

TABLE 3.2. Coding for Bipolar I and Major Depressive Disorders

Severity	Bipolar I, current or most recent episode ^a			Major depressive, current or most recent episode	
	Manic	Hypomanic	Depressed	Single	Recurrent
Mild ^b	F31.11 [296.41]	F31.0 [296.40] (no severity, no psychosis for hypomanic episodes)	F31.31 [296.51]	F32.0 [296.21]	F33.0 [296.31]
Moderate ^c	F31.12 [296.42]		F31.32 [296.52]	F32.1 [296.22]	F33.1 [296.32]
Severe ^d	F31.13 [296.43]		F31.4 [296.53]	F32.2 [296.23]	F33.2 [296.33]
With psychotic features ^e	F31.2 [296.44]	—	F31.5 [296.54]	F32.3 [296.24]	F33.3 [296.34]
In partial remission ^f	F31.73 [296.45]	F31.71 [296.45]	F31.75 [296.55]	F32.4 [296.25]	F33.41 [296.35]
In full remission ^g	F31.74 [296.46]	F31.72 [296.46]	F31.76 [296.56]	F32.5 [296.26]	F33.42 [296.36]
Unspecified	F31.9 [296.40]		F31.9 [296.50]	F32.9 [296.20]	F33.9 [296.30]

Note. Here are two examples of how you put it together: Bipolar I disorder, manic, severe with mood-congruent psychotic features, with peripartum onset, with mixed features. Major depressive disorder, recurrent, in partial remission, with seasonal pattern. Note the order: name → episode type → severity/psychotic/remission → other specifiers.

^aIf the bipolar I type isn't specified, code as F31.9 [296.7].

^bMild. Meets the minimum of symptoms, which are distressing but interfere minimally with functionality.

^cModerate. Intermediate between mild and severe.

^dSevere. Many serious symptoms that profoundly impede patient's functioning.

^eIf psychotic features are present, use these code numbers regardless of severity (it will almost always be severe, anyway). Record these features as mood-congruent or mood-incongruent (p. 164).

^fPartial remission. Symptoms are no longer sufficient to meet criteria.

^gFull remission. For 2 months or more, the patient has been essentially free of symptoms.

TABLE 3.3. Descriptors and Specifiers That Can Apply to Mood Disorders

Disorder	Severity/ remission (p. 158)	With mixed features (p. 161)	With anxious distress (p. 159)	With catatonia ^a (p. 160)	With atypical features (p. 160)	With melancholic features (p. 161)	With peripartum onset (p. 163)	With psychotic features (p. 164)	With rapid cycling (p. 165)	With seasonal pattern (p. 165)
Major depression										
Single episode	×	×	×	×	×	×	×	×		
Recurrent	×	×	×	×	×	×	×	×		×
Bipolar I										
Most recent mania	×	×	×	×			×	×	×	×
Most recent depression	×	×	×	×	×	×	×	×	×	×
Most recent hypomania	×	×	×				×		×	×
Most recent unspecified										
Bipolar II										
Most recent hypomanic	×	×	×				×		×	
Most recent depressed	×	×	×	×	×	×	×	×	×	×
Cyclothymia			×							
Persistent (dysthymia)	×	×	×		×	×	×	×		

Note. This table can help you to choose the sometimes lengthy string of names, codes, and modifiers for the mood disorders. Start reading from left to right in the table, putting in any modifiers that apply in the order you come to them. Dysthymia can also have early or late onset, plus a variety of additional specifiers (p. 140).

^aThe catatonia specifier requires its own line of code and description. (See p. 100.)

