

## Disclaimer

The following report(s) provides findings from an FDA-initiated query using Sentinel. While Sentinel queries may be undertaken to assess potential medical product safety risks, they may also be initiated for various other reasons. Some examples include determining a rate or count of an identified health outcome of interest, examining medical product use, exploring the feasibility of future, more detailed analyses within Sentinel, and seeking to better understand Sentinel capabilities.

Data obtained through Sentinel are intended to complement other types of evidence such as preclinical studies, clinical trials, postmarket studies, and adverse event reports, all of which are used by FDA to inform regulatory decisions regarding medical product safety. The information contained in this report is provided as part of FDA's commitment to place knowledge acquired from Sentinel in the public domain as soon as possible. Any public health actions taken by FDA regarding products involved in Sentinel queries will continue to be communicated through existing channels.

FDA wants to emphasize that the fact that FDA has initiated a query involving a medical product and is reporting findings related to that query does not mean that FDA is suggesting health care practitioners should change their prescribing practices for the medical product or that patients taking the medical product should stop using it. Patients who have questions about the use of an identified medical product should contact their health care practitioners.

The following report contains a description of the request, request specifications, and results from the modular program run(s).

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## Overview for Request: cder\_mpl1r\_wp223

**Request ID:** cder\_mpl1r\_wp223\_ndsp\_v01

**Request Description:** In this report we examined utilization and dosage of loop diuretics in the Sentinel Distributed Database (SDD).

**Sentinel Routine Querying Module:** Cohort Identification and Descriptive Analysis (CIDA) module, version 11.1.0.

**Data Source:** We distributed this query to six Sentinel Data Partners on November 22, 2021. The study period included data from January 1, 2000 through the most recent available data (March 31, 2021). Please see Appendix A for a list of dates of available data for each Data Partner.

**Study Design:** We identified individuals aged over 18 with prevalent use of loop diuretics, including bumetanide, furosemide, torsemide, and ethacrynic acid. We further refined the cohorts by requiring pre-cohort entry enrollment, and excluding individuals with a history of cancer. We also identified individuals with incident use of loop diuretics among individuals without a history of cancer, with pre-cohort entry enrollment required. We then characterized use, dispensing, and dosage patterns by examining all episodes of use occurring after the initial exposure. This is a Type 5 analysis in the Query Request Package (QRP) documentation.

**Exposures of Interest:** We defined the exposures of interest, loop diuretics, using outpatient dispensing data and National Drug Codes (NDCs). The specific loop diuretics of interest in this request were oral bumetanide, furosemide, torsemide, and ethacrynic acid. For all cohorts, we included all valid exposure episodes during the query period; only the first valid episode's incidence was assessed using the washout period. For the cohorts that required a washout (see cohort eligibility criteria below) we assessed incidence with respect to all loop diuretics in the 365 days before the first valid qualifying dispensing (index), regardless of which drug was the index exposure. We defined dosage for loop diuretics as Oral Furosemide Equivalents<sup>1</sup> as follows:

1 mg oral bumetanide = 80mg oral furosemide

1 mg oral torsemide = 4mg oral furosemide

1 mg oral ethacrynic acid = .8 mg oral furosemide

Please see Appendix B for a list of generic and brand names of medical products used to define the exposures and washout in this request.

**Cohort Eligibility Criteria:** For each of the loop diuretics we assessed the following cohorts with varying cohort eligibility criteria.

- 1) Prevalent Use: No additional cohort criteria applied
- 2) Prevalent Use with Exclusion Criteria: We required 365 days of continuous medical and drug enrollment before index with allowable gaps in coverage of 45 days, and required there be no evidence of cancer (including cancer diagnoses, radiation, or chemotherapy) in the 365 days before index.
- 3) New Use with Exclusion Criteria: We required 365 days of continuous medical and drug enrollment before index with allowable gaps in coverage of 45 days, and that there be no evidence of any loop diuretics or cancer (including cancer diagnoses, radiation, or chemotherapy) in the 365 days before index.

We included the following age groups in each of the above cohorts: 18-44, 45-64, 65-74, 75-84, and 85+ years.

Please see Appendices C and D for a list of the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) diagnosis and procedure codes, and generic and brand names of medical products used to define the inclusion and exclusion criteria in this request.

### Overview for Request: cder\_mpl1r\_wp223

**Episode Creation:** We created exposure episodes based on the number of days of product supplied per dispensing in the outpatient pharmacy dispensing data. We did not bridge together episodes. These “as treated” episodes are the time during which we assessed for dose. Follow-up began on the day of the index dispensing and continued until the first occurrence of the following:

1. Episodes Censored at Treatment Cessation: disenrollment; death; the end of the data provided by each Data Partner; the end of the query period; or end of treatment.
2. Episodes Censored at Treatment Cessation and Within-Class Switch: disenrollment; death; the end of the data provided by each Data Partner; the end of the query period; end of treatment; or initiation of treatment of any other loop diuretic.

We assessed exposure duration using the following categories:

- 0-<1 years (0-364 days)
- 1-<2 years (365-729 days)
- 2-<3 years (730-1094 days)
- 3-<4 years (1095-1459 days)
- 4-<5 years (1460-1824 days)
- 5-<6 years (1825-2189 days)
- 6-<7 years (2190-2554 days)
- 7+ years (2555+ days)

**Baseline Characteristics:** For the cohorts that required continuous medical and drug enrollment before index, we assessed the following characteristics in the 365 days prior to the index date of loop diuretic use: age, year, sex, Charlson/Elixhauser combined comorbidity score,<sup>2</sup> health service and drug utilization, and the following characteristics defined using the CMS Chronic Conditions Warehouse (CCW):<sup>3</sup> acute myocardial infarction, alzheimer’s disease and related conditions, atrial fibrillation, diabetes, heart failure, hyperlipidemia, hypertension, depression, ischemic heart disease, rheumatoid arthritis/osteoarthritis, stroke/TIA, breast cancer, colorectal cancer, prostate cancer, lung cancer, endometrial cancer, acquired hypothyroidism, anemia, asthma, benign prostatic hyperplasia, chronic kidney disease, COPD and bronchiectasis. Please see Appendix E for a list of ICD-9-CM and ICD-10-CM diagnosis codes used to define baseline characteristics in this request. Please also see Appendix G for the care settings used in evaluating these baseline characteristics.

**Please see Appendices F and H for the specifications defining parameters in this request and design diagrams of cohort entry requirements.**

**Limitations:** Algorithms used to define exposures and inclusion/exclusion criteria are imperfect; thus, it is possible that there may be misclassification. Therefore, data should be interpreted with this limitation in mind.

**Notes:** Please contact the Sentinel Operations Center ([info@sentinel-system.org](mailto:info@sentinel-system.org)) for questions and to provide comments/suggestions for future enhancements to this document. For more information on Sentinel's routine querying modules, please refer to the documentation (<https://dev.sentinel-system.org/projects/SENTINEL/repos/sentinel-routine-querying-tool-documentation/browse>).

<sup>1</sup>Anisman SD, Erickson SB, Morden NE. How to prescribe loop diuretics in oedema. *BMJ*. 2019 Feb 21;364:l359.

<sup>2</sup>Gagne JJ, Glynn RJ, Avorn J, Levin R, Schneeweiss S. A combined comorbidity score predicted mortality in elderly patients better than existing scores. *J Clin Epidemiol*. 2011;64(7):749-759

<sup>3</sup>Chronic Conditions Data Warehouse. Condition Categories - Chronic Conditions Data Warehouse. <https://www.ccwdata.org/web/guest/condition-categories>.



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**Glossary of Terms for Analyses Using  
Cohort Identification and Descriptive Analysis (CIDA) Module\***

**Amount Supplied** - number of units (pills, tablets, vials) dispensed. Net amount per NDC per dispensing.

**Blackout Period** - number of days at the beginning of a treatment episode that events are to be ignored. If an event occurs during the blackout period, the episode is excluded.

**Care Setting** - type of medical encounter or facility where the exposure, event, or condition code was recorded. Possible care settings include: Inpatient Hospital Stay (IP), Non-Acute Institutional Stay (IS), Emergency Department (ED), Ambulatory Visit (AV), and Other Ambulatory Visit (OA). For laboratory results, possible care settings include: Emergency Department (E), Home (H), Inpatient (I), Outpatient (O), or Unknown or Missing (U). The Care Setting, along with the Principal Diagnosis Indicator (PDX), forms the Care Setting/PDX parameter.

**Ambulatory Visit (AV)** - includes visits at outpatient clinics, same-day surgeries, urgent care visits, and other same-day ambulatory hospital encounters, but excludes emergency department encounters.

**Emergency Department (ED)** - includes ED encounters that become inpatient stays (in which case inpatient stays would be a separate encounter). Excludes urgent care visits.

**Inpatient Hospital Stay (IP)** - includes all inpatient stays, same-day hospital discharges, hospital transfers, and acute hospital care where the discharge is after the admission date.

**Non-Acute Institutional Stay (IS)** - includes hospice, skilled nursing facility (SNF), rehab center, nursing home, residential, overnight non-hospital dialysis and other non-hospital stays.

**Other Ambulatory Visit (OA)** - includes other non overnight AV encounters such as hospice visits, home health visits, skilled nursing facility visits, other non-hospital visits, as well as telemedicine, telephone and email consultations.

**Charlson/Elixhauser Combined Comorbidity Score** - calculated based on comorbidities observed during a requester-defined window around the exposure episode start date (e.g., in the 183 days prior to index).

**Code Days** - the minimum number of times the diagnosis must be found during the evaluation period in order to fulfill the algorithm to identify the corresponding patient characteristic.

**Cohort Definition (drug/exposure)** - indicates how the cohort will be defined: 01: Cohort includes only the first valid treatment episode during the query period; 02: Cohort includes all valid treatment episodes during the query period; 03: Cohort includes all valid treatment episodes during the query period until an event occurs.

**Computed Start Marketing Date** - represents the first observed dispensing date among all valid users within a GROUP (scenario) within each Data Partner site.

**Days Supplied** - number of days supplied for all dispensings in qualifying treatment episodes.

**Eligible Members** - number of members eligible for an incident treatment episode (defined by the drug/exposure and event washout periods) with drug and medical coverage during the query period.

**Enrollment Gap** - number of days allowed between two consecutive enrollment periods without breaking a "continuously enrolled" sequence.

**Episodes** - treatment episodes; length of episode is determined by days supplied in one dispensing or consecutive dispensings bridged by the episode gap.

**Episode Gap** - number of days allowed between two (or more) consecutive exposures (dispensings/procedures) to be considered the same treatment episode.

**Event Deduplication** - specifies how events are counted by the Modular Program (MP) algorithm: 0: Counts all occurrences of a health outcome of interest (HOI) during an exposure episode; 1: de-duplicates occurrences of the same HOI code and code type on the same day; 2: de-duplicates occurrences of the same HOI group on the same day (e.g., de-duplicates at the group level).

**Exposure Episode Length** - number of days after exposure initiation that is considered "exposed time."

**Exposure Extension Period** - number of days post treatment period in which the outcomes/events are counted for a treatment episode. Extensions are added after any episode gaps have been bridged.

**Lookback Period** - number of days wherein a member is required to have evidence of pre-existing condition (diagnosis/procedure/drug dispensing).

**Maximum Episode Duration** - truncates exposure episodes after a requester-specified number of exposed days. Applied after any gaps are bridged and extension days added to the length of the exposure episode.

**Member-Years** - sum of all days of enrollment with medical and drug coverage in the query period preceded by an exposure washout period all divided by 365.25.

**Minimum Days Supplied** - specifies a minimum number of days in length of the days supplied for the episode to be considered.

**Minimum Episode Duration** - specifies a minimum number of days in length of the episode for it to be considered. Applied after any gaps are bridged and extension days added to the length of the exposure episode.

**Monitoring Period** - used to define time periods of interest for both sequential analysis and simple cohort characterization requests.

**Principal Diagnosis (PDX)** - diagnosis or condition established to be chiefly responsible for admission of the patient to the hospital. 'P' = principal diagnosis, 'S' = secondary diagnosis, 'X' = unspecified diagnosis, '.' = blank. Along with the Care Setting values, forms the Caresetting/PDX parameter.

**Query Period** - period in which the modular program looks for exposures and outcomes of interest.

**Switch Evaluation Step Value** - value used to differentiate evaluation step. Each switch pattern can support up to 2 evaluation steps (0 = switch pattern evaluation start; 1 = first evaluation; 2 = second evaluation).

**Switch Gap Inclusion Indicator** - indicator for whether gaps in treatment episodes that are included in a switch episode will be counted as part of the switch episode duration.

**Switch Pattern Cohort Inclusion Date** - indicates which date to use for inclusion into the switch pattern cohort of interest as well as optionally as the index date of the treatment episode initiating the switch pattern. Valid options are the product approval date, product marketing date, other requester defined date, or computed start marketing date.

**Switch Pattern Cohort Inclusion Strategy** - indicates how the switch pattern cohort inclusion date will be used: 01: used only as a switch cohort entry date. First treatment episode dispensing date is used as index for computing time to first switch; 02: used as switch cohort entry date and as initial switch step index date for computing time to first switch.

**Treatment Episode Truncation Indicator** - indicates whether the exposure episode will be truncated at the occurrence of a requester-specified code.

**Washout Period (drug/exposure)** - number of days a user is required to have no evidence of prior exposure (drug dispensing/procedure) and continuous drug and medical coverage prior to an incident treatment episode.

**Washout Period (event/outcome)** - number of days a user is required to have no evidence of a prior event (procedure/diagnosis) and continuous drug and medical coverage prior to an incident treatment episode.

**Years at Risk** - number of days supplied plus any episode gaps and exposure extension periods all divided by 365.25.

\*all terms may not be used in this report



**Table 1a. Aggregated Characteristics of Prevalent Bumetanide in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Patient Characteristics</b>	<b>Number</b>	<b>Percent</b>
Unique patients	1,292,089	N/A
<b>Demographic Characteristics</b>	<b>Mean</b>	<b>Standard Deviation</b>
Age (years)	72.3	12.7
	<b>Number</b>	<b>Percent</b>
Age		
18-44 years	47,401	3.7%
45-64 years	272,052	21.1%
65-74 years	390,695	30.2%
75-84 years	352,405	27.3%
≥ 85 years	229,536	17.8%
Sex		
Female	736,964	57.0%
Male	555,125	43.0%
Race <sup>1</sup>		
American Indian or Alaska Native	4,062	0.3%
Asian	12,012	0.9%
Black or African American	146,532	11.3%
Native Hawaiian or Other Pacific Islander	1,269	0.1%
Unknown	205,095	15.9%
White	923,119	71.4%
Hispanic origin		
Yes	25,029	1.9%
No	1,056,321	81.8%
Unknown	210,739	16.3%
Year		
2000	2,760	0.2%
2001	1,702	0.1%
2002	2,151	0.2%
2003	1,898	0.1%
2004	1,978	0.2%
2005	1,471	0.1%
2006	9,837	0.8%
2007	12,000	0.9%
2008	22,093	1.7%
2009	15,146	1.2%
2010	169,029	13.1%
2011	80,861	6.3%
2012	80,740	6.2%
2013	106,328	8.2%
2014	83,925	6.5%
2015	96,773	7.5%
2016	105,326	8.2%
2017	111,552	8.6%
2018	108,549	8.4%
2019	125,120	9.7%
2020	121,982	9.4%
2021	30,868	2.4%

**Table 1a. Aggregated Characteristics of Prevalent Bumetanide in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Medical Product Use (365 days prior to index)</b>	<b>Mean</b>	<b>Standard Deviation</b>
Mean number of filled prescriptions	46.4	46.5
Mean number of generics dispensed	12.4	8.4
Mean number of unique drug classes dispensed	11.2	7.2
<b>Health Service Utilization Intensity Metrics (365 days prior to index)</b>		
Mean number of ambulatory encounters	24.6	28.3
Mean number of emergency room encounters	1.0	2.3
Mean number of inpatient hospital encounters	1.1	1.6
Mean number of non-acute institutional encounters	0.3	0.9
Mean number of other ambulatory encounters	15.6	25.0

<sup>1</sup>Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

**Table 1b. Aggregated Characteristics of Prevalent Furosemide in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Patient Characteristics</b>	<b>Number</b>	<b>Percent</b>
Unique patients	16,261,347	N/A
<b>Demographic Characteristics</b>	<b>Mean</b>	<b>Standard Deviation</b>
Age (years)	71.4	13.0
<b>Age</b>	<b>Number</b>	<b>Percent</b>
18-44 years	759,002	4.7%
45-64 years	3,612,234	22.2%
65-74 years	4,973,357	30.6%
75-84 years	4,130,467	25.4%
≥ 85 years	2,786,287	17.1%
<b>Sex</b>		
Female	9,699,503	59.6%
Male	6,561,844	40.4%
<b>Race<sup>1</sup></b>		
American Indian or Alaska Native	69,576	0.4%
Asian	196,081	1.2%
Black or African American	1,716,847	10.6%
Native Hawaiian or Other Pacific Islander	15,835	0.1%
Unknown	3,171,705	19.5%
White	11,091,303	68.2%
<b>Hispanic origin</b>		
Yes	309,690	1.9%
No	12,608,537	77.5%
Unknown	3,343,120	20.6%
<b>Year</b>		
2000	86,231	0.5%
2001	29,292	0.2%
2002	27,866	0.2%
2003	25,242	0.2%
2004	26,037	0.2%
2005	18,852	0.1%
2006	201,024	1.2%
2007	240,358	1.5%
2008	421,883	2.6%
2009	268,519	1.7%
2010	3,110,084	19.1%
2011	1,177,460	7.2%
2012	1,103,291	6.8%
2013	1,337,619	8.2%
2014	1,195,646	7.4%
2015	1,167,235	7.2%
2016	1,151,303	7.1%
2017	1,108,391	6.8%
2018	1,079,022	6.6%
2019	1,128,910	6.9%
2020	1,088,881	6.7%
2021	268,201	1.6%

**Table 1b. Aggregated Characteristics of Prevalent Furosemide in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Medical Product Use (365 days prior to index)</b>	<b>Mean</b>	<b>Standard Deviation</b>
Mean number of filled prescriptions	29.6	34.7
Mean number of generics dispensed	8.6	6.9
Mean number of unique drug classes dispensed	7.8	5.9
<b>Health Service Utilization Intensity Metrics (365 days prior to index)</b>		
Mean number of ambulatory encounters	16.7	22.1
Mean number of emergency room encounters	0.7	1.7
Mean number of inpatient hospital encounters	0.6	1.0
Mean number of non-acute institutional encounters	0.2	0.6
Mean number of other ambulatory encounters	8.3	17.4

<sup>1</sup>Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

**Table 1c. Aggregated Characteristics of Prevalent Torsion in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Patient Characteristics</b>	<b>Number</b>	<b>Percent</b>
Unique patients	1,270,424	N/A
<b>Demographic Characteristics</b>	<b>Mean</b>	<b>Standard Deviation</b>
Age (years)	72.7	12.4
<b>Age</b>	<b>Number</b>	<b>Percent</b>
18-44 years	41,904	3.3%
45-64 years	251,100	19.8%
65-74 years	388,365	30.6%
75-84 years	360,413	28.4%
≥ 85 years	228,642	18.0%
<b>Sex</b>		
Female	701,511	55.2%
Male	568,913	44.8%
<b>Race<sup>1</sup></b>		
American Indian or Alaska Native	4,513	0.4%
Asian	9,715	0.8%
Black or African American	140,275	11.0%
Native Hawaiian or Other Pacific Islander	1,089	0.1%
Unknown	205,584	16.2%
White	909,248	71.6%
<b>Hispanic origin</b>		
Yes	16,510	1.3%
No	1,027,145	80.9%
Unknown	226,769	17.8%
<b>Year</b>		
2000	1,809	0.1%
2001	2,228	0.2%
2002	2,516	0.2%
2003	2,195	0.2%
2004	2,145	0.2%
2005	1,322	0.1%
2006	12,966	1.0%
2007	11,998	0.9%
2008	24,719	1.9%
2009	14,522	1.1%
2010	155,410	12.2%
2011	65,569	5.2%
2012	66,661	5.2%
2013	88,371	7.0%
2014	91,381	7.2%
2015	90,452	7.1%
2016	98,076	7.7%
2017	107,007	8.4%
2018	117,565	9.3%
2019	137,804	10.8%
2020	138,226	10.9%
2021	37,482	3.0%

**Table 1c. Aggregated Characteristics of Prevalent Torsemide in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Medical Product Use (365 days prior to index)</b>	<b>Mean</b>	<b>Standard Deviation</b>
Mean number of filled prescriptions	44.5	44.6
Mean number of generics dispensed	12.1	8.2
Mean number of unique drug classes dispensed	10.9	7.0
<b>Health Service Utilization Intensity Metrics (365 days prior to index)</b>		
Mean number of ambulatory encounters	24.7	27.6
Mean number of emergency room encounters	0.9	2.1
Mean number of inpatient hospital encounters	1.0	1.5
Mean number of non-acute institutional encounters	0.3	0.8
Mean number of other ambulatory encounters	13.6	22.8

<sup>1</sup>Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

**Table 1d. Aggregated Characteristics of Prevalent Ethacrynic Acid in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Patient Characteristics</b>	<b>Number</b>	<b>Percent</b>
Unique patients	26,666	N/A
<b>Demographic Characteristics</b>	<b>Mean</b>	<b>Standard Deviation</b>
Age (years)	73.0	12.5
	<b>Number</b>	<b>Percent</b>
Age		
18-44 years	1,105	4.1%
45-64 years	5,097	19.1%
65-74 years	7,451	27.9%
75-84 years	7,481	28.1%
≥ 85 years	5,532	20.7%
Sex		
Female	19,355	72.6%
Male	7,311	27.4%
Race <sup>1</sup>		
American Indian or Alaska Native	*****	*****
Asian	228	0.9%
Black or African American	1,669	6.3%
Native Hawaiian or Other Pacific Islander	*****	*****
Unknown	5,893	22.1%
White	18,793	70.5%
Hispanic origin		
Yes	257	1.0%
No	19,799	74.2%
Unknown	6,610	24.8%
Year		
2000	130	0.5%
2001	60	0.2%
2002	21	0.1%
2003	*****	*****
2004	30	0.1%
2005	*****	*****
2006	268	1.0%
2007	296	1.1%
2008	770	2.9%
2009	600	2.3%
2010	3,999	15.0%
2011	2,553	9.6%
2012	2,560	9.6%
2013	3,271	12.3%
2014	2,598	9.7%
2015	2,085	7.8%
2016	1,626	6.1%
2017	1,537	5.8%
2018	1,777	6.7%
2019	1,093	4.1%
2020	1,066	4.0%
2021	297	1.1%

**Table 1d. Aggregated Characteristics of Prevalent Ethacrynic Acid in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Medical Product Use (365 days prior to index)</b>	<b>Mean</b>	<b>Standard Deviation</b>
Mean number of filled prescriptions	43.2	41.6
Mean number of generics dispensed	12.7	8.3
Mean number of unique drug classes dispensed	11.2	7.0
<b>Health Service Utilization Intensity Metrics (365 days prior to index)</b>		
Mean number of ambulatory encounters	26.5	25.1
Mean number of emergency room encounters	0.8	1.9
Mean number of inpatient hospital encounters	0.8	1.3
Mean number of non-acute institutional encounters	0.2	0.7
Mean number of other ambulatory encounters	12.3	21.9

<sup>1</sup>Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.



**Table 1e. Aggregated Characteristics of New Bumetanide - Exclude Cancer, Chemotherapy, and Radiation and Washout Loop Diuretics in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Patient Characteristics</b>	<b>Number</b>	<b>Percent</b>
Unique patients	197,597	N/A
<b>Demographic Characteristics</b>	<b>Mean</b>	<b>Standard Deviation</b>
Age (years)	71.0	13.0
	<b>Number</b>	<b>Percent</b>
Age		
18-44 years	10,529	5.3%
45-64 years	44,511	22.5%
65-74 years	59,947	30.3%
75-84 years	51,261	25.9%
≥ 85 years	31,349	15.9%
Sex		
Female	119,701	60.6%
Male	77,896	39.4%
Race <sup>1</sup>		
American Indian or Alaska Native	632	0.3%
Asian	2,321	1.2%
Black or African American	22,218	11.2%
Native Hawaiian or Other Pacific Islander	227	0.1%
Unknown	37,551	19.0%
White	134,648	68.1%
Hispanic origin		
Yes	4,407	2.2%
No	155,186	78.5%
Unknown	38,004	19.2%
Year		
2000	0	0.0%
2001	329	0.2%
2002	445	0.2%
2003	411	0.2%
2004	441	0.2%
2005	300	0.2%
2006	87	0.0%
2007	1,196	0.6%
2008	2,158	1.1%
2009	3,907	2.0%
2010	3,985	2.0%
2011	16,806	8.5%
2012	16,365	8.3%
2013	17,656	8.9%
2014	15,402	7.8%
2015	17,656	8.9%
2016	18,520	9.4%
2017	19,373	9.8%
2018	18,486	9.4%
2019	20,142	10.2%
2020	19,085	9.7%
<b>Demographic Characteristics</b>	<b>Number</b>	<b>Percent</b>
2021	4,847	2.50%

**Table 1e. Aggregated Characteristics of New Bumetanide - Exclude Cancer, Chemotherapy, and Radiation and Washout Loop Diuretics in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Health Characteristics (365 days prior to index)</b>	<b>Mean</b>	<b>Standard Deviation</b>
Charlson/Elixhauser combined comorbidity score	3.8	3.3
	<b>Number</b>	<b>Percent</b>
Acute myocardial infarction	13,742	7.0%
Alzheimer's disease and related conditions	23,935	12.1%
Heart failure	76,755	38.8%
Depression	49,523	25.1%
Ischemic heart disease	89,502	45.3%
Rheumatoid arthritis/osteoarthritis	90,150	45.6%
Acquired hypothyroidism <sup>2</sup>	34,860	17.6%
Anemia	83,873	42.4%
Atrial fibrillation	47,206	23.9%
Diabetes	87,598	44.3%
Hyperlipidemia	119,121	60.3%
Hypertension	162,603	82.3%
Stroke/TIA	16,671	8.4%
Breast cancer	0	0.0%
Colorectal cancer	0	0.0%
Prostate cancer	0	0.0%
Lung cancer	0	0.0%
Endometrial cancer	0	0.0%
Acquired hypothyroidism	41,324	20.9%
Asthma	19,249	9.7%
Benign prostatic hyperplasia	16,393	8.3%
Chronic kidney disease	80,866	40.9%
COPD and bronchiectasis	51,378	26.0%
Osteoporosis	13,485	6.8%
<b>Medical Product Use (365 days prior to index)</b>	<b>Mean</b>	<b>Standard Deviation</b>
Mean number of filled prescriptions	47.5	39.2
Mean number of generics dispensed	11.8	6.7
Mean number of unique drug classes dispensed	10.6	5.7
<b>Health Service Utilization Intensity Metrics (365 days prior to index)</b>		
Mean number of ambulatory encounters	25.4	34.1
Mean number of emergency room encounters	1.0	2.1
Mean number of inpatient hospital encounters	0.8	1.3
Mean number of non-acute institutional encounters	0.3	0.8
Mean number of other ambulatory encounters	13.0	22.5

<sup>1</sup>Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

**Table 1f. Aggregated Characteristics of New Furosemide - Exclude Cancer, Chemotherapy, and Radiation and Washout Loop Diuretics in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Patient Characteristics</b>	<b>Number</b>	<b>Percent</b>
Unique patients	5,839,348	N/A
<b>Demographic Characteristics</b>	<b>Mean</b>	<b>Standard Deviation</b>
Age (years)	71.3	13.3
<b>Age</b>	<b>Number</b>	<b>Percent</b>
18-44 years	329,109	5.6%
45-64 years	1,297,222	22.2%
65-74 years	1,694,543	29.0%
75-84 years	1,490,057	25.5%
≥ 85 years	1,028,417	17.6%
<b>Sex</b>		
Female	3,638,136	62.3%
Male	2,201,212	37.7%
<b>Race<sup>1</sup></b>		
American Indian or Alaska Native	28,815	0.5%
Asian	91,098	1.6%
Black or African American	614,007	10.5%
Native Hawaiian or Other Pacific Islander	5,926	0.1%
Unknown	1,160,770	19.9%
White	3,938,732	67.5%
<b>Hispanic origin</b>		
Yes	124,101	2.1%
No	4,519,365	77.4%
Unknown	1,195,882	20.5%
<b>Year</b>		
2000	43	0.0%
2001	18,784	0.3%
2002	19,117	0.3%
2003	17,376	0.3%
2004	16,921	0.3%
2005	12,718	0.2%
2006	3,961	0.1%
2007	44,736	0.8%
2008	74,093	1.3%
2009	127,744	2.2%
2010	120,536	2.1%
2011	556,029	9.5%
2012	535,628	9.2%
2013	524,145	9.0%
2014	552,876	9.5%
2015	556,255	9.5%
2016	544,275	9.3%
2017	529,925	9.1%
2018	519,668	8.9%
2019	500,638	8.6%
2020	457,095	7.8%

**Table 1f. Aggregated Characteristics of New Furosemide - Exclude Cancer, Chemotherapy, and Radiation and Washout Loop Diuretics in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Demographic Characteristics</b>	<b>Number</b>	<b>Percent</b>
2021	106,785	1.8%
<b>Health Characteristics (365 days prior to index)</b>		
Charlson/Elixhauser combined comorbidity score	3.0	2.9
	<b>Number</b>	<b>Percent</b>
Acute myocardial infarction	292,422	5.0%
Alzheimer's disease and related conditions	785,864	13.5%
Heart failure	1,671,929	28.6%
Depression	1,451,825	24.9%
Ischemic heart disease	2,270,052	38.9%
Rheumatoid arthritis/osteoarthritis	2,550,079	43.7%
Acquired hypothyroidism <sup>2</sup>	957,497	16.4%
Anemia	2,030,332	34.8%
Atrial fibrillation	1,172,306	20.1%
Diabetes	2,169,315	37.1%
Hyperlipidemia	3,280,982	56.2%
Hypertension	4,545,693	77.8%
Stroke/TIA	456,237	7.8%
Breast cancer	0	0.0%
Colorectal cancer	0	0.0%
Prostate cancer	0	0.0%
Lung cancer	0	0.0%
Endometrial cancer	0	0.0%
Acquired hypothyroidism	1,103,484	18.9%
Asthma	533,622	9.1%
Benign prostatic hyperplasia	432,105	7.4%
Chronic kidney disease	1,632,161	28.0%
COPD and bronchiectasis	1,322,268	22.6%
Osteoporosis	427,598	7.3%
<b>Medical Product Use (365 days prior to index)</b>		
Mean number of filled prescriptions	47.2	39.0
Mean number of generics dispensed	11.3	6.5
Mean number of unique drug classes dispensed	10.1	5.5
<b>Health Service Utilization Intensity Metrics (365 days prior to index)</b>		
Mean number of ambulatory encounters	21.1	24.2
Mean number of emergency room encounters	0.9	2.1
Mean number of inpatient hospital encounters	0.7	1.1
Mean number of non-acute institutional encounters	0.2	0.7
Mean number of other ambulatory encounters	11.0	20.6

<sup>1</sup>Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

**Table 1g. Aggregated Characteristics of New Torsemide - Exclude Cancer, Chemotherapy, and Radiation and Washout Loop Diuretics in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Patient Characteristics</b>	<b>Number</b>	<b>Percent</b>
Unique patients	194,601	N/A
<b>Demographic Characteristics</b>	<b>Mean</b>	<b>Standard Deviation</b>
Age (years)	71.8	12.6
<b>Age</b>	<b>Number</b>	<b>Percent</b>
18-44 years	8,908	4.6%
45-64 years	40,716	20.9%
65-74 years	59,274	30.5%
75-84 years	53,785	27.6%
≥ 85 years	31,918	16.4%
<b>Sex</b>		
Female	115,480	59.3%
Male	79,121	40.7%
<b>Race<sup>1</sup></b>		
American Indian or Alaska Native	715	0.4%
Asian	2,107	1.1%
Black or African American	21,657	11.1%
Native Hawaiian or Other Pacific Islander	175	0.1%
Unknown	37,047	19.0%
White	132,900	68.3%
<b>Hispanic origin</b>		
Yes	3,080	1.6%
No	151,594	77.9%
Unknown	39,927	20.5%
<b>Year</b>		
2000	0	0.0%
2001	419	0.2%
2002	482	0.2%
2003	442	0.2%
2004	489	0.3%
2005	307	0.2%
2006	96	0.0%
2007	1,502	0.8%
2008	2,081	1.1%
2009	3,968	2.0%
2010	3,500	1.8%
2011	13,885	7.1%
2012	13,473	6.9%
2013	14,169	7.3%
2014	15,732	8.1%
2015	16,726	8.6%
2016	17,565	9.0%
2017	18,429	9.5%
2018	20,340	10.5%
2019	22,126	11.4%
2020	22,870	11.8%

**Table 1g. Aggregated Characteristics of New Torsemide - Exclude Cancer, Chemotherapy, and Radiation and Washout Loop Diuretics in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Demographic Characteristics</b>	<b>Number</b>	<b>Percent</b>
2021	6,000	3.1%
<b>Health Characteristics (365 days prior to index)</b>		
Charlson/Elixhauser combined comorbidity score	3.5	3.1
	<b>Number</b>	<b>Percent</b>
Acute myocardial infarction	9,933	5.1%
Alzheimer's disease and related conditions	19,924	10.2%
Heart failure	67,702	34.8%
Depression	43,776	22.5%
Ischemic heart disease	84,615	43.5%
Rheumatoid arthritis/osteoarthritis	86,143	44.3%
Acquired hypothyroidism <sup>2</sup>	34,282	17.6%
Anemia	75,893	39.0%
Atrial fibrillation	45,715	23.5%
Diabetes	84,093	43.2%
Hyperlipidemia	120,152	61.7%
Hypertension	162,028	83.3%
Stroke/TIA	14,710	7.6%
Breast cancer	0	0.0%
Colorectal cancer	0	0.0%
Prostate cancer	0	0.0%
Lung cancer	0	0.0%
Endometrial cancer	0	0.0%
Acquired hypothyroidism	39,377	20.2%
Asthma	17,752	9.1%
Benign prostatic hyperplasia	16,312	8.4%
Chronic kidney disease	78,407	40.3%
COPD and bronchiectasis	42,123	21.6%
Osteoporosis	12,964	6.7%
<b>Medical Product Use (365 days prior to index)</b>		
Mean number of filled prescriptions	46.1	37.1
Mean number of generics dispensed	11.6	6.5
Mean number of unique drug classes dispensed	10.4	5.5
<b>Health Service Utilization Intensity Metrics (365 days prior to index)</b>		
Mean number of ambulatory encounters	24.8	31.6
Mean number of emergency room encounters	0.8	1.9
Mean number of inpatient hospital encounters	0.7	1.1
Mean number of non-acute institutional encounters	0.2	0.7
Mean number of other ambulatory encounters	10.7	19.7

<sup>1</sup>Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

**Table 1h. Aggregated Characteristics of New Ethacrynic Acid - Exclude Cancer, Chemotherapy, and Radiation and Washout Loop Diuretics in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Patient Characteristics</b>	<b>Number</b>	<b>Percent</b>
Unique patients	5,253	N/A
<b>Demographic Characteristics</b>	<b>Mean</b>	<b>Standard Deviation</b>
Age (years)	70.3	13.1
	<b>Number</b>	<b>Percent</b>
Age		
18-44 years	363	6.9%
45-64 years	1,292	24.6%
65-74 years	1,405	26.7%
75-84 years	1,304	24.8%
≥ 85 years	889	16.9%
Sex		
Female	4,198	79.9%
Male	1,055	20.1%
Race <sup>1</sup>		
American Indian or Alaska Native	11	0.2%
Asian	39	0.7%
Black or African American	399	7.6%
Native Hawaiian or Other Pacific Islander	0	0.0%
Unknown	1,490	28.4%
White	3,314	63.1%
Hispanic origin		
Yes	47	0.9%
No	3,547	67.5%
Unknown	1,659	31.6%
Year		
2000	0	0.0%
2001	14	0.3%
2002	*****	*****
2003	*****	*****
2004	*****	*****
2005	*****	*****
2006	*****	*****
2007	46	0.9%
2008	82	1.6%
2009	185	3.5%
2010	170	3.2%
2011	597	11.4%
2012	606	11.5%
2013	675	12.8%
2014	553	10.5%
2015	457	8.7%
2016	389	7.4%
2017	350	6.7%
2018	528	10.1%
2019	249	4.7%
2020	259	4.9%

**Table 1h. Aggregated Characteristics of New Ethacrynic Acid - Exclude Cancer, Chemotherapy, and Radiation and Washout Loop Diuretics in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Demographic Characteristics</b>	<b>Number</b>	<b>Percent</b>
2021	73	1.4%
<b>Health Characteristics (365 days prior to index)</b>	<b>Mean</b>	<b>Standard Deviation</b>
Charlson/Elixhauser combined comorbidity score	2.7	2.9
	<b>Number</b>	<b>Percent</b>
Acute myocardial infarction	154	2.9%
Alzheimer's disease and related conditions	448	8.5%
Heart failure	1,374	26.2%
Depression	1,158	22.0%
Ischemic heart disease	1,769	33.7%
Rheumatoid arthritis/osteoarthritis	2,296	43.7%
Acquired hypothyroidism <sup>2</sup>	1,156	22.0%
Anemia	1,895	36.1%
Atrial fibrillation	1,000	19.0%
Diabetes	1,678	31.9%
Hyperlipidemia	2,881	54.8%
Hypertension	4,142	78.9%
Stroke/TIA	376	7.2%
Breast cancer	0	0.0%
Colorectal cancer	0	0.0%
Prostate cancer	0	0.0%
Lung cancer	0	0.0%
Endometrial cancer	0	0.0%
Acquired hypothyroidism	1,292	24.6%
Asthma	767	14.6%
Benign prostatic hyperplasia	234	4.5%
Chronic kidney disease	1,478	28.1%
COPD and bronchiectasis	970	18.5%
Osteoporosis	484	9.2%
<b>Medical Product Use (365 days prior to index)</b>	<b>Mean</b>	<b>Standard Deviation</b>
Mean number of filled prescriptions	48.3	38.7
Mean number of generics dispensed	12.5	6.9
Mean number of unique drug classes dispensed	11.2	5.8



**Table 1h. Aggregated Characteristics of New Ethacrynic Acid - Exclude Cancer, Chemotherapy, and Radiation and Washout Loop Diuretics in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Health Service Utilization Intensity Metrics (365 days prior to index)</b>		
Mean number of ambulatory encounters	26.0	23.6
Mean number of emergency room encounters	0.9	1.7
Mean number of inpatient hospital encounters	0.6	1.1
Mean number of non-acute institutional encounters	0.2	0.7
Mean number of other ambulatory encounters	10.6	19.7

<sup>1</sup>Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 1i. Aggregated Characteristics of Prevalent Bumetanide - Exclude Cancer, Chemotherapy, and Radiation in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Patient Characteristics</b>	<b>Number</b>	<b>Percent</b>
Unique patients	722,868	N/A
<b>Demographic Characteristics</b>	<b>Mean</b>	<b>Standard Deviation</b>
Age (years)	72.1	12.9
	<b>Number</b>	<b>Percent</b>
Age		
18-44 years	27,658	3.8%
45-64 years	157,113	21.7%
65-74 years	218,753	30.3%
75-84 years	191,442	26.5%
≥ 85 years	127,902	17.7%
Sex		
Female	431,211	59.7%
Male	291,657	40.3%
Race <sup>1</sup>		
American Indian or Alaska Native	2,611	0.4%
Asian	7,601	1.1%
Black or African American	88,775	12.3%
Native Hawaiian or Other Pacific Islander	707	0.1%
Unknown	109,090	15.1%
White	514,084	71.1%
Hispanic origin		
Yes	14,743	2.0%
No	598,335	82.8%
Unknown	109,790	15.2%
Year		
2000	27	0.0%
2001	2,412	0.3%
2002	1,746	0.2%
2003	1,529	0.2%
2004	1,507	0.2%
2005	1,247	0.2%
2006	252	0.0%
2007	5,924	0.8%
2008	8,214	1.1%
2009	13,166	1.8%
2010	10,087	1.4%
2011	99,816	13.8%
2012	55,955	7.7%
2013	57,154	7.9%
2014	56,208	7.8%
2015	59,391	8.2%
2016	63,612	8.8%
2017	66,993	9.3%
2018	64,467	8.9%
2019	69,707	9.6%
2020	66,400	9.2%

**Table 1i. Aggregated Characteristics of Prevalent Bumetanide - Exclude Cancer, Chemotherapy, and Radiation in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Demographic Characteristics</b>	<b>Number</b>	<b>Percent</b>
2021	17,054	2.4%
<b>Health Characteristics (365 days prior to index)</b>		
Charlson/Elixhauser combined comorbidity score	5.0	3.5
	<b>Number</b>	<b>Percent</b>
Acute myocardial infarction	47,282	6.5%
Alzheimer's disease and related conditions	97,309	13.5%
Heart failure	420,097	58.1%
Depression	203,703	28.2%
Ischemic heart disease	395,258	54.7%
Rheumatoid arthritis/osteoarthritis	352,769	48.8%
Acquired hypothyroidism <sup>2</sup>	144,555	20.0%
Anemia	358,017	49.5%
Atrial fibrillation	245,201	33.9%
Diabetes	380,590	52.6%
Hyperlipidemia	471,251	65.2%
Hypertension	630,285	87.2%
Stroke/TIA	67,113	9.3%
Breast cancer	0	0.0%
Colorectal cancer	0	0.0%
Prostate cancer	0	0.0%
Lung cancer	0	0.0%
Endometrial cancer	0	0.0%
Acquired hypothyroidism	174,002	24.1%
Asthma	88,103	12.2%
Benign prostatic hyperplasia	65,320	9.0%
Chronic kidney disease	367,897	50.9%
COPD and bronchiectasis	248,491	34.4%
Osteoporosis	52,313	7.2%
<b>Medical Product Use (365 days prior to index)</b>		
Mean number of filled prescriptions	66.7	48.6
Mean number of generics dispensed	15.3	7.5
Mean number of unique drug classes dispensed	13.7	6.3
<b>Health Service Utilization Intensity Metrics (365 days prior to index)</b>		
Mean number of ambulatory encounters	29.2	31.4
Mean number of emergency room encounters	1.3	2.5
Mean number of inpatient hospital encounters	1.2	1.7
Mean number of non-acute institutional encounters	0.4	0.9
Mean number of other ambulatory encounters	18.2	27.6

<sup>1</sup>Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

**Table 1j. Aggregated Characteristics of Prevalent Furosemide - Exclude Cancer, Chemotherapy, and Radiation in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Patient Characteristics</b>	<b>Number</b>	<b>Percent</b>
Unique patients	9,383,348	N/A
<b>Demographic Characteristics</b>	<b>Mean</b>	<b>Standard Deviation</b>
Age (years)	71.6	13.2
<b>Age</b>	<b>Number</b>	<b>Percent</b>
18-44 years	448,500	4.8%
45-64 years	2,089,667	22.3%
65-74 years	2,801,439	29.9%
75-84 years	2,347,747	25.0%
≥ 85 years	1,695,995	18.1%
<b>Sex</b>		
Female	5,839,167	62.2%
Male	3,544,181	37.8%
<b>Race<sup>1</sup></b>		
American Indian or Alaska Native	46,797	0.5%
Asian	125,766	1.3%
Black or African American	1,067,795	11.4%
Native Hawaiian or Other Pacific Islander	8,641	0.1%
Unknown	1,713,426	18.3%
White	6,420,923	68.4%
<b>Hispanic origin</b>		
Yes	191,193	2.0%
No	7,418,154	79.1%
Unknown	1,774,001	18.9%
<b>Year</b>		
2000	1,610	0.0%
2001	63,937	0.7%
2002	26,590	0.3%
2003	22,174	0.2%
2004	20,993	0.2%
2005	16,791	0.2%
2006	4,574	0.0%
2007	119,879	1.3%
2008	157,511	1.7%
2009	245,145	2.6%
2010	167,795	1.8%
2011	1,767,354	18.8%
2012	852,884	9.1%
2013	752,806	8.0%
2014	840,991	9.0%
2015	772,521	8.2%
2016	743,745	7.9%
2017	708,651	7.6%
2018	682,176	7.3%
2019	648,718	6.9%
2020	617,214	6.6%

**Table 1j. Aggregated Characteristics of Prevalent Furosemide - Exclude Cancer, Chemotherapy, and Radiation in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Demographic Characteristics</b>	<b>Number</b>	<b>Percent</b>
2021	149,289	1.6%
<b>Health Characteristics (365 days prior to index)</b>		
Charlson/Elixhauser combined comorbidity score	3.2	3.0
	<b>Number</b>	<b>Percent</b>
Acute myocardial infarction	386,776	4.1%
Alzheimer's disease and related conditions	1,234,919	13.2%
Heart failure	3,221,137	34.3%
Depression	2,282,721	24.3%
Ischemic heart disease	3,905,084	41.6%
Rheumatoid arthritis/osteoarthritis	4,053,133	43.2%
Acquired hypothyroidism <sup>2</sup>	1,565,764	16.7%
Anemia	3,372,224	35.9%
Atrial fibrillation	2,048,198	21.8%
Diabetes	3,826,884	40.8%
Hyperlipidemia	5,334,714	56.9%
Hypertension	7,439,601	79.3%
Stroke/TIA	726,383	7.7%
Breast cancer	0	0.0%
Colorectal cancer	0	0.0%
Prostate cancer	0	0.0%
Lung cancer	0	0.0%
Endometrial cancer	0	0.0%
Acquired hypothyroidism	1,797,319	19.2%
Asthma	874,038	9.3%
Benign prostatic hyperplasia	645,964	6.9%
Chronic kidney disease	2,746,114	29.3%
COPD and bronchiectasis	2,233,280	23.8%
Osteoporosis	662,085	7.1%
<b>Medical Product Use (365 days prior to index)</b>		
Mean number of filled prescriptions	55.2	42.3
Mean number of generics dispensed	12.5	6.7
Mean number of unique drug classes dispensed	11.2	5.7
<b>Health Service Utilization Intensity Metrics (365 days prior to index)</b>		
Mean number of ambulatory encounters	22.4	25.8
Mean number of emergency room encounters	0.9	2.0
Mean number of inpatient hospital encounters	0.7	1.2
Mean number of non-acute institutional encounters	0.2	0.7
Mean number of other ambulatory encounters	11.8	22.0

<sup>1</sup>Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

**Table 1k. Aggregated Characteristics of Prevalent Torsemide - Exclude Cancer, Chemotherapy, and Radiation in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Patient Characteristics</b>	<b>Number</b>	<b>Percent</b>
Unique patients	709,845	N/A
<b>Demographic Characteristics</b>	<b>Mean</b>	<b>Standard Deviation</b>
Age (years)	72.6	12.6
<b>Age</b>	<b>Number</b>	<b>Percent</b>
18-44 years	24,444	3.4%
45-64 years	144,496	20.4%
65-74 years	217,135	30.6%
75-84 years	196,048	27.6%
≥ 85 years	127,722	18.0%
<b>Sex</b>		
Female	411,323	57.9%
Male	298,522	42.1%
<b>Race<sup>1</sup></b>		
American Indian or Alaska Native	2,912	0.4%
Asian	6,218	0.9%
Black or African American	85,057	12.0%
Native Hawaiian or Other Pacific Islander	589	0.1%
Unknown	109,569	15.4%
White	505,500	71.2%
<b>Hispanic origin</b>		
Yes	9,837	1.4%
No	580,927	81.8%
Unknown	119,081	16.8%
<b>Year</b>		
2000	18	0.0%
2001	2,333	0.3%
2002	1,914	0.3%
2003	1,788	0.3%
2004	1,683	0.2%
2005	1,126	0.2%
2006	233	0.0%
2007	7,525	1.1%
2008	7,770	1.1%
2009	14,169	2.0%
2010	9,014	1.3%
2011	88,184	12.4%
2012	46,441	6.5%
2013	46,247	6.5%
2014	59,827	8.4%
2015	56,356	7.9%
2016	59,490	8.4%
2017	64,392	9.1%
2018	69,334	9.8%
2019	75,368	10.6%
2020	76,269	10.7%

**Table 1k. Aggregated Characteristics of Prevalent Torsemide - Exclude Cancer, Chemotherapy, and Radiation in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Demographic Characteristics</b>	<b>Number</b>	<b>Percent</b>
2021	20,364	2.9%
<b>Health Characteristics (365 days prior to index)</b>		
Charlson/Elixhauser combined comorbidity score	4.8	3.4
	<b>Number</b>	<b>Percent</b>
Acute myocardial infarction	39,945	5.6%
Alzheimer's disease and related conditions	83,868	11.8%
Heart failure	406,178	57.2%
Depression	184,266	26.0%
Ischemic heart disease	386,873	54.5%
Rheumatoid arthritis/osteoarthritis	335,043	47.2%
Acquired hypothyroidism <sup>2</sup>	139,430	19.6%
Anemia	333,954	47.0%
Atrial fibrillation	249,275	35.1%
Diabetes	366,182	51.6%
Hyperlipidemia	472,191	66.5%
Hypertension	621,958	87.6%
Stroke/TIA	60,845	8.6%
Breast cancer	0	0.0%
Colorectal cancer	0	0.0%
Prostate cancer	0	0.0%
Lung cancer	0	0.0%
Endometrial cancer	0	0.0%
Acquired hypothyroidism	164,762	23.2%
Asthma	81,480	11.5%
Benign prostatic hyperplasia	65,542	9.2%
Chronic kidney disease	359,537	50.7%
COPD and bronchiectasis	217,266	30.6%
Osteoporosis	48,836	6.9%
<b>Medical Product Use (365 days prior to index)</b>		
Mean number of filled prescriptions	64.1	46.4
Mean number of generics dispensed	14.9	7.3
Mean number of unique drug classes dispensed	13.3	6.1
<b>Health Service Utilization Intensity Metrics (365 days prior to index)</b>		
Mean number of ambulatory encounters	29.1	30.4
Mean number of emergency room encounters	1.1	2.3
Mean number of inpatient hospital encounters	1.1	1.6
Mean number of non-acute institutional encounters	0.3	0.8
Mean number of other ambulatory encounters	15.9	25.2

<sup>1</sup>Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

**Table 11. Aggregated Characteristics of Prevalent Ethacrynic Acid - Exclude Cancer, Chemotherapy, and Radiation in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Patient Characteristics</b>	<b>Number</b>	<b>Percent</b>
Unique patients	12,831	N/A
<b>Demographic Characteristics</b>	<b>Mean</b>	<b>Standard Deviation</b>
Age (years)	72.5	13.0
	<b>Number</b>	<b>Percent</b>
Age		
18-44 years	614	4.8%
45-64 years	2,684	20.9%
65-74 years	3,465	27.0%
75-84 years	3,420	26.7%
≥ 85 years	2,648	20.6%
Sex		
Female	9,687	75.5%
Male	3,144	24.5%
Race <sup>1</sup>		
American Indian or Alaska Native	*****	*****
Asian	120	0.9%
Black or African American	965	7.5%
Native Hawaiian or Other Pacific Islander	*****	*****
Unknown	2,931	22.8%
White	8,773	68.4%
Hispanic origin		
Yes	137	1.1%
No	9,435	73.5%
Unknown	3,259	25.4%
Year		
2000	*****	*****
2001	85	0.7%
2002	16	0.1%
2003	*****	*****
2004	17	0.1%
2005	13	0.1%
2006	*****	*****
2007	161	1.3%
2008	167	1.3%
2009	468	3.6%
2010	336	2.6%
2011	2,139	16.7%
2012	1,404	10.9%
2013	1,518	11.8%
2014	1,494	11.6%
2015	1,181	9.2%
2016	861	6.7%
2017	786	6.1%
2018	921	7.2%
2019	551	4.3%
2020	551	4.3%



**Table 11. Aggregated Characteristics of Prevalent Ethacrynic Acid - Exclude Cancer, Chemotherapy, and Radiation in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Demographic Characteristics</b>	<b>Number</b>	<b>Percent</b>
2021	148	1.2%
<b>Health Characteristics (365 days prior to index)</b>	<b>Mean</b>	<b>Standard Deviation</b>
Charlson/Elixhauser combined comorbidity score	3.6	3.2
	<b>Number</b>	<b>Percent</b>
Acute myocardial infarction	416	3.2%
Alzheimer's disease and related conditions	1,270	9.9%
Heart failure	5,185	40.4%
Depression	2,947	23.0%
Ischemic heart disease	5,338	41.6%
Rheumatoid arthritis/osteoarthritis	5,791	45.1%
Acquired hypothyroidism <sup>2</sup>	2,890	22.5%
Anemia	5,494	42.8%
Atrial fibrillation	3,385	26.4%
Diabetes	4,903	38.2%
Hyperlipidemia	7,433	57.9%
Hypertension	10,683	83.3%
Stroke/TIA	1,047	8.2%
Breast cancer	0	0.0%
Colorectal cancer	0	0.0%
Prostate cancer	0	0.0%
Lung cancer	0	0.0%
Endometrial cancer	0	0.0%
Acquired hypothyroidism	3,336	26.0%
Asthma	1,889	14.7%
Benign prostatic hyperplasia	741	5.8%
Chronic kidney disease	4,677	36.5%
COPD and bronchiectasis	2,954	23.0%
Osteoporosis	1,184	9.2%
<b>Medical Product Use (365 days prior to index)</b>	<b>Mean</b>	<b>Standard Deviation</b>
Mean number of filled prescriptions	59.3	43.7
Mean number of generics dispensed	14.8	7.4
Mean number of unique drug classes dispensed	13.1	6.1

**Table 1I. Aggregated Characteristics of Prevalent Ethacrynic Acid - Exclude Cancer, Chemotherapy, and Radiation in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021**

<b>Health Service Utilization Intensity Metrics (365 days prior to index)</b>		
Mean number of ambulatory encounters	28.6	24.9
Mean number of emergency room encounters	1.0	2.1
Mean number of inpatient hospital encounters	0.8	1.3
Mean number of non-acute institutional encounters	0.2	0.7
Mean number of other ambulatory encounters	13.9	24.1

<sup>1</sup>Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 2a. Categorical Summary of Patients' Cumulative Exposure Duration for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\***

	Number of Patients by Cumulative Treatment Episode Duration								
	0-364 Days		365-729 Days		730-1094 Days		1095-1459 Days		
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>									
<i>Prevalent Bumetanide</i>	1,292,089	864,818	66.9%	197,799	15.3%	97,358	7.5%	55,208	4.3%
<i>Prevalent Furosemide</i>	16,261,347	9,464,018	58.2%	2,568,017	15.8%	1,485,357	9.1%	950,255	5.8%
<i>Prevalent Torsemide</i>	1,270,424	806,066	63.4%	211,660	16.7%	105,565	8.3%	58,829	4.6%
<i>Prevalent Ethacrynic Acid</i>	26,666	21,177	79.4%	2,538	9.5%	1,193	4.5%	718	2.7%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>									
<i>Prevalent Bumetanide</i>	1,292,089	898,270	69.5%	183,029	14.2%	89,667	6.9%	50,789	3.9%
<i>Prevalent Furosemide</i>	16,261,347	9,507,506	58.5%	2,560,585	15.7%	1,477,734	9.1%	943,765	5.8%
<i>Prevalent Torsemide</i>	1,270,424	837,195	65.9%	198,927	15.7%	97,992	7.7%	54,461	4.3%
<i>Prevalent Ethacrynic Acid</i>	26,666	21,418	80.3%	2,444	9.2%	1,144	4.3%	671	2.5%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>									
<i>Prevalent Bumetanide</i>	722,868	466,869	64.6%	119,162	16.5%	60,357	8.3%	32,344	4.5%
<i>Prevalent Furosemide</i>	9,383,348	5,208,070	55.5%	1,592,483	17.0%	940,930	10.0%	597,914	6.4%
<i>Prevalent Torsemide</i>	709,845	435,875	61.4%	124,838	17.6%	63,698	9.0%	35,068	4.9%
<i>Prevalent Ethacrynic Acid</i>	12,831	9,923	77.3%	1,354	10.6%	665	5.2%	376	2.9%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>									
<i>Prevalent Bumetanide</i>	722,868	486,372	67.3%	110,597	15.3%	55,869	7.7%	29,755	4.1%
<i>Prevalent Furosemide</i>	9,383,348	5,235,191	55.8%	1,587,970	16.9%	936,022	10.0%	593,583	6.3%
<i>Prevalent Torsemide</i>	709,845	453,427	63.9%	117,845	16.6%	59,375	8.4%	32,573	4.6%
<i>Prevalent Ethacrynic Acid</i>	12,831	10,038	78.2%	1,309	10.2%	630	4.9%	367	2.9%
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>									
<i>New Bumetanide</i>	197,597	144,270	73.0%	26,446	13.4%	12,286	6.2%	6,589	3.3%
<i>New Furosemide</i>	5,839,348	3,824,004	65.5%	875,599	15.0%	471,593	8.1%	277,604	4.8%
<i>New Torsemide</i>	194,601	136,447	70.1%	28,121	14.5%	13,478	6.9%	7,299	3.8%
<i>New Ethacrynic Acid</i>	5,253	4,409	83.9%	409	7.8%	197	3.8%	100	1.9%

**Table 2a. Categorical Summary of Patients' Cumulative Exposure Duration for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\***

Total Number of Patients	Number of Patients by Cumulative Treatment Episode Duration								
	0-364 Days		365-729 Days		730-1094 Days		1095-1459 Days		
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>									
<i>New Bumetanide</i>	197,597	145,340	73.6%	26,121	13.2%	12,022	6.1%	6,464	3.3%
<i>New Furosemide</i>	5,839,348	3,836,249	65.7%	873,104	15.0%	468,883	8.0%	275,514	4.7%
<i>New Torsemide</i>	194,601	137,462	70.6%	27,881	14.3%	13,188	6.8%	7,162	3.7%
<i>New Ethacrynic Acid</i>	5,253	4,427	84.3%	401	7.6%	195	3.7%	97	1.8%

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

**Table 2a. Categorical Summary of Patients' Cumulative Exposure Duration for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\* (Continued)**

	Number of Patients by Cumulative Treatment Episode Duration							
	1460-1824 Days		1825-2189 Days		2190-2554 Days		2555+ Days	
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	31,631	2.4%	18,036	1.4%	10,917	0.8%	16,322	1.3%
<i>Prevalent Furosemide</i>	626,192	3.9%	417,679	2.6%	279,326	1.7%	470,503	2.9%
<i>Prevalent Torsemide</i>	34,154	2.7%	20,909	1.6%	13,273	1.0%	19,968	1.6%
<i>Prevalent Ethacrynic Acid</i>	444	1.7%	242	0.9%	158	0.6%	196	0.7%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	28,933	2.2%	16,608	1.3%	9,903	0.8%	14,890	1.2%
<i>Prevalent Furosemide</i>	620,881	3.8%	413,079	2.5%	275,643	1.7%	462,154	2.8%
<i>Prevalent Torsemide</i>	31,743	2.5%	19,444	1.5%	12,233	1.0%	18,429	1.5%
<i>Prevalent Ethacrynic Acid</i>	422	1.6%	232	0.9%	151	0.6%	184	0.7%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	18,594	2.6%	10,945	1.5%	6,550	0.9%	8,047	1.1%
<i>Prevalent Furosemide</i>	389,627	4.2%	253,532	2.7%	168,663	1.8%	232,129	2.5%
<i>Prevalent Torsemide</i>	20,476	2.9%	12,514	1.8%	7,763	1.1%	9,613	1.4%
<i>Prevalent Ethacrynic Acid</i>	226	1.8%	130	1.0%	75	0.6%	82	0.6%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	17,013	2.4%	10,005	1.4%	5,979	0.8%	7,278	1.0%
<i>Prevalent Furosemide</i>	385,955	4.1%	250,700	2.7%	166,187	1.8%	227,740	2.4%
<i>Prevalent Torsemide</i>	19,004	2.7%	11,664	1.6%	7,108	1.0%	8,849	1.2%
<i>Prevalent Ethacrynic Acid</i>	218	1.7%	118	0.9%	71	0.6%	80	0.6%
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	3,692	1.9%	2,036	1.0%	1,128	0.6%	1,150	0.6%
<i>New Furosemide</i>	167,721	2.9%	101,079	1.7%	59,998	1.0%	61,750	1.1%
<i>New Torsemide</i>	4,070	2.1%	2,406	1.2%	1,377	0.7%	1,403	0.7%
<i>New Ethacrynic Acid</i>	60	1.1%	37	0.7%	19	0.4%	22	0.4%

**Table 2a. Categorical Summary of Patients' Cumulative Exposure Duration for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\* (Continued)**

	Number of Patients by Cumulative Treatment Episode Duration							
	1460-1824 Days		1825-2189 Days		2190-2554 Days		2555+ Days	
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	3,514	1.8%	1,965	1.0%	1,089	0.6%	1,082	0.5%
<i>New Furosemide</i>	166,058	2.8%	99,861	1.7%	59,077	1.0%	60,602	1.0%
<i>New Torsemide</i>	3,936	2.0%	2,314	1.2%	1,324	0.7%	1,334	0.7%
<i>New Ethacrynic Acid</i>	57	1.1%	35	0.7%	19	0.4%	22	0.4%

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

**Table 2b. Continuous Summary of Patients' Cumulative Exposure Duration for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\***

	Total Number of Patients	Distribution of Cumulative Treatment Episode Duration, days						
		Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	1,292,089	1	54	180	526	5,560	405.4	564.7
<i>Prevalent Furosemide</i>	16,261,347	1	60	261	763	7,302	554.5	719.7
<i>Prevalent Torsemide</i>	1,270,424	1	60	210	595	5,539	450.0	598.0
<i>Prevalent Ethacrynic Acid</i>	26,666	1	30	90	279	4,645	276.1	475.6
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	1,292,089	1	31	150	478	5,560	374.7	549.7
<i>Prevalent Furosemide</i>	16,261,347	1	60	255	754	7,200	549.7	716.2
<i>Prevalent Torsemide</i>	1,270,424	1	55	180	543	5,493	420.3	585.0
<i>Prevalent Ethacrynic Acid</i>	26,666	1	30	73	266	4,645	262.4	466.9
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	722,868	1	60	200	570	5,049	421.9	554.1
<i>Prevalent Furosemide</i>	9,383,348	1	83	292	810	6,677	568.3	689.7
<i>Prevalent Torsemide</i>	709,845	1	77	240	630	5,154	462.9	581.9
<i>Prevalent Ethacrynic Acid</i>	12,831	1	30	90	330	3,764	293.1	473.7
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	722,868	1	40	172	518	5,049	390.5	540.1
<i>Prevalent Furosemide</i>	9,383,348	1	77	285	805	6,677	563.4	686.6
<i>Prevalent Torsemide</i>	709,845	1	60	207	580	5,152	433.2	569.9
<i>Prevalent Ethacrynic Acid</i>	12,831	1	30	90	300	3,764	279.7	466.2
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	197,597	1	30	120	406	4,648	325.3	474.3
<i>New Furosemide</i>	5,839,348	1	41	180	570	6,667	419.1	566.4
<i>New Torsemide</i>	194,601	1	50	150	459	5,152	360.3	501.1
<i>New Ethacrynic Acid</i>	5,253	1	30	60	190	3,764	218.5	402.3
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	197,597	1	30	120	390	4,648	318.1	467.5
<i>New Furosemide</i>	5,839,348	1	40	180	566	6,570	416.0	563.9
<i>New Torsemide</i>	194,601	1	45	150	450	5,152	353.3	494.9
<i>New Ethacrynic Acid</i>	5,253	1	30	60	180	3,764	213.3	397.4

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

**Table 3a. Categorical Summary of First Treatment Episodes for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\***

	Number of Patients by First Treatment Episode Duration								
	0-364 Days		365-729 Days		730-1094 Days		1095-1459 Days		
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>									
<i>Prevalent Bumetanide</i>	1,292,089	1,223,162	94.7%	46,724	3.6%	12,973	1.0%	5,014	0.4%
<i>Prevalent Furosemide</i>	16,261,347	15,324,985	94.2%	576,255	3.5%	187,262	1.2%	82,101	0.5%
<i>Prevalent Torsemide</i>	1,270,424	1,188,205	93.5%	54,555	4.3%	15,781	1.2%	6,311	0.5%
<i>Prevalent Ethacrynic Acid</i>	26,666	25,815	96.8%	546	2.0%	161	0.6%	73	0.3%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>									
<i>Prevalent Bumetanide</i>	1,292,089	1,237,553	95.8%	36,901	2.9%	10,296	0.8%	3,948	0.3%
<i>Prevalent Furosemide</i>	16,261,347	15,335,535	94.3%	570,573	3.5%	185,138	1.1%	81,010	0.5%
<i>Prevalent Torsemide</i>	1,270,424	1,204,484	94.8%	43,972	3.5%	12,503	1.0%	4,933	0.4%
<i>Prevalent Ethacrynic Acid</i>	26,666	25,921	97.2%	481	1.8%	141	0.5%	66	0.2%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>									
<i>Prevalent Bumetanide</i>	722,868	685,249	94.8%	25,789	3.6%	7,183	1.0%	2,648	0.4%
<i>Prevalent Furosemide</i>	9,383,348	8,859,199	94.4%	330,477	3.5%	104,603	1.1%	44,376	0.5%
<i>Prevalent Torsemide</i>	709,845	665,376	93.7%	29,813	4.2%	8,638	1.2%	3,301	0.5%
<i>Prevalent Ethacrynic Acid</i>	12,831	12,435	96.9%	276	2.2%	66	0.5%	32	0.2%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>									
<i>Prevalent Bumetanide</i>	722,868	693,380	95.9%	20,215	2.8%	5,684	0.8%	2,026	0.3%
<i>Prevalent Furosemide</i>	9,383,348	8,865,352	94.5%	327,096	3.5%	103,317	1.1%	43,723	0.5%
<i>Prevalent Torsemide</i>	709,845	674,354	95.0%	23,986	3.4%	6,820	1.0%	2,549	0.4%
<i>Prevalent Ethacrynic Acid</i>	12,831	12,481	97.3%	241	1.9%	62	0.5%	27	0.2%
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>									
<i>New Bumetanide</i>	197,597	189,279	95.8%	5,602	2.8%	1,591	0.8%	603	0.3%
<i>New Furosemide</i>	5,839,348	5,546,064	95.0%	185,436	3.2%	59,319	1.0%	24,846	0.4%
<i>New Torsemide</i>	194,601	184,161	94.6%	6,780	3.5%	2,145	1.1%	822	0.4%
<i>New Ethacrynic Acid</i>	5,253	5,118	97.4%	98	1.9%	18	0.3%	11	0.2%



**Table 3a. Categorical Summary of First Treatment Episodes for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\***

	Number of Patients by First Treatment Episode Duration								
	0-364 Days		365-729 Days		730-1094 Days		1095-1459 Days		
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>									
<i>New Bumetanide</i>	197,597	189,518	95.9%	5,466	2.8%	1,544	0.8%	570	0.3%
<i>New Furosemide</i>	5,839,348	5,548,468	95.0%	184,141	3.2%	58,813	1.0%	24,573	0.4%
<i>New Torsemide</i>	194,601	184,436	94.8%	6,634	3.4%	2,085	1.1%	794	0.4%
<i>New Ethacrynic Acid</i>	5,253	5,128	97.6%	89	1.7%	19	0.4%	*****	*****

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 3a. Categorical Summary of First Treatment Episodes for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\* (Continued)**

	Number of Patients by First Treatment Episode Duration							
	1460-1824 Days		1825-2189 Days		2190-2554 Days		2555+ Days	
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	2,336	0.2%	939	0.1%	430	0.0%	511	0.0%
<i>Prevalent Furosemide</i>	40,761	0.3%	21,526	0.1%	12,203	0.1%	16,254	0.1%
<i>Prevalent Torsemide</i>	2,753	0.2%	1,299	0.1%	741	0.1%	779	0.1%
<i>Prevalent Ethacrynic Acid</i>	36	0.1%	*****	*****	*****	*****	14	0.1%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	1,885	0.1%	724	0.1%	361	0.0%	421	0.0%
<i>Prevalent Furosemide</i>	40,221	0.2%	21,107	0.1%	11,931	0.1%	15,832	0.1%
<i>Prevalent Torsemide</i>	2,230	0.2%	1,054	0.1%	602	0.0%	646	0.1%
<i>Prevalent Ethacrynic Acid</i>	27	0.1%	12	0.0%	*****	*****	*****	*****
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	1,071	0.1%	488	0.1%	239	0.0%	201	0.0%
<i>Prevalent Furosemide</i>	20,932	0.2%	10,886	0.1%	6,124	0.1%	6,751	0.1%
<i>Prevalent Torsemide</i>	1,381	0.2%	649	0.1%	353	0.0%	334	0.0%
<i>Prevalent Ethacrynic Acid</i>	*****	*****	*****	*****	*****	*****	*****	*****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	824	0.1%	385	0.1%	191	0.0%	163	0.0%
<i>Prevalent Furosemide</i>	20,584	0.2%	10,700	0.1%	5,974	0.1%	6,602	0.1%
<i>Prevalent Torsemide</i>	1,077	0.2%	510	0.1%	277	0.0%	272	0.0%
<i>Prevalent Ethacrynic Acid</i>	*****	*****	*****	*****	*****	*****	*****	*****
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	273	0.1%	133	0.1%	64	0.0%	52	0.0%
<i>New Furosemide</i>	11,675	0.2%	5,835	0.1%	3,161	0.1%	3,012	0.1%
<i>New Torsemide</i>	363	0.2%	169	0.1%	85	0.0%	76	0.0%
<i>New Ethacrynic Acid</i>	*****	*****	*****	*****	*****	*****	*****	*****

**Table 3a. Categorical Summary of First Treatment Episodes for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\* (Continued)**

	Number of Patients by First Treatment Episode Duration							
	1460-1824 Days		1825-2189 Days		2190-2554 Days		2555+ Days	
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	258	0.1%	131	0.1%	59	0.0%	51	0.0%
<i>New Furosemide</i>	11,556	0.2%	5,759	0.1%	3,086	0.1%	2,952	0.1%
<i>New Torsemide</i>	343	0.2%	158	0.1%	79	0.0%	72	0.0%
<i>New Ethacrynic Acid</i>	****	****	****	****	****	****	****	****

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 3b. Continuous Summary of First Treatment Episodes for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\***

Total Number of Patients	Distribution of First Treatment Episode Duration, days							
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation	
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	1,292,089	1	30	30	90	5,560	102.4	188.9
<i>Prevalent Furosemide</i>	16,261,347	1	30	30	90	7,302	108.4	224.2
<i>Prevalent Torsemide</i>	1,270,424	1	30	54	97	5,097	117.3	212.0
<i>Prevalent Ethacrynic Acid</i>	26,666	1	30	30	75	4,092	78.3	164.0
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	1,292,089	1	29	30	90	5,560	87.1	172.0
<i>Prevalent Furosemide</i>	16,261,347	1	30	30	90	5,559	107.3	222.6
<i>Prevalent Torsemide</i>	1,270,424	1	30	30	90	5,097	100.5	193.9
<i>Prevalent Ethacrynic Acid</i>	26,666	1	30	30	60	4,092	71.0	153.7
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	722,868	1	30	30	90	5,049	102.0	181.4
<i>Prevalent Furosemide</i>	9,383,348	1	30	30	90	5,144	107.3	210.8
<i>Prevalent Torsemide</i>	709,845	1	30	60	91	4,698	115.6	202.7
<i>Prevalent Ethacrynic Acid</i>	12,831	1	30	30	90	3,178	77.4	150.2
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	722,868	1	30	30	90	5,049	86.7	164.3
<i>Prevalent Furosemide</i>	9,383,348	1	30	30	90	5,144	106.2	209.3
<i>Prevalent Torsemide</i>	709,845	1	30	30	90	4,698	99.2	184.1
<i>Prevalent Ethacrynic Acid</i>	12,831	1	30	30	60	3,178	71.0	142.6
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	197,597	1	30	30	90	3,850	88.9	169.8
<i>New Furosemide</i>	5,839,348	1	30	30	90	4,919	94.8	197.1
<i>New Torsemide</i>	194,601	1	30	30	90	3,740	103.8	191.8
<i>New Ethacrynic Acid</i>	5,253	1	30	30	60	3,178	68.2	138.5

**Table 3b. Continuous Summary of First Treatment Episodes for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\***

Total Number of Patients	Distribution of First Treatment Episode Duration, days							
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation	
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	197,597	1	30	30	90	3,850	87.0	167.1
<i>New Furosemide</i>	5,839,348	1	30	30	90	4,919	94.1	196.1
<i>New Torsemide</i>	194,601	1	30	30	90	3,740	101.8	188.5
<i>New Ethacrynic Acid</i>	5,253	1	30	30	60	3,178	66.2	134.8

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

**Table 4. Continuous Summary of All Treatment Episode Gaps for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\***

	Total Number of Gaps	Distribution of Treatment Episode Gap Durations, days						Standard Deviation
		Minimum	Q1	Median	Q3	Maximum	Mean	
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	4,350,849	1	4	14	40	6,203	53.3	160.2
<i>Prevalent Furosemide</i>	74,417,684	1	4	13	43	7,222	71.4	225.5
<i>Prevalent Torsemide</i>	4,464,011	1	4	14	40	5,484	51.6	152.1
<i>Prevalent Ethacrynic Acid</i>	68,867	1	4	12	36	3,425	48.8	144.9
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	4,350,849	1	4	15	45	6,203	57.9	165.6
<i>Prevalent Furosemide</i>	74,417,684	1	4	13	43	7,222	71.9	226.0
<i>Prevalent Torsemide</i>	4,464,011	1	4	15	44	5,530	55.6	157.5
<i>Prevalent Ethacrynic Acid</i>	68,867	1	4	13	38	3,425	50.8	147.1
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	2,628,005	1	4	14	40	5,857	52.1	150.8
<i>Prevalent Furosemide</i>	45,896,019	1	4	13	42	6,742	67.0	206.2
<i>Prevalent Torsemide</i>	2,677,901	1	4	14	40	5,484	50.1	142.6
<i>Prevalent Ethacrynic Acid</i>	38,034	1	4	12	35	3,324	46.3	133.3
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	2,628,005	1	5	15	45	5,857	56.5	156.1
<i>Prevalent Furosemide</i>	45,896,019	1	4	13	43	6,742	67.4	206.6
<i>Prevalent Torsemide</i>	2,677,901	1	4	15	44	5,530	53.9	147.9
<i>Prevalent Ethacrynic Acid</i>	38,034	1	4	13	37	3,324	48.0	134.7
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	538,263	1	5	17	55	5,386	72.9	192.8
<i>New Furosemide</i>	20,577,784	1	4	15	56	6,671	88.6	250.3
<i>New Torsemide</i>	540,829	1	5	16	55	4,983	71.3	187.9
<i>New Ethacrynic Acid</i>	10,984	1	4	13	39	2,492	57.0	155.2

**Table 4. Continuous Summary of All Treatment Episode Gaps for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\***

	Total Number of Gaps	Distribution of Treatment Episode Gap Durations, days						
		Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	538,263	1	5	17	57	5,386	74.0	193.8
<i>New Furosemide</i>	20,577,784	1	4	15	56	6,671	88.9	250.6
<i>New Torsemide</i>	540,829	1	5	17	57	4,983	72.4	188.9
<i>New Ethacrynic Acid</i>	10,984	1	4	13	40	2,492	57.7	155.4

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

**Table 5. Continuous Summary of First Treatment Episode Gaps for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\***

	Total Number of Patients	Distribution of First Treatment Episode Gap Duration, days						Standard Deviation
		Minimum	Q1	Median	Q3	Maximum	Mean	
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	795,969	1	4	15	50	5,857	77.9	232.5
<i>Prevalent Furosemide</i>	11,295,839	1	5	19	80	7,222	137.6	366.6
<i>Prevalent Torsemide</i>	806,126	1	4	15	50	5,484	74.0	218.4
<i>Prevalent Ethacrynic Acid</i>	13,346	1	4	13	47	3,425	72.2	205.1
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	795,969	1	5	19	65	5,857	89.5	241.8
<i>Prevalent Furosemide</i>	11,295,839	1	5	19	81	7,222	138.3	367.0
<i>Prevalent Torsemide</i>	806,126	1	5	19	64	5,530	85.8	229.2
<i>Prevalent Ethacrynic Acid</i>	13,346	1	4	15	53	3,425	77.0	209.5
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	465,837	1	4	15	51	5,857	75.7	218.1
<i>Prevalent Furosemide</i>	6,773,138	1	5	19	78	6,742	127.0	334.7
<i>Prevalent Torsemide</i>	468,416	1	4	16	51	5,484	71.9	205.3
<i>Prevalent Ethacrynic Acid</i>	6,891	1	4	14	47	3,324	68.4	188.4
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	465,837	1	5	20	66	5,857	86.9	227.5
<i>Prevalent Furosemide</i>	6,773,138	1	5	19	79	6,742	127.7	335.1
<i>Prevalent Torsemide</i>	468,416	1	5	20	65	5,530	83.3	216.4
<i>Prevalent Ethacrynic Acid</i>	6,891	1	4	16	53	3,324	72.3	190.9
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	113,689	1	5	21	87	5,052	115.0	280.9
<i>New Furosemide</i>	3,783,060	1	6	25	127	6,671	173.2	397.3
<i>New Torsemide</i>	114,828	1	5	22	88	4,983	113.3	274.5
<i>New Ethacrynic Acid</i>	2,375	1	4	16	62	2,492	87.6	209.2



**Table 5. Continuous Summary of First Treatment Episode Gaps for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\***

Total Number of Patients	Distribution of First Treatment Episode Gap Duration, days							
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation	
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	113,689	1	5	22	89	5,052	116.2	281.6
<i>New Furosemide</i>	3,783,060	1	6	25	128	6,671	173.5	397.5
<i>New Torsemide</i>	114,828	1	5	22	90	4,983	114.5	275.3
<i>New Ethacrynic Acid</i>	2,375	1	4	16	64	2,492	88.3	209.3

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

**Table 6. Continuous Summary of Second and Subsequent Treatment Episode Gaps for Exposures of Interest in the Sentinel Distributed Database from January 1, 2000 to March 31, 2021\***

	Total Number of Gaps	Distribution of Treatment Episode Durations Excluding First Treatment Episode Gap, days						Standard Deviation
		Minimum	Q1	Median	Q3	Maximum	Mean	
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	3,554,880	1	4	13	38	6,203	47.8	138.3
<i>Prevalent Furosemide</i>	63,121,845	1	4	12	39	6,961	59.6	187.1
<i>Prevalent Torsemide</i>	3,657,885	1	4	13	38	5,075	46.6	132.6
<i>Prevalent Ethacrynic Acid</i>	55,521	1	4	12	34	3,324	43.2	125.5
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	3,554,880	1	4	15	42	6,203	50.9	142.1
<i>Prevalent Furosemide</i>	63,121,845	1	4	12	39	6,961	60.0	187.6
<i>Prevalent Torsemide</i>	3,657,885	1	4	14	41	5,090	48.9	135.9
<i>Prevalent Ethacrynic Acid</i>	55,521	1	4	13	35	3,324	44.5	126.8
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	2,162,168	1	4	13	38	5,835	47.0	131.3
<i>Prevalent Furosemide</i>	39,122,881	1	4	12	39	6,530	56.6	172.4
<i>Prevalent Torsemide</i>	2,209,485	1	4	13	38	4,991	45.5	124.8
<i>Prevalent Ethacrynic Acid</i>	31,143	1	4	12	33	3,090	41.4	117.1
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	2,162,168	1	4	15	42	5,835	50.0	134.9
<i>Prevalent Furosemide</i>	39,122,881	1	4	12	39	6,530	57.0	172.9
<i>Prevalent Torsemide</i>	2,209,485	1	4	14	41	4,991	47.7	127.8
<i>Prevalent Ethacrynic Acid</i>	31,143	1	4	12	35	3,090	42.6	118.0
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	424,574	1	5	16	49	5,386	61.6	159.3
<i>New Furosemide</i>	16,794,724	1	4	14	47	6,501	69.5	198.1
<i>New Torsemide</i>	426,001	1	4	15	49	4,750	60.0	154.6
<i>New Ethacrynic Acid</i>	8,609	1	4	12	36	2,257	48.6	135.3
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	424,574	1	5	16	51	5,386	62.8	160.5
<i>New Furosemide</i>	16,794,724	1	4	14	47	6,501	69.9	198.5
<i>New Torsemide</i>	426,001	1	5	16	50	4,750	61.0	155.9
<i>New Ethacrynic Acid</i>	8,609	1	4	12	36	2,257	49.2	135.6

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

**Table 7. Summary of Reasons First Treatment Episodes Ended for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\*<sup>1</sup>**

	Censoring Reason						
	Total Number of Patients	End of exposure episode <sup>2</sup>		Occurrence of request-defined censoring criteria <sup>3</sup>		Evidence of death <sup>4</sup>	
		Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1,292,089	1,217,133	94.2%	0	0.0%	70,727	5.5%
<i>Prevalent Furosemide</i>	16,261,347	15,670,509	96.4%	0	0.0%	538,773	3.3%
<i>Prevalent Torsemide</i>	1,270,424	1,197,944	94.3%	0	0.0%	66,229	5.2%
<i>Prevalent Ethacrynic Acid</i>	26,666	26,085	97.8%	0	0.0%	614	2.3%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1,292,089	1,029,816	79.7%	205,559	15.9%	56,803	4.4%
<i>Prevalent Furosemide</i>	16,261,347	15,439,706	94.9%	248,210	1.5%	526,539	3.2%
<i>Prevalent Torsemide</i>	1,270,424	1,026,650	80.8%	188,674	14.9%	52,330	4.1%
<i>Prevalent Ethacrynic Acid</i>	26,666	22,771	85.4%	3,508	13.2%	524	2.0%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	722,868	686,621	95.0%	0	0.0%	34,300	4.7%
<i>Prevalent Furosemide</i>	9,383,348	9,103,880	97.0%	0	0.0%	257,588	2.7%
<i>Prevalent Torsemide</i>	709,845	674,741	95.1%	0	0.0%	32,563	4.6%
<i>Prevalent Ethacrynic Acid</i>	12,831	12,603	98.2%	0	0.0%	237	1.8%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	722,868	583,487	80.7%	112,911	15.6%	27,059	3.7%
<i>Prevalent Furosemide</i>	9,383,348	8,971,440	95.6%	141,807	1.5%	251,203	2.7%
<i>Prevalent Torsemide</i>	709,845	581,872	82.0%	101,799	14.3%	25,532	3.6%
<i>Prevalent Ethacrynic Acid</i>	12,831	11,100	86.5%	1,576	12.3%	203	1.6%
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	197,597	191,020	96.7%	0	0.0%	5,941	3.0%

**Table 7. Summary of Reasons First Treatment Episodes Ended for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\*<sup>1</sup>**

	Censoring Reason						
	Total Number of Patients	End of exposure episode <sup>2</sup>		Occurrence of request-defined censoring criteria <sup>3</sup>		Evidence of death <sup>4</sup>	
		Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients
<i>New Furosemide</i>	5,839,348	5,668,341	97.1%	0	0.0%	160,217	2.7%
<i>New Torsemide</i>	194,601	188,725	97.0%	0	0.0%	5,042	2.6%
<i>New Ethacrynic Acid</i>	5,253	5,187	98.7%	0	0.0%	68	1.3%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	197,597	184,369	93.3%	7,130	3.6%	5,666	2.9%
<i>New Furosemide</i>	5,839,348	5,605,647	96.0%	66,894	1.1%	157,558	2.7%
<i>New Torsemide</i>	194,601	182,642	93.9%	6,494	3.3%	4,775	2.5%
<i>New Ethacrynic Acid</i>	5,253	4,940	94.0%	258	4.9%	66	1.3%

<sup>1</sup>A patient's episode may be censored due to more than one reason if they occur on the same date. Therefore, the sum of the reasons for censoring may be greater than the total number of patients.

<sup>2</sup>Represents episodes censored due to end of the exposure episode. In as-treated analyses, exposure episodes are defined using days supplied as recorded in outpatient pharmacy dispensing records, and episodes end after days supplied are exhausted or a pre-determined maximum episode duration is met. In point exposure analyses, exposure episodes end when a pre-determined maximum episode duration is met.

<sup>3</sup>Represents episodes censored due to occurrence of additional user-defined criteria using drug, procedure, diagnosis, and/or laboratory codes.

<sup>4</sup>Represents episodes censored due to evidence of death. Death data source and completeness varies by Data Partner.

<sup>5</sup>Represents episodes censored due to disenrollment from health plan. Data Partners often artificially assign a "disenrollment" date equal to data end date for members still enrolled on that date. Therefore, a patient may have dual reasons for censoring as "disenrollment" and "end of data" on the same day - this can be interpreted as right-censoring in most cases.

<sup>6</sup>Represents episodes censored due to Data Partner data end date. This end date represents the last day of the most recent year-month in which all of a Data Partner's data tables in the Sentinel Common Data Model have at least 80% of the record count relative to the prior month.

<sup>7</sup>Represents episodes censored due to user-specified study end date.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

**Table 7. Summary of Reasons First Treatment Episodes Ended for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\*<sup>1</sup> (Continued)**

	Censoring Reason					
	Disenrollment <sup>5</sup>		End of data partner data <sup>6</sup>		End of query period <sup>7</sup>	
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>						
<i>Prevalent Bumetanide</i>	78,039	6.0%	36,079	2.8%	41,865	3.2%
<i>Prevalent Furosemide</i>	875,484	5.4%	328,178	2.0%	378,322	2.3%
<i>Prevalent Torsemide</i>	97,207	7.7%	52,659	4.1%	58,493	4.6%
<i>Prevalent Ethacrynic Acid</i>	901	3.4%	313	1.2%	280	1.1%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>						
<i>Prevalent Bumetanide</i>	65,371	5.1%	29,372	2.3%	34,376	2.7%
<i>Prevalent Furosemide</i>	864,577	5.3%	323,213	2.0%	372,643	2.3%
<i>Prevalent Torsemide</i>	82,002	6.5%	43,638	3.4%	48,787	3.8%
<i>Prevalent Ethacrynic Acid</i>	818	3.1%	284	1.1%	256	1.0%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>						
<i>Prevalent Bumetanide</i>	40,341	5.6%	21,252	2.9%	24,414	3.4%
<i>Prevalent Furosemide</i>	454,347	4.8%	205,578	2.2%	228,726	2.4%
<i>Prevalent Torsemide</i>	51,292	7.2%	30,639	4.3%	33,259	4.7%
<i>Prevalent Ethacrynic Acid</i>	422	3.3%	159	1.2%	144	1.1%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>						
<i>Prevalent Bumetanide</i>	33,551	4.6%	17,456	2.4%	20,011	2.8%
<i>Prevalent Furosemide</i>	448,694	4.8%	202,679	2.2%	225,372	2.4%
<i>Prevalent Torsemide</i>	43,153	6.1%	25,673	3.6%	27,838	3.9%
<i>Prevalent Ethacrynic Acid</i>	380	3.0%	143	1.1%	130	1.0%
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>						
<i>New Bumetanide</i>	10,251	5.2%	5,537	2.8%	6,216	3.1%

**Table 7. Summary of Reasons First Treatment Episodes Ended for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\*<sup>1</sup> (Continued)**

	Censoring Reason					
	Disenrollment <sup>5</sup>		End of data partner data <sup>6</sup>		End of query period <sup>7</sup>	
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients
<i>New Furosemide</i>	286,765	4.9%	142,282	2.4%	154,404	2.6%
<i>New Torsemide</i>	13,832	7.1%	8,674	4.5%	9,253	4.8%
<i>New Ethacrynic Acid</i>	184	3.5%	81	1.5%	72	1.4%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>						
<i>New Bumetanide</i>	10,004	5.1%	5,413	2.7%	6,076	3.1%
<i>New Furosemide</i>	283,942	4.9%	140,567	2.4%	152,495	2.6%
<i>New Torsemide</i>	13,549	7.0%	8,518	4.4%	9,075	4.7%
<i>New Ethacrynic Acid</i>	178	3.4%	81	1.5%	72	1.4%

<sup>1</sup>A patient's episode may be censored due to more than one reason if they occur on the same date. Therefore, the sum of the reasons for censoring may be greater than the total number of patients.

<sup>2</sup>Represents episodes censored due to end of the exposure episode. In as-treated analyses, exposure episodes are defined using days supplied as recorded in outpatient pharmacy dispensing records, and episodes end after days supplied are exhausted or a pre-determined maximum episode duration is met. In point exposure analyses, exposure episodes end when a pre-determined maximum episode duration is met.

<sup>3</sup>Represents episodes censored due to occurrence of additional user-defined criteria using drug, procedure, diagnosis, and/or laboratory codes.

<sup>4</sup>Represents episodes censored due to evidence of death. Death data source and completeness varies by Data Partner.

<sup>5</sup>Represents episodes censored due to disenrollment from health plan. Data Partners often artificially assign a "disenrollment" date equal to data end date for members still enrolled on that date. Therefore, a patient may have dual reasons for censoring as "disenrollment" and "end of data" on the same day - this can be interpreted as right-censoring in most cases.

<sup>6</sup>Represents episodes censored due to Data Partner data end date. This end date represents the last day of the most recent year-month in which all of a Data Partner's data tables in the Sentinel Common Data Model have at least 80% of the record count relative to the prior month.

<sup>7</sup>Represents episodes censored due to user-specified study end date.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

**Table 8. Summary of Reasons Treatment Episodes Ended for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\*<sup>1</sup>**

	Censoring Reason						
	End of exposure episode <sup>2</sup>		Occurrence of request-defined censoring criteria <sup>3</sup>		Evidence of death <sup>4</sup>		
	Total Number of Episodes	Number of Episodes	Percent of Total Episodes	Number of Episodes	Percent of Total Episodes	Number of Episodes	Percent of Total Episodes
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	5,642,938	5,438,417	96.4%	0	0.0%	193,576	3.4%
<i>Prevalent Furosemide</i>	90,679,031	88,208,937	97.3%	0	0.0%	2,350,657	2.6%
<i>Prevalent Torsemide</i>	5,734,435	5,533,652	96.5%	0	0.0%	187,149	3.3%
<i>Prevalent Ethacrynic Acid</i>	95,533	93,981	98.4%	0	0.0%	1,636	1.7%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	5,642,938	5,002,050	88.6%	471,340	8.4%	167,741	3.0%
<i>Prevalent Furosemide</i>	90,679,031	87,129,455	96.1%	1,156,042	1.3%	2,293,845	2.5%
<i>Prevalent Torsemide</i>	5,734,435	5,165,868	90.1%	399,503	7.0%	162,375	2.8%
<i>Prevalent Ethacrynic Acid</i>	95,533	87,536	91.6%	6,793	7.1%	1,457	1.5%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	3,350,873	3,241,457	96.7%	0	0.0%	103,461	3.1%
<i>Prevalent Furosemide</i>	55,279,367	53,924,422	97.5%	0	0.0%	1,291,936	2.3%
<i>Prevalent Torsemide</i>	3,387,746	3,280,776	96.8%	0	0.0%	100,620	3.0%
<i>Prevalent Ethacrynic Acid</i>	50,865	50,127	98.5%	0	0.0%	771	1.5%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	3,350,873	2,990,559	89.2%	270,305	8.1%	89,456	2.7%
<i>Prevalent Furosemide</i>	55,279,367	53,273,000	96.4%	696,038	1.3%	1,259,339	2.3%
<i>Prevalent Torsemide</i>	3,387,746	3,073,277	90.7%	224,445	6.6%	87,598	2.6%
<i>Prevalent Ethacrynic Acid</i>	50,865	46,972	92.3%	3,303	6.5%	696	1.4%
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	735,860	716,040	97.3%	0	0.0%	17,638	2.4%

**Table 8. Summary of Reasons Treatment Episodes Ended for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\*<sup>1</sup>**

	Censoring Reason						
	End of exposure episode <sup>2</sup>		Occurrence of request-defined censoring criteria <sup>3</sup>		Evidence of death <sup>4</sup>		
	Total Number of Episodes	Number of Episodes	Percent of Total Episodes	Number of Episodes	Percent of Total Episodes	Number of Episodes	Percent of Total Episodes
<i>New Furosemide</i>	26,417,132	25,733,848	97.4%	0	0.0%	640,069	2.4%
<i>New Torsemide</i>	735,430	717,631	97.6%	0	0.0%	15,545	2.1%
<i>New Ethacrynic Acid</i>	16,237	16,069	99.0%	0	0.0%	173	1.1%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	735,860	694,750	94.4%	22,809	3.1%	16,673	2.3%
<i>New Furosemide</i>	26,417,132	25,451,182	96.3%	302,216	1.1%	626,338	2.4%
<i>New Torsemide</i>	735,430	698,742	95.0%	20,193	2.7%	14,631	2.0%
<i>New Ethacrynic Acid</i>	16,237	15,552	95.8%	546	3.4%	161	1.0%

<sup>1</sup>An episode may be censored due to more than one reason if they occur on the same date. Therefore, the sum of the reasons for censoring may be greater than the total number of episodes.

<sup>2</sup>Represents episodes censored due to end of the exposure episode. In as-treated analyses, exposure episodes are defined using days supplied as recorded in outpatient pharmacy dispensing records, and episodes end after days supplied are exhausted or a pre-determined maximum episode duration is met. In point exposure analyses, exposure episodes end when a pre-determined maximum episode duration is met.

<sup>3</sup>Represents episodes censored due to occurrence of additional user-defined criteria using drug, procedure, diagnosis, and/or laboratory codes.

<sup>4</sup>Represents episodes censored due to evidence of death. Death data source and completeness varies by Data Partner.

<sup>5</sup>Represents episodes censored due to disenrollment from health plan. Data Partners often artificially assign a "disenrollment" date equal to data end date for members still enrolled on that date. Therefore, a patient may have dual reasons for censoring as "disenrollment" and "end of data" on the same day - this can be interpreted as right-censoring in most cases.

<sup>6</sup>Represents episodes censored due to Data Partner data end date. This end date represents the last day of the most recent year-month in which all of a Data Partner's data tables in the Sentinel Common Data Model have at least 80% of the record count relative to the prior month.

<sup>7</sup>Represents episodes censored due to user-specified study end date.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.



**Table 8. Summary of Reasons Treatment Episodes Ended for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\*<sup>1</sup>**  
**(Continued)**

	Censoring Reason					
	Disenrollment <sup>5</sup>		End of data partner data <sup>6</sup>		End of query period <sup>7</sup>	
	Number of Episodes	Percent of Total Episodes	Number of Episodes	Percent of Total Episodes	Number of Episodes	Percent of Total Episodes
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>						
<i>Prevalent Bumetanide</i>	278,463	4.9%	135,062	2.4%	149,604	2.7%
<i>Prevalent Furosemide</i>	4,202,531	4.6%	1,803,357	2.0%	1,941,276	2.1%
<i>Prevalent Torsemide</i>	332,464	5.8%	180,796	3.2%	192,812	3.4%
<i>Prevalent Ethacrynic Acid</i>	3,085	3.2%	1,113	1.2%	1,048	1.1%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>						
<i>Prevalent Bumetanide</i>	254,999	4.5%	123,311	2.2%	136,429	2.4%
<i>Prevalent Furosemide</i>	4,155,471	4.6%	1,779,829	2.0%	1,914,993	2.1%
<i>Prevalent Torsemide</i>	307,446	5.4%	166,894	2.9%	177,797	3.1%
<i>Prevalent Ethacrynic Acid</i>	2,920	3.1%	1,057	1.1%	998	1.0%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>						
<i>Prevalent Bumetanide</i>	160,947	4.8%	84,838	2.5%	94,219	2.8%
<i>Prevalent Furosemide</i>	2,516,594	4.6%	1,205,846	2.2%	1,296,570	2.3%
<i>Prevalent Torsemide</i>	191,837	5.7%	111,141	3.3%	118,082	3.5%
<i>Prevalent Ethacrynic Acid</i>	1,640	3.2%	677	1.3%	652	1.3%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>						
<i>Prevalent Bumetanide</i>	147,760	4.4%	77,863	2.3%	86,253	2.6%
<i>Prevalent Furosemide</i>	2,488,486	4.5%	1,190,671	2.2%	1,279,547	2.3%
<i>Prevalent Torsemide</i>	177,882	5.3%	103,152	3.0%	109,380	3.2%
<i>Prevalent Ethacrynic Acid</i>	1,562	3.1%	648	1.3%	625	1.2%
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>						
<i>New Bumetanide</i>	37,769	5.1%	21,063	2.9%	23,322	3.2%
<i>New Furosemide</i>	1,362,007	5.2%	728,859	2.8%	779,264	2.9%

**Table 8. Summary of Reasons Treatment Episodes Ended for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\*<sup>1</sup>  
(Continued)**

	Censoring Reason					
	Disenrollment <sup>5</sup>		End of data partner data <sup>6</sup>		End of query period <sup>7</sup>	
	Number of Episodes	Percent of Total Episodes	Number of Episodes	Percent of Total Episodes	Number of Episodes	Percent of Total Episodes
<i>New Torsemide</i>	46,969	6.4%	29,258	4.0%	30,789	4.2%
<i>New Ethacrynic Acid</i>	618	3.8%	295	1.8%	283	1.7%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>						
<i>New Bumetanide</i>	36,834	5.0%	20,569	2.8%	22,776	3.1%
<i>New Furosemide</i>	1,348,031	5.1%	720,302	2.7%	769,791	2.9%
<i>New Torsemide</i>	45,979	6.3%	28,712	3.9%	30,194	4.1%
<i>New Ethacrynic Acid</i>	604	3.7%	291	1.8%	279	1.7%

<sup>1</sup>An episode may be censored due to more than one reason if they occur on the same date. Therefore, the sum of the reasons for censoring may be greater than the total number of episodes.

<sup>2</sup>Represents episodes censored due to end of the exposure episode. In as-treated analyses, exposure episodes are defined using days supplied as recorded in outpatient pharmacy dispensing records, and episodes end after days supplied are exhausted or a pre-determined maximum episode duration is met. In point exposure analyses, exposure episodes end when a pre-determined maximum episode duration is met.

<sup>3</sup>Represents episodes censored due to occurrence of additional user-defined criteria using drug, procedure, diagnosis, and/or laboratory codes.

<sup>4</sup>Represents episodes censored due to evidence of death. Death data source and completeness varies by Data Partner.

<sup>5</sup>Represents episodes censored due to disenrollment from health plan. Data Partners often artificially assign a "disenrollment" date equal to data end date for members still enrolled on that date. Therefore, a patient may have dual reasons for censoring as "disenrollment" and "end of data" on the same day - this can be interpreted as right-censoring in most cases.

<sup>6</sup>Represents episodes censored due to Data Partner data end date. This end date represents the last day of the most recent year-month in which all of a Data Partner's data tables in the Sentinel Common Data Model have at least 80% of the record count relative to the prior month.

<sup>7</sup>Represents episodes censored due to user-specified study end date.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

**Table 9. Summary of Episode Duration for Treatment Episodes Ended due to End Of Exposure Episode for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

		Number of Episodes Censored due to End Of Exposure Episode by Episode Length									
		0-364 days		365-729 days		730-1,094 days		1,095-1,459 days			
Total Number of Episodes	Total Number of Episodes Censored due to End Of Exposure Episode <sup>1</sup>	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>											
<i>Prevalent Bumetanide</i>	5,642,938	5,438,417	96.4%	5,244,800	96.4%	137,277	2.5%	34,167	0.6%	12,452	0.2%
<i>Prevalent Furosemide</i>	90,679,031	88,208,937	97.3%	84,619,575	95.5%	2,408,429	2.7%	669,939	0.8%	264,743	0.3%
<i>Prevalent Torsemide</i>	5,734,435	5,533,652	96.7%	5,309,596	96.0%	156,211	2.8%	40,409	0.7%	14,893	0.3%
<i>Prevalent Ethacrynic Acid</i>	95,533	93,981	97.3%	91,385	97.2%	1,763	1.9%	478	0.5%	184	0.2%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>											
<i>Prevalent Bumetanide</i>	5,642,938	5,002,050	88.7%	4,842,390	96.8%	114,194	2.3%	27,818	0.6%	9,937	0.2%
<i>Prevalent Furosemide</i>	90,679,031	87,129,455	96.1%	83,676,803	96.0%	2,327,044	2.7%	641,509	0.7%	251,899	0.3%
<i>Prevalent Torsemide</i>	5,734,435	5,165,868	90.1%	4,976,473	96.3%	133,395	2.6%	33,561	0.6%	12,160	0.2%
<i>Prevalent Ethacrynic Acid</i>	95,533	87,536	91.6%	85,338	97.5%	1,519	1.7%	396	0.5%	144	0.2%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>											
<i>Prevalent Bumetanide</i>	3,350,873	3,241,457	96.7%	3,131,924	96.6%	78,893	2.4%	19,267	0.6%	6,560	0.2%
<i>Prevalent Furosemide</i>	55,279,367	53,924,422	97.5%	51,860,811	96.2%	1,412,073	2.6%	382,188	0.7%	145,192	0.3%
<i>Prevalent Torsemide</i>	3,387,746	3,280,776	96.8%	3,155,907	96.2%	88,240	2.7%	22,471	0.7%	7,964	0.2%
<i>Prevalent Ethacrynic Acid</i>	50,865	50,127	98.5%	48,832	97.4%	938	1.9%	212	0.4%	86	0.2%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>											
<i>Prevalent Bumetanide</i>	3,350,873	2,990,559	89.2%	2,900,251	97.0%	65,546	2.2%	15,662	0.5%	5,229	0.2%
<i>Prevalent Furosemide</i>	55,279,367	53,273,000	96.4%	51,288,369	96.3%	1,363,536	2.6%	365,596	0.7%	138,142	0.3%
<i>Prevalent Torsemide</i>	3,387,746	3,073,277	90.7%	2,967,659	96.6%	75,468	2.5%	18,665	0.6%	6,477	0.2%
<i>Prevalent Ethacrynic Acid</i>	50,865	46,972	92.3%	45,863	97.6%	820	1.7%	171	0.4%	68	0.1%

**Table 9. Summary of Episode Duration for Treatment Episodes Ended due to End Of Exposure Episode for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

	Number of Episodes Censored due to End Of Exposure Episode by Episode Length									
			0-364 days		365-729 days		730-1,094 days		1,095-1,459 days	
	Total Number of Episodes	Total Number of Episodes Censored due to End Of Exposure Episode <sup>1</sup>	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>										
<i>New Bumetanide</i>	735,860	716,040	693,259	96.8%	16,325	2.3%	4,069	0.6%	1,373	0.2%
<i>New Furosemide</i>	26,417,132	25,733,848	24,766,580	96.2%	667,220	2.6%	179,961	0.7%	66,746	0.3%
<i>New Torsemide</i>	735,430	717,631	690,729	96.3%	18,740	2.6%	5,053	0.7%	1,761	0.2%
<i>New Ethacrynic Acid</i>	16,237	16,069	15,655	97.4%	304	1.9%	67	0.4%	31	0.2%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>										
<i>New Bumetanide</i>	735,860	694,750	673,986	97.0%	14,982	2.2%	3,644	0.5%	1,227	0.2%
<i>New Furosemide</i>	26,417,132	25,451,182	24,518,256	96.3%	645,547	2.5%	172,835	0.7%	63,804	0.3%
<i>New Torsemide</i>	735,430	698,742	673,806	96.4%	17,481	2.5%	4,652	0.7%	1,597	0.2%
<i>New Ethacrynic Acid</i>	16,237	15,552	15,188	97.7%	274	1.8%	55	0.4%	*****	*****

<sup>1</sup>Represents episodes censored due to end of the exposure episode. In as-treated analyses, exposure episodes are defined using days supplied as recorded in outpatient pharmacy dispensing records, and episodes end after days supplied are exhausted or a pre-determined maximum episode duration is met. In point exposure analyses, exposure episodes end when a pre-determined maximum episode duration is met.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 9. Summary of Episode Duration for Treatment Episodes Ended due to End Of Exposure Episode for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Number of Episodes Censored due to End Of Exposure Episode by Episode Length								
	1,460-1,824 days		1,825-2,189 days		2,190-2,554 days		2,555+ days	
	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	5,293	0.1%	2,252	0.0%	1,114	0.0%	1,062	0.0%
<i>Prevalent Furosemide</i>	119,902	0.1%	58,855	0.1%	31,284	0.0%	36,210	0.0%
<i>Prevalent Torsemide</i>	6,264	0.1%	3,037	0.1%	1,610	0.0%	1,632	0.0%
<i>Prevalent Ethacrynic Acid</i>	93	0.1%	33	0.0%	23	0.0%	22	0.0%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	4,127	0.1%	1,829	0.0%	908	0.0%	847	0.0%
<i>Prevalent Furosemide</i>	113,535	0.1%	55,405	0.1%	29,291	0.0%	33,969	0.0%
<i>Prevalent Torsemide</i>	5,150	0.1%	2,480	0.0%	1,307	0.0%	1,342	0.0%
<i>Prevalent Ethacrynic Acid</i>	77	0.1%	26	0.0%	19	0.0%	17	0.0%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	2,631	0.1%	1,182	0.0%	602	0.0%	398	0.0%
<i>Prevalent Furosemide</i>	63,706	0.1%	30,150	0.1%	15,650	0.0%	14,652	0.0%
<i>Prevalent Torsemide</i>	3,204	0.1%	1,547	0.0%	765	0.0%	678	0.0%
<i>Prevalent Ethacrynic Acid</i>	31	0.1%	12	0.0%	*****	*****	*****	*****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	2,111	0.1%	966	0.0%	485	0.0%	309	0.0%
<i>Prevalent Furosemide</i>	60,351	0.1%	28,448	0.1%	14,707	0.0%	13,851	0.0%
<i>Prevalent Torsemide</i>	2,587	0.1%	1,252	0.0%	619	0.0%	550	0.0%
<i>Prevalent Ethacrynic Acid</i>	29	0.1%	*****	*****	*****	*****	*****	*****
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	573	0.1%	247	0.0%	120	0.0%	74	0.0%
<i>New Furosemide</i>	28,655	0.1%	13,039	0.1%	6,390	0.0%	5,257	0.0%

**Table 9. Summary of Episode Duration for Treatment Episodes Ended due to End Of Exposure Episode for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Number of Episodes Censored due to End Of Exposure Episode by Episode Length								
	1,460-1,824 days		1,825-2,189 days		2,190-2,554 days		2,555+ days	
	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<i>New Torsemide</i>	713	0.1%	349	0.0%	160	0.0%	126	0.0%
<i>New Ethacrynic Acid</i>	****	****	****	****	****	****	****	****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	513	0.1%	225	0.0%	107	0.0%	66	0.0%
<i>New Furosemide</i>	27,309	0.1%	12,392	0.0%	6,033	0.0%	5,006	0.0%
<i>New Torsemide</i>	631	0.1%	314	0.0%	147	0.0%	114	0.0%
<i>New Ethacrynic Acid</i>	****	****	****	****	****	****	****	****

<sup>1</sup>Represents episodes censored due to end of the exposure episode. In as-treated analyses, exposure episodes are defined using days supplied as recorded in outpatient pharmacy dispensing records, and episodes end after days supplied are exhausted or a pre-determined maximum episode duration is met. In point exposure analyses, exposure episodes end when a pre-determined maximum episode duration is met.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 9. Summary of Episode Duration for Treatment Episodes Ended due to End Of Exposure Episode for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Distribution of Treatment Episode Length, in Days							
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1	30	30	90	5,560	89.7	151.5
<i>Prevalent Furosemide</i>	1	30	30	90	7,302	95.9	173.2
<i>Prevalent Torsemide</i>	1	30	39	90	5,124	96.3	164.4
<i>Prevalent Ethacrynic Acid</i>	1	30	30	90	4,092	75.9	143.7
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1	30	30	90	5,560	86.0	143.7
<i>Prevalent Furosemide</i>	1	30	30	90	5,924	94.8	170.4
<i>Prevalent Torsemide</i>	1	30	30	90	5,002	92.3	156.5
<i>Prevalent Ethacrynic Acid</i>	1	30	30	86	4,092	72.9	136.1
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	1	30	30	90	5,049	88.1	143.8
<i>Prevalent Furosemide</i>	1	30	30	90	5,597	93.3	162.2
<i>Prevalent Torsemide</i>	1	30	39	90	5,124	93.8	155.3
<i>Prevalent Ethacrynic Acid</i>	1	30	30	90	3,487	73.0	130.4
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	1	30	30	90	5,049	84.5	136.4
<i>Prevalent Furosemide</i>	1	30	30	90	5,597	92.3	159.7
<i>Prevalent Torsemide</i>	1	30	30	90	5,002	90.1	147.4
<i>Prevalent Ethacrynic Acid</i>	1	30	30	80	3,487	70.4	123.6
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	1	30	30	90	4,308	84.6	139.9
<i>New Furosemide</i>	1	30	30	90	5,597	89.6	157.6

**Table 9. Summary of Episode Duration for Treatment Episodes Ended due to End Of Exposure Episode for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Distribution of Treatment Episode Length, in Days							
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<i>New Torsemide</i>	1	30	31	90	5,002	92.7	154.1
<i>New Ethacrynic Acid</i>	1	30	30	60	3,178	69.9	124.9
Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation							
<i>New Bumetanide</i>	1	30	30	90	3,695	82.7	135.7
<i>New Furosemide</i>	1	30	30	90	5,597	88.6	155.4
<i>New Torsemide</i>	1	30	30	90	5,002	90.9	150.1
<i>New Ethacrynic Acid</i>	1	30	30	60	3,178	67.6	118.7

<sup>1</sup>Represents episodes censored due to end of the exposure episode. In as-treated analyses, exposure episodes are defined using days supplied as recorded in outpatient pharmacy dispensing records, and episodes end after days supplied are exhausted or a pre-determined maximum episode duration is met. In point exposure analyses, exposure episodes end when a pre-determined maximum episode duration is met.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.



**Table 10. Summary of Episode Duration for Treatment Episodes Ended due to Occurrence Of Request-Defined Censoring Criteria for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

Number of Episodes Censored due to Occurrence Of Request-Defined Censoring Criteria by Episode Length										
			0-364 days		365-729 days		730-1,094 days		1,095-1,459 days	
	Total Number of Episodes	Total Number of Episodes Censored due to Occurrence Of Request-Defined Censoring Criteria <sup>1</sup>	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<i>Prevalent Bumetanide</i>	5,642,938	0	0	NaN	0	NaN	0	NaN	0	NaN
<i>Prevalent Furosemide</i>	90,679,031	0	0	NaN	0	NaN	0	NaN	0	NaN
<i>Prevalent Torsemide</i>	5,734,435	0	0	NaN	0	NaN	0	NaN	0	NaN
<i>Prevalent Ethacrynic Acid</i>	95,533	0	0	NaN	0	NaN	0	NaN	0	NaN
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>										
<i>Prevalent Bumetanide</i>	5,642,938	471,340	457,928	97.2%	8,858	1.9%	2,677	0.6%	1,084	0.2%
<i>Prevalent Furosemide</i>	90,679,031	1,156,042	1,047,983	90.7%	63,697	5.5%	23,020	2.0%	10,298	0.9%
<i>Prevalent Torsemide</i>	5,734,435	399,503	385,537	96.5%	9,158	2.3%	2,813	0.7%	1,103	0.3%
<i>Prevalent Ethacrynic Acid</i>	95,533	6,793	6,569	96.7%	134	2.0%	50	0.7%	26	0.4%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>										
<i>Prevalent Bumetanide</i>	3,350,873	0	0	NaN	0	NaN	0	NaN	0	NaN
<i>Prevalent Furosemide</i>	55,279,367	0	0	NaN	0	NaN	0	NaN	0	NaN
<i>Prevalent Torsemide</i>	3,387,746	0	0	NaN	0	NaN	0	NaN	0	NaN
<i>Prevalent Ethacrynic Acid</i>	50,865	0	0	NaN	0	NaN	0	NaN	0	NaN
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>										
<i>Prevalent Bumetanide</i>	3,350,873	270,305	262,970	97.3%	5,035	1.9%	1,515	0.6%	493	0.2%
<i>Prevalent Furosemide</i>	55,279,367	696,038	634,877	91.2%	37,540	5.4%	13,074	1.9%	5,464	0.8%
<i>Prevalent Torsemide</i>	3,387,746	224,445	216,990	96.7%	4,927	2.2%	1,563	0.7%	565	0.3%
<i>Prevalent Ethacrynic Acid</i>	50,865	3,303	3,203	97.0%	57	1.7%	31	0.9%	*****	*****
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>										
<i>New Bumetanide</i>	735,860	0	0	NaN	0	NaN	0	NaN	0	NaN
<i>New Furosemide</i>	26,417,132	0	0	NaN	0	NaN	0	NaN	0	NaN
<i>New Torsemide</i>	735,430	0	0	NaN	0	NaN	0	NaN	0	NaN
<i>New Ethacrynic Acid</i>	16,237	0	0	NaN	0	NaN	0	NaN	0	NaN

**Table 10. Summary of Episode Duration for Treatment Episodes Ended due to Occurrence Of Request-Defined Censoring Criteria for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

Number of Episodes Censored due to Occurrence Of Request-Defined Censoring Criteria by Episode Length										
			0-364 days		365-729 days		730-1,094 days		1,095-1,459 days	
Total Number of Episodes	Total Number of Episodes Censored due to Occurrence Of Request-Defined Censoring Criteria <sup>1</sup>	Percent		Percent		Percent		Percent		
		Number of Episodes	of Episodes	Number of Episodes	of Episodes	Number of Episodes	of Episodes	Number of Episodes	of Episodes	
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>										
<i>New Bumetanide</i>	735,860	22,809	21,441	94.0%	939	4.1%	282	1.2%	84	0.4%
<i>New Furosemide</i>	26,417,132	302,216	275,018	91.0%	17,176	5.7%	5,751	1.9%	2,301	0.8%
<i>New Torsemide</i>	735,430	20,193	18,871	93.5%	866	4.3%	271	1.3%	114	0.6%
<i>New Ethacrynic Acid</i>	16,237	546	515	94.3%	15	2.7%	*****	*****	*****	*****

<sup>1</sup>Represents episodes censored due to occurrence of additional user-defined criteria using drug, procedure, diagnosis, and/or laboratory codes.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

NaN: Not a Number

**Table 10. Summary of Episode Duration for Treatment Episodes Ended due to Occurrence Of Request-Defined Censoring Criteria for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Number of Episodes Censored due to Occurrence Of Request-Defined Censoring Criteria by Episode Length								
	1,460-1,824 days		1,825-2,189 days		2,190-2,554 days		2,555+ days	
	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	0	NaN	0	NaN	0	NaN	0	NaN
<i>Prevalent Furosemide</i>	0	NaN	0	NaN	0	NaN	0	NaN
<i>Prevalent Torsemide</i>	0	NaN	0	NaN	0	NaN	0	NaN
<i>Prevalent Ethacrynic Acid</i>	0	NaN	0	NaN	0	NaN	0	NaN
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	522	0.1%	136	0.0%	77	0.0%	58	0.0%
<i>Prevalent Furosemide</i>	5,219	0.5%	2,665	0.2%	1,539	0.1%	1,621	0.1%
<i>Prevalent Torsemide</i>	461	0.1%	219	0.1%	111	0.0%	101	0.0%
<i>Prevalent Ethacrynic Acid</i>	*****	*****	*****	*****	0	0.0%	*****	*****
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	0	NaN	0	NaN	0	NaN	0	NaN
<i>Prevalent Furosemide</i>	0	NaN	0	NaN	0	NaN	0	NaN
<i>Prevalent Torsemide</i>	0	NaN	0	NaN	0	NaN	0	NaN
<i>Prevalent Ethacrynic Acid</i>	0	NaN	0	NaN	0	NaN	0	NaN
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	181	0.1%	62	0.0%	32	0.0%	17	0.0%
<i>Prevalent Furosemide</i>	2,638	0.4%	1,232	0.2%	682	0.1%	531	0.1%
<i>Prevalent Torsemide</i>	222	0.1%	94	0.0%	44	0.0%	40	0.0%
<i>Prevalent Ethacrynic Acid</i>	*****	*****	*****	*****	0	0.0%	*****	*****
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	0	NaN	0	NaN	0	NaN	0	NaN
<i>New Furosemide</i>	0	NaN	0	NaN	0	NaN	0	NaN
<i>New Torsemide</i>	0	NaN	0	NaN	0	NaN	0	NaN
<i>New Ethacrynic Acid</i>	0	NaN	0	NaN	0	NaN	0	NaN

**Table 10. Summary of Episode Duration for Treatment Episodes Ended due to Occurrence Of Request-Defined Censoring Criteria for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Number of Episodes Censored due to Occurrence Of Request-Defined Censoring Criteria by Episode Length								
	1,460-1,824 days		1,825-2,189 days		2,190-2,554 days		2,555+ days	
	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	38	0.2%	12	0.1%	*****	*****	*****	*****
<i>New Furosemide</i>	1,079	0.4%	474	0.2%	261	0.1%	156	0.1%
<i>New Torsemide</i>	46	0.2%	14	0.1%	*****	*****	*****	*****
<i>New Ethacrynic Acid</i>	*****	*****	0	0.0%	0	0.0%	0	0.0%

<sup>1</sup>Represents episodes censored due to occurrence of additional user-defined criteria using drug, procedure, diagnosis, and/or laboratory codes.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

NaN: Not a Number

**Table 10. Summary of Episode Duration for Treatment Episodes Ended due to Occurrence Of Request-Defined Censoring Criteria for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Distribution of Treatment Episode Length, in Days							
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	NaN	NaN	NaN	NaN	NaN	NaN	NaN
<i>Prevalent Furosemide</i>	NaN	NaN	NaN	NaN	NaN	NaN	NaN
<i>Prevalent Torsemide</i>	NaN	NaN	NaN	NaN	NaN	NaN	NaN
<i>Prevalent Ethacrynic Acid</i>	NaN	NaN	NaN	NaN	NaN	NaN	NaN
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1	6	18	41	4,556	54.0	141.7
<i>Prevalent Furosemide</i>	1	12	31	109	4,815	130.1	278.9
<i>Prevalent Torsemide</i>	1	8	21	52	3,910	63.9	159.8
<i>Prevalent Ethacrynic Acid</i>	1	8	21	45	3,475	62.2	163.9
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	NaN	NaN	NaN	NaN	NaN	NaN	NaN
<i>Prevalent Furosemide</i>	NaN	NaN	NaN	NaN	NaN	NaN	NaN
<i>Prevalent Torsemide</i>	NaN	NaN	NaN	NaN	NaN	NaN	NaN
<i>Prevalent Ethacrynic Acid</i>	NaN	NaN	NaN	NaN	NaN	NaN	NaN
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	1	6	18	41	4,166	52.2	131.1
<i>Prevalent Furosemide</i>	1	12	31	105	4,686	122.1	253.8
<i>Prevalent Torsemide</i>	1	8	21	52	3,818	61.9	151.5
<i>Prevalent Ethacrynic Acid</i>	1	8	20	46	2,885	59.8	150.1
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	NaN	NaN	NaN	NaN	NaN	NaN	NaN
<i>New Furosemide</i>	NaN	NaN	NaN	NaN	NaN	NaN	NaN
<i>New Torsemide</i>	NaN	NaN	NaN	NaN	NaN	NaN	NaN
<i>New Ethacrynic Acid</i>	NaN	NaN	NaN	NaN	NaN	NaN	NaN

**Table 10. Summary of Episode Duration for Treatment Episodes Ended due to Occurrence Of Request-Defined Censoring Criteria for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Distribution of Treatment Episode Length, in Days							
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	1	11	27	79	4,166	90.9	189.6
<i>New Furosemide</i>	1	15	38	116	3,600	125.8	245.9
<i>New Torsemide</i>	1	13	29	85	3,129	99.3	202.6
<i>New Ethacrynic Acid</i>	1	10	24	78	1,776	91.8	197.3

<sup>1</sup>Represents episodes censored due to occurrence of additional user-defined criteria using drug, procedure, diagnosis, and/or laboratory codes.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

NaN: Not a Number

**Table 11. Summary of Episode Duration for Treatment Episodes Ended due to Evidence Of Death for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

Number of Episodes Censored due to Evidence Of Death by Episode Length										
		0-364 days		365-729 days		730-1,094 days		1,095-1,459 days		
Total Number of Episodes	Total Number of Episodes Censored due to Evidence Of Death <sup>1</sup>	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>										
<i>Prevalent Bumetanide</i>	5,642,938	193,576	87.8%	170,007	7.7%	5,058	2.6%	2,012	1.0%	
<i>Prevalent Furosemide</i>	90,679,031	2,350,657	83.4%	1,960,375	9.5%	86,267	3.7%	39,736	1.7%	
<i>Prevalent Torsemide</i>	5,734,435	187,149	85.7%	160,360	8.8%	5,732	3.1%	2,508	1.3%	
<i>Prevalent Ethacrynic Acid</i>	95,533	1,636	89.0%	1,456	7.1%	34	2.1%	14	0.9%	
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>										
<i>Prevalent Bumetanide</i>	5,642,938	167,741	88.8%	148,977	7.1%	4,021	2.4%	1,561	0.9%	
<i>Prevalent Furosemide</i>	90,679,031	2,293,845	83.7%	1,919,976	9.4%	82,534	3.6%	37,797	1.6%	
<i>Prevalent Torsemide</i>	5,734,435	162,375	87.0%	141,215	8.2%	4,451	2.7%	1,910	1.2%	
<i>Prevalent Ethacrynic Acid</i>	95,533	1,457	89.4%	1,302	7.0%	27	1.9%	12	0.8%	
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>										
<i>Prevalent Bumetanide</i>	3,350,873	103,461	87.7%	90,712	7.9%	2,672	2.6%	1,071	1.0%	
<i>Prevalent Furosemide</i>	55,279,367	1,291,936	83.7%	1,080,723	9.7%	46,528	3.6%	20,709	1.6%	
<i>Prevalent Torsemide</i>	3,387,746	100,620	85.7%	86,201	9.0%	3,064	3.0%	1,339	1.3%	
<i>Prevalent Ethacrynic Acid</i>	50,865	771	90.7%	699	6.1%	*****	*****	*****	*****	
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>										
<i>Prevalent Bumetanide</i>	3,350,873	89,456	88.8%	79,405	7.3%	2,107	2.4%	819	0.9%	
<i>Prevalent Furosemide</i>	55,279,367	1,259,339	83.9%	1,057,185	9.6%	44,432	3.5%	19,693	1.6%	
<i>Prevalent Torsemide</i>	3,387,746	87,598	86.9%	76,149	8.4%	2,373	2.7%	1,030	1.2%	
<i>Prevalent Ethacrynic Acid</i>	50,865	696	91.1%	634	5.7%	*****	*****	*****	*****	

**Table 11. Summary of Episode Duration for Treatment Episodes Ended due to Evidence Of Death for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

Number of Episodes Censored due to Evidence Of Death by Episode Length										
		0-364 days		365-729 days		730-1,094 days		1,095-1,459 days		
Total Number of Episodes	Total Number of Episodes Censored due to Evidence Of Death <sup>1</sup>	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>										
<i>New Bumetanide</i>	735,860	17,638	15,412	87.4%	1,399	7.9%	477	2.7%	193	1.1%
<i>New Furosemide</i>	26,417,132	640,069	542,751	84.8%	58,873	9.2%	21,438	3.3%	9,279	1.4%
<i>New Torsemide</i>	735,430	15,545	13,237	85.2%	1,438	9.3%	471	3.0%	231	1.5%
<i>New Ethacrynic Acid</i>	16,237	173	156	90.2%	*****	*****	*****	*****	*****	*****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>										
<i>New Bumetanide</i>	735,860	16,673	14,677	88.0%	1,266	7.6%	423	2.5%	168	1.0%
<i>New Furosemide</i>	26,417,132	626,338	532,692	85.0%	56,851	9.1%	20,572	3.3%	8,880	1.4%
<i>New Torsemide</i>	735,430	14,631	12,577	86.0%	1,300	8.9%	404	2.8%	205	1.4%
<i>New Ethacrynic Acid</i>	16,237	161	147	91.3%	*****	*****	*****	*****	*****	*****

<sup>1</sup>Represents episodes censored due to evidence of death. Death data source and completeness varies by Data Partner.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.



**Table 11. Summary of Episode Duration for Treatment Episodes Ended due to Evidence Of Death for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

	1,460-1,824 days		1,825-2,189 days		2,190-2,554 days		2,555+ days	
	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	863	0.4%	359	0.2%	166	0.1%	151	0.1%
<i>Prevalent Furosemide</i>	19,743	0.8%	9,987	0.4%	5,223	0.2%	5,485	0.2%
<i>Prevalent Torsemide</i>	1,052	0.6%	491	0.3%	235	0.1%	233	0.1%
<i>Prevalent Ethacrynic Acid</i>	*****	*****	*****	*****	0	0.0%	*****	*****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	675	0.4%	274	0.2%	131	0.1%	123	0.1%
<i>Prevalent Furosemide</i>	18,664	0.8%	9,383	0.4%	4,857	0.2%	5,071	0.2%
<i>Prevalent Torsemide</i>	800	0.5%	384	0.2%	182	0.1%	180	0.1%
<i>Prevalent Ethacrynic Acid</i>	*****	*****	*****	*****	0	0.0%	*****	*****
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	484	0.5%	197	0.2%	78	0.1%	60	0.1%
<i>Prevalent Furosemide</i>	9,689	0.7%	4,803	0.4%	2,308	0.2%	1,799	0.1%
<i>Prevalent Torsemide</i>	528	0.5%	219	0.2%	92	0.1%	75	0.1%
<i>Prevalent Ethacrynic Acid</i>	*****	*****	*****	*****	0	0.0%	0	0.0%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	363	0.4%	159	0.2%	59	0.1%	52	0.1%
<i>Prevalent Furosemide</i>	9,148	0.7%	4,520	0.4%	2,151	0.2%	1,670	0.1%
<i>Prevalent Torsemide</i>	409	0.5%	173	0.2%	72	0.1%	58	0.1%
<i>Prevalent Ethacrynic Acid</i>	*****	*****	*****	*****	0	0.0%	0	0.0%
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	86	0.5%	44	0.2%	14	0.1%	13	0.1%
<i>New Furosemide</i>	4,198	0.7%	2,022	0.3%	913	0.1%	595	0.1%

**Table 11. Summary of Episode Duration for Treatment Episodes Ended due to Evidence Of Death for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

	1,460-1,824 days		1,825-2,189 days		2,190-2,554 days		2,555+ days	
	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<i>New Torsemide</i>	109	0.7%	35	0.2%	*****	*****	*****	*****
<i>New Ethacrynic Acid</i>	0	0.0%	*****	*****	0	0.0%	0	0.0%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	77	0.5%	38	0.2%	12	0.1%	12	0.1%
<i>New Furosemide</i>	4,012	0.6%	1,918	0.3%	853	0.1%	560	0.1%
<i>New Torsemide</i>	92	0.6%	32	0.2%	12	0.1%	*****	*****
<i>New Ethacrynic Acid</i>	0	0.0%	*****	*****	0	0.0%	0	0.0%

<sup>1</sup>Represents episodes censored due to evidence of death. Death data source and completeness varies by Data Partner.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 11. Summary of Episode Duration for Treatment Episodes Ended due to Evidence Of Death for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Distribution of Treatment Episode Length, in Days							
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1	23	60	173	4,015	161.8	273.3
<i>Prevalent Furosemide</i>	1	25	72	228	5,182	208.7	352.6
<i>Prevalent Torsemide</i>	1	26	70	203	4,754	184.2	303.4
<i>Prevalent Ethacrynic Acid</i>	1	19	51	147	2,559	147.2	267.0
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1	21	55	159	3,965	151.6	263.1
<i>Prevalent Furosemide</i>	1	25	70	223	5,182	205.1	347.7
<i>Prevalent Torsemide</i>	1	24	64	183	4,754	171.3	290.1
<i>Prevalent Ethacrynic Acid</i>	1	18	48	140	2,559	142.5	263.7
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	1	24	63	178	3,850	163.7	269.3
<i>Prevalent Furosemide</i>	1	26	74	228	4,677	203.1	329.9
<i>Prevalent Torsemide</i>	1	26	72	207	4,201	182.3	289.2
<i>Prevalent Ethacrynic Acid</i>	1	21	54	146	2,079	136.4	233.6
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	1	22	58	164	3,850	153.1	259.1
<i>Prevalent Furosemide</i>	1	25	73	223	4,677	199.8	325.9
<i>Prevalent Torsemide</i>	1	25	66	187	4,201	169.9	276.8
<i>Prevalent Ethacrynic Acid</i>	1	19	51	136	2,079	133.0	234.9
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	1	22	61	178	3,850	165.7	279.5
<i>New Furosemide</i>	1	24	69	209	3,985	189.5	311.1

**Table 11. Summary of Episode Duration for Treatment Episodes Ended due to Evidence Of Death for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Distribution of Treatment Episode Length, in Days							
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<i>New Torsemide</i>	1	26	72	209	3,308	186.7	297.0
<i>New Ethacrynic Acid</i>	1	20	52	147	2,079	156.1	296.7
Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation							
<i>New Bumetanide</i>	1	22	59	171	3,850	159.6	272.6
<i>New Furosemide</i>	1	24	67	206	3,985	186.8	308.0
<i>New Torsemide</i>	1	25	69	198	3,308	179.1	288.8
<i>New Ethacrynic Acid</i>	1	19	49	146	2,079	149.0	294.2

<sup>1</sup>Represents episodes censored due to evidence of death. Death data source and completeness varies by Data Partner.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 12. Summary of Episode Duration for Treatment Episodes Ended due to Disenrollment for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

		Number of Episodes Censored due to Disenrollment by Episode Length										
		0-364 days		365-729 days		730-1,094 days		1,095-1,459 days				
		Total Number of Episodes	Percent of Episodes		Percent of Episodes		Percent of Episodes		Percent of Episodes			
Total Number of Episodes Censored due to Disenrollment <sup>1</sup>			Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>												
<i>Prevalent Bumetanide</i>	5,642,938	278,463	235,011	84.4%	26,420	9.5%	8,817	3.2%	3,990	1.4%		
<i>Prevalent Furosemide</i>	90,679,031	4,202,531	3,440,165	81.9%	423,754	10.1%	160,631	3.8%	78,474	1.9%		
<i>Prevalent Torsemide</i>	5,734,435	332,464	274,308	82.5%	35,830	10.8%	11,721	3.5%	5,056	1.5%		
<i>Prevalent Ethacrynic Acid</i>	95,533	3,085	2,649	85.9%	254	8.2%	84	2.7%	42	1.4%		
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>												
<i>Prevalent Bumetanide</i>	5,642,938	254,999	217,708	85.4%	22,802	8.9%	7,539	3.0%	3,376	1.3%		
<i>Prevalent Furosemide</i>	90,679,031	4,155,471	3,408,345	82.0%	416,471	10.0%	157,296	3.8%	76,653	1.8%		
<i>Prevalent Torsemide</i>	5,734,435	307,446	256,851	83.5%	31,432	10.2%	10,098	3.3%	4,312	1.4%		
<i>Prevalent Ethacrynic Acid</i>	95,533	2,920	2,531	86.7%	234	8.0%	73	2.5%	35	1.2%		
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>												
<i>Prevalent Bumetanide</i>	3,350,873	160,947	135,136	84.0%	15,828	9.8%	5,392	3.4%	2,293	1.4%		
<i>Prevalent Furosemide</i>	55,279,367	2,516,594	2,052,588	81.6%	262,858	10.4%	99,340	3.9%	46,877	1.9%		
<i>Prevalent Torsemide</i>	3,387,746	191,837	158,430	82.6%	20,814	10.8%	6,835	3.6%	2,838	1.5%		
<i>Prevalent Ethacrynic Acid</i>	50,865	1,640	1,422	86.7%	137	8.4%	38	2.3%	21	1.3%		
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>												
<i>Prevalent Bumetanide</i>	3,350,873	147,760	125,568	85.0%	13,715	9.3%	4,637	3.1%	1,911	1.3%		
<i>Prevalent Furosemide</i>	55,279,367	2,488,486	2,033,717	81.7%	258,285	10.4%	97,243	3.9%	45,784	1.8%		
<i>Prevalent Torsemide</i>	3,387,746	177,882	148,812	83.7%	18,309	10.3%	5,909	3.3%	2,390	1.3%		
<i>Prevalent Ethacrynic Acid</i>	50,865	1,562	1,367	87.5%	128	8.2%	32	2.0%	18	1.2%		

**Table 12. Summary of Episode Duration for Treatment Episodes Ended due to Disenrollment for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

<b>Number of Episodes Censored due to Disenrollment by Episode Length</b>											
		<b>0-364 days</b>		<b>365-729 days</b>		<b>730-1,094 days</b>		<b>1,095-1,459 days</b>			
		<b>Percent of Episodes</b>		<b>Percent of Episodes</b>		<b>Percent of Episodes</b>		<b>Percent of Episodes</b>			
<b>Total Number of Episodes</b>	<b>Total Number of Episodes Censored due to Disenrollment<sup>1</sup></b>	<b>Number of Episodes</b>	<b>Percent of Episodes</b>	<b>Number of Episodes</b>	<b>Percent of Episodes</b>	<b>Number of Episodes</b>	<b>Percent of Episodes</b>	<b>Number of Episodes</b>	<b>Percent of Episodes</b>	<b>Number of Episodes</b>	<b>Percent of Episodes</b>
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>											
<i>New Bumetanide</i>	735,860	37,769	31,910 84.5%	3,577 9.5%	1,255 3.3%	522 1.4%					
<i>New Furosemide</i>	26,417,132	1,362,007	1,114,020 81.8%	144,247 10.6%	53,704 3.9%	24,267 1.8%					
<i>New Torsemide</i>	735,430	46,969	39,114 83.3%	4,847 10.3%	1,710 3.6%	633 1.3%					
<i>New Ethacrynic Acid</i>	16,237	618	536 86.7%	49 7.9%	22 3.6%	*****	*****				
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>											
<i>New Bumetanide</i>	735,860	36,834	31,252 84.8%	3,427 9.3%	1,191 3.2%	488 1.3%					
<i>New Furosemide</i>	26,417,132	1,348,031	1,104,525 81.9%	141,927 10.5%	52,677 3.9%	23,753 1.8%					
<i>New Torsemide</i>	735,430	45,979	38,454 83.6%	4,662 10.1%	1,632 3.5%	611 1.3%					
<i>New Ethacrynic Acid</i>	16,237	604	529 87.6%	46 7.6%	*****	*****	*****	*****			

<sup>1</sup>Represents episodes censored due to disenrollment from health plan. Data Partners often artificially assign a "disenrollment" date equal to data end date for members still enrolled on that date. Therefore, a patient may have dual reasons for censoring as "disenrollment" and "end of data" on the same day - this can be interpreted as right-censoring in most cases.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 12. Summary of Episode Duration for Treatment Episodes Ended due to Disenrollment for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

	1,460-1,824 days		1,825-2,189 days		2,190-2,554 days		2,555+ days	
	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	1,998	0.7%	1,001	0.4%	597	0.2%	629	0.2%
<i>Prevalent Furosemide</i>	41,540	1.0%	23,125	0.6%	13,623	0.3%	21,219	0.5%
<i>Prevalent Torsemide</i>	2,499	0.8%	1,297	0.4%	747	0.2%	1,006	0.3%
<i>Prevalent Ethacrynic Acid</i>	24	0.8%	****	****	****	****	11	0.4%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	1,665	0.7%	867	0.3%	514	0.2%	528	0.2%
<i>Prevalent Furosemide</i>	40,508	1.0%	22,501	0.5%	13,184	0.3%	20,513	0.5%
<i>Prevalent Torsemide</i>	2,145	0.7%	1,100	0.4%	641	0.2%	867	0.3%
<i>Prevalent Ethacrynic Acid</i>	22	0.8%	****	****	****	****	****	****
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	1,101	0.7%	587	0.4%	354	0.2%	256	0.2%
<i>Prevalent Furosemide</i>	24,030	1.0%	13,394	0.5%	7,934	0.3%	9,573	0.4%
<i>Prevalent Torsemide</i>	1,361	0.7%	722	0.4%	398	0.2%	439	0.2%
<i>Prevalent Ethacrynic Acid</i>	****	****	****	****	****	****	****	****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	914	0.6%	509	0.3%	301	0.2%	205	0.1%
<i>Prevalent Furosemide</i>	23,457	0.9%	13,041	0.5%	7,695	0.3%	9,264	0.4%
<i>Prevalent Torsemide</i>	1,145	0.6%	604	0.3%	336	0.2%	377	0.2%
<i>Prevalent Ethacrynic Acid</i>	****	****	****	****	****	****	****	****
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	268	0.7%	129	0.3%	63	0.2%	45	0.1%
<i>New Furosemide</i>	12,195	0.9%	6,465	0.5%	3,505	0.3%	3,604	0.3%

**Table 12. Summary of Episode Duration for Treatment Episodes Ended due to Disenrollment for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

	1,460-1,824 days		1,825-2,189 days		2,190-2,554 days		2,555+ days	
	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<i>New Torsemide</i>	334	0.7%	159	0.3%	89	0.2%	83	0.2%
<i>New Ethacrynic Acid</i>	0	0.0%	*****	*****	0	0.0%	*****	*****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	253	0.7%	123	0.3%	61	0.2%	39	0.1%
<i>New Furosemide</i>	11,931	0.9%	6,305	0.5%	3,409	0.3%	3,504	0.3%
<i>New Torsemide</i>	308	0.7%	149	0.3%	84	0.2%	79	0.2%
<i>New Ethacrynic Acid</i>	0	0.0%	*****	*****	0	0.0%	*****	*****

<sup>1</sup>Represents episodes censored due to disenrollment from health plan. Data Partners often artificially assign a "disenrollment" date equal to data end date for members still enrolled on that date. Therefore, a patient may have dual reasons for censoring as "disenrollment" and "end of data" on the same day - this can be interpreted as right-censoring in most cases.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.



**Table 12. Summary of Episode Duration for Treatment Episodes Ended due to Disenrollment for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

	Distribution of Treatment Episode Length, in Days						
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1	26	73	224	5,560	200.0	340.6
<i>Prevalent Furosemide</i>	1	27	79	257	7,302	234.3	407.2
<i>Prevalent Torsemide</i>	1	28	81	251	5,124	217.0	357.5
<i>Prevalent Ethacrynic Acid</i>	1	21	59	177	4,092	189.9	364.6
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1	24	69	206	5,560	190.1	330.5
<i>Prevalent Furosemide</i>	1	27	79	254	5,597	232.3	404.4
<i>Prevalent Torsemide</i>	1	27	77	235	5,002	206.6	347.4
<i>Prevalent Ethacrynic Acid</i>	1	20	57	170	4,092	179.1	347.5
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	1	27	75	226	5,049	200.3	329.6
<i>Prevalent Furosemide</i>	1	28	80	256	5,597	230.8	386.4
<i>Prevalent Torsemide</i>	1	29	81	247	5,124	212.5	341.3
<i>Prevalent Ethacrynic Acid</i>	1	20	58	161	3,178	172.8	320.4
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	1	25	71	209	5,049	189.8	318.4
<i>Prevalent Furosemide</i>	1	28	80	254	5,597	228.9	384.1
<i>Prevalent Torsemide</i>	1	27	77	230	5,002	201.7	329.9
<i>Prevalent Ethacrynic Acid</i>	1	19	57	156	3,178	161.5	295.0
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	1	25	71	214	3,695	192.8	318.0
<i>New Furosemide</i>	1	27	80	253	5,597	223.0	364.7
<i>New Torsemide</i>	1	28	79	234	5,002	205.1	328.3
<i>New Ethacrynic Acid</i>	1	18	57	162	3,178	165.0	297.4

**Table 12. Summary of Episode Duration for Treatment Episodes Ended due to Disenrollment for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Distribution of Treatment Episode Length, in Days							
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	1	24	70	209	3,695	189.1	312.9
<i>New Furosemide</i>	1	27	79	251	5,597	221.4	362.9
<i>New Torsemide</i>	1	28	78	230	5,002	201.7	324.2
<i>New Ethacrynic Acid</i>	1	17	55	158	3,178	158.9	292.2

<sup>1</sup>Represents episodes censored due to disenrollment from health plan. Data Partners often artificially assign a "disenrollment" date equal to data end date for members still enrolled on that date. Therefore, a patient may have dual reasons for censoring as "disenrollment" and "end of data" on the same day - this can be interpreted as right-censoring in most cases.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 13. Summary of Episode Duration for Treatment Episodes Ended due to End Of Data Partner Data for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

Number of Episodes Censored due to End Of Data Partner Data by Episode Length								
			0-364 days		365-729 days		730-1,094 days	
	Total Number of Episodes	Total Number of Episodes Censored due to End Of Data Partner Data <sup>1</sup>	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	5,642,938	135,062	106,992	79.2%	16,552	12.3%	5,658	4.2%
<i>Prevalent Furosemide</i>	90,679,031	1,803,357	1,348,074	74.8%	240,047	13.3%	95,838	5.3%
<i>Prevalent Torsemide</i>	5,734,435	180,796	140,962	78.0%	24,309	13.4%	7,966	4.4%
<i>Prevalent Ethacrynic Acid</i>	95,533	1,113	913	82.0%	111	10.0%	30	2.7%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	5,642,938	123,311	99,244	80.5%	14,289	11.6%	4,825	3.9%
<i>Prevalent Furosemide</i>	90,679,031	1,779,829	1,333,718	74.9%	235,831	13.3%	93,875	5.3%
<i>Prevalent Torsemide</i>	5,734,435	166,894	132,155	79.2%	21,363	12.8%	6,896	4.1%
<i>Prevalent Ethacrynic Acid</i>	95,533	1,057	877	83.0%	103	9.7%	26	2.5%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	3,350,873	84,838	67,405	79.5%	10,308	12.2%	3,624	4.3%
<i>Prevalent Furosemide</i>	55,279,367	1,205,846	909,831	75.5%	158,815	13.2%	63,311	5.3%
<i>Prevalent Torsemide</i>	3,387,746	111,141	87,541	78.8%	14,517	13.1%	4,751	4.3%
<i>Prevalent Ethacrynic Acid</i>	50,865	677	559	82.6%	72	10.6%	17	2.5%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	3,350,873	77,863	62,841	80.7%	8,969	11.5%	3,116	4.0%
<i>Prevalent Furosemide</i>	55,279,367	1,190,671	900,515	75.6%	156,027	13.1%	61,998	5.2%
<i>Prevalent Torsemide</i>	3,387,746	103,152	82,528	80.0%	12,819	12.4%	4,145	4.0%
<i>Prevalent Ethacrynic Acid</i>	50,865	648	542	83.6%	67	10.3%	15	2.3%

**Table 13. Summary of Episode Duration for Treatment Episodes Ended due to End Of Data Partner Data for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

Number of Episodes Censored due to End Of Data Partner Data by Episode Length								
			0-364 days		365-729 days		730-1,094 days	
	Total Number of Episodes	Total Number of Episodes Censored due to End Of Data Partner Data <sup>1</sup>	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	735,860	21,063	16,928	80.4%	2,442	11.6%	893	4.2%
<i>New Furosemide</i>	26,417,132	728,859	558,714	76.7%	94,899	13.0%	37,000	5.1%
<i>New Torsemide</i>	735,430	29,258	23,460	80.2%	3,538	12.1%	1,249	4.3%
<i>New Ethacrynic Acid</i>	16,237	295	248	84.1%	30	10.2%	*****	*****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	735,860	20,569	16,617	80.8%	2,345	11.4%	852	4.1%
<i>New Furosemide</i>	26,417,132	720,302	553,250	76.8%	93,343	13.0%	36,279	5.0%
<i>New Torsemide</i>	735,430	28,712	23,126	80.5%	3,418	11.9%	1,201	4.2%
<i>New Ethacrynic Acid</i>	16,237	291	246	84.5%	29	10.0%	*****	*****

<sup>1</sup>Represents episodes censored due to Data Partner data end date. This end date represents the last day of the most recent year-month in which all of a Data Partner's data tables in the Sentinel Common Data Model have at least 80% of the record count relative to the prior month.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 13. Summary of Episode Duration for Treatment Episodes Ended due to End Of Data Partner Data for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Number of Episodes Censored due to End Of Data Partner Data by Episode Length										
	1,095-1,459 days		1,460-1,824 days		1,825-2,189 days		2,190-2,554 days		2,555+ days	
	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>										
<i>Prevalent Bumetanide</i>	2,681	2.0%	1,429	1.1%	762	0.6%	470	0.3%	518	0.4%
<i>Prevalent Furosemide</i>	48,557	2.7%	26,837	1.5%	16,338	0.9%	10,180	0.6%	17,486	1.0%
<i>Prevalent Torsemide</i>	3,402	1.9%	1,778	1.0%	955	0.5%	582	0.3%	842	0.5%
<i>Prevalent Ethacrynic Acid</i>	21	1.9%	14	1.3%	*****	*****	*****	*****	11	1.0%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>										
<i>Prevalent Bumetanide</i>	2,273	1.8%	1,186	1.0%	655	0.5%	404	0.3%	435	0.4%
<i>Prevalent Furosemide</i>	47,473	2.7%	26,234	1.5%	15,927	0.9%	9,844	0.6%	16,927	1.0%
<i>Prevalent Torsemide</i>	2,901	1.7%	1,534	0.9%	811	0.5%	502	0.3%	732	0.4%
<i>Prevalent Ethacrynic Acid</i>	20	1.9%	13	1.2%	*****	*****	*****	*****	*****	*****
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>										
<i>Prevalent Bumetanide</i>	1,655	2.0%	859	1.0%	463	0.5%	306	0.4%	218	0.3%
<i>Prevalent Furosemide</i>	31,739	2.6%	17,442	1.4%	10,204	0.8%	6,356	0.5%	8,148	0.7%
<i>Prevalent Torsemide</i>	2,017	1.8%	1,046	0.9%	569	0.5%	321	0.3%	379	0.3%
<i>Prevalent Ethacrynic Acid</i>	13	1.9%	*****	*****	*****	*****	*****	*****	*****	*****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>										
<i>Prevalent Bumetanide</i>	1,386	1.8%	716	0.9%	399	0.5%	261	0.3%	175	0.2%
<i>Prevalent Furosemide</i>	31,032	2.6%	17,085	1.4%	9,961	0.8%	6,157	0.5%	7,896	0.7%
<i>Prevalent Torsemide</i>	1,702	1.6%	892	0.9%	475	0.5%	267	0.3%	324	0.3%
<i>Prevalent Ethacrynic Acid</i>	12	1.9%	*****	*****	*****	*****	*****	*****	*****	*****

**Table 13. Summary of Episode Duration for Treatment Episodes Ended due to End Of Data Partner Data for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Number of Episodes Censored due to End Of Data Partner Data by Episode Length										
	1,095-1,459 days		1,460-1,824 days		1,825-2,189 days		2,190-2,554 days		2,555+ days	
	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>										
<i>New Bumetanide</i>	384	1.8%	209	1.0%	106	0.5%	59	0.3%	42	0.2%
<i>New Furosemide</i>	17,665	2.4%	9,355	1.3%	5,156	0.7%	2,927	0.4%	3,143	0.4%
<i>New Torsemide</i>	470	1.6%	266	0.9%	128	0.4%	73	0.2%	74	0.3%
<i>New Ethacrynic Acid</i>	*****	*****	0	0.0%	*****	*****	0	0.0%	*****	*****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>										
<i>New Bumetanide</i>	362	1.8%	199	1.0%	101	0.5%	57	0.3%	36	0.2%
<i>New Furosemide</i>	17,313	2.4%	9,179	1.3%	5,032	0.7%	2,846	0.4%	3,060	0.4%
<i>New Torsemide</i>	461	1.6%	247	0.9%	120	0.4%	69	0.2%	70	0.2%
<i>New Ethacrynic Acid</i>	*****	*****	0	0.0%	*****	*****	0	0.0%	*****	*****

<sup>1</sup>Represents episodes censored due to Data Partner data end date. This end date represents the last day of the most recent year-month in which all of a Data Partner's data tables in the Sentinel Common Data Model have at least 80% of the record count relative to the prior month.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 13. Summary of Episode Duration for Treatment Episodes Ended due to End Of Data Partner Data for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Distribution of Treatment Episode Length, in Days							
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1	34	92	298	5,560	250.5	399.2
<i>Prevalent Furosemide</i>	1	41	115	369	7,302	312.5	497.7
<i>Prevalent Torsemide</i>	1	37	103	316	5,124	258.6	402.5
<i>Prevalent Ethacrynic Acid</i>	1	26	76	230	4,092	243.8	471.1
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1	31	86	278	5,560	237.7	387.7
<i>Prevalent Furosemide</i>	1	40	114	365	5,597	310.1	494.8
<i>Prevalent Torsemide</i>	1	35	93	297	5,002	246.8	392.3
<i>Prevalent Ethacrynic Acid</i>	1	25	72	218	4,092	229.7	449.6
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	1	33	89	290	5,049	244.0	380.4
<i>Prevalent Furosemide</i>	1	38	108	356	5,597	295.9	459.5
<i>Prevalent Torsemide</i>	1	36	98	301	5,124	247.7	379.9
<i>Prevalent Ethacrynic Acid</i>	1	27	76	209	3,178	218.4	388.6
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	1	30	85	269	5,049	231.1	367.9
<i>Prevalent Furosemide</i>	1	38	108	352	5,597	293.8	457.2
<i>Prevalent Torsemide</i>	1	34	88	282	5,002	235.3	367.3
<i>Prevalent Ethacrynic Acid</i>	1	25	73	192	3,178	202.9	355.0
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	1	30	85	272	3,611	232.8	363.8
<i>New Furosemide</i>	1	36	104	335	5,597	275.1	420.4
<i>New Torsemide</i>	1	34	89	276	5,002	234.0	359.4

**Table 13. Summary of Episode Duration for Treatment Episodes Ended due to End Of Data Partner Data for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

Distribution of Treatment Episode Length, in Days							
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<i>New Ethacrynic Acid</i>	1	22	71	191	3,178	191.5	343.7
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	1	30	84	267	3,611	228.3	357.8
<i>New Furosemide</i>	1	36	101	331	5,597	273.5	418.7
<i>New Torsemide</i>	1	34	87	272	5,002	230.5	355.3
<i>New Ethacrynic Acid</i>	1	22	71	190	3,178	189.0	342.9

<sup>1</sup>Represents episodes censored due to Data Partner data end date. This end date represents the last day of the most recent year-month in which all of a Data Partner's data tables in the Sentinel Common Data Model have at least 80% of the record count relative to the prior month.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.



**Table 14. Summary of Episode Duration for Treatment Episodes Ended due to End Of Query Period for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

			Number of Episodes Censored due to End Of Query Period by Episode Length							
			0-364 days		365-729 days		730-1,094 days		1,095-1,459 days	
	Total Number of Episodes	Total Number of Episodes Censored due to End Of Query Period <sup>1</sup>	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>										
<i>Prevalent Bumetanide</i>	5,642,938	149,604	117,297	78.4%	19,048	12.7%	6,504	4.3%	3,060	2.0%
<i>Prevalent Furosemide</i>	90,679,031	1,941,276	1,432,327	73.8%	267,324	13.8%	106,910	5.5%	54,210	2.8%
<i>Prevalent Torsemide</i>	5,734,435	192,812	149,654	77.6%	26,305	13.6%	8,608	4.5%	3,700	1.9%
<i>Prevalent Ethacrynic Acid</i>	95,533	1,048	866	82.6%	103	9.8%	28	2.7%	18	1.7%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>										
<i>Prevalent Bumetanide</i>	5,642,938	136,429	108,831	79.8%	16,399	12.0%	5,512	4.0%	2,580	1.9%
<i>Prevalent Furosemide</i>	90,679,031	1,914,993	1,416,718	74.0%	262,470	13.7%	104,662	5.5%	52,939	2.8%
<i>Prevalent Torsemide</i>	5,734,435	177,797	140,224	78.9%	23,072	13.0%	7,432	4.2%	3,158	1.8%
<i>Prevalent Ethacrynic Acid</i>	95,533	998	832	83.4%	98	9.8%	24	2.4%	17	1.7%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>										
<i>Prevalent Bumetanide</i>	3,350,873	94,219	74,385	78.9%	11,690	12.4%	4,095	4.3%	1,904	2.0%
<i>Prevalent Furosemide</i>	55,279,367	1,296,570	969,840	74.8%	174,506	13.5%	69,602	5.4%	35,376	2.7%
<i>Prevalent Torsemide</i>	3,387,746	118,082	92,628	78.4%	15,605	13.2%	5,113	4.3%	2,221	1.9%
<i>Prevalent Ethacrynic Acid</i>	50,865	652	542	83.1%	68	10.4%	17	2.6%	12	1.8%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>										
<i>Prevalent Bumetanide</i>	3,350,873	86,253	69,272	80.3%	10,108	11.7%	3,484	4.0%	1,596	1.9%
<i>Prevalent Furosemide</i>	55,279,367	1,279,547	959,593	75.0%	171,317	13.4%	68,107	5.3%	34,544	2.7%
<i>Prevalent Torsemide</i>	3,387,746	109,380	87,201	79.7%	13,740	12.6%	4,437	4.1%	1,879	1.7%
<i>Prevalent Ethacrynic Acid</i>	50,865	625	526	84.2%	64	10.2%	15	2.4%	*****	*****

**Table 14. Summary of Episode Duration for Treatment Episodes Ended due to End Of Query Period for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

	Total Number of Episodes	Total Number of Episodes Censored due to End Of Query Period <sup>1</sup>	Number of Episodes Censored due to End Of Query Period by Episode Length							
			0-364 days		365-729 days		730-1,094 days		1,095-1,459 days	
			Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>										
<i>New Bumetanide</i>	735,860	23,322	18,593	79.7%	2,783	11.9%	1,008	4.3%	454	1.9%
<i>New Furosemide</i>	26,417,132	779,264	592,490	76.0%	103,672	13.3%	40,681	5.2%	19,509	2.5%
<i>New Torsemide</i>	735,430	30,789	24,578	79.8%	3,783	12.3%	1,332	4.3%	518	1.7%
<i>New Ethacrynic Acid</i>	16,237	283	240	84.8%	29	10.2%	*****	*****	*****	*****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>										
<i>New Bumetanide</i>	735,860	22,776	18,262	80.2%	2,667	11.7%	960	4.2%	430	1.9%
<i>New Furosemide</i>	26,417,132	769,791	586,585	76.2%	101,905	13.2%	39,855	5.2%	19,096	2.5%
<i>New Torsemide</i>	735,430	30,194	24,214	80.2%	3,655	12.1%	1,283	4.2%	505	1.7%
<i>New Ethacrynic Acid</i>	16,237	279	238	85.3%	28	10.0%	*****	*****	*****	*****

<sup>1</sup>Represents episodes censored due to user-specified study end date.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 14. Summary of Episode Duration for Treatment Episodes Ended due to End Of Query Period for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

	Number of Episodes Censored due to End Of Query Period by Episode Length							
	1,460-1,824 days		1,825-2,189 days		2,190-2,554 days		2,555+ days	
	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	1,685	1.1%	880	0.6%	558	0.4%	572	0.4%
<i>Prevalent Furosemide</i>	30,413	1.6%	18,777	1.0%	11,710	0.6%	19,605	1.0%
<i>Prevalent Torsemide</i>	1,946	1.0%	1,041	0.5%	631	0.3%	927	0.5%
<i>Prevalent Ethacrynic Acid</i>	12	1.1%	*****	*****	*****	*****	*****	*****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i>	1,400	1.0%	748	0.5%	482	0.4%	477	0.3%
<i>Prevalent Furosemide</i>	29,688	1.6%	18,275	1.0%	11,313	0.6%	18,928	1.0%
<i>Prevalent Torsemide</i>	1,681	0.9%	887	0.5%	541	0.3%	802	0.5%
<i>Prevalent Ethacrynic Acid</i>	11	1.1%	*****	*****	*****	*****	*****	*****
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	1,002	1.1%	531	0.6%	362	0.4%	250	0.3%
<i>Prevalent Furosemide</i>	19,556	1.5%	11,536	0.9%	7,025	0.5%	9,129	0.7%
<i>Prevalent Torsemide</i>	1,137	1.0%	614	0.5%	341	0.3%	423	0.4%
<i>Prevalent Ethacrynic Acid</i>	*****	*****	*****	*****	*****	*****	*****	*****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i>	831	1.0%	453	0.5%	311	0.4%	198	0.2%
<i>Prevalent Furosemide</i>	19,135	1.5%	11,241	0.9%	6,795	0.5%	8,815	0.7%
<i>Prevalent Torsemide</i>	972	0.9%	513	0.5%	281	0.3%	357	0.3%
<i>Prevalent Ethacrynic Acid</i>	*****	*****	*****	*****	*****	*****	0	0.0%

**Table 14. Summary of Episode Duration for Treatment Episodes Ended due to End Of Query Period for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

	Number of Episodes Censored due to End Of Query Period by Episode Length							
	1,460-1,824 days		1,825-2,189 days		2,190-2,554 days		2,555+ days	
	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes	Number of Episodes	Percent of Episodes
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	241	1.0%	122	0.5%	68	0.3%	53	0.2%
<i>New Furosemide</i>	10,367	1.3%	5,781	0.7%	3,213	0.4%	3,551	0.5%
<i>New Torsemide</i>	284	0.9%	135	0.4%	76	0.2%	83	0.3%
<i>New Ethacrynic Acid</i>	0	0.0%	*****	*****	0	0.0%	0	0.0%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i>	228	1.0%	117	0.5%	67	0.3%	45	0.2%
<i>New Furosemide</i>	10,159	1.3%	5,641	0.7%	3,112	0.4%	3,438	0.4%
<i>New Torsemide</i>	264	0.9%	124	0.4%	71	0.2%	78	0.3%
<i>New Ethacrynic Acid</i>	0	0.0%	*****	*****	0	0.0%	0	0.0%

<sup>1</sup>Represents episodes censored due to user-specified study end date.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 14. Summary of Episode Duration for Treatment Episodes Ended due to End Of Query Period for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

	Distribution of Treatment Episode Length, in Days						
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1	35	92	306	5,560	255.2	404.8
<i>Prevalent Furosemide</i>	1	41	114	386	5,559	319.3	507.0
<i>Prevalent Torsemide</i>	1	37	100	317	5,124	259.9	406.0
<i>Prevalent Ethacrynic Acid</i>	1	24	72	211	4,092	233.6	458.7
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>							
<i>Prevalent Bumetanide</i>	1	31	86	283	5,560	241.5	392.8
<i>Prevalent Furosemide</i>	1	41	113	384	5,559	316.7	503.8
<i>Prevalent Torsemide</i>	1	35	89	297	5,097	247.6	395.7
<i>Prevalent Ethacrynic Acid</i>	1	24	71	203	4,092	221.4	439.5
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	1	34	91	297	5,049	248.7	386.5
<i>Prevalent Furosemide</i>	1	40	112	368	5,130	302.2	466.9
<i>Prevalent Torsemide</i>	1	36	98	304	5,124	250.4	384.0
<i>Prevalent Ethacrynic Acid</i>	1	26	74	192	2,841	208.3	364.0
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>							
<i>Prevalent Bumetanide</i>	1	31	86	275	5,049	235.0	373.3
<i>Prevalent Furosemide</i>	1	39	111	365	5,130	299.9	464.3
<i>Prevalent Torsemide</i>	1	34	88	286	5,002	237.6	371.0
<i>Prevalent Ethacrynic Acid</i>	1	24	72	189	2,534	192.1	324.1

**Table 14. Summary of Episode Duration for Treatment Episodes Ended due to End Of Query Period for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

	Distribution of Treatment Episode Length, in Days						
	Minimum	Q1	Median	Q3	Maximum	Mean	Standard Deviation
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	1	31	86	283	4,363	239.1	372.2
<i>New Furosemide</i>	1	37	106	345	5,043	281.0	426.9
<i>New Torsemide</i>	1	35	91	281	5,002	236.9	363.2
<i>New Ethacrynic Acid</i>	1	22	71	189	2,149	172.6	270.2
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>							
<i>New Bumetanide</i>	1	31	85	275	4,363	234.5	365.9
<i>New Furosemide</i>	1	37	105	342	5,043	279.1	424.9
<i>New Torsemide</i>	1	34	88	275	5,002	233.2	358.5
<i>New Ethacrynic Acid</i>	1	22	71	185	2,149	169.8	267.6

<sup>1</sup>Represents episodes censored due to user-specified study end date.

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 15. Summary of Cumulative Filled Dose in All Treatment Episodes for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

	Number of Patients by Cumulative Filled Dose								
	0 - <30,000mg Oral Furosemide Equivalents		30,000 - <60,000mg Oral Furosemide Equivalents		60,000 - <90,000mg Oral Furosemide Equivalents		90,000 - <120,000mg Oral Furosemide Equivalents		
	Total Number of Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>									
<i>Prevalent Bumetanide</i> <sup>1</sup>	1,292,089	728,085	56.3%	182,930	14.2%	104,305	8.1%	67,525	5.2%
<i>Prevalent Furosemide</i> <sup>2</sup>	16,261,347	12,351,037	76.0%	2,016,631	12.4%	867,981	5.3%	429,951	2.6%
<i>Prevalent Torsemide</i> <sup>3</sup>	1,270,424	717,446	56.5%	187,572	14.8%	103,757	8.2%	64,493	5.1%
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	26,666	24,201	90.8%	1,514	5.7%	472	1.8%	211	0.8%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>									
<i>Prevalent Bumetanide</i> <sup>1</sup>	1,292,089	771,651	59.7%	171,711	13.3%	96,562	7.5%	62,594	4.8%
<i>Prevalent Furosemide</i> <sup>2</sup>	16,261,347	12,392,839	76.2%	2,004,392	12.3%	859,697	5.3%	423,814	2.6%
<i>Prevalent Torsemide</i> <sup>3</sup>	1,270,424	757,459	59.6%	177,638	14.0%	96,683	7.6%	60,014	4.7%
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	26,666	24,346	91.3%	1,419	5.3%	453	1.7%	204	0.8%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>									
<i>Prevalent Bumetanide</i> <sup>1</sup>	722,868	389,162	53.8%	106,969	14.8%	62,550	8.7%	40,327	5.6%
<i>Prevalent Furosemide</i> <sup>2</sup>	9,383,348	7,003,872	74.6%	1,264,056	13.5%	530,414	5.7%	259,044	2.8%
<i>Prevalent Torsemide</i> <sup>3</sup>	709,845	386,683	54.5%	109,100	15.4%	61,284	8.6%	38,123	5.4%
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	12,831	11,531	89.9%	797	6.2%	247	1.9%	117	0.9%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>									
<i>Prevalent Bumetanide</i> <sup>1</sup>	722,868	414,117	57.3%	100,846	14.0%	58,142	8.0%	37,387	5.2%
<i>Prevalent Furosemide</i> <sup>2</sup>	9,383,348	7,029,741	74.9%	1,256,595	13.4%	524,786	5.6%	255,035	2.7%
<i>Prevalent Torsemide</i> <sup>3</sup>	709,845	408,929	57.6%	103,853	14.6%	57,340	8.1%	35,615	5.0%
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	12,831	11,604	90.4%	749	5.8%	240	1.9%	110	0.9%
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>									
<i>New Bumetanide</i> <sup>1</sup>	197,597	136,704	69.2%	24,803	12.6%	12,571	6.4%	7,276	3.7%
<i>New Furosemide</i> <sup>2</sup>	5,839,348	4,903,175	84.0%	576,264	9.9%	198,419	3.4%	82,890	1.4%

**Table 15. Summary of Cumulative Filled Dose in All Treatment Episodes for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

	Number of Patients by Cumulative Filled Dose								
	0 - <30,000mg Oral Furosemide Equivalents		30,000 - <60,000mg Oral Furosemide Equivalents		60,000 - <90,000mg Oral Furosemide Equivalents		90,000 - <120,000mg Oral Furosemide Equivalents		
	Total Number of Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients
<i>New Torsemide</i> <sup>3</sup>	194,601	141,000	72.5%	24,164	12.4%	11,237	5.8%	6,061	3.1%
<i>New Ethacrynic Acid</i> <sup>4</sup>	5,253	4,970	94.6%	195	3.7%	54	1.0%	20	0.4%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>									
<i>New Bumetanide</i> <sup>1</sup>	197,597	137,946	69.8%	24,551	12.4%	12,331	6.2%	7,136	3.6%
<i>New Furosemide</i> <sup>2</sup>	5,839,348	4,914,160	84.2%	571,916	9.8%	195,766	3.4%	81,259	1.4%
<i>New Torsemide</i> <sup>3</sup>	194,601	142,078	73.0%	23,906	12.3%	10,993	5.6%	5,927	3.0%
<i>New Ethacrynic Acid</i> <sup>4</sup>	5,253	4,981	94.8%	187	3.6%	52	1.0%	21	0.4%

<sup>1</sup>Bumetanide: 0 - <30,000mg furosemide equivalents = 0 - 374mg; 30,000 - <60,000mg furosemide equivalents = 375-749mg; 60,000 - <90,000mg furosemide equivalents = 750-1,124mg; 90,000 - <120,000mg furosemide equivalents = 1,125-1,499mg; 120,000 - <150,000mg furosemide equivalents = 1,500-1,874mg; 150,000 - <180,000mg furosemide equivalents = 1,875-2,249mg; 180,000 - <210,000mg furosemide equivalents = 2,250-2,624mg; 210,000+ mg furosemide equivalents = 2,625+ mg

<sup>2</sup>Furosemide: 0 - <30,000mg furosemide equivalents = 0 - 29,999mg; 30,000 - <60,000mg furosemide equivalents = 30,000-59,999mg; 60,000 - <90,000mg furosemide equivalents = 60,000-89,999mg; 90,000 - <120,000mg furosemide equivalents = 90,000-119,999mg; 120,000 - <150,000mg furosemide equivalents = 120,000-149,999mg; 150,000 - <180,000mg furosemide equivalents = 150,000-179,999mg; 180,000 - <210,000mg furosemide equivalents = 180,000-209,999mg; 210,000+ mg furosemide equivalents = 210,000+ mg

<sup>3</sup>Torsemide: 0 - <30,000mg furosemide equivalents = 0 - 7,499mg; 30,000 - <60,000mg furosemide equivalents = 7,500-14,999mg; 60,000 - <90,000mg furosemide equivalents = 15,000-22,499mg; 90,000 - <120,000mg furosemide equivalents = 22,500-29,999mg; 120,000 - <150,000mg furosemide equivalents = 30,000-37,499mg; 150,000 - <180,000mg furosemide equivalents = 37,500-44,999mg; 180,000 - <210,000mg furosemide equivalents = 45,000-52,499mg; 210,000+ mg furosemide equivalents = 52,500+ mg

<sup>4</sup>Ethacrynic acid: 0 - <30,000mg furosemide equivalents = 0 - 37,499mg; 30,000 - <60,000mg furosemide equivalents = 37,500-74,999mg; 60,000 - <90,000mg furosemide equivalents = 75,000-112,499mg; 90,000 - <120,000mg furosemide equivalents = 112,500-149,999mg; 120,000 - <150,000mg furosemide equivalents = 150,000-187,499mg; 150,000 - <180,000mg furosemide equivalents = 187,500-224,999mg; 180,000 - <210,000mg furosemide equivalents = 225,000-262,499mg; 210,000+ mg furosemide equivalents = 262,500+ mg

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.



**Table 15. Summary of Cumulative Filled Dose in All Treatment Episodes for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

	Number of Patients by Cumulative Filled Dose							
	120,000 - <150,000mg Oral Furosemide Equivalents		150,000 - <180,000mg Oral Furosemide Equivalents		180,000 - <210,000mg Oral Furosemide Equivalents		210,000+ mg Oral Furosemide Equivalents	
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>								
<i>Prevalent Bumetanide</i> <sup>1</sup>	48,028	3.7%	33,857	2.6%	25,279	2.0%	102,080	7.9%
<i>Prevalent Furosemide</i> <sup>2</sup>	237,661	1.5%	134,612	0.8%	75,470	0.5%	148,004	0.9%
<i>Prevalent Torsemide</i> <sup>3</sup>	45,226	3.6%	31,052	2.4%	23,369	1.8%	97,509	7.7%
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	97	0.4%	65	0.2%	37	0.1%	69	0.3%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>								
<i>Prevalent Bumetanide</i> <sup>1</sup>	43,969	3.4%	31,003	2.4%	22,984	1.8%	91,615	7.1%
<i>Prevalent Furosemide</i> <sup>2</sup>	233,238	1.4%	131,489	0.8%	73,279	0.5%	142,599	0.9%
<i>Prevalent Torsemide</i> <sup>3</sup>	41,434	3.3%	28,528	2.2%	21,266	1.7%	87,402	6.9%
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	90	0.3%	51	0.2%	37	0.1%	66	0.2%
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i> <sup>1</sup>	28,715	4.0%	20,122	2.8%	15,486	2.1%	59,537	8.2%
<i>Prevalent Furosemide</i> <sup>2</sup>	139,338	1.5%	69,259	0.7%	41,434	0.4%	75,931	0.8%
<i>Prevalent Torsemide</i> <sup>3</sup>	26,970	3.8%	18,035	2.5%	13,786	1.9%	55,864	7.9%
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	51	0.4%	39	0.3%	12	0.1%	37	0.3%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>								
<i>Prevalent Bumetanide</i> <sup>1</sup>	26,412	3.7%	18,438	2.6%	14,078	1.9%	53,448	7.4%
<i>Prevalent Furosemide</i> <sup>2</sup>	136,543	1.5%	67,431	0.7%	40,222	0.4%	72,995	0.8%
<i>Prevalent Torsemide</i> <sup>3</sup>	24,764	3.5%	16,643	2.3%	12,486	1.8%	50,215	7.1%
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	48	0.4%	*****	*****	12	0.1%	*****	*****
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i> <sup>1</sup>	4,722	2.4%	3,015	1.5%	2,206	1.1%	6,300	3.2%
<i>New Furosemide</i> <sup>2</sup>	37,216	0.6%	17,439	0.3%	9,377	0.2%	14,568	0.2%

**Table 15. Summary of Cumulative Filled Dose in All Treatment Episodes for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

	Number of Patients by Cumulative Filled Dose							
	120,000 - <150,000mg Oral Furosemide Equivalents		150,000 - <180,000mg Oral Furosemide Equivalents		180,000 - <210,000mg Oral Furosemide Equivalents		210,000+ mg Oral Furosemide Equivalents	
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients
<i>New Torsemide</i> <sup>3</sup>	3,676	1.9%	2,213	1.1%	1,630	0.8%	4,620	2.4%
<i>New Ethacrynic Acid</i> <sup>4</sup>	*****	*****	*****	*****	0	0.0%	*****	*****
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>								
<i>New Bumetanide</i> <sup>1</sup>	4,599	2.3%	2,956	1.5%	2,128	1.1%	5,950	3.0%
<i>New Furosemide</i> <sup>2</sup>	36,334	0.6%	16,906	0.3%	9,031	0.2%	13,976	0.2%
<i>New Torsemide</i> <sup>3</sup>	3,581	1.8%	2,174	1.1%	1,564	0.8%	4,378	2.2%
<i>New Ethacrynic Acid</i> <sup>4</sup>	*****	*****	*****	*****	0	0.0%	*****	*****

<sup>1</sup>Bumetanide: 0 - <30,000mg furosemide equivalents = 0 - 374mg; 30,000 - <60,000mg furosemide equivalents = 375-749mg; 60,000 - <90,000mg furosemide equivalents = 750-1,124mg; 90,000 - <120,000mg furosemide equivalents = 1,125-1,499mg; 120,000 - <150,000mg furosemide equivalents = 1,500-1,874mg; 150,000 - <180,000mg furosemide equivalents = 1,875-2,249mg; 180,000 - <210,000mg furosemide equivalents = 2,250-2,624mg; 210,000+ mg furosemide equivalents = 2,625+ mg

<sup>2</sup>Furosemide: 0 - <30,000mg furosemide equivalents = 0 - 29,999mg; 30,000 - <60,000mg furosemide equivalents = 30,000-59,999mg; 60,000 - <90,000mg furosemide equivalents = 60,000-89,999mg; 90,000 - <120,000mg furosemide equivalents = 90,000-119,999mg; 120,000 - <150,000mg furosemide equivalents = 120,000-149,999mg; 150,000 - <180,000mg furosemide equivalents = 150,000-179,999mg; 180,000 - <210,000mg furosemide equivalents = 180,000-209,999mg; 210,000+ mg furosemide equivalents = 210,000+ mg

<sup>3</sup>Torsemide: 0 - <30,000mg furosemide equivalents = 0 - 7,499mg; 30,000 - <60,000mg furosemide equivalents = 7,500-14,999mg; 60,000 - <90,000mg furosemide equivalents = 15,000-22,499mg; 90,000 - <120,000mg furosemide equivalents = 22,500-29,999mg; 120,000 - <150,000mg furosemide equivalents = 30,000-37,499mg; 150,000 - <180,000mg furosemide equivalents = 37,500-44,999mg; 180,000 - <210,000mg furosemide equivalents = 45,000-52,499mg; 210,000+ mg furosemide equivalents = 52,500+ mg

<sup>4</sup>Ethacrynic acid: 0 - <30,000mg furosemide equivalents = 0 - 37,499mg; 30,000 - <60,000mg furosemide equivalents = 37,500-74,999mg; 60,000 - <90,000mg furosemide equivalents = 75,000-112,499mg; 90,000 - <120,000mg furosemide equivalents = 112,500-149,999mg; 120,000 - <150,000mg furosemide equivalents = 150,000-187,499mg; 150,000 - <180,000mg furosemide equivalents = 187,500-224,999mg; 180,000 - <210,000mg furosemide equivalents = 225,000-262,499mg; 210,000+ mg furosemide equivalents = 262,500+ mg

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 16. Summary of Cumulative Filled Dose in Each Patient's First Treatment Episode for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

	Number of Patients by Cumulative Filled Dose in First Treatment Episode										
	0 - <30,000mg Oral Furosemide Equivalents		30,000 - <60,000mg Oral Furosemide Equivalents		60,000 - <90,000mg Oral Furosemide Equivalents		90,000 - <120,000mg Oral Furosemide Equivalents		120,000 - <150,000mg Oral Furosemide Equivalents		
	Total Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>											
<i>Prevalent Bumetanide</i> <sup>1</sup>	1,292,089	88.6%	79,506	6.2%	28,473	2.2%	14,031	1.1%	8,376	0.6%	
<i>Prevalent Furosemide</i> <sup>2</sup>	16,261,347	97.7%	252,027	1.5%	66,818	0.4%	26,164	0.2%	12,088	0.1%	
<i>Prevalent Torsemide</i> <sup>3</sup>	1,270,424	87.6%	82,708	6.5%	30,989	2.4%	14,160	1.1%	8,901	0.7%	
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	26,666	99.0%	180	0.7%	57	0.2%	27	0.1%	*****	*****	
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>											
<i>Prevalent Bumetanide</i> <sup>1</sup>	1,292,089	91.1%	63,999	5.0%	22,057	1.7%	10,647	0.8%	6,229	0.5%	
<i>Prevalent Furosemide</i> <sup>2</sup>	16,261,347	97.8%	247,390	1.5%	65,264	0.4%	25,349	0.2%	11,664	0.1%	
<i>Prevalent Torsemide</i> <sup>3</sup>	1,270,424	90.3%	67,257	5.30%	24,059	1.9%	10,680	0.8%	6,602	0.5%	
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	26,666	99.2%	137	0.5%	48	0.2%	20	0.1%	*****	*****	
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>											
<i>Prevalent Bumetanide</i> <sup>1</sup>	722,868	88.6%	45,039	6.2%	15,759	2.2%	7,714	1.1%	4,488	0.6%	
<i>Prevalent Furosemide</i> <sup>2</sup>	9,383,348	97.9%	138,111	1.5%	34,539	0.4%	12,965	0.1%	5,789	0.1%	
<i>Prevalent Torsemide</i> <sup>3</sup>	709,845	87.8%	46,543	6.6%	17,209	2.4%	7,587	1.1%	4,797	0.7%	
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	12,831	99.0%	80	0.6%	26	0.2%	*****	*****	*****	*****	
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>											
<i>Prevalent Bumetanide</i> <sup>1</sup>	722,868	91.2%	36,378	5.0%	12,116	1.7%	5,705	0.8%	3,267	0.5%	
<i>Prevalent Furosemide</i> <sup>2</sup>	9,383,348	97.9%	135,392	1.4%	33,589	0.4%	12,512	0.1%	5,555	0.1%	
<i>Prevalent Torsemide</i> <sup>3</sup>	709,845	90.4%	38,097	5.4%	13,364	1.9%	5,677	0.8%	3,553	0.5%	
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	12,831	99.2%	65	0.5%	22	0.2%	*****	*****	*****	*****	
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>											
<i>New Bumetanide</i> <sup>1</sup>	197,597	93.9%	7,259	3.7%	2,289	1.2%	990	0.5%	588	0.3%	
<i>New Furosemide</i> <sup>2</sup>	5,839,348	98.5%	63,849	1.1%	14,491	0.2%	5,178	0.1%	2,068	0.0%	

**Table 16. Summary of Cumulative Filled Dose in Each Patient's First Treatment Episode for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\***

	Number of Patients by Cumulative Filled Dose in First Treatment Episode										
	0 - <30,000mg Oral Furosemide Equivalents		30,000 - <60,000mg Oral Furosemide Equivalents		60,000 - <90,000mg Oral Furosemide Equivalents		90,000 - <120,000mg Oral Furosemide Equivalents		120,000 - <150,000mg Oral Furosemide Equivalents		
	Total Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	
<i>New Torsemide</i> <sup>3</sup>	194,601	94.3%	183,549	3.5%	6,809	1.1%	2,137	0.4%	833	0.2%	473
<i>New Ethacrynic Acid</i> <sup>4</sup>	5,253	99.5%	5,228	****	****	****	****	****	****	0	0.0%
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>											
<i>New Bumetanide</i> <sup>1</sup>	197,597	94.1%	185,939	3.6%	7,066	1.1%	2,214	0.5%	940	0.3%	568
<i>New Furosemide</i> <sup>2</sup>	5,839,348	98.5%	5,752,962	1.1%	62,882	0.2%	14,179	0.1%	5,022	0.0%	1,981
<i>New Torsemide</i> <sup>3</sup>	194,601	94.5%	183,891	3.4%	6,639	1.1%	2,073	0.4%	800	0.2%	448
<i>New Ethacrynic Acid</i> <sup>4</sup>	5,253	99.6%	5,232	****	****	****	****	0	0.0%	0	0.0%

<sup>1</sup>Bumetanide: 0 - <30,000mg furosemide equivalents = 0 - 374mg; 30,000 - <60,000mg furosemide equivalents = 375-749mg; 60,000 - <90,000mg furosemide equivalents = 750-1,124mg; 90,000 - <120,000mg furosemide equivalents = 1,125-1,499mg; 120,000 - <150,000mg furosemide equivalents = 1,500-1,874mg; 150,000 - <180,000mg furosemide equivalents = 1,875-2,249mg; 180,000 - <210,000mg furosemide equivalents = 2,250-2,624mg; 210,000+ mg furosemide equivalents = 2,625+ mg

<sup>2</sup>Furosemide: 0 - <30,000mg furosemide equivalents = 0 - 29,999mg; 30,000 - <60,000mg furosemide equivalents = 30,000-59,999mg; 60,000 - <90,000mg furosemide equivalents = 60,000-89,999mg; 90,000 - <120,000mg furosemide equivalents = 90,000-119,999mg; 120,000 - <150,000mg furosemide equivalents = 120,000-149,999mg; 150,000 - <180,000mg furosemide equivalents = 150,000-179,999mg; 180,000 - <210,000mg furosemide equivalents = 180,000-209,999mg; 210,000+ mg furosemide equivalents = 210,000+ mg

<sup>3</sup>Torsemide: 0 - <30,000mg furosemide equivalents = 0 - 7,499mg; 30,000 - <60,000mg furosemide equivalents = 7,500-14,999mg; 60,000 - <90,000mg furosemide equivalents = 15,000-22,499mg; 90,000 - <120,000mg furosemide equivalents = 22,500-29,999mg; 120,000 - <150,000mg furosemide equivalents = 30,000-37,499mg; 150,000 - <180,000mg furosemide equivalents = 37,500-44,999mg; 180,000 - <210,000mg furosemide equivalents = 45,000-52,499mg; 210,000+ mg furosemide equivalents = 52,500+ mg

<sup>4</sup>Ethacrynic acid: 0 - <30,000mg furosemide equivalents = 0 - 37,499mg; 30,000 - <60,000mg furosemide equivalents = 37,500-74,999mg; 60,000 - <90,000mg furosemide equivalents = 75,000-112,499mg; 90,000 - <120,000mg furosemide equivalents = 112,500-149,999mg; 120,000 - <150,000mg furosemide equivalents = 150,000-187,499mg; 150,000 - <180,000mg furosemide equivalents = 187,500-224,999mg; 180,000 - <210,000mg furosemide equivalents = 225,000-262,499mg; 210,000+ mg furosemide equivalents = 262,500+ mg

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Table 16. Summary of Cumulative Filled Dose in Each Patient's First Treatment Episode for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

	Number of Patients by Cumulative Filled Dose in First Treatment Episode						Distribution of Cumulative Filled Dose			
	150,000 - <180,000mg Oral Furosemide Equivalents		180,000 - <210,000mg Oral Furosemide Equivalents		210,000+ mg Oral Furosemide Equivalents		Minimum	Maximum	Mean	Standard Deviation
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients				
<b>Episodes Censored at Treatment Cessation, No Exclusions</b>										
<i>Prevalent Bumetanide</i> <sup>1</sup>	4,789	0.4%	3,206	0.2%	9,485	0.7%	5	14,750,400	16,577.5	52,099.0
<i>Prevalent Furosemide</i> <sup>2</sup>	6,513	0.0%	3,446	0.0%	6,896	0.0%	0	12,055,200	4,399.3	16,175.2
<i>Prevalent Torsemide</i> <sup>3</sup>	5,100	0.4%	3,690	0.3%	11,692	0.9%	6	36,110,400	17,467.9	60,759.0
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	*****	*****	*****	*****	*****	*****	10	309,600	2,793.1	7,843.2
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Exclusions</b>										
<i>Prevalent Bumetanide</i> <sup>1</sup>	3,498	0.3%	2,325	0.2%	6,707	0.5%	4	14,400,000	13,561.3	44,848.8
<i>Prevalent Furosemide</i> <sup>2</sup>	6,225	0.0%	3,336	0.0%	6,460	0.0%	0	12,055,200	4,332.8	15,910.5
<i>Prevalent Torsemide</i> <sup>3</sup>	3,712	0.3%	2,602	0.2%	8,067	0.6%	3	36,110,400	14,093.6	52,192.9
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	*****	*****	*****	*****	*****	*****	4	309,600	2,467.1	7,133.9
<b>Episodes Censored at Treatment Cessation, No Evidence of Cancer, Chemotherapy, or Radiation</b>										
<i>Prevalent Bumetanide</i> <sup>1</sup>	2,627	0.4%	1,708	0.2%	4,847	0.7%	13	14,750,400	16,423.7	49,382.1
<i>Prevalent Furosemide</i> <sup>2</sup>	2,706	0.0%	1,499	0.0%	2,899	0.0%	0	9,823,760	4,323.8	14,829.7
<i>Prevalent Torsemide</i> <sup>3</sup>	2,717	0.4%	1,968	0.3%	6,039	0.9%	2	12,024,000	17,142.4	51,811.2
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	*****	*****	*****	*****	*****	*****	10	234,400	2,819.1	7,594.4
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Cancer, Chemotherapy, or Radiation</b>										
<i>Prevalent Bumetanide</i> <sup>1</sup>	1,895	0.3%	1,264	0.2%	3,274	0.5%	4	14,400,000	13,376.6	39,259.2
<i>Prevalent Furosemide</i> <sup>2</sup>	2,564	0.0%	1,435	0.0%	2,723	0.0%	0	9,823,760	4,258.5	14,554.7
<i>Prevalent Torsemide</i> <sup>3</sup>	1,910	0.3%	1,364	0.2%	4,063	0.6%	2	6,018,000	13,805.4	39,296.0
<i>Prevalent Ethacrynic Acid</i> <sup>4</sup>	*****	*****	*****	*****	*****	*****	4	222,400	2,532.5	7,031.7
<b>Episodes Censored at Treatment Cessation, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>										
<i>New Bumetanide</i> <sup>1</sup>	297	0.2%	191	0.1%	438	0.2%	17	14,400,000	9,945.4	43,145.0
<i>New Furosemide</i> <sup>2</sup>	901	0.0%	452	0.0%	1,062	0.0%	0	9,823,760	3,310.2	13,718.1
<i>New Torsemide</i> <sup>3</sup>	231	0.1%	169	0.1%	400	0.2%	6	4,531,840	8,883.1	27,857.7

**Table 16. Summary of Cumulative Filled Dose in Each Patient's First Treatment Episode for Exposures of Interest in the Sentinel Distributed Database (SDD) from January 1, 2000 to March 31, 2021\* (Continued)**

	Number of Patients by Cumulative Filled Dose in First Treatment Episode						Distribution of Cumulative Filled Dose			
	150,000 - <180,000mg Oral Furosemide Equivalents		180,000 - <210,000mg Oral Furosemide Equivalents		210,000+ mg Oral Furosemide Equivalents		Minimum	Maximum	Mean	Standard Deviation
	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients	Number of Patients	Percent of Total Patients				
<i>New Ethacrynic Acid</i> <sup>4</sup>	0	0.0%	0	0.0%	0	0.0%	13	108,600	1,966.3	4,722.1
<b>Episodes Censored at Treatment Cessation and Within-Class Switch, No Evidence of Prior Loop Diuretic, Cancer, Chemotherapy, or Radiation</b>										
<i>New Bumetanide</i> <sup>1</sup>	289	0.1%	182	0.1%	399	0.2%	17	14,400,000	9,693.5	42,824.0
<i>New Furosemide</i> <sup>2</sup>	865	0.0%	438	0.0%	1,019	0.0%	0	9,823,760	3,276.0	13,623.8
<i>New Torsemide</i> <sup>3</sup>	219	0.1%	156	0.1%	375	0.2%	6	4,531,840	8,666.1	27,372.2
<i>New Ethacrynic Acid</i> <sup>4</sup>	0	0.0%	0	0.0%	0	0.0%	13	89,400	1,881.2	4,374.1

<sup>1</sup>Bumetanide: 0 - <30,000mg furosemide equivalents = 0 - 374mg; 30,000 - <60,000mg furosemide equivalents = 375-749mg; 60,000 - <90,000mg furosemide equivalents = 750-1,124mg; 90,000 - <120,000mg furosemide equivalents = 1,125-1,499mg; 120,000 - <150,000mg furosemide equivalents = 1,500-1,874mg; 150,000 - <180,000mg furosemide equivalents = 1,875-2,249mg; 180,000 - <210,000mg furosemide equivalents = 2,250-2,624mg; 210,000+ mg furosemide equivalents = 2,625+ mg

<sup>2</sup>Furosemide: 0 - <30,000mg furosemide equivalents = 0 - 29,999mg; 30,000 - <60,000mg furosemide equivalents = 30,000-59,999mg; 60,000 - <90,000mg furosemide equivalents = 60,000-89,999mg; 90,000 - <120,000mg furosemide equivalents = 90,000-119,999mg; 120,000 - <150,000mg furosemide equivalents = 120,000-149,999mg; 150,000 - <180,000mg furosemide equivalents = 150,000-179,999mg; 180,000 - <210,000mg furosemide equivalents = 180,000-209,999mg; 210,000+ mg furosemide equivalents = 210,000+ mg

<sup>3</sup>Torsemide: 0 - <30,000mg furosemide equivalents = 0 - 7,499mg; 30,000 - <60,000mg furosemide equivalents = 7,500-14,999mg; 60,000 - <90,000mg furosemide equivalents = 15,000-22,499mg; 90,000 - <120,000mg furosemide equivalents = 22,500-29,999mg; 120,000 - <150,000mg furosemide equivalents = 30,000-37,499mg; 150,000 - <180,000mg furosemide equivalents = 37,500-44,999mg; 180,000 - <210,000mg furosemide equivalents = 45,000-52,499mg; 210,000+ mg furosemide equivalents = 52,500+ mg

<sup>4</sup>Ethacrynic acid: 0 - <30,000mg furosemide equivalents = 0 - 37,499mg; 30,000 - <60,000mg furosemide equivalents = 37,500-74,999mg; 60,000 - <90,000mg furosemide equivalents = 75,000-112,499mg; 90,000 - <120,000mg furosemide equivalents = 112,500-149,999mg; 120,000 - <150,000mg furosemide equivalents = 150,000-187,499mg; 150,000 - <180,000mg furosemide equivalents = 187,500-224,999mg; 180,000 - <210,000mg furosemide equivalents = 225,000-262,499mg; 210,000+ mg furosemide equivalents = 262,500+ mg

\*Episodes censored at query end date, Data Partner data end date, and death, in addition to listed censoring reasons specific to each scenario.

\*\*\*\*\*Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

**Appendix A. Dates of Available Data for Each Data Partner (DP) as of Request Distribution Date (November 16, 2021)**

Masked DP ID	DP Start Date	DP End Date <sup>1</sup>
DP01	01/01/2007	03/31/2021
DP02	01/01/2008	12/31/2020
DP03	01/01/2000	12/31/2019
DP04	01/01/2010	03/31/2021
DP05	01/01/2008	12/31/2020
DP06	01/01/2006	03/31/2021

<sup>1</sup>End Date represents the earliest of: (1) query end date, or (2) last day of the most recent month for which all of a Data Partner's data tables (enrollment, dispensing, etc.) have at least 80% of the record count relative to the prior month.

**Appendix B. List of Generic and Brand Names of Medical Products Used to Define Exposures and Washout in this Request**

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<b>Generic Name</b>	<b>Brand Name</b>
<b>Bumetanide</b>	
bumetanide	Bumex
bumetanide	bumetanide
<b>Furosemide</b>	
furosemide	Lasix
furosemide	furosemide
<b>Torsemide</b>	
torsemide	Demadex
torsemide	torsemide
<b>Ethacrynic Acid</b>	
ethacrynic acid	Edecrin
ethacrynic acid	ethacrynic acid



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
<b>Cancer</b>			
C92.A1	Acute myeloid leukemia with multilineage dysplasia, in remission	ICD-10-CM	Diagnosis
C92.A0	Acute myeloid leukemia with multilineage dysplasia, not having achieved remission	ICD-10-CM	Diagnosis
C92.A2	Acute myeloid leukemia with multilineage dysplasia, in relapse	ICD-10-CM	Diagnosis
C94.0	Acute erythroid leukemia	ICD-10-CM	Diagnosis
C94.02	Acute erythroid leukemia, in relapse	ICD-10-CM	Diagnosis
C94.01	Acute erythroid leukemia, in remission	ICD-10-CM	Diagnosis
C94.00	Acute erythroid leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C95.0	Acute leukemia of unspecified cell type	ICD-10-CM	Diagnosis
C95.02	Acute leukemia of unspecified cell type, in relapse	ICD-10-CM	Diagnosis
C95.01	Acute leukemia of unspecified cell type, in remission	ICD-10-CM	Diagnosis
C95.00	Acute leukemia of unspecified cell type not having achieved remission	ICD-10-CM	Diagnosis
C91.0	Acute lymphoblastic leukemia [ALL]	ICD-10-CM	Diagnosis
C91.02	Acute lymphoblastic leukemia, in relapse	ICD-10-CM	Diagnosis
C91.01	Acute lymphoblastic leukemia, in remission	ICD-10-CM	Diagnosis
C91.00	Acute lymphoblastic leukemia not having achieved remission	ICD-10-CM	Diagnosis
C94.2	Acute megakaryoblastic leukemia	ICD-10-CM	Diagnosis
C94.22	Acute megakaryoblastic leukemia, in relapse	ICD-10-CM	Diagnosis
C94.21	Acute megakaryoblastic leukemia, in remission	ICD-10-CM	Diagnosis
C94.20	Acute megakaryoblastic leukemia not having achieved remission	ICD-10-CM	Diagnosis
C93.0	Acute monoblastic/monocytic leukemia	ICD-10-CM	Diagnosis
C93.02	Acute monoblastic/monocytic leukemia, in relapse	ICD-10-CM	Diagnosis
C93.01	Acute monoblastic/monocytic leukemia, in remission	ICD-10-CM	Diagnosis
C93.00	Acute monoblastic/monocytic leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C92.0	Acute myeloblastic leukemia	ICD-10-CM	Diagnosis
C92.02	Acute myeloblastic leukemia, in relapse	ICD-10-CM	Diagnosis
C92.01	Acute myeloblastic leukemia, in remission	ICD-10-CM	Diagnosis
C92.00	Acute myeloblastic leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C92.62	Acute myeloid leukemia with 11q23-abnormality in relapse	ICD-10-CM	Diagnosis
C92.61	Acute myeloid leukemia with 11q23-abnormality in remission	ICD-10-CM	Diagnosis
C92.60	Acute myeloid leukemia with 11q23-abnormality not having achieved remission	ICD-10-CM	Diagnosis
C92.A	Acute myeloid leukemia with multilineage dysplasia	ICD-10-CM	Diagnosis
C92.6	Acute myeloid leukemia with 11q23-abnormality	ICD-10-CM	Diagnosis
C92.5	Acute myelomonocytic leukemia	ICD-10-CM	Diagnosis
C92.52	Acute myelomonocytic leukemia, in relapse	ICD-10-CM	Diagnosis
C92.51	Acute myelomonocytic leukemia, in remission	ICD-10-CM	Diagnosis
C92.50	Acute myelomonocytic leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C94.40	Acute panmyelosis with myelofibrosis not having achieved remission	ICD-10-CM	Diagnosis
C94.42	Acute panmyelosis with myelofibrosis, in relapse	ICD-10-CM	Diagnosis
C94.41	Acute panmyelosis with myelofibrosis, in remission	ICD-10-CM	Diagnosis
C94.4	Acute panmyelosis with myelofibrosis	ICD-10-CM	Diagnosis
C92.40	Acute promyelocytic leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C92.4	Acute promyelocytic leukemia	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
C92.42	Acute promyelocytic leukemia, in relapse	ICD-10-CM	Diagnosis
C92.41	Acute promyelocytic leukemia, in remission	ICD-10-CM	Diagnosis
C91.5	Adult T-cell lymphoma/leukemia (HTLV-1-associated)	ICD-10-CM	Diagnosis
C91.52	Adult T-cell lymphoma/leukemia (HTLV-1-associated), in relapse	ICD-10-CM	Diagnosis
C91.51	Adult T-cell lymphoma/leukemia (HTLV-1-associated), in remission	ICD-10-CM	Diagnosis
C91.50	Adult T-cell lymphoma/leukemia (HTLV-1-associated) not having achieved remission	ICD-10-CM	Diagnosis
C96.21	Aggressive systemic mastocytosis	ICD-10-CM	Diagnosis
C84.7	Anaplastic large cell lymphoma, ALK-negative	ICD-10-CM	Diagnosis
C84.6	Anaplastic large cell lymphoma, ALK-positive	ICD-10-CM	Diagnosis
C84.79	Anaplastic large cell lymphoma, ALK-negative, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.73	Anaplastic large cell lymphoma, ALK-negative, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.76	Anaplastic large cell lymphoma, ALK-negative, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.72	Anaplastic large cell lymphoma, ALK-negative, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.71	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.74	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.75	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.78	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.77	Anaplastic large cell lymphoma, ALK-negative, spleen	ICD-10-CM	Diagnosis
C84.70	Anaplastic large cell lymphoma, ALK-negative, unspecified site	ICD-10-CM	Diagnosis
C84.63	Anaplastic large cell lymphoma, ALK-positive, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.66	Anaplastic large cell lymphoma, ALK-positive, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.62	Anaplastic large cell lymphoma, ALK-positive, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.61	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.64	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.65	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.68	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.67	Anaplastic large cell lymphoma, ALK-positive, spleen	ICD-10-CM	Diagnosis
C84.60	Anaplastic large cell lymphoma, ALK-positive, unspecified site	ICD-10-CM	Diagnosis
C84.69	Anaplastic large cell lymphoma, ALK-positive, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C86.5	Angioimmunoblastic T-cell lymphoma	ICD-10-CM	Diagnosis
C22.3	Angiosarcoma of liver	ICD-10-CM	Diagnosis
C92.21	Atypical chronic myeloid leukemia, BCR/ABL-negative, in remission	ICD-10-CM	Diagnosis
C92.20	Atypical chronic myeloid leukemia, BCR/ABL-negative, not having achieved remission	ICD-10-CM	Diagnosis
C92.22	Atypical chronic myeloid leukemia, BCR/ABL-negative, in relapse	ICD-10-CM	Diagnosis
C92.2	Atypical chronic myeloid leukemia, BCR/ABL-negative	ICD-10-CM	Diagnosis
C86.4	Blastic NK-cell lymphoma	ICD-10-CM	Diagnosis
C83.7	Burkitt lymphoma	ICD-10-CM	Diagnosis
C83.79	Burkitt lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83.73	Burkitt lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.76	Burkitt lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C83.72	Burkitt lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.74	Burkitt lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.71	Burkitt lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.78	Burkitt lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.75	Burkitt lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.77	Burkitt lymphoma, spleen	ICD-10-CM	Diagnosis
C83.70	Burkitt lymphoma, unspecified site	ICD-10-CM	Diagnosis
C95.1	Chronic leukemia of unspecified cell type	ICD-10-CM	Diagnosis
C95.12	Chronic leukemia of unspecified cell type, in relapse	ICD-10-CM	Diagnosis
C95.11	Chronic leukemia of unspecified cell type, in remission	ICD-10-CM	Diagnosis
C95.10	Chronic leukemia of unspecified cell type not having achieved remission	ICD-10-CM	Diagnosis
C91.11	Chronic lymphocytic leukemia of B-cell type in remission	ICD-10-CM	Diagnosis
C91.10	Chronic lymphocytic leukemia of B-cell type not having achieved remission	ICD-10-CM	Diagnosis
C91.12	Chronic lymphocytic leukemia of B-cell type in relapse	ICD-10-CM	Diagnosis
C91.1	Chronic lymphocytic leukemia of B-cell type	ICD-10-CM	Diagnosis
C92.12	Chronic myeloid leukemia, BCR/ABL-positive, in relapse	ICD-10-CM	Diagnosis
C92.11	Chronic myeloid leukemia, BCR/ABL-positive, in remission	ICD-10-CM	Diagnosis
C92.10	Chronic myeloid leukemia, BCR/ABL-positive, not having achieved remission	ICD-10-CM	Diagnosis
C92.1	Chronic myeloid leukemia, BCR/ABL-positive	ICD-10-CM	Diagnosis
C93.12	Chronic myelomonocytic leukemia, in relapse	ICD-10-CM	Diagnosis
C93.11	Chronic myelomonocytic leukemia, in remission	ICD-10-CM	Diagnosis
C93.10	Chronic myelomonocytic leukemia not having achieved remission	ICD-10-CM	Diagnosis
C93.1	Chronic myelomonocytic leukemia	ICD-10-CM	Diagnosis
C82.63	Cutaneous follicle center lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.65	Cutaneous follicle center lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.69	Cutaneous follicle center lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.66	Cutaneous follicle center lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.62	Cutaneous follicle center lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.68	Cutaneous follicle center lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.61	Cutaneous follicle center lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.64	Cutaneous follicle center lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.6	Cutaneous follicle center lymphoma	ICD-10-CM	Diagnosis
C82.67	Cutaneous follicle center lymphoma, spleen	ICD-10-CM	Diagnosis
C82.60	Cutaneous follicle center lymphoma, unspecified site	ICD-10-CM	Diagnosis
C84.A9	Cutaneous T-cell lymphoma, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.A3	Cutaneous T-cell lymphoma, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.A6	Cutaneous T-cell lymphoma, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.A2	Cutaneous T-cell lymphoma, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.A5	Cutaneous T-cell lymphoma, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.A4	Cutaneous T-cell lymphoma, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.A1	Cutaneous T-cell lymphoma, unspecified lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.A8	Cutaneous T-cell lymphoma, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C84.A0	Cutaneous T-cell lymphoma, unspecified, unspecified site	ICD-10-CM	Diagnosis
C84.A	Cutaneous T-cell lymphoma, unspecified	ICD-10-CM	Diagnosis
C84.A7	Cutaneous T-cell lymphoma, unspecified, spleen	ICD-10-CM	Diagnosis
C82.59	Diffuse follicle center lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.54	Diffuse follicle center lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.51	Diffuse follicle center lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.55	Diffuse follicle center lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.5	Diffuse follicle center lymphoma	ICD-10-CM	Diagnosis
C82.53	Diffuse follicle center lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.56	Diffuse follicle center lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.52	Diffuse follicle center lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.58	Diffuse follicle center lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.57	Diffuse follicle center lymphoma, spleen	ICD-10-CM	Diagnosis
C82.50	Diffuse follicle center lymphoma, unspecified site	ICD-10-CM	Diagnosis
C83.3	Diffuse large B-cell lymphoma	ICD-10-CM	Diagnosis
C83.39	Diffuse large B-cell lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83.33	Diffuse large B-cell lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.36	Diffuse large B-cell lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.32	Diffuse large B-cell lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.31	Diffuse large B-cell lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.35	Diffuse large B-cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.34	Diffuse large B-cell lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.38	Diffuse large B-cell lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.37	Diffuse large B-cell lymphoma, spleen	ICD-10-CM	Diagnosis
C83.30	Diffuse large B-cell lymphoma, unspecified site	ICD-10-CM	Diagnosis
C80.0	Disseminated malignant neoplasm, unspecified	ICD-10-CM	Diagnosis
C86.2	Enteropathy-type (intestinal) T-cell lymphoma	ICD-10-CM	Diagnosis
C90.20	Extramedullary plasmacytoma not having achieved remission	ICD-10-CM	Diagnosis
C90.2	Extramedullary plasmacytoma	ICD-10-CM	Diagnosis
C90.22	Extramedullary plasmacytoma in relapse	ICD-10-CM	Diagnosis
C90.21	Extramedullary plasmacytoma in remission	ICD-10-CM	Diagnosis
C88.4	Extranodal marginal zone B-cell lymphoma of mucosa-associated lymphoid tissue [MALT-lymphoma]	ICD-10-CM	Diagnosis
C86.0	Extranodal NK/T-cell lymphoma, nasal type	ICD-10-CM	Diagnosis
C82.45	Follicular lymphoma grade IIIb, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.49	Follicular lymphoma grade IIIb, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.29	Follicular lymphoma grade III, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82	Follicular lymphoma	ICD-10-CM	Diagnosis
C82.21	Follicular lymphoma grade III, unspecified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.24	Follicular lymphoma grade III, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.25	Follicular lymphoma grade III, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.39	Follicular lymphoma grade IIIa, extranodal and solid organ sites	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C82.0	Follicular lymphoma grade I	ICD-10-CM	Diagnosis
C82.09	Follicular lymphoma grade I, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.03	Follicular lymphoma grade I, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.06	Follicular lymphoma grade I, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.02	Follicular lymphoma grade I, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.04	Follicular lymphoma grade I, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.01	Follicular lymphoma grade I, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.05	Follicular lymphoma grade I, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.08	Follicular lymphoma grade I, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.07	Follicular lymphoma grade I, spleen	ICD-10-CM	Diagnosis
C82.00	Follicular lymphoma grade I, unspecified site	ICD-10-CM	Diagnosis
C82.1	Follicular lymphoma grade II	ICD-10-CM	Diagnosis
C82.19	Follicular lymphoma grade II, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.13	Follicular lymphoma grade II, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.16	Follicular lymphoma grade II, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.12	Follicular lymphoma grade II, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.14	Follicular lymphoma grade II, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.11	Follicular lymphoma grade II, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.15	Follicular lymphoma grade II, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.18	Follicular lymphoma grade II, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.17	Follicular lymphoma grade II, spleen	ICD-10-CM	Diagnosis
C82.10	Follicular lymphoma grade II, unspecified site	ICD-10-CM	Diagnosis
C82.23	Follicular lymphoma grade III, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.26	Follicular lymphoma grade III, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.22	Follicular lymphoma grade III, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.28	Follicular lymphoma grade III, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.20	Follicular lymphoma grade III, unspecified, unspecified site	ICD-10-CM	Diagnosis
C82.2	Follicular lymphoma grade III, unspecified	ICD-10-CM	Diagnosis
C82.27	Follicular lymphoma grade III, unspecified, spleen	ICD-10-CM	Diagnosis
C82.3	Follicular lymphoma grade IIIa	ICD-10-CM	Diagnosis
C82.33	Follicular lymphoma grade IIIa, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.36	Follicular lymphoma grade IIIa, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.32	Follicular lymphoma grade IIIa, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.31	Follicular lymphoma grade IIIa, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.35	Follicular lymphoma grade IIIa, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.34	Follicular lymphoma grade IIIa, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.38	Follicular lymphoma grade IIIa, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.37	Follicular lymphoma grade IIIa, spleen	ICD-10-CM	Diagnosis
C82.30	Follicular lymphoma grade IIIa, unspecified site	ICD-10-CM	Diagnosis
C82.4	Follicular lymphoma grade IIIb	ICD-10-CM	Diagnosis
C82.48	Follicular lymphoma grade IIIb, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.43	Follicular lymphoma grade IIIb, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.46	Follicular lymphoma grade IIIb, intrapelvic lymph nodes	ICD-10-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
C82.42	Follicular lymphoma grade IIIb, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.41	Follicular lymphoma grade IIIb, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.44	Follicular lymphoma grade IIIb, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.47	Follicular lymphoma grade IIIb, spleen	ICD-10-CM	Diagnosis
C82.40	Follicular lymphoma grade IIIb, unspecified site	ICD-10-CM	Diagnosis
C82.93	Follicular lymphoma, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.96	Follicular lymphoma, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.92	Follicular lymphoma, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.91	Follicular lymphoma, unspecified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.94	Follicular lymphoma, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.95	Follicular lymphoma, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.99	Follicular lymphoma, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.98	Follicular lymphoma, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.90	Follicular lymphoma, unspecified, unspecified site	ICD-10-CM	Diagnosis
C82.9	Follicular lymphoma, unspecified	ICD-10-CM	Diagnosis
C82.97	Follicular lymphoma, unspecified, spleen	ICD-10-CM	Diagnosis
C49.A	Gastrointestinal stromal tumor	ICD-10-CM	Diagnosis
C49.A4	Gastrointestinal stromal tumor of large intestine	ICD-10-CM	Diagnosis
C49.A1	Gastrointestinal stromal tumor of esophagus	ICD-10-CM	Diagnosis
C49.A9	Gastrointestinal stromal tumor of other sites	ICD-10-CM	Diagnosis
C49.A5	Gastrointestinal stromal tumor of rectum	ICD-10-CM	Diagnosis
C49.A2	Gastrointestinal stromal tumor of stomach	ICD-10-CM	Diagnosis
C49.A3	Gastrointestinal stromal tumor of small intestine	ICD-10-CM	Diagnosis
C49.A0	Gastrointestinal stromal tumor, unspecified site	ICD-10-CM	Diagnosis
C91.4	Hairy cell leukemia	ICD-10-CM	Diagnosis
C91.42	Hairy cell leukemia, in relapse	ICD-10-CM	Diagnosis
C91.41	Hairy cell leukemia, in remission	ICD-10-CM	Diagnosis
C91.40	Hairy cell leukemia not having achieved remission	ICD-10-CM	Diagnosis
C88.2	Heavy chain disease	ICD-10-CM	Diagnosis
C22.2	Hepatoblastoma	ICD-10-CM	Diagnosis
C86.1	Hepatosplenic T-cell lymphoma	ICD-10-CM	Diagnosis
C96.A	Histiocytic sarcoma	ICD-10-CM	Diagnosis
C81	Hodgkin lymphoma	ICD-10-CM	Diagnosis
C81.99	Hodgkin lymphoma, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.93	Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.96	Hodgkin lymphoma, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.92	Hodgkin lymphoma, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.98	Hodgkin lymphoma, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C81.94	Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.91	Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C81.95	Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.9	Hodgkin lymphoma, unspecified	ICD-10-CM	Diagnosis
C81.97	Hodgkin lymphoma, unspecified, spleen	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C81.90	Hodgkin lymphoma, unspecified, unspecified site	ICD-10-CM	Diagnosis
C88.3	Immunoproliferative small intestinal disease	ICD-10-CM	Diagnosis
C22.1	Intrahepatic bile duct carcinoma	ICD-10-CM	Diagnosis
C93.3	Juvenile myelomonocytic leukemia	ICD-10-CM	Diagnosis
C93.32	Juvenile myelomonocytic leukemia, in relapse	ICD-10-CM	Diagnosis
C93.31	Juvenile myelomonocytic leukemia, in remission	ICD-10-CM	Diagnosis
C93.30	Juvenile myelomonocytic leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C46	Kaposi's sarcoma	ICD-10-CM	Diagnosis
C46.4	Kaposi's sarcoma of gastrointestinal sites	ICD-10-CM	Diagnosis
C46.52	Kaposi's sarcoma of left lung	ICD-10-CM	Diagnosis
C46.5	Kaposi's sarcoma of lung	ICD-10-CM	Diagnosis
C46.3	Kaposi's sarcoma of lymph nodes	ICD-10-CM	Diagnosis
C46.7	Kaposi's sarcoma of other sites	ICD-10-CM	Diagnosis
C46.2	Kaposi's sarcoma of palate	ICD-10-CM	Diagnosis
C46.51	Kaposi's sarcoma of right lung	ICD-10-CM	Diagnosis
C46.0	Kaposi's sarcoma of skin	ICD-10-CM	Diagnosis
C46.1	Kaposi's sarcoma of soft tissue	ICD-10-CM	Diagnosis
C46.50	Kaposi's sarcoma of unspecified lung	ICD-10-CM	Diagnosis
C46.9	Kaposi's sarcoma, unspecified	ICD-10-CM	Diagnosis
C81.39	Lymphocyte depleted Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.33	Lymphocyte depleted Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.36	Lymphocyte depleted Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.32	Lymphocyte depleted Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.35	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.34	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.31	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C81.38	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C95	Leukemia of unspecified cell type	ICD-10-CM	Diagnosis
C95.90	Leukemia, unspecified not having achieved remission	ICD-10-CM	Diagnosis
C95.9	Leukemia, unspecified	ICD-10-CM	Diagnosis
C95.92	Leukemia, unspecified, in relapse	ICD-10-CM	Diagnosis
C95.91	Leukemia, unspecified, in remission	ICD-10-CM	Diagnosis
C22.0	Liver cell carcinoma	ICD-10-CM	Diagnosis
C81.41	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.5	Lymphoblastic (diffuse) lymphoma	ICD-10-CM	Diagnosis
C83.55	Lymphoblastic (diffuse) lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.59	Lymphoblastic (diffuse) lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83.53	Lymphoblastic (diffuse) lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.56	Lymphoblastic (diffuse) lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.52	Lymphoblastic (diffuse) lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.54	Lymphoblastic (diffuse) lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.51	Lymphoblastic (diffuse) lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C83.58	Lymphoblastic (diffuse) lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.57	Lymphoblastic (diffuse) lymphoma, spleen	ICD-10-CM	Diagnosis
C83.50	Lymphoblastic (diffuse) lymphoma, unspecified site	ICD-10-CM	Diagnosis
C81.49	Lymphocyte-rich Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.45	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.4	Lymphocyte-rich Hodgkin lymphoma	ICD-10-CM	Diagnosis
C81.43	Lymphocyte-rich Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.46	Lymphocyte-rich Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.42	Lymphocyte-rich Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.44	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.48	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C81.47	Lymphocyte-rich Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C81.40	Lymphocyte-rich Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C81.3	Lymphocyte depleted Hodgkin lymphoma	ICD-10-CM	Diagnosis
C81.37	Lymphocyte depleted Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C81.30	Lymphocyte depleted Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C91	Lymphoid leukemia	ICD-10-CM	Diagnosis
C91.90	Lymphoid leukemia, unspecified not having achieved remission	ICD-10-CM	Diagnosis
C91.9	Lymphoid leukemia, unspecified	ICD-10-CM	Diagnosis
C91.92	Lymphoid leukemia, unspecified, in relapse	ICD-10-CM	Diagnosis
C91.91	Lymphoid leukemia, unspecified, in remission	ICD-10-CM	Diagnosis
O9A.1	Malignant neoplasm complicating pregnancy, childbirth and the puerperium	ICD-10-CM	Diagnosis
C22	Malignant neoplasm of liver and intrahepatic bile ducts	ICD-10-CM	Diagnosis
C21.8	Malignant neoplasm of overlapping sites of rectum, anus and anal canal	ICD-10-CM	Diagnosis
C63.8	Malignant neoplasm of overlapping sites of male genital organs	ICD-10-CM	Diagnosis
C47.10	Malignant neoplasm of peripheral nerves of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C47.2	Malignant neoplasm of peripheral nerves of lower limb, including hip	ICD-10-CM	Diagnosis
C47.22	Malignant neoplasm of peripheral nerves of left lower limb, including hip	ICD-10-CM	Diagnosis
C47.12	Malignant neoplasm of peripheral nerves of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C47.21	Malignant neoplasm of peripheral nerves of right lower limb, including hip	ICD-10-CM	Diagnosis
C47.11	Malignant neoplasm of peripheral nerves of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C47.20	Malignant neoplasm of peripheral nerves of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C96.9	Malignant neoplasm of lymphoid, hematopoietic and related tissue, unspecified	ICD-10-CM	Diagnosis
C57.8	Malignant neoplasm of overlapping sites of female genital organs	ICD-10-CM	Diagnosis
C50.122	Malignant neoplasm of central portion of left male breast	ICD-10-CM	Diagnosis
C50.112	Malignant neoplasm of central portion of left female breast	ICD-10-CM	Diagnosis
C50.121	Malignant neoplasm of central portion of right male breast	ICD-10-CM	Diagnosis
C50.111	Malignant neoplasm of central portion of right female breast	ICD-10-CM	Diagnosis
C50.119	Malignant neoplasm of central portion of unspecified female breast	ICD-10-CM	Diagnosis
C50.129	Malignant neoplasm of central portion of unspecified male breast	ICD-10-CM	Diagnosis
C49.22	Malignant neoplasm of connective and soft tissue of left lower limb, including hip	ICD-10-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C49.12	Malignant neoplasm of connective and soft tissue of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C49.21	Malignant neoplasm of connective and soft tissue of right lower limb, including hip	ICD-10-CM	Diagnosis
C49.11	Malignant neoplasm of connective and soft tissue of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C49.20	Malignant neoplasm of connective and soft tissue of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C49.10	Malignant neoplasm of connective and soft tissue of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C49.1	Malignant neoplasm of connective and soft tissue of upper limb, including shoulder	ICD-10-CM	Diagnosis
C50.31	Malignant neoplasm of lower-inner quadrant of breast, female	ICD-10-CM	Diagnosis
C50.312	Malignant neoplasm of lower-inner quadrant of left female breast	ICD-10-CM	Diagnosis
C50.322	Malignant neoplasm of lower-inner quadrant of left male breast	ICD-10-CM	Diagnosis
C50.311	Malignant neoplasm of lower-inner quadrant of right female breast	ICD-10-CM	Diagnosis
C50.321	Malignant neoplasm of lower-inner quadrant of right male breast	ICD-10-CM	Diagnosis
C50.319	Malignant neoplasm of lower-inner quadrant of unspecified female breast	ICD-10-CM	Diagnosis
C50.329	Malignant neoplasm of lower-inner quadrant of unspecified male breast	ICD-10-CM	Diagnosis
C50.32	Malignant neoplasm of lower-inner quadrant of breast, male	ICD-10-CM	Diagnosis
C50.51	Malignant neoplasm of lower-outer quadrant of breast, female	ICD-10-CM	Diagnosis
C50.512	Malignant neoplasm of lower-outer quadrant of left female breast	ICD-10-CM	Diagnosis
C50.522	Malignant neoplasm of lower-outer quadrant of left male breast	ICD-10-CM	Diagnosis
C50.511	Malignant neoplasm of lower-outer quadrant of right female breast	ICD-10-CM	Diagnosis
C50.521	Malignant neoplasm of lower-outer quadrant of right male breast	ICD-10-CM	Diagnosis
C50.519	Malignant neoplasm of lower-outer quadrant of unspecified female breast	ICD-10-CM	Diagnosis
C50.529	Malignant neoplasm of lower-outer quadrant of unspecified male breast	ICD-10-CM	Diagnosis
C50.52	Malignant neoplasm of lower-outer quadrant of breast, male	ICD-10-CM	Diagnosis
C50.022	Malignant neoplasm of nipple and areola, left male breast	ICD-10-CM	Diagnosis
C50.012	Malignant neoplasm of nipple and areola, left female breast	ICD-10-CM	Diagnosis
C50.021	Malignant neoplasm of nipple and areola, right male breast	ICD-10-CM	Diagnosis
C50.011	Malignant neoplasm of nipple and areola, right female breast	ICD-10-CM	Diagnosis
C50.019	Malignant neoplasm of nipple and areola, unspecified female breast	ICD-10-CM	Diagnosis
C50.029	Malignant neoplasm of nipple and areola, unspecified male breast	ICD-10-CM	Diagnosis
C17.9	Malignant neoplasm of small intestine, unspecified	ICD-10-CM	Diagnosis
C57.7	Malignant neoplasm of other specified female genital organs	ICD-10-CM	Diagnosis
C38.8	Malignant neoplasm of overlapping sites of heart, mediastinum and pleura	ICD-10-CM	Diagnosis
C76.8	Malignant neoplasm of other specified ill-defined sites	ICD-10-CM	Diagnosis
C50.21	Malignant neoplasm of upper-inner quadrant of breast, female	ICD-10-CM	Diagnosis
C50.212	Malignant neoplasm of upper-inner quadrant of left female breast	ICD-10-CM	Diagnosis
C50.222	Malignant neoplasm of upper-inner quadrant of left male breast	ICD-10-CM	Diagnosis
C50.211	Malignant neoplasm of upper-inner quadrant of right female breast	ICD-10-CM	Diagnosis
C50.221	Malignant neoplasm of upper-inner quadrant of right male breast	ICD-10-CM	Diagnosis
C50.229	Malignant neoplasm of upper-inner quadrant of unspecified male breast	ICD-10-CM	Diagnosis
C50.41	Malignant neoplasm of upper-outer quadrant of breast, female	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
C50.412	Malignant neoplasm of upper-outer quadrant of left female breast	ICD-10-CM	Diagnosis
C50.422	Malignant neoplasm of upper-outer quadrant of left male breast	ICD-10-CM	Diagnosis
C50.411	Malignant neoplasm of upper-outer quadrant of right female breast	ICD-10-CM	Diagnosis
C50.421	Malignant neoplasm of upper-outer quadrant of right male breast	ICD-10-CM	Diagnosis
C50.419	Malignant neoplasm of upper-outer quadrant of unspecified female breast	ICD-10-CM	Diagnosis
C50.429	Malignant neoplasm of upper-outer quadrant of unspecified male breast	ICD-10-CM	Diagnosis
C50.42	Malignant neoplasm of upper-outer quadrant of breast, male	ICD-10-CM	Diagnosis
C50.219	Malignant neoplasm of upper-inner quadrant of unspecified female breast	ICD-10-CM	Diagnosis
C7A.094	Malignant carcinoid tumor of the foregut, unspecified	ICD-10-CM	Diagnosis
C7A.029	Malignant carcinoid tumor of the large intestine, unspecified portion	ICD-10-CM	Diagnosis
C7A.024	Malignant carcinoid tumor of the descending colon	ICD-10-CM	Diagnosis
C7A.020	Malignant carcinoid tumor of the appendix	ICD-10-CM	Diagnosis
C7A.022	Malignant carcinoid tumor of the ascending colon	ICD-10-CM	Diagnosis
C7A.090	Malignant carcinoid tumor of the bronchus and lung	ICD-10-CM	Diagnosis
C7A.021	Malignant carcinoid tumor of the cecum	ICD-10-CM	Diagnosis
C7A.010	Malignant carcinoid tumor of the duodenum	ICD-10-CM	Diagnosis
C7A.096	Malignant carcinoid tumor of the hindgut, unspecified	ICD-10-CM	Diagnosis
C7A.012	Malignant carcinoid tumor of the ileum	ICD-10-CM	Diagnosis
C7A.011	Malignant carcinoid tumor of the jejunum	ICD-10-CM	Diagnosis
C7A.093	Malignant carcinoid tumor of the kidney	ICD-10-CM	Diagnosis
C7A.095	Malignant carcinoid tumor of the midgut, unspecified	ICD-10-CM	Diagnosis
C7A.026	Malignant carcinoid tumor of the rectum	ICD-10-CM	Diagnosis
C7A.025	Malignant carcinoid tumor of the sigmoid colon	ICD-10-CM	Diagnosis
C7A.092	Malignant carcinoid tumor of the stomach	ICD-10-CM	Diagnosis
C7A.091	Malignant carcinoid tumor of the thymus	ICD-10-CM	Diagnosis
C7A.023	Malignant carcinoid tumor of the transverse colon	ICD-10-CM	Diagnosis
C7A.00	Malignant carcinoid tumor of unspecified site	ICD-10-CM	Diagnosis
C7A.019	Malignant carcinoid tumor of the small intestine, unspecified portion	ICD-10-CM	Diagnosis
C7A.0	Malignant carcinoid tumors	ICD-10-CM	Diagnosis
C7A.09	Malignant carcinoid tumors of other sites	ICD-10-CM	Diagnosis
C7A.098	Malignant carcinoid tumors of other sites	ICD-10-CM	Diagnosis
C7A.01	Malignant carcinoid tumors of the small intestine	ICD-10-CM	Diagnosis
C7A.02	Malignant carcinoid tumors of the appendix, large intestine, and rectum	ICD-10-CM	Diagnosis
C88.9	Malignant immunoproliferative disease, unspecified	ICD-10-CM	Diagnosis
C88	Malignant immunoproliferative diseases and certain other B-cell lymphomas	ICD-10-CM	Diagnosis
C96.2	Malignant mast cell neoplasm	ICD-10-CM	Diagnosis
C96.20	Malignant mast cell neoplasm, unspecified	ICD-10-CM	Diagnosis
C43.2	Malignant melanoma of ear and external auricular canal	ICD-10-CM	Diagnosis
C43.62	Malignant melanoma of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C43.22	Malignant melanoma of left ear and external auricular canal	ICD-10-CM	Diagnosis
C43.122	Malignant melanoma of left lower eyelid, including canthus	ICD-10-CM	Diagnosis
C43.121	Malignant melanoma of left upper eyelid, including canthus	ICD-10-CM	Diagnosis
C43.51	Malignant melanoma of anal skin	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C43.1	Malignant melanoma of eyelid, including canthus	ICD-10-CM	Diagnosis
C43.12	Malignant melanoma of left eyelid, including canthus	ICD-10-CM	Diagnosis
C43.72	Malignant melanoma of left lower limb, including hip	ICD-10-CM	Diagnosis
C43.0	Malignant melanoma of lip	ICD-10-CM	Diagnosis
C43.7	Malignant melanoma of lower limb, including hip	ICD-10-CM	Diagnosis
C43.31	Malignant melanoma of nose	ICD-10-CM	Diagnosis
C43.59	Malignant melanoma of other part of trunk	ICD-10-CM	Diagnosis
C43.39	Malignant melanoma of other parts of face	ICD-10-CM	Diagnosis
C43.8	Malignant melanoma of overlapping sites of skin	ICD-10-CM	Diagnosis
C43.11	Malignant melanoma of right eyelid, including canthus	ICD-10-CM	Diagnosis
C43.71	Malignant melanoma of right lower limb, including hip	ICD-10-CM	Diagnosis
C43.4	Malignant melanoma of scalp and neck	ICD-10-CM	Diagnosis
C43	Malignant melanoma of skin	ICD-10-CM	Diagnosis
C43.52	Malignant melanoma of skin of breast	ICD-10-CM	Diagnosis
C43.9	Malignant melanoma of skin, unspecified	ICD-10-CM	Diagnosis
C43.5	Malignant melanoma of trunk	ICD-10-CM	Diagnosis
C43.30	Malignant melanoma of unspecified part of face	ICD-10-CM	Diagnosis
C43.6	Malignant melanoma of upper limb, including shoulder	ICD-10-CM	Diagnosis
C43.3	Malignant melanoma of other and unspecified parts of face	ICD-10-CM	Diagnosis
C43.61	Malignant melanoma of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C43.21	Malignant melanoma of right ear and external auricular canal	ICD-10-CM	Diagnosis
C43.112	Malignant melanoma of right lower eyelid, including canthus	ICD-10-CM	Diagnosis
C43.111	Malignant melanoma of right upper eyelid, including canthus	ICD-10-CM	Diagnosis
C43.20	Malignant melanoma of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
C43.10	Malignant melanoma of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
C43.70	Malignant melanoma of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C43.60	Malignant melanoma of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C13.1	Malignant neoplasm of aryepiglottic fold, hypopharyngeal aspect	ICD-10-CM	Diagnosis
C14	Malignant neoplasm of other and ill-defined sites in the lip, oral cavity and pharynx	ICD-10-CM	Diagnosis
C14.8	Malignant neoplasm of overlapping sites of lip, oral cavity and pharynx	ICD-10-CM	Diagnosis
C47.1	Malignant neoplasm of peripheral nerves of upper limb, including shoulder	ICD-10-CM	Diagnosis
C72	Malignant neoplasm of spinal cord, cranial nerves and other parts of central nervous system	ICD-10-CM	Diagnosis
C02.3	Malignant neoplasm of anterior two-thirds of tongue, part unspecified	ICD-10-CM	Diagnosis
C10.1	Malignant neoplasm of anterior surface of epiglottis	ICD-10-CM	Diagnosis
C11.3	Malignant neoplasm of anterior wall of nasopharynx	ICD-10-CM	Diagnosis
C75.5	Malignant neoplasm of aortic body and other paraganglia	ICD-10-CM	Diagnosis
C80.2	Malignant neoplasm associated with transplanted organ	ICD-10-CM	Diagnosis
C50.61	Malignant neoplasm of axillary tail of breast, female	ICD-10-CM	Diagnosis
C50.612	Malignant neoplasm of axillary tail of left female breast	ICD-10-CM	Diagnosis
C50.622	Malignant neoplasm of axillary tail of left male breast	ICD-10-CM	Diagnosis
C50.611	Malignant neoplasm of axillary tail of right female breast	ICD-10-CM	Diagnosis
C50.621	Malignant neoplasm of axillary tail of right male breast	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C50.619	Malignant neoplasm of axillary tail of unspecified female breast	ICD-10-CM	Diagnosis
C50.629	Malignant neoplasm of axillary tail of unspecified male breast	ICD-10-CM	Diagnosis
C41	Malignant neoplasm of bone and articular cartilage of other and unspecified sites	ICD-10-CM	Diagnosis
C41.9	Malignant neoplasm of bone and articular cartilage, unspecified	ICD-10-CM	Diagnosis
C40	Malignant neoplasm of bone and articular cartilage of limbs	ICD-10-CM	Diagnosis
C50.91	Malignant neoplasm of breast of unspecified site, female	ICD-10-CM	Diagnosis
C50.92	Malignant neoplasm of breast of unspecified site, male	ICD-10-CM	Diagnosis
C50.11	Malignant neoplasm of central portion of breast, female	ICD-10-CM	Diagnosis
C50.12	Malignant neoplasm of central portion of breast, male	ICD-10-CM	Diagnosis
C71.0	Malignant neoplasm of cerebrum, except lobes and ventricles	ICD-10-CM	Diagnosis
C00.6	Malignant neoplasm of commissure of lip, unspecified	ICD-10-CM	Diagnosis
O9A.111	Malignant neoplasm complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O9A.112	Malignant neoplasm complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O9A.113	Malignant neoplasm complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O9A.119	Malignant neoplasm complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O9A.12	Malignant neoplasm complicating childbirth	ICD-10-CM	Diagnosis
O9A.11	Malignant neoplasm complicating pregnancy	ICD-10-CM	Diagnosis
O9A.13	Malignant neoplasm complicating the puerperium	ICD-10-CM	Diagnosis
C49.6	Malignant neoplasm of connective and soft tissue of trunk, unspecified	ICD-10-CM	Diagnosis
C49.0	Malignant neoplasm of connective and soft tissue of head, face and neck	ICD-10-CM	Diagnosis
C49.2	Malignant neoplasm of connective and soft tissue of lower limb, including hip	ICD-10-CM	Diagnosis
C49.4	Malignant neoplasm of connective and soft tissue of abdomen	ICD-10-CM	Diagnosis
C49.5	Malignant neoplasm of connective and soft tissue of pelvis	ICD-10-CM	Diagnosis
C49.3	Malignant neoplasm of connective and soft tissue of thorax	ICD-10-CM	Diagnosis
C49.9	Malignant neoplasm of connective and soft tissue, unspecified	ICD-10-CM	Diagnosis
C74.02	Malignant neoplasm of cortex of left adrenal gland	ICD-10-CM	Diagnosis
C74.01	Malignant neoplasm of cortex of right adrenal gland	ICD-10-CM	Diagnosis
C74.00	Malignant neoplasm of cortex of unspecified adrenal gland	ICD-10-CM	Diagnosis
C16.6	Malignant neoplasm of greater curvature of stomach, unspecified	ICD-10-CM	Diagnosis
C26.9	Malignant neoplasm of ill-defined sites within the digestive system	ICD-10-CM	Diagnosis
C26.0	Malignant neoplasm of intestinal tract, part unspecified	ICD-10-CM	Diagnosis
C11.2	Malignant neoplasm of lateral wall of nasopharynx	ICD-10-CM	Diagnosis
C69.52	Malignant neoplasm of left lacrimal gland and duct	ICD-10-CM	Diagnosis
C16.5	Malignant neoplasm of lesser curvature of stomach, unspecified	ICD-10-CM	Diagnosis
C22.9	Malignant neoplasm of liver, not specified as primary or secondary	ICD-10-CM	Diagnosis
C22.8	Malignant neoplasm of liver, primary, unspecified as to type	ICD-10-CM	Diagnosis
C40.22	Malignant neoplasm of long bones of left lower limb	ICD-10-CM	Diagnosis
C40.21	Malignant neoplasm of long bones of right lower limb	ICD-10-CM	Diagnosis
C40.20	Malignant neoplasm of long bones of unspecified lower limb	ICD-10-CM	Diagnosis
C50.3	Malignant neoplasm of lower-inner quadrant of breast	ICD-10-CM	Diagnosis
C50.5	Malignant neoplasm of lower-outer quadrant of breast	ICD-10-CM	Diagnosis
C34.32	Malignant neoplasm of lower lobe, left bronchus or lung	ICD-10-CM	Diagnosis
C34.31	Malignant neoplasm of lower lobe, right bronchus or lung	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
C34.30	Malignant neoplasm of lower lobe, unspecified bronchus or lung	ICD-10-CM	Diagnosis
C39.9	Malignant neoplasm of lower respiratory tract, part unspecified	ICD-10-CM	Diagnosis
C64.2	Malignant neoplasm of left kidney, except renal pelvis	ICD-10-CM	Diagnosis
C62.92	Malignant neoplasm of left testis, unspecified whether descended or undescended	ICD-10-CM	Diagnosis
C63.9	Malignant neoplasm of male genital organ, unspecified	ICD-10-CM	Diagnosis
C74.12	Malignant neoplasm of medulla of left adrenal gland	ICD-10-CM	Diagnosis
C74.11	Malignant neoplasm of medulla of right adrenal gland	ICD-10-CM	Diagnosis
C74.10	Malignant neoplasm of medulla of unspecified adrenal gland	ICD-10-CM	Diagnosis
C76.2	Malignant neoplasm of abdomen	ICD-10-CM	Diagnosis
C31.9	Malignant neoplasm of accessory sinus, unspecified	ICD-10-CM	Diagnosis
C31	Malignant neoplasm of accessory sinuses	ICD-10-CM	Diagnosis
C72.4	Malignant neoplasm of acoustic nerve	ICD-10-CM	Diagnosis
C74	Malignant neoplasm of adrenal gland	ICD-10-CM	Diagnosis
C24.1	Malignant neoplasm of ampulla of Vater	ICD-10-CM	Diagnosis
C21.1	Malignant neoplasm of anal canal	ICD-10-CM	Diagnosis
C04.0	Malignant neoplasm of anterior floor of mouth	ICD-10-CM	Diagnosis
C38.1	Malignant neoplasm of anterior mediastinum	ICD-10-CM	Diagnosis
C67.3	Malignant neoplasm of anterior wall of bladder	ICD-10-CM	Diagnosis
C21	Malignant neoplasm of anus and anal canal	ICD-10-CM	Diagnosis
C21.0	Malignant neoplasm of anus, unspecified	ICD-10-CM	Diagnosis
C18.1	Malignant neoplasm of appendix	ICD-10-CM	Diagnosis
C18.2	Malignant neoplasm of ascending colon	ICD-10-CM	Diagnosis
C50.62	Malignant neoplasm of axillary tail of breast, male	ICD-10-CM	Diagnosis
C50.6	Malignant neoplasm of axillary tail of breast	ICD-10-CM	Diagnosis
C01	Malignant neoplasm of base of tongue	ICD-10-CM	Diagnosis
C24.9	Malignant neoplasm of biliary tract, unspecified	ICD-10-CM	Diagnosis
C67	Malignant neoplasm of bladder	ICD-10-CM	Diagnosis
C67.5	Malignant neoplasm of bladder neck	ICD-10-CM	Diagnosis
C67.9	Malignant neoplasm of bladder, unspecified	ICD-10-CM	Diagnosis
C25.1	Malignant neoplasm of body of pancreas	ICD-10-CM	Diagnosis
C60.2	Malignant neoplasm of body of penis	ICD-10-CM	Diagnosis
C16.2	Malignant neoplasm of body of stomach	ICD-10-CM	Diagnosis
C41.0	Malignant neoplasm of bones of skull and face	ICD-10-CM	Diagnosis
C02.1	Malignant neoplasm of border of tongue	ICD-10-CM	Diagnosis
C71	Malignant neoplasm of brain	ICD-10-CM	Diagnosis
C71.7	Malignant neoplasm of brain stem	ICD-10-CM	Diagnosis
C71.9	Malignant neoplasm of brain, unspecified	ICD-10-CM	Diagnosis
C10.4	Malignant neoplasm of branchial cleft	ICD-10-CM	Diagnosis
C50	Malignant neoplasm of breast	ICD-10-CM	Diagnosis
C50.9	Malignant neoplasm of breast of unspecified site	ICD-10-CM	Diagnosis
C57.1	Malignant neoplasm of broad ligament	ICD-10-CM	Diagnosis
C34	Malignant neoplasm of bronchus and lung	ICD-10-CM	Diagnosis
C16.0	Malignant neoplasm of cardia	ICD-10-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C75.4	Malignant neoplasm of carotid body	ICD-10-CM	Diagnosis
C72.1	Malignant neoplasm of cauda equina	ICD-10-CM	Diagnosis
C18.0	Malignant neoplasm of cecum	ICD-10-CM	Diagnosis
C72.9	Malignant neoplasm of central nervous system, unspecified	ICD-10-CM	Diagnosis
C50.1	Malignant neoplasm of central portion of breast	ICD-10-CM	Diagnosis
C71.6	Malignant neoplasm of cerebellum	ICD-10-CM	Diagnosis
C70.0	Malignant neoplasm of cerebral meninges	ICD-10-CM	Diagnosis
C71.5	Malignant neoplasm of cerebral ventricle	ICD-10-CM	Diagnosis
C53	Malignant neoplasm of cervix uteri	ICD-10-CM	Diagnosis
C53.9	Malignant neoplasm of cervix uteri, unspecified	ICD-10-CM	Diagnosis
C06.0	Malignant neoplasm of cheek mucosa	ICD-10-CM	Diagnosis
C69.3	Malignant neoplasm of choroid	ICD-10-CM	Diagnosis
C69.4	Malignant neoplasm of ciliary body	ICD-10-CM	Diagnosis
C51.2	Malignant neoplasm of clitoris	ICD-10-CM	Diagnosis
C21.2	Malignant neoplasm of cloacogenic zone	ICD-10-CM	Diagnosis
C18	Malignant neoplasm of colon	ICD-10-CM	Diagnosis
C18.9	Malignant neoplasm of colon, unspecified	ICD-10-CM	Diagnosis
C69.0	Malignant neoplasm of conjunctiva	ICD-10-CM	Diagnosis
C69.1	Malignant neoplasm of cornea	ICD-10-CM	Diagnosis
C54	Malignant neoplasm of corpus uteri	ICD-10-CM	Diagnosis
C54.9	Malignant neoplasm of corpus uteri, unspecified	ICD-10-CM	Diagnosis
C74.0	Malignant neoplasm of cortex of adrenal gland	ICD-10-CM	Diagnosis
C75.2	Malignant neoplasm of craniopharyngeal duct	ICD-10-CM	Diagnosis
C62.12	Malignant neoplasm of descended left testis	ICD-10-CM	Diagnosis
C62.11	Malignant neoplasm of descended right testis	ICD-10-CM	Diagnosis
C62.1	Malignant neoplasm of descended testis	ICD-10-CM	Diagnosis
C18.6	Malignant neoplasm of descending colon	ICD-10-CM	Diagnosis
C67.1	Malignant neoplasm of dome of bladder	ICD-10-CM	Diagnosis
C02.0	Malignant neoplasm of dorsal surface of tongue	ICD-10-CM	Diagnosis
C17.0	Malignant neoplasm of duodenum	ICD-10-CM	Diagnosis
C53.0	Malignant neoplasm of endocervix	ICD-10-CM	Diagnosis
C75.9	Malignant neoplasm of endocrine gland, unspecified	ICD-10-CM	Diagnosis
C25.4	Malignant neoplasm of endocrine pancreas	ICD-10-CM	Diagnosis
C54.1	Malignant neoplasm of endometrium	ICD-10-CM	Diagnosis
C63.0	Malignant neoplasm of epididymis	ICD-10-CM	Diagnosