indicates if substance abuse affects the mental health of the client.

**NOTE:**
*Report at admission, annually thereafter, and at formal discharge.*

<table>
<thead>
<tr>
<th>Codes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td>Yes</td>
</tr>
<tr>
<td>N</td>
<td>No</td>
</tr>
<tr>
<td>U</td>
<td>Unknown, Not Reported</td>
</tr>
</tbody>
</table>
## OPERATIONS CODES

<table>
<thead>
<tr>
<th>Code</th>
<th>Description of Operation</th>
</tr>
</thead>
<tbody>
<tr>
<td>DMH</td>
<td>Department of Mental Health</td>
</tr>
<tr>
<td>DHS</td>
<td>Department of Health Services</td>
</tr>
<tr>
<td>FFS</td>
<td>Fee-For-Service</td>
</tr>
<tr>
<td>NGA</td>
<td>Non-Governmental Agency</td>
</tr>
<tr>
<td>OPA</td>
<td>Other Public Agency</td>
</tr>
<tr>
<td>NA</td>
<td>Not Applicable</td>
</tr>
</tbody>
</table>

## PATIENT STATUS CODE

Indicates the status of the client as of the ending date of service.

**VALID CODES:**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Discharge to Home or Self Care</td>
</tr>
<tr>
<td>02</td>
<td>Discharge/Transferred to General Hospital or Inpatient Care</td>
</tr>
<tr>
<td>04</td>
<td>Discharged/Transferred to Intermediate Care Facility or Assisted Living Facility</td>
</tr>
<tr>
<td>07</td>
<td>Left Against Medical Advice or Discontinued Care Expired</td>
</tr>
<tr>
<td>20</td>
<td>Expired</td>
</tr>
<tr>
<td>21</td>
<td>Discharged/Transferred to Court/Law Enforcement</td>
</tr>
<tr>
<td>30</td>
<td>Still Patient</td>
</tr>
<tr>
<td>43</td>
<td>Discharge/Transferred to a Federal Health Care Facility</td>
</tr>
<tr>
<td>50</td>
<td>Hospice – Home</td>
</tr>
<tr>
<td>51</td>
<td>Hospice – Medical Facility (Certified) Providing Hospice Level of Care</td>
</tr>
<tr>
<td>65</td>
<td>Discharged/Transferred to a Psychiatric Hospital or Psychiatric District Part Unit of a Hospital</td>
</tr>
<tr>
<td>70</td>
<td>Discharged/Transferred to another Type of Health Care Institution not Defined Elsewhere in this Code List</td>
</tr>
</tbody>
</table>

NOTE: *The above codes are only applicable to Inpatient Services.*
PLACE OF BIRTH

The field consists of three separate subfields: Birth County, Birth State, Birth Country. All subfields must be completed.

CLIENT BORN IN CALIFORNIA
If county of birth is known, enter the two digit county code listed in the Valid California Codes section for the Birth County, ‘CA’ for the Birth State, and ‘US’ for the Birth Country.

If county of birth is not known, enter ‘99’ for Birth County, ‘CA’ for the Birth State, and ‘US’ for the Birth Country.

CLIENT BORN OUTSIDE CALIFORNIA BUT INSIDE UNITED STATES
If state of birth is known, enter ‘00’ for the Birth County, the two character alphabetic code listed in the Valid State Codes section (which is the U.S. Postal code for states) for the Birth State, and ‘US’ for the Birth Country.

If state of birth is not known, enter ‘00’ for the Birth County, ‘UN’ for the Birth State, and ‘US’ for the Birth Country.

CLIENT BORN OUTSIDE UNITED STATES
If the country of birth is unknown, enter ‘00’ for the Birth County, ‘00’ for the Birth State, and ‘99’ for the Birth Country.

If the country of birth is known but not listed, enter ‘00’ for the Birth County, ‘00’ for the Birth State, and ‘00’ for the Birth Country.
### POINT OF ORIGIN FOR ADMISSION

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Non-Health Care Facility Point of Origin</td>
</tr>
<tr>
<td>2</td>
<td>Clinic or Physician’s Office</td>
</tr>
<tr>
<td>4</td>
<td>Transfer from a Hospital</td>
</tr>
<tr>
<td>5</td>
<td>Transfer from a Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF)</td>
</tr>
<tr>
<td>6</td>
<td>Transfer from another Health Care Facility</td>
</tr>
<tr>
<td>8</td>
<td>Court/Law Enforcement</td>
</tr>
<tr>
<td>9</td>
<td>Information not Available</td>
</tr>
<tr>
<td>D</td>
<td>Transfer from one district unit of the hospital to another district unit of the same hospital resulting in a separate claim to the payer</td>
</tr>
<tr>
<td>E</td>
<td>Transfer from Ambulatory Surgery Center</td>
</tr>
<tr>
<td>F</td>
<td>Transfer from Hospice and is Under a Hospice plan of care or enrolled in a Hospice program</td>
</tr>
</tbody>
</table>

### PRIMARY PROBLEM AREA

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Inadequate information</td>
</tr>
<tr>
<td>1</td>
<td>Mentally ill, disabled</td>
</tr>
<tr>
<td>2</td>
<td>Developmentally disabled</td>
</tr>
<tr>
<td>3</td>
<td>Alcoholism</td>
</tr>
<tr>
<td>4</td>
<td>Drug Abuse</td>
</tr>
<tr>
<td>5</td>
<td>Mentally disordered offender</td>
</tr>
<tr>
<td>6</td>
<td>Dual Diagnosis – Mentally Ill and/or Drug Abuse, Alcoholism</td>
</tr>
<tr>
<td>7</td>
<td>Problems accessing health care</td>
</tr>
<tr>
<td>8</td>
<td>Problems with legal system/crime</td>
</tr>
<tr>
<td>9</td>
<td>Other psychosocial problems</td>
</tr>
<tr>
<td>Code</td>
<td>Program Area</td>
</tr>
<tr>
<td>------</td>
<td>------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>06</td>
<td>Child Abuse/Neglect</td>
</tr>
<tr>
<td>02</td>
<td>Children’s Services other than Abuse, Neglect, School</td>
</tr>
<tr>
<td>05</td>
<td>Community/Domestic Violence</td>
</tr>
<tr>
<td>36</td>
<td>Community Linkage/Monitoring Linkages</td>
</tr>
<tr>
<td>12</td>
<td>Disaster Response</td>
</tr>
<tr>
<td>42</td>
<td>Drop-In-Center</td>
</tr>
<tr>
<td>39</td>
<td>Education (Client/Family/Significant Other Classes)</td>
</tr>
<tr>
<td>33</td>
<td>Engaging Clients &amp; Families (Significant Others/Guardians)</td>
</tr>
<tr>
<td>32</td>
<td>Enriched Residential Services</td>
</tr>
<tr>
<td>10</td>
<td>Geriatric Services</td>
</tr>
<tr>
<td>28</td>
<td>Homeless Mentally Ill</td>
</tr>
<tr>
<td>14</td>
<td>Housing/Community Care</td>
</tr>
<tr>
<td>34</td>
<td>Identifying Needed Services in Community &amp; Mapping Available Services</td>
</tr>
<tr>
<td>26</td>
<td>Information/Referral Only</td>
</tr>
<tr>
<td>13</td>
<td>Job Development/Mentally Disabled</td>
</tr>
<tr>
<td>03</td>
<td>Law Enforcement/Justice System</td>
</tr>
<tr>
<td>19</td>
<td>Minority Mental Health Issues</td>
</tr>
<tr>
<td>21</td>
<td>Occupational Health</td>
</tr>
<tr>
<td>04</td>
<td>Other Health/Human Services</td>
</tr>
<tr>
<td>09</td>
<td>Parent Training</td>
</tr>
<tr>
<td>41</td>
<td>Peer Support</td>
</tr>
<tr>
<td>35</td>
<td>Recruiting, Engaging &amp; Working with Community Based Agencies</td>
</tr>
<tr>
<td>18</td>
<td>Refugee/Immigration Problems</td>
</tr>
<tr>
<td>31</td>
<td>Residential &amp; Bridging Services</td>
</tr>
<tr>
<td>22</td>
<td>Resource Development - Financial</td>
</tr>
<tr>
<td>23</td>
<td>Resource Development - Programs</td>
</tr>
<tr>
<td>01</td>
<td>School Problems</td>
</tr>
<tr>
<td>37</td>
<td>Self Help/Advocacy Activities</td>
</tr>
<tr>
<td>24</td>
<td>Service Utilization Mental Health</td>
</tr>
<tr>
<td>07</td>
<td>Sexual Abuse Rape Adult</td>
</tr>
<tr>
<td>25</td>
<td>Socialization</td>
</tr>
<tr>
<td>17</td>
<td>Stigma/Community Acceptance</td>
</tr>
<tr>
<td>20</td>
<td>Stress</td>
</tr>
<tr>
<td>27</td>
<td>Substance Abuse</td>
</tr>
<tr>
<td>43</td>
<td>Suicide Prevention</td>
</tr>
<tr>
<td>40</td>
<td>Training (Staff Classes)</td>
</tr>
<tr>
<td>38</td>
<td>Vocational Activities</td>
</tr>
<tr>
<td>29</td>
<td>Welfare to Work</td>
</tr>
</tbody>
</table>
# REFERRAL IN CODES

## County Mental Health Facilities

**INPATIENT/RESIDENTIAL**  (Revised June 2006)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>State Hospital (LPS Program)</td>
</tr>
<tr>
<td>12</td>
<td>County operated Inpatient</td>
</tr>
<tr>
<td>13</td>
<td>County contracted Inpatient</td>
</tr>
<tr>
<td>20</td>
<td>Psychiatric Diversion Program (PDP)</td>
</tr>
<tr>
<td>25</td>
<td>County operated Residential</td>
</tr>
<tr>
<td>27</td>
<td>County contracted Residential</td>
</tr>
</tbody>
</table>

## OUTPATIENT

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>*11</td>
<td>Project ABC</td>
</tr>
<tr>
<td>15</td>
<td>State operated</td>
</tr>
<tr>
<td>16</td>
<td>County operated</td>
</tr>
<tr>
<td>17</td>
<td>County contracted</td>
</tr>
<tr>
<td>19</td>
<td>Tri-Cities Programs</td>
</tr>
<tr>
<td>74</td>
<td>FFS Network Provider</td>
</tr>
<tr>
<td>76</td>
<td>Linkage Agency</td>
</tr>
</tbody>
</table>

## PARTIAL DAY CARE

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>21</td>
<td>County operated</td>
</tr>
<tr>
<td>22</td>
<td>County contracted</td>
</tr>
<tr>
<td>24</td>
<td>Tri-Cities Programs</td>
</tr>
</tbody>
</table>

## OTHER

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>26</td>
<td>Case Management</td>
</tr>
<tr>
<td>28</td>
<td>Community Outreach</td>
</tr>
</tbody>
</table>

*This code is only applicable to Project ABC providers.*
## Non-County Mental Health Facilities

### INPATIENT/RESIDENTIAL (Revised July 2005)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>29</td>
<td>State Hospital (Non-LPS Program)</td>
</tr>
<tr>
<td>30</td>
<td>Psychiatric service of a general hospital</td>
</tr>
<tr>
<td>32</td>
<td>Psychiatric service of a military or veterans hospital</td>
</tr>
<tr>
<td>33</td>
<td>Private psychiatric hospital</td>
</tr>
<tr>
<td>34</td>
<td>LA Care</td>
</tr>
<tr>
<td>35</td>
<td>Foundation Health</td>
</tr>
<tr>
<td>36</td>
<td>Other residential facility for treatment of mental illness</td>
</tr>
</tbody>
</table>

### OUTPATIENT

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>40</td>
<td>Private mental health professional</td>
</tr>
<tr>
<td>42</td>
<td>Private psychiatric clinic/counseling service</td>
</tr>
<tr>
<td>43</td>
<td>Military or veterans outpatient psychiatric service</td>
</tr>
<tr>
<td>49</td>
<td>Self-help association</td>
</tr>
</tbody>
</table>

### REHABILITATION/PARTIAL DAY CARE

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>53</td>
<td>Military or veterans rehabilitation center</td>
</tr>
<tr>
<td>54</td>
<td>Other day treatment/rehabilitation center day training, sheltered workshop for mentally ill</td>
</tr>
</tbody>
</table>

### OTHER

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>56</td>
<td>Suicide prevention and other telephone hotlines</td>
</tr>
</tbody>
</table>
### Auxiliary and Generic 24-hour Health Services, non-County

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>59</td>
<td>Board and care, nursing, or convalescent home</td>
</tr>
<tr>
<td>60</td>
<td>Non-psychiatric service of private general hospital</td>
</tr>
<tr>
<td>61</td>
<td>Non-psychiatric service of general hospital</td>
</tr>
<tr>
<td>62</td>
<td>Non-psychiatric service of military, veterans’ hospital</td>
</tr>
<tr>
<td>63</td>
<td>Drug/alcohol abuse detoxification facility or recovery home</td>
</tr>
</tbody>
</table>

### OUTPATIENT/PARTIAL DAY (non-County)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>50</td>
<td>Regional screening center for developmental disabilities</td>
</tr>
<tr>
<td>51</td>
<td>Other agency serving the developmentally disabled</td>
</tr>
<tr>
<td>52</td>
<td>Drug/alcohol outpatient clinic, partial day detoxification program, outreach program</td>
</tr>
<tr>
<td>65</td>
<td>Private physician or medical clinic</td>
</tr>
<tr>
<td>66</td>
<td>County health services medical clinic</td>
</tr>
<tr>
<td>69</td>
<td>Other medical outpatient service</td>
</tr>
</tbody>
</table>

### Social Agencies (non-County)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>64</td>
<td>County Department of Children’s Services</td>
</tr>
<tr>
<td>67</td>
<td>County Department of Public Social Services</td>
</tr>
<tr>
<td>68</td>
<td>County Department of Probation</td>
</tr>
<tr>
<td>70</td>
<td>Courts</td>
</tr>
<tr>
<td>71</td>
<td>Jail, Correctional Institution (except Probation Department)</td>
</tr>
<tr>
<td>72</td>
<td>School/College</td>
</tr>
<tr>
<td>73</td>
<td>Vocational Rehabilitation Department</td>
</tr>
<tr>
<td>75</td>
<td>Cal Works</td>
</tr>
<tr>
<td>80</td>
<td>Police/Sheriff</td>
</tr>
<tr>
<td>81</td>
<td>Attorney, Legal Aid</td>
</tr>
<tr>
<td>82</td>
<td>Public Defender</td>
</tr>
<tr>
<td>83</td>
<td>Employment Service</td>
</tr>
<tr>
<td>84</td>
<td>Public Guardian</td>
</tr>
<tr>
<td>85</td>
<td>Religious Organization, Clergy</td>
</tr>
<tr>
<td>86</td>
<td>Information and Referral Agency</td>
</tr>
<tr>
<td>87</td>
<td>Other Social Agency</td>
</tr>
</tbody>
</table>
**Other Referral Sources**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Self</td>
</tr>
<tr>
<td>91</td>
<td>Family</td>
</tr>
<tr>
<td>92</td>
<td>Friends</td>
</tr>
<tr>
<td>93</td>
<td>Identification as a “highest utilizer” on a client listing provided by administrative headquarters</td>
</tr>
<tr>
<td>94</td>
<td>Compromised Immune System (CIS)</td>
</tr>
</tbody>
</table>

**Miscellaneous Referral-Out**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>95</td>
<td>Other</td>
</tr>
<tr>
<td>99</td>
<td>Unknown</td>
</tr>
</tbody>
</table>
# REFERRAL OUT CODES

## County Mental Health Facilities

INPATIENT/RESIDENTIAL  (Revised September 2006)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>State Hospital (LPS Program)</td>
</tr>
<tr>
<td>12</td>
<td>County operated Inpatient</td>
</tr>
<tr>
<td>13</td>
<td>County contracted Inpatient</td>
</tr>
<tr>
<td>25</td>
<td>County operated Residential</td>
</tr>
<tr>
<td>27</td>
<td>County contracted Residential</td>
</tr>
</tbody>
</table>

OUTPATIENT

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>State operated</td>
</tr>
<tr>
<td>16</td>
<td>County operated</td>
</tr>
<tr>
<td>17</td>
<td>County contracted</td>
</tr>
<tr>
<td>19</td>
<td>Tri-Cities Programs</td>
</tr>
<tr>
<td>74</td>
<td>FFS Network Provider</td>
</tr>
<tr>
<td>76</td>
<td>Linkage Agency</td>
</tr>
</tbody>
</table>

PARTIAL DAY CARE

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>21</td>
<td>County operated</td>
</tr>
<tr>
<td>22</td>
<td>County contracted</td>
</tr>
<tr>
<td>24</td>
<td>Tri-Cities Programs</td>
</tr>
</tbody>
</table>

OTHER  (Revised September 2006)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>26</td>
<td>Case Management</td>
</tr>
</tbody>
</table>
Non-County Mental Health Facilities

INPATIENT/RESIDENTIAL  (Revised September 2006)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>29</td>
<td>State Hospital (Non-LPS Program)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>Psychiatric service of a general hospital</td>
</tr>
<tr>
<td>32</td>
<td>Psychiatric service of a military or veterans hospital</td>
</tr>
<tr>
<td>33</td>
<td>Private psychiatric hospital</td>
</tr>
<tr>
<td>36</td>
<td>Other residential facility for treatment of mental illness</td>
</tr>
</tbody>
</table>

OUTPATIENT

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>40</td>
<td>Private mental health professional</td>
</tr>
<tr>
<td>44</td>
<td>Private psychiatric clinic/counseling service</td>
</tr>
<tr>
<td>45</td>
<td>Military or veterans outpatient psychiatric service</td>
</tr>
<tr>
<td>49</td>
<td>Self-help association</td>
</tr>
</tbody>
</table>

REHABILITATION/PARTIAL DAY CARE

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>53</td>
<td>Military or veterans rehabilitation center</td>
</tr>
<tr>
<td>54</td>
<td>Other day treatment/rehabilitation center day training, sheltered workshop for mentally ill</td>
</tr>
</tbody>
</table>
## REFERRAL OUT CODES (con’t.)

### Auxiliary and Generic 24-hour Health Services, non-County

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>59</td>
<td>Board and care, nursing, or convalescent home</td>
</tr>
<tr>
<td>60</td>
<td>Non-psychiatric service of private general hospital</td>
</tr>
<tr>
<td>61</td>
<td>Non-psychiatric service of general hospital</td>
</tr>
<tr>
<td>62</td>
<td>Non-psychiatric service of military, veterans’ hospital</td>
</tr>
<tr>
<td>63</td>
<td>Drug/alcohol abuse detoxification facility or recovery home</td>
</tr>
</tbody>
</table>

### OUTPATIENT/PARTIAL DAY (non-County)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>50</td>
<td>Regional screening center for developmental disabilities</td>
</tr>
<tr>
<td>51</td>
<td>Other agency serving the developmentally disabled</td>
</tr>
<tr>
<td>52</td>
<td>Drug/alcohol outpatient clinic, partial day detoxification program, outreach program</td>
</tr>
<tr>
<td>65</td>
<td>Private physician or medical clinic</td>
</tr>
<tr>
<td>66</td>
<td>County health services medical clinic</td>
</tr>
<tr>
<td>69</td>
<td>Other medical outpatient service</td>
</tr>
</tbody>
</table>

### Social Agencies (non-County)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>64</td>
<td>County Department of Children’s Services</td>
</tr>
<tr>
<td>67</td>
<td>County Department of Public Social Services</td>
</tr>
<tr>
<td>68</td>
<td>County Department of Probation</td>
</tr>
<tr>
<td>70</td>
<td>Courts</td>
</tr>
<tr>
<td>71</td>
<td>Jail, Correctional Institution (except Probation Department)</td>
</tr>
<tr>
<td>72</td>
<td>School/College</td>
</tr>
<tr>
<td>73</td>
<td>Vocational Rehabilitation Department</td>
</tr>
<tr>
<td>80</td>
<td>Police/Sheriff</td>
</tr>
<tr>
<td>81</td>
<td>Attorney, Legal Aid</td>
</tr>
<tr>
<td>82</td>
<td>Public Defender</td>
</tr>
<tr>
<td>83</td>
<td>Employment Service</td>
</tr>
<tr>
<td>84</td>
<td>Public Guardian</td>
</tr>
<tr>
<td>85</td>
<td>Religious Organization, Clergy</td>
</tr>
<tr>
<td>86</td>
<td>Information and Referral Agency</td>
</tr>
<tr>
<td>87</td>
<td>Other Social Agency</td>
</tr>
</tbody>
</table>
### Other Referral Sources

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>94</td>
<td>Compromised Immune System (CIS)</td>
</tr>
</tbody>
</table>

### Miscellaneous Referral-Out

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>95</td>
<td>Other</td>
</tr>
<tr>
<td>99</td>
<td>Unknown</td>
</tr>
</tbody>
</table>

### No Referral-Out Recommendation

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>02</td>
<td>Client withdrew/stopped coming: Therapist thinks there is a continuing immediate need for treatment, but client has said there has been enough personal or situational improvement in order to discontinue</td>
</tr>
<tr>
<td>03</td>
<td>Client withdrew/stopped coming: in the intake process, the client rejected treatment plan offered by agency and refused referral</td>
</tr>
<tr>
<td>04</td>
<td>No current need for further care under DMH Policy</td>
</tr>
<tr>
<td>05</td>
<td>Client withdrew/stopped coming: Client’s reason unknown</td>
</tr>
<tr>
<td>90</td>
<td>Client withdrew/stopped coming: Client has withdrawn prematurely because in the therapist’s opinion his/her concern with the presenting crisis has abated</td>
</tr>
<tr>
<td>06</td>
<td>Client died</td>
</tr>
<tr>
<td>07</td>
<td>Client moved away</td>
</tr>
<tr>
<td>08</td>
<td>Referral desirable but no suitable agency available</td>
</tr>
</tbody>
</table>
# SERVICE AREA/BUREAU

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 through 8</td>
<td><strong>Service Area</strong>, Adult Systems of Care</td>
</tr>
<tr>
<td></td>
<td>1 = Service Area 1 (SA1)</td>
</tr>
<tr>
<td></td>
<td>2 = Service Area 2 (SA2), etc.</td>
</tr>
<tr>
<td>A through H</td>
<td><strong>Countywide</strong> Services located in a specified Service Area:</td>
</tr>
<tr>
<td></td>
<td>A = Countywide program located in SA1</td>
</tr>
<tr>
<td></td>
<td>B = Countywide program located in SA2, etc.</td>
</tr>
<tr>
<td>CC1 through CC8</td>
<td><strong>Critical Care</strong> services located in a specified Service Area:</td>
</tr>
<tr>
<td></td>
<td>CC1 = Critical Care services located in SA1</td>
</tr>
<tr>
<td></td>
<td>CC2 = Critical Care services located in SA2, etc.</td>
</tr>
<tr>
<td>CS1 through CS8</td>
<td><strong>Children’s System of Care</strong> administrated program located in a specified Service Area:</td>
</tr>
<tr>
<td></td>
<td>CS1 = CS Bureau Program located in SA1</td>
</tr>
<tr>
<td></td>
<td>CS2 = CS Bureau program located in SA2, etc.</td>
</tr>
<tr>
<td>FF1 through FF8</td>
<td><strong>Fee-For-Service</strong> programs located in a specified Service Area:</td>
</tr>
<tr>
<td></td>
<td>FF1 = Fee-For-Service program located in SA1</td>
</tr>
<tr>
<td></td>
<td>FF2 = Fee-For-Service program located in SA2, etc.</td>
</tr>
<tr>
<td>HQ</td>
<td>County Administration</td>
</tr>
<tr>
<td>LPS</td>
<td>State Hospitals</td>
</tr>
<tr>
<td>PG</td>
<td>Public Guardian</td>
</tr>
</tbody>
</table>
Identifies the location of services at which services were rendered.

<table>
<thead>
<tr>
<th>Codes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>03</td>
<td>School</td>
</tr>
<tr>
<td>04</td>
<td>Homeless Shelter (Effective 12-3-2007)</td>
</tr>
<tr>
<td><strong>09</strong></td>
<td><strong>Prison/Correctional Facility</strong> (Effective 2-23-2009) (Not applicable to FFS 2 providers)</td>
</tr>
<tr>
<td>11</td>
<td>Office</td>
</tr>
<tr>
<td>12</td>
<td>Home</td>
</tr>
<tr>
<td>13</td>
<td>Assisted Living Facility (Effective 12-3-2007)</td>
</tr>
<tr>
<td>14</td>
<td>Group Home  (Effective 12-3-2007)</td>
</tr>
<tr>
<td><strong>16</strong></td>
<td><strong>Temporary Lodging, e.g. hotel</strong> (Effective 2-23-2009)</td>
</tr>
<tr>
<td>20</td>
<td>Urgent Care</td>
</tr>
<tr>
<td>21</td>
<td>Inpatient Hospital</td>
</tr>
<tr>
<td>22</td>
<td>Outpatient Hospital</td>
</tr>
<tr>
<td>23</td>
<td>Emergency Room – Hospital</td>
</tr>
<tr>
<td>25</td>
<td>Birthing Center</td>
</tr>
<tr>
<td>26</td>
<td>Military Treatment Facility</td>
</tr>
<tr>
<td>31</td>
<td>Skilled Nursing Facility – Without STP</td>
</tr>
<tr>
<td>32</td>
<td>Nursing Facility – With STP</td>
</tr>
<tr>
<td>33</td>
<td>Custodial Care Facility</td>
</tr>
<tr>
<td>34</td>
<td>Hospice</td>
</tr>
<tr>
<td>50</td>
<td>Federally Qualified Health Center</td>
</tr>
<tr>
<td>51</td>
<td>Inpatient Psychiatric Facility</td>
</tr>
<tr>
<td>52</td>
<td>Psychiatric Facility Partial Hospitalization</td>
</tr>
<tr>
<td>53</td>
<td>Community Mental Health Center</td>
</tr>
<tr>
<td>54</td>
<td>Intermediate Care Facility/Mentally Retarded</td>
</tr>
<tr>
<td>55</td>
<td>Residential Substance Abuse Treatment Facility</td>
</tr>
<tr>
<td>56</td>
<td>Psychiatric Residential Treatment Center</td>
</tr>
<tr>
<td>71</td>
<td>State or Local Public Health Clinic</td>
</tr>
<tr>
<td>99</td>
<td>Other Unlisted Facility</td>
</tr>
</tbody>
</table>
## SERVICE RECIPIENT

<table>
<thead>
<tr>
<th>Code</th>
<th>Service Recipient</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>CalWorks</td>
</tr>
<tr>
<td>1</td>
<td>Community-at-Large</td>
</tr>
<tr>
<td>7</td>
<td>Community Care Facility</td>
</tr>
<tr>
<td>10</td>
<td>Community Organization</td>
</tr>
<tr>
<td>15</td>
<td>Community Support/Self-Help</td>
</tr>
<tr>
<td>4</td>
<td>Couple/Family</td>
</tr>
<tr>
<td>20</td>
<td>Disaster Survivor</td>
</tr>
<tr>
<td>19</td>
<td>General Relief Opportunity for Work Program (GROW)</td>
</tr>
<tr>
<td>16</td>
<td>Government Groups</td>
</tr>
<tr>
<td>21</td>
<td>Homeless</td>
</tr>
<tr>
<td>13</td>
<td>Human Services Agency Private</td>
</tr>
<tr>
<td>12</td>
<td>Human Services Agency Public</td>
</tr>
<tr>
<td>23</td>
<td>Human Services Agency Public/Private</td>
</tr>
<tr>
<td>3</td>
<td>Individual</td>
</tr>
<tr>
<td>14</td>
<td>Labor Union or Employee Organization</td>
</tr>
<tr>
<td>8</td>
<td>Law Enforcement/Justice System</td>
</tr>
<tr>
<td>17</td>
<td>Other Groups</td>
</tr>
<tr>
<td>9</td>
<td>Private Industry</td>
</tr>
<tr>
<td>22</td>
<td>Regional Center</td>
</tr>
<tr>
<td>11</td>
<td>Religious Organization</td>
</tr>
<tr>
<td>6</td>
<td>School Private</td>
</tr>
<tr>
<td>5</td>
<td>School Public</td>
</tr>
<tr>
<td>2</td>
<td>Special Population</td>
</tr>
<tr>
<td>24</td>
<td>Veteran</td>
</tr>
</tbody>
</table>
### Source of Income

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>SA</td>
<td>Salary</td>
</tr>
<tr>
<td>UI</td>
<td>Unemployment Insurance</td>
</tr>
<tr>
<td>DI</td>
<td>Disability Insurance</td>
</tr>
<tr>
<td>SS</td>
<td>SSI</td>
</tr>
<tr>
<td>PA</td>
<td>Other Public Assistance</td>
</tr>
<tr>
<td>VA</td>
<td>Veterans’ Administration</td>
</tr>
<tr>
<td>GR</td>
<td>Los Angeles County General Relief</td>
</tr>
<tr>
<td>IC</td>
<td>Inkind Care</td>
</tr>
<tr>
<td>SE</td>
<td>Self-Employed</td>
</tr>
<tr>
<td>OT</td>
<td>Other (includes retirement income)</td>
</tr>
<tr>
<td>NO</td>
<td>None</td>
</tr>
<tr>
<td>UN</td>
<td>Unknown</td>
</tr>
</tbody>
</table>

### State Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Code</th>
<th>Description</th>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AL</td>
<td>Alabama</td>
<td>LA</td>
<td>Louisiana</td>
<td>OK</td>
<td>Oklahoma</td>
</tr>
<tr>
<td>AK</td>
<td>Alaska</td>
<td>ME</td>
<td>Maine</td>
<td>OR</td>
<td>Oregon</td>
</tr>
<tr>
<td>AZ</td>
<td>Arizona</td>
<td>MD</td>
<td>Maryland</td>
<td>PA</td>
<td>Pennsylvania</td>
</tr>
<tr>
<td>AR</td>
<td>Arkansas</td>
<td>MA</td>
<td>Massachusetts</td>
<td>RI</td>
<td>Rhode Island</td>
</tr>
<tr>
<td>CA</td>
<td>California</td>
<td>MI</td>
<td>Michigan</td>
<td>SC</td>
<td>South Carolina</td>
</tr>
<tr>
<td>CO</td>
<td>Colorado</td>
<td>MN</td>
<td>Minnesota</td>
<td>SD</td>
<td>South Dakota</td>
</tr>
<tr>
<td>CT</td>
<td>Connecticut</td>
<td>MS</td>
<td>Mississippi</td>
<td>TN</td>
<td>Tennessee</td>
</tr>
<tr>
<td>DE</td>
<td>Delaware</td>
<td>MO</td>
<td>Missouri</td>
<td>TX</td>
<td>Texas</td>
</tr>
<tr>
<td>DC</td>
<td>District of Columbia</td>
<td>MT</td>
<td>Montana</td>
<td>UT</td>
<td>Utah</td>
</tr>
<tr>
<td>FL</td>
<td>Florida</td>
<td>NE</td>
<td>Nebraska</td>
<td>VT</td>
<td>Vermont</td>
</tr>
<tr>
<td>GA</td>
<td>Georgia</td>
<td>NV</td>
<td>Nevada</td>
<td>VA</td>
<td>Virginia</td>
</tr>
<tr>
<td>HI</td>
<td>Hawaii</td>
<td>NH</td>
<td>New Hampshire</td>
<td>WA</td>
<td>Washington</td>
</tr>
<tr>
<td>ID</td>
<td>Idaho</td>
<td>NJ</td>
<td>New Jersey</td>
<td>WV</td>
<td>West Virginia</td>
</tr>
<tr>
<td>IL</td>
<td>Illinois</td>
<td>NM</td>
<td>New Mexico</td>
<td>WI</td>
<td>Wisconsin</td>
</tr>
<tr>
<td>IN</td>
<td>Indiana</td>
<td>NY</td>
<td>New York</td>
<td>WY</td>
<td>Wyoming</td>
</tr>
<tr>
<td>IA</td>
<td>Iowa</td>
<td>NC</td>
<td>North Carolina</td>
<td></td>
<td></td>
</tr>
<tr>
<td>KS</td>
<td>Kansas</td>
<td>ND</td>
<td>North Dakota</td>
<td></td>
<td></td>
</tr>
<tr>
<td>KY</td>
<td>Kentucky</td>
<td>OH</td>
<td>Ohio</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

UN=Unknown State

Confidential 119 Published by: DMH – CIO
### STREET ABBREVIATIONS

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Code</th>
<th>Description</th>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AL</td>
<td>Alley</td>
<td>FWY</td>
<td>Freeway</td>
<td>PL</td>
<td>Place</td>
</tr>
<tr>
<td>ARC</td>
<td>Arcade</td>
<td>GDNS</td>
<td>Gardens</td>
<td>PZ</td>
<td>Plaza</td>
</tr>
<tr>
<td>AVE</td>
<td>Avenue</td>
<td>GRN</td>
<td>Green</td>
<td>PT</td>
<td>Point</td>
</tr>
<tr>
<td>BLVD</td>
<td>Boulevard</td>
<td>ARC</td>
<td>Arcade</td>
<td>RMP</td>
<td>Ramp</td>
</tr>
<tr>
<td>BRDG</td>
<td>Bridge</td>
<td>PZ</td>
<td>Plaza</td>
<td>RCH</td>
<td>Ranch</td>
</tr>
<tr>
<td>BPS</td>
<td>Bypass</td>
<td>PL</td>
<td>Place</td>
<td>RD</td>
<td>Road</td>
</tr>
<tr>
<td>CL</td>
<td>Calle</td>
<td>FWY</td>
<td>Freeway</td>
<td>SKWY</td>
<td>Skyway</td>
</tr>
<tr>
<td>CM</td>
<td>Camino</td>
<td>LN</td>
<td>Lane</td>
<td>SQ</td>
<td>Square</td>
</tr>
<tr>
<td>CK</td>
<td>Creek</td>
<td>LP</td>
<td>Loop</td>
<td>ST</td>
<td>Street</td>
</tr>
<tr>
<td>CSWY</td>
<td>Causeway</td>
<td>ML</td>
<td>Mall</td>
<td>TER</td>
<td>Terrace</td>
</tr>
<tr>
<td>CTR</td>
<td>Center</td>
<td>MNR</td>
<td>Manor</td>
<td>THWY</td>
<td>Throughway</td>
</tr>
<tr>
<td>CIR</td>
<td>Circle</td>
<td>MEWS</td>
<td>Mews</td>
<td>TFWY</td>
<td>Trafficway</td>
</tr>
<tr>
<td>COM</td>
<td>Common</td>
<td>MTY</td>
<td>Motorway</td>
<td>TR</td>
<td>Trail</td>
</tr>
<tr>
<td>CT</td>
<td>Court</td>
<td>MTN</td>
<td>Mountain</td>
<td>TUN</td>
<td>Tunnel</td>
</tr>
<tr>
<td>CV</td>
<td>Cove</td>
<td>OVL</td>
<td>Oval</td>
<td>TPKE</td>
<td>Turnpike</td>
</tr>
<tr>
<td>CRES</td>
<td>Crescent</td>
<td>OVPS</td>
<td>Overpass</td>
<td>VLY</td>
<td>Valley</td>
</tr>
<tr>
<td>Xing</td>
<td>Crossing</td>
<td>PK</td>
<td>Park, Peak</td>
<td>VIS</td>
<td>Vista</td>
</tr>
<tr>
<td>CYN</td>
<td>Canyon</td>
<td>PW</td>
<td>Parkway</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DR</td>
<td>Drive</td>
<td>PS</td>
<td>Pass</td>
<td>UNP</td>
<td>Underpass</td>
</tr>
<tr>
<td>EST</td>
<td>Estates</td>
<td>PAS</td>
<td>Paseo</td>
<td>WLK</td>
<td>Walk</td>
</tr>
<tr>
<td>EXWY</td>
<td>Expressway</td>
<td>PTH</td>
<td>Path</td>
<td>WL</td>
<td>Wall</td>
</tr>
<tr>
<td></td>
<td></td>
<td>PKE</td>
<td>Pike</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## SUPERVISORIAL DISTRICTS

These codes are used only on the Reporting Unit/Provider screen and are not entered by the field staff.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
</table>
| 1 through 5 | 1 = Supervisory District 1  
                    2 = Supervisory District 2, etc. |
| A through E | Countywide Service located in a specified Supervisory District:  
                    A = Countywide program located in Supervisory District 1  
                    B = Countywide program located in Supervisory District 2, etc. |
| S        | State Hospitals                                  |
| 9        | County Administration                           |

## TARGET GROUP

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>MD</td>
<td>Mentally Disordered</td>
</tr>
<tr>
<td>DD</td>
<td>Developmentally Disabled</td>
</tr>
<tr>
<td>MDO</td>
<td>Mentally Disordered Offender</td>
</tr>
<tr>
<td>DRG</td>
<td>Drug</td>
</tr>
<tr>
<td>ALC</td>
<td>Alcohol</td>
</tr>
</tbody>
</table>
### TAXONOMY CODES

| LAC-DMH Suggested Staff in this Taxonomy | Taxonomy Description | Taxonomy Code | Required for Rendering Provider App | Excerpts from the Federal Definitions
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>All Students</strong></td>
<td>Student in an Organized Health Care Education/Training Program</td>
<td>390200000X</td>
<td>No</td>
<td>An individual who is enrolled in an organized health care education/training program leading to a degree, certification, registration, and/or licensure to provide health care.</td>
</tr>
<tr>
<td><strong>Licensed Pharmacist</strong></td>
<td>Pharmacist, General Practice</td>
<td>1835G0000X</td>
<td>Yes</td>
<td>An individual licensed by the appropriate state regulatory agency to engage in the practice of pharmacy.</td>
</tr>
<tr>
<td></td>
<td>Pharmacist, Pharmacotherapy</td>
<td>1835P1200X</td>
<td>Yes</td>
<td>A licensed pharmacist who has demonstrated specialized knowledge and skill in optimizing pharmacotherapeutic care of patients, by developing, implementing, monitoring, and modifying complex treatment plans, providing advanced level education and consultation, and collaborating with other health professionals in the management of therapy.</td>
</tr>
<tr>
<td></td>
<td>Pharmacist, Psychiatric</td>
<td>1835P1300X</td>
<td>Yes</td>
<td>A licensed pharmacist who has demonstrated specialized knowledge and skill in optimizing care of patients with psychiatric illness by assessing and monitoring patients, recognizing drug-induced problems, and recommending appropriate treatment plans.</td>
</tr>
<tr>
<td><strong>Licensed Psychiatric Technician</strong></td>
<td>Licensed Psychiatric Technician</td>
<td>167G00000X</td>
<td>Yes</td>
<td>An individual licensed by the state board as a Psychiatric Technician based upon completion of a prescribed course of theory and clinical practice, with two thirds of the clinical practice focused on mental and developmental disorders.</td>
</tr>
<tr>
<td><strong>Licensed Physician Assistant (DEA)</strong></td>
<td>Physician Assistant</td>
<td>363A00000X</td>
<td>Yes</td>
<td>A physician assistant is a person who has successfully completed an accredited education program for physician assistant, is licensed by the state and is practicing within the scope of that license.</td>
</tr>
<tr>
<td>LAC-DMH Suggested Staff in this Taxonomy</td>
<td>Taxonomy Description</td>
<td>Taxonomy Code</td>
<td>Required for Rendering Provider App</td>
<td>Excerpts from the Federal Definitions</td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>----------------------</td>
<td>---------------</td>
<td>-------------------------------------</td>
<td>--------------------------------------</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Required for Rendering Provider App</td>
<td>Excerpts from the Federal Definitions</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>License</td>
<td>Registration</td>
</tr>
<tr>
<td>Nurse (Registered)</td>
<td>Registered Nurse</td>
<td>163W00000X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Registered Nurse, Addiction (Substance Use Disorder)</td>
<td>163WA0400X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Registered Nurse, Community Health</td>
<td>163WC1500X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Registered Nurse, Psychiatric/Mental Health Child &amp; Adolescent</td>
<td>163WP0807X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Registered Nurse, Psychiatric/Mental Health</td>
<td>163WP0808X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Registered Nurse, Psychiatric/Mental Health Adult</td>
<td>163WP0809X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Nurse Practitioner (Certified, DEA)</td>
<td>Nurse Practitioner</td>
<td>363L00000X</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Nurse Practitioner, Community Health</td>
<td>363LC1500X</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Nurse Practitioner, Psychiatric/Mental Health</td>
<td>363LP0808X</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>
### TAXONOMY CODES (con’t.)

<table>
<thead>
<tr>
<th>LAC-DMH Suggested Staff in this Taxonomy</th>
<th>Taxonomy Description</th>
<th>Taxonomy Code</th>
<th>Required for Rendering Provider App</th>
<th>Excerpts from the Federal Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Nurse Specialist</td>
<td>Clinical Nurse Specialist</td>
<td>364S00000X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>A registered nurse, who, through a graduate degree program in nursing, or through a formal post-basic education program or continuing education courses and clinical experience, is expert in a specialty area of nursing practice within one or more of the components of direct patient/client care; consultation, education, research and administration.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clinical Nurse Specialist, Community Health/Public Health</td>
<td>364SC1501X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Specific definitions of CNS Specialty areas are not available at this time.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clinical Nurse Specialist, Psychiatric/Mental Health Child &amp; Adolescent</td>
<td>364SP0807X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Specific definitions of CNS Specialty areas are not available at this time.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clinical Nurse Specialist, Psychiatric/Mental Health Adult</td>
<td>364SP0808X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Specific definitions of CNS Specialty areas are not available at this time.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clinical Nurse Specialist, Psychiatric/Mental Health Community</td>
<td>364SP0809X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Specific definitions of CNS Specialty areas are not available at this time.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clinical Nurse Specialist, Psychiatric/Mental Health Child &amp; Family</td>
<td>364SP0810X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Specific definitions of CNS Specialty areas are not available at this time.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clinical Nurse Specialist, Psychiatric/Mental Health Chronically Ill</td>
<td>364SP0811X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Specific definitions of CNS Specialty areas are not available at this time.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clinical Nurse Specialist, Psychiatric/Mental Health Community</td>
<td>364SP0812X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Specific definitions of CNS Specialty areas are not available at this time.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### TAXONOMY CODES (con’t.)

<table>
<thead>
<tr>
<th>LAC-DMH Suggested Staff in this Taxonomy</th>
<th>Taxonomy Description</th>
<th>Taxonomy Code</th>
<th>Required for Rendering Provider App</th>
<th>Excerpts from the Federal Definitions See <a href="http://www.wpc-edi.com/taxonomy">www.wpc-edi.com/taxonomy</a> for the full definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Nurse Specialist</td>
<td>Clinical Nurse Specialist Psychiatric/Mental Health Geropsychiatric</td>
<td>364SP0813X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Vocational Nurse (Licensed)</td>
<td>Licensed Vocational Nurse</td>
<td>164X00000X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Physician (Licensed, DEA, Non-Resident)</td>
<td>Physician, General Practice</td>
<td>208D00000X</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Physician (Licensed, DEA, Non-Resident)</td>
<td>Physician, Forensic Psychiatry</td>
<td>2084F0202X</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Physician (Licensed, DEA, Non-Resident)</td>
<td>Physician, Psychiatry</td>
<td>2084P0800X</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Physician, Addiction Psychiatry</td>
<td>Physician, Addiction Psychiatry</td>
<td>2084P0802X</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>
### TAXONOMY CODES (con’t.)

<table>
<thead>
<tr>
<th>LAC-DMH Suggested Staff in this Taxonomy</th>
<th>Taxonomy Description</th>
<th>Taxonomy Code</th>
<th>Required for Rendering Provider App</th>
<th>Excerpts from the Federal Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Psychiatrist (Licensed, DEA, Non-Resident)</strong></td>
<td>Physician, Child &amp; Adolescent Psychiatry</td>
<td>2084P0804X</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Physician, Geriatric Psychiatry</td>
<td>2084P0805X</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Suggested: Physician Psychiatrist (Licensed, Resident)</strong></td>
<td>Specialist</td>
<td>174400000X</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Psychologist (Licensed)</strong></td>
<td>Psychologist</td>
<td>103T00000X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Psychologist, Addiction (Substance Use Disorder)</td>
<td>103TA0400X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Psychologist, Adult Development &amp; Aging</td>
<td>103TA0700X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Psychologist, Cognitive &amp; Behavioral</td>
<td>103TB0200X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Psychologist, Clinical</td>
<td>103TC0700X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>LAC-DMH Suggested Staff in this Taxonomy</td>
<td>Taxonomy Description</td>
<td>Taxonomy Code</td>
<td>Required for Rendering Provider App</td>
<td>Excerpts from the Federal Definitions</td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>----------------------</td>
<td>--------------</td>
<td>------------------------------------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td>Psychologist (Licensed)</td>
<td>Psychologist, Counseling</td>
<td>103TC1900X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Psychologist, Clinical Child &amp; Adolescent</td>
<td>103TC2200X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Psychologist, Group Psychotherapy</td>
<td>103TP2701X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Suggested: Psychologist (Waivered)</td>
<td>Rehabilitation Counselor</td>
<td>225C00000X</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Social Worker (Licensed)</td>
<td>Social Worker</td>
<td>104100000X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Social Worker, Clinical</td>
<td>1041C0700X</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Social Worker, School</td>
<td>1041S0200X</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
### TAXONOMY CODES (con’t.)

<table>
<thead>
<tr>
<th>LAC-DMH Suggested Staff in this Taxonomy</th>
<th>Taxonomy Description</th>
<th>Taxonomy Code</th>
<th>Required for Rendering Provider App</th>
<th>Excerpts from the Federal Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suggested: Social Worker (Registered)</td>
<td>Counselor, Mental Health</td>
<td>101YM0800X</td>
<td>No</td>
<td>Definition of Counselor: A provider who is trained and educated in the performance of behavior health services through interpersonal communications and analysis. Training and education at the specialty level usually requires a master’s degree and clinical experience and supervision for licensure or certification. Specific definition of Mental Health Counselor Specialty is not available at this time.</td>
</tr>
<tr>
<td>MFT (Licensed or Registered)</td>
<td>Marriage and Family Therapist</td>
<td>106H00000X</td>
<td>Yes No</td>
<td>A marriage and family therapist is a person with a master's degree in marriage and family therapy, or a master's or doctoral degree in a related mental health field with substantially equivalent coursework in marriage and family therapy, who receives supervised clinical experience, or a person who meets the state requirements to practice as a marriage and family therapist.</td>
</tr>
<tr>
<td>Use per Federal Definition</td>
<td>Counselor</td>
<td>101Y00000X</td>
<td>No No</td>
<td>A provider who is trained and educated in the performance of behavior health services through interpersonal communications and analysis. Training and education at the specialty level usually requires a master's degree and clinical experience and supervision for licensure or certification.</td>
</tr>
<tr>
<td></td>
<td>Counselor, Addiction (Substance Use Disorder)</td>
<td>101YA0400X</td>
<td>No No</td>
<td>Specific definitions of Counselor Specialties are not available at this time.</td>
</tr>
<tr>
<td></td>
<td>Counselor, Professional</td>
<td>101YP2500X</td>
<td>No No</td>
<td>Specific definitions of Counselor Specialties are not available at this time.</td>
</tr>
<tr>
<td></td>
<td>Counselor, School</td>
<td>101YS0200X</td>
<td>No No</td>
<td>Specific definitions of Counselor Specialties are not available at this time.</td>
</tr>
<tr>
<td>LAC-DMH Suggested Staff in this Taxonomy</td>
<td>Taxonomy Description</td>
<td>Taxonomy Code</td>
<td>Required for Rendering Provider App</td>
<td>Excerpts from the Federal Definitions</td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>---------------------</td>
<td>--------------</td>
<td>-------------------------------------</td>
<td>-------------------------------------</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>License Certification DEA License</td>
<td>A medical or mental health professional who has attained credentials after satisfactorily completing a poetry therapy training program approved by the National Federation for Biblio/Poetry Therapy...Certified poetry therapists and registered poetry therapists are licensed mental health professionals with advanced training in the theory and practice of poetry therapy...</td>
</tr>
<tr>
<td>Poetry Therapist</td>
<td></td>
<td>102X00000X</td>
<td>Yes No</td>
<td>A person who provides case management services and assists an individual in gaining access to needed medical, social, educational, and/or other services. The person has the ability to provide an assessment and review of completed plan of care on a periodic basis.</td>
</tr>
<tr>
<td>Case Manager/Care Coordinator</td>
<td></td>
<td>171M00000X</td>
<td>No No</td>
<td>Community Health Workers are lay members of communities who work either for pay or as volunteers in association with the local health care system in both urban and rural environments and usually share ethnicity, language, socioeconomic statues and life experiences with the community members they serve.</td>
</tr>
<tr>
<td>Community Health Worker</td>
<td></td>
<td>172V00000X</td>
<td>No No</td>
<td>An individual who uses art to achieve the therapeutic goals of symptom relief, emotional integration, and recovery from or adjustment to illness or disability</td>
</tr>
<tr>
<td>Art Therapist</td>
<td></td>
<td>221700000X</td>
<td>No No</td>
<td>A Developmental Therapist is a person qualified by completion of an approved program in Developmental Therapy and where applicable credentialed by the state and practicing within the scope of the credential, or credentialed by completion of education experiences as approved by the state and practicing within the scope of that credential, or where state credentialing does not exist, certified by the Board of the Developmental Therapy Association.</td>
</tr>
</tbody>
</table>
## TAXONOMY CODES (con’t.)

<table>
<thead>
<tr>
<th>LAC-DMH Suggested Staff in this Taxonomy</th>
<th>Taxonomy Description</th>
<th>Taxonomy Code</th>
<th>Required for Rendering Provider App</th>
<th>Excerpts from the Federal Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use per Federal Definition</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rehabilitation Practitioner</td>
<td>225400000X</td>
<td>No</td>
<td>No</td>
<td>A health care practitioner who trains or retrains individuals disabled by disease or injury to help them attain their maximum functional capacity.</td>
</tr>
<tr>
<td>Dance Therapist</td>
<td>225600000X</td>
<td>No</td>
<td>No</td>
<td>The dance therapist, sometimes called a movement therapist, focuses on rhythmic body movements as a medium of physical and psychological change. Dance therapy is practiced more often with mental health patients than with physically disabled patients. A master's degree is required by the American Dance Therapy Association to award the credentials Dance Therapist Registered (DTR).</td>
</tr>
<tr>
<td>Recreation Therapist</td>
<td>225800000X</td>
<td>No</td>
<td>No</td>
<td>A recreation therapist uses recreational activities for intervention in some physical, social or emotional behavior to bring about a desired change in that behavior and promote growth and development of the patient.</td>
</tr>
<tr>
<td>Music Therapist</td>
<td>225A00000X</td>
<td>No</td>
<td>No</td>
<td>Music therapists use music interventions to assess clients' strengths and needs, develop goals, implement services, and evaluate and document progress for individuals of all ages. Music therapists facilitate changes in physical, cognitive, emotional, and/or psychosocial health.</td>
</tr>
</tbody>
</table>
### TAXONOMY CODES (cont.)

<table>
<thead>
<tr>
<th>LAC-DMH Suggested Staff in this Taxonomy</th>
<th>Taxonomy Description</th>
<th>Taxonomy Code</th>
<th>Required for Rendering Provider App</th>
<th>Excerpts from the Federal Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>License Registration Certification</td>
<td>See <a href="http://www.wpc-edi.com/taxonomy">www.wpc-edi.com/taxonomy</a> for the full definition</td>
</tr>
<tr>
<td>Occupational Therapist</td>
<td></td>
<td>225X00000X</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Occupational Therapist, Mental Health</td>
<td></td>
<td>225XM0800X</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Occupational Therapy Assistant</td>
<td></td>
<td>224Z00000X</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

**Use per Federal Definition**

- **Occupational Therapist**: An occupational therapist is a person who has graduated from an entry-level occupational therapy program accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) or predecessor organizations, or approved by the World Federation of Occupational Therapists (WFOT), or an equivalent international occupational therapy education program; has successfully completed a period of supervised fieldwork experience required by the occupational therapy program; has passed a nationally recognized entry-level examination for occupational therapists, and fulfills state requirements for licensure, certification, or registration.

- **Occupational Therapist, Mental Health**: Occupational therapists provide treatment for people recovering from a mental or physical illness to regain their independence and stability and to engage in normal daily occupations (work, home, family life, school, leisure). Occupational therapists provide particular emphasis on interventions that result in improved quality of life and decrease hospitalization.

- **Occupational Therapy Assistant**: An occupational therapy assistant is a person who has graduated from an occupational therapy assistant program accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) or predecessor organizations, has successfully completed a period of supervised fieldwork experience required by the accredited occupational therapy assistant program, has passed a nationally recognized entry-level examination for occupational therapy assistants, and fulfills state requirements for licensure, certification, or registration.
**TAXONOMY CODES (con’t.)**

<table>
<thead>
<tr>
<th>LAC-DMH Suggested Staff in this Taxonomy</th>
<th>Taxonomy Description</th>
<th>Taxonomy Code</th>
<th>Required for Rendering Provider App</th>
<th>Excerpts from the Federal Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use per Federal Definition</td>
<td>Technician</td>
<td>374700000X</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>A person with specialized training in a narrow field of expertise whose occupation requires training and is skilled in specific technical processes and procedures.</td>
</tr>
<tr>
<td></td>
<td>Technician, Attendant Care Provider</td>
<td>3747A0650X</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>An individual who provides hands-on care, of both a supportive and health related nature, specific to the needs of a medically stable, physically handicapped individual. Supportive services are those that substitute for the absence, loss, diminution, or impairment of a physical or cognitive function.</td>
</tr>
</tbody>
</table>
VETERAN STATUS

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td>Yes, client is a military veteran</td>
</tr>
<tr>
<td>N</td>
<td>No</td>
</tr>
<tr>
<td>U</td>
<td>Unknown</td>
</tr>
</tbody>
</table>