TABLE 6.1. Comparison of PTSD in Preschool Children, PTSD in Adults, and Acute Stress Disorder

Child PTSD	Adult PTSD	Acute Stress Disorder
	<u>Trauma</u>	
Direct experience	Direct experience	Direct experience
Witness (not just TV)	Witness	Witness
Learn of	Learn of	Learn of
	Repeat exposure (not just TV)	Repeat exposure (not just TV)
<i>Intrusion symptoms (1/5)^a</i>	<i>Intrusion symptoms (1/5)</i>	<i>All symptoms (9/14)</i>
<ul style="list-style-type: none">• Memories• Dreams• Dissociative reactions• Psychological distress• Physiological reactions	<ul style="list-style-type: none">• Memories• Dreams• Dissociative reactions• Psychological distress• Physiological reactions	<ul style="list-style-type: none">• Memories• Dreams• Dissociative reactions• Psychological distress or physiological reactions
<i>Avoid/Neg. emotions (1/6)</i>	<i>Avoidance (1/2)</i>	
<ul style="list-style-type: none">• Avoids memories• Avoids external reminders	<ul style="list-style-type: none">• Avoids memories• Avoids external reminders	<ul style="list-style-type: none">• Avoids memories• Avoids external reminders
	<i>Negative emotions (2/7)</i>	
	<ul style="list-style-type: none">• Amnesia• Negative beliefs• Distortion → self-blame	<ul style="list-style-type: none">• Altered sense of reality of self or surroundings• Amnesia
<ul style="list-style-type: none">• Negative emotional state• Decreased interest• Social withdrawal• Decreased positive emotions	<ul style="list-style-type: none">• Negative emotional state• Decreased interest• Detached from others• No positive emotions	<ul style="list-style-type: none">• No positive emotions
<i>Physiological (2/5)</i>	<i>Physiological (2/6)</i>	
<ul style="list-style-type: none">• Irritable, angry	<ul style="list-style-type: none">• Irritable, angry• Reckless, self-destructive	<ul style="list-style-type: none">• Irritable, angry
<ul style="list-style-type: none">• Hypervigilance• Startle• Poor concentration• Sleep disturbance	<ul style="list-style-type: none">• Hypervigilance• Startle• Poor concentration• Sleep disturbance	<ul style="list-style-type: none">• Hypervigilance• Startle• Poor concentration• Sleep disturbance
	<u>Duration</u>	
>1 month	>1 month	3 days–1 month

^aFractions indicate the number of symptoms required of the number possible in the following list.

TABLE 15.1. Symptoms of Substance Intoxication and Withdrawal

		Substance intoxication								Substance withdrawal					
		Alcohol/sedatives ^a	Cannabis	Stimulants ^b	Caffeine	Hallucinogens	Inhalants	Opioids	PCP	Alcohol/sedatives ^a	Cannabis	Stimulants ^b	Caffeine	Tobacco	Opioids
Social	Impaired social functioning			×											
	Inappropriate sexuality	×													
	Social withdrawal		×												
	Interpersonal sensitivity			×											
Mood	Labile mood	×													
	Anxiety		×	×		×				×	×			×	
	Euphoria		×	×			×	×							
	Blunted affect, apathy			×			×	×							
	Anger			×							×			×	
	Dysphoria, depression					×		×			×	×	×	×	×
	Irritability										×		×	×	
Judgment	Impaired judgment	×	×	×		×	×	×	×						
	Assaultiveness, belligerence						×		×						
	Impulsivity								×						
Sleep	Insomnia, sleeplessness				×					×	×	×		×	×
	Bad dreams										×	×			
	Hypersomnia											×			
Activity level	Aggression	×									×				
	Agitation, increased activity			×	×			×	×	×		×			
	Tirelessness				×										
	Restlessness				×						×			×	
	Decreased activity, retardation			×			×	×				×			
Alertness	Reduced attention	×						×							
	Hypervigilance			×											
	Stupor or coma	×		×			×	×	×						
	Time seems slowed		×												
	Poor concentration												×	×	

^aThis grouping also includes hypnotics and anxiolytics.

^bCocaine and amphetamines

(cont.)

TABLE 15.1 (*cont.*)

		Substance intoxication							Substance withdrawal						
		Alcohol/sedatives ^a	Cannabis	Stimulants ^b	Caffeine	Hallucinogens	Inhalants	Opioids	PCP	Alcohol/sedatives ^a	Cannabis	Stimulants ^b	Caffeine	Tobacco	Opioids
	Confusion			×											
	Drowsiness							×					×		
Perception	Ideas of reference					×									
	Fears of insanity					×									
	Persecutory ideas					×									
	Perceptual changes					×									
	Brief hallucinations/illusions					×				×					
	Depersonalization/derealization					×									
Autonomic	Dry mouth		×												
	Constricted pupils							×							
	Dilated pupils			×		×									×
	Sweating			×		×				×	×				×
	Piloerection														×
Muscle	Muscle weakness			×			×								
	Muscle twitching				×										
	Muscle aches												×		×
	Muscle rigidity								×						
Neurological	Dystonia, dyskinesia			×											
	Nystagmus	×					×		×						
	Tremors					×	×			×	×				
	Blurred vision					×	×								
	Double vision						×								
	Impaired reflexes						×								
	Seizures			×					×	×					
	Numbness								×						
	Headache										×		×		
Gastrointestinal	GI upset, diarrhea				×										×
	Nausea, vomiting			×						×			×		×
	Abdominal pain										×				

TABLE 15.1 (cont.)

		Substance intoxication							Substance withdrawal					
		Alcohol/sedatives ^a	Cannabis	Stimulants ^b	Caffeine	Hallucinogens	Inhalants	Opioids	PCP	Alcohol/sedatives ^a	Cannabis	Stimulants ^b	Caffeine	Tobacco
	Increased appetite/weight gain		×								×		×	
	Decreased appetite/weight loss			×						×				
Motor	Incoordination	×	×			×	×							
	Unsteady gait	×					×							
	Stereotypies			×										
	Trouble walking							×						
	Lethargy						×							
	Trouble speaking							×						
	Slurred speech	×					×	×						
Cardiovascular	Chest pain			×										
	Irregular heartbeat			×	×	×								
	Slow heart rate			×										
	Rapid heart rate		×	×	×	×			×	×				
	Blood pressure up or down			×					×					
General	Depressed breathing			×										
	Dizziness						×							
	Red eyes		×											
	Chills			×						×				
	Fever									×				×
	Reduced memory	×						×						
	Nervous, excited				×					×				
	Rambling speech				×									
	Hyperacute hearing								×					
	Red face				×									
	Increased urination				×									
	Fatigue										×	×		
	Tearing, runny nose													×
	Yawning													×

TABLE 15.2. ICD-10-CM Code Numbers for Substance Intoxication, Substance Withdrawal, Substance Use Disorder, and Substance-Induced Mental Disorders

Substance and use disorder (or not)	Substance use/intoxication/withdrawal			Substance-induced disorders										
	Just use	Intoxication	Withdrawal	Psychotic	Mood	Anxiety	OCD	Sleep	Sex	Delirium I	Delirium W	NCD major	NCD mild	Unspecified
Alcohol F10				I/W ^a	I/W	I/W		I/W	I/W					.99
w/mild use dis.	.10	.129		.159	.14	.180		.182	.181	.121	.121			
w/mod./severe use dis.	.20	.229	.239 (.232) ^b	.259	.24	.280		.282	.281	.221	.231	.27 (.26) ^c	.288	
No use disorder		.929		.959	.94	.980		.982	.981	.921	.921	.97 (.96) ^c	.988	
Caffeine F15						I		I/W						.99
w/mild use dis.						.180		.182						
w/mod./severe use dis.						.280		.282						
No use disorder		.929	.93			.980		.982						
Cannabis F12				I		I		I/W						.99
w/mild use dis.	.10	.129 (.122) ^b		.159		.180		.188		.121				
w/mod./severe use dis.	.20	.229 (.222) ^b		.259		.280		.288		.221				
No use disorder		.929 (.922) ^b		.959		.980		.988		.921				

(cont.)

Note. OK, I confess: This table's *really* fussy. You can just accept the fuss, or you could try to understand the original DSM-5 explanations. That way lies madness. Abbreviations in column heads: OCD, obsessive-compulsive and related disorder; Sleep, sleep disorder; Sex, sexual dysfunction; Delirium I, intoxication delirium; Delirium W, withdrawal delirium; NCD, neurocognitive disorder.

^aI, occurs during intoxication; W, occurs during withdrawal; I/W, either.

^bTwo numbers in a cell indicate separate codes for intoxication or withdrawal without (or with) perceptual disturbances.

^cAlcohol-induced NCD can occur without or with confabulation and amnesic syndrome. The number in parentheses is for amnesic-confabulatory type.

TABLE 15.2 (*cont.*)

Substance and use disorder (or not)	Substance use/intoxication/ withdrawal			Substance-induced disorders										
	Just use	Intoxication	Withdrawal	Psychotic	Mood	Anxiety	OCD	Sleep	Sex	Delirium I	Delirium W	NCD major	NCD mild	Unspecified
Phencyclidine F16				I	I	I								.99
w/mild use dis.	.10	.129		.159	.14	.180				.121				
w/mod./severe use dis.	.20	.229		.259	.24	.280				.221				
No use disorder		.929		.959	.94	.980				.921				
Other hallucinogens F16			.983 ^d	I	I	I								.99
w/mild use dis.	.10	.129		.159	.14	.180				.121				
w/mod./severe use dis.	.20	.229		.259	.24	.280				.221				
No use disorder		.929		.959	.94	.980				.921				
Inhalants F18				I	I	I								.99
w/mild use dis.	.10	.129		.159	.14 ^e	.180				.121		.17	.188	
w/mod./severe use dis.	.20	.229		.259	.24 ^e	.280				.221		.27	.288	
No use disorder		.929		.959	.94 ^e	.980				.921		.97	.988	
Opioids F11					I	W		I/W	I/W					.99
w/mild use dis.	.10	.129 (.122) ^b			.14 ^e	.188		.182	.181	.121	.121			
w/mod./severe use dis.	.20	.229 (.222) ^b	.23		.24 ^e	.288		.282	.281	.221	.23 ^f			
No use disorder		.929 (.922) ^b			.94 ^e	.988		.982	.981	.921	.921			
Sed./hyp./anx. F13				I/W	I/W	W		I/W	I/W					.99
w/mild use dis.	.10	.129		.159	.14	.180		.182	.181	.121	.121			

TABLE 15.2 (*cont.*)

w/mod./severe use dis.	.20	.229	.239 (.232) ^b	.259	.24	.280		.282	.281	.221	.231	.27	.288	
No use disorder		.929		.959	.94	.980		.982	.981	.921	.921	.97	.988	
Amphetamines/other stimulants F15				I	I/W	I/W	I	I/W						.99
w/mild use dis.	.10	.129 (.122) ^b		.159	.14	.180	.188	.182	.181	.121				
w/mod./severe use dis.	.20	.229 (.222) ^b	.23	.259	.24	.280	.288	.282	.281	.221				
No use disorder		.929 (.922) ^b		.959	.94	.980	.988	.982	.981	.921				
Cocaine F14				I	I/W	I/W	I	I/W						.99
w/mild use dis.	.10	.129 (.122) ^b		.159	.14	.180	.188	.182	.181	.121				
w/mod./severe use dis.	.20	.229 (.222) ^b	.23	.259	.24	.280	.288	.282	.281	.221				
No use disorder		.929 (.922) ^b		.959	.94	.980	.988	.982	.981	.921				
Tobacco F17								W						.209
w/mild use dis.	Z72.0													
w/mod./severe use dis.	.200		.203					.208						
No use disorder														
Other (unknown) F19				I/W	I/W	I/W	I	I/W	I/W					.99
w/mild use dis.	.10	.129		.159	.14	.180	.188	.182	.181	.121	.121	.17	.188	
w/mod./severe use dis.	.20	.229	.239	.259	.24	.280	.288	.282	.281	.221	.231	.27	.288	
No use disorder		.929		.959	.94	.980	.988	.982	.981	.921	.921	.97	.988	

^bTwo numbers in a cell indicate separate codes for intoxication or withdrawal without (or with) perceptual disturbances.

^dThis code is for hallucinogen persisting perception disorder (see p. 433); I couldn't find any better place to put it. Tables are great, but they do have limitations.

^eFor inhalants and opioids, you can only have depressive mood disorder, not bipolar ones.

^fYes, I realize that opioid withdrawal delirium has only two numbers after the decimal. Deal with it.

TABLE 16.1a. Coding for Major and Mild NCDs: Five Etiologies

Etiology ^a	Major NCD due to {probable}{possible} [etiology] ^b		Mild NCD {with} {without} behavioral disturbance ^c
	With behavioral disturbance	Without behavioral disturbance	
Alzheimer's disease	G30.9 [331.0] Alzheimer's disease		(No medical disorder code) — G31.84 [331.83] Mild NCD due to [etiology]
	F02.81 [294.11]	F02.80 [294.10]	
Frontotemporal lobar degeneration	G31.09 [331.19] Frontotemporal disease		
	F02.81 [294.11]	F02.80 [294.10]	
Lewy body disease	G31.83 [331.82] Lewy body disease		State whether {probable} or {possible} and whether the NCD is {with} {without} behavioral disturbance
	F02.81 [294.11]	F02.80 [294.10]	
Parkinson's disease	G20 [332.0] Parkinson's disease		
	F02.81 [294.11]	F02.80 [294.10]	
Vascular disease	—		
	F01.51 [290.40]	F01.50 [290.40]	

^aOnly these five etiologies for NCD (Table 16.1a) include probable and possible levels of certainty.

^bUnder revised rules (not printed in DSM-5), we must state in words whether the major NCD is due to *probable* or *possible* disease—the numbering is the same. The “Recording Major and Mild Neurocognitive Disorders” section of the text gives examples of how names should be listed.

^cIn mild NCD, you don't include the suspected causative factor (for example, Alzheimer's disease). That's because the level of certainty about cause is so much lower in mild than in major NCD. Also, there's no code number for behavioral disturbance, though you should indicate it in the verbiage. Finally, for each Table 16.1a mild NCD, you can add verbiage indicating whether it is probable or possible; however, there is no difference in the code number.

TABLE 16.1b. Coding for Major and Mild NCDs: All Other Etiologies

Etiology	Major NCD		Mild NCD ^c
	With behavioral disturbance	Without behavioral disturbance	
Traumatic brain injury	S06.2X9S [907.0] ^d		(No medical disorder code) — G31.84 [331.83] Mild NCD due to [etiology]
	F02.81 [294.11]	F02.80 [294.10]	
HIV disease	B20 [042] HIV infection		G31.84 [331.83] Mild NCD due to [etiology]
	F02.81 [294.11]	F02.80 [294.10]	
Huntington’s disease	G10 [333.4] Huntington’s disease		No statement of {probable}{possible}.
	F02.81 [294.11]	F02.80 [294.10]	
Prion disease	A81.9 [046.79] Prion disease		You can state {with} {without} behavioral disturbance.
	F02.81 [294.11]	F02.80 [294.10]	
Other medical condition	## [##] ICD-10 name [ICD-9 name]		
	F02.81 [294.11]	F02.80 [294.10]	
Substance/medication-induced	See Table 15.2 (p. 465)		
Multiple etiologies ^e	(Multiple sets of numbers and names)		
	F02.81 [294.11]	F02.80 [294.10]	

^dThe two code titles for TBI were just too long to squeeze into a table: S06.2X9S = diffuse traumatic brain injury with loss of consciousness of unspecified duration, sequela; 907.0 = late effect of intracranial injury without skull fracture.

^eIf a vascular disorder contributes to the multiple causation, list it along with the multiple-causes bit. Don't ask me why; it's just another rule.

Physical Disorders That Affect Mental Diagnosis

Medical disorder	Anx	Depr	Mania	Psych	Delir	Dem	Cata	Pers chg	Erect	Ejac	Sex Pain	Anorg
Cardiovascular												
Anemia	x											
Angina	x											
Aortic aneurysm									x			
Arrhythmia	x				x							
A-V malformation							x					
Congestive heart failure	x				x				x			
Hyperthyroidism	x				x							
Myocardial infarction	x											
Mitral valve prolapse	x											
Paroxysmal atrial tachycardia	x											
Shock	x				x							
Endocrine												
Addison's (adrenal insufficiency)	x	x			x							
Carcinoid tumor	x											
Cushing's disease	x	x	x		x			x				
Diabetes	x								x			x
Hyperparathyroidism							x					
Hyperthyroidism	x	x	x		x				x			
Hypoglycemia	x	x			x	x						
Hypoparathyroidism	x	x										
Hypothyroidism	x	x		x		x		x	x			x
Inappropriate ADH secretion					x							
Klinefelter's syndrome									x			
Menopause	x										x	
Pancreatic tumor		x										
Pheochromocytoma	x											
Premenstrual syndrome	x											
Hyperprolactinemia												x

(cont.)

Note. Key to column heads: Anx, anxiety; Depr, depression; Psych, psychosis; Delir, delirium; Dem, dementia (major neurocognitive disorder); Cata, catatonia symptoms; Pers chng, personality change; Erect, erectile dysfunction; Ejac, ejaculatory dysfunction; Sex pain, sexual pain syndromes (male or female); anorg, anorgasmia.

Physical Disorders That Affect Mental Diagnosis (cont.)

Medical disorder	Anx	Depr	Mania	Psych	Delir	Dem	Cata	Pers chg	Erect	Ejac	Sex Pain	Anorg
Infections												
AIDS	x	x	x			x		x				
Brain abscess					x							
Subacute bacterial endocarditis	x											
Systemic infection	x				x							
Urinary tract infection					x							
Vaginitis											x	
Viral infections		x										
Toxicity												
Aminophylline					x							
Antidepressants	x			x	x				x	x		x
Aspirin intolerance	x											
Bromide				x								
Cimetidine					x							
Digitalis					x							
Disulfiram				x	x							
Estrogens									x			
Fluorides							x					
Heavy metals	x	x										
Herbicides									x			
L-dopa					x							
Steroids	x			x								
Theophylline	x											
Metabolic												
Electrolyte imbalance	x				x							
Hepatic disease		x			x	x			x			
Hypercarbia					x							
Hyperventilation	x											
Hypocalcemia	x											
Hypokalemia	x	x										
Hypoxia					x							
Malnutrition		x			x				x			
Porphyria	x							x				
Renal disease	x			x	x				x			

Physical Disorders That Affect Mental Diagnosis (cont.)

Medical disorder	Anx	Depr	Mania	Psych	Delir	Dem	Cata	Pers chg	Erect	Ejac	Sex Pain	Anorg
Neurological												
Alzheimer's/ frontotemporal						×						
Amyotrophic lateral sclerosis						×			×			
Brain tumor	×			×	×	×	×	×				
Cerebellar degeneration						×						
Cerebrovascular accident	×					×		×				
Creutzfeldt-Jakob						×						
Encephalitis	×				×	×	×					
Epilepsy, seizures	×	×			×	×		×				
Extradural hematoma					×							
Head trauma	×				×	×	×	×				
Huntington's	×	×				×		×				
Intracerebral hematoma					×							
Ménière's	×											
Meningitis					×							
Migraine	×											
Multiple sclerosis	×	×	×			×		×	×			
Multi-infarct						×						
Neurosyphilis			×		×	×		×	×			
Normal-pressure hydrocephalus						×						
Parkinson's						×			×			×
Post-anoxia						×						
Progressive supranuclear palsy						×						
Spinal cord disease									×			
Subarachnoid hemorrhage					×		×					
Subdural hematoma					×	×	×					
Transient ischemic attack	×				×							
Wilson's disease	×							×				

(cont.)

Physical Disorders That Affect Mental Diagnosis (cont.)

Medical disorder	Anx	Depr	Mania	Psych	Delir	Dem	Cata	Pers chg	Erect	Ejac	Sex Pain	Anorg
Pulmonary												
Asthma	x											
Chronic obstructive lung disease	x				x				x			
Hyperventilation	x											
Pulmonary embolus	x											
Other												
Collagen	x											
Endometriosis											x	
Pelvic disease									x		x	x
Peyronie's disease									x			
Postoperative states					x							
Systemic lupus erythematosus	x	x		x	x			x				
Temporal arteritis	x											
Vitamin deficiency												
B ¹² (pernicious anemia)	x	x				x						
Folic acid						x						
Niacin (pellagra)					x	x						
Thiamin (B ¹) (Wernicke's)					x	x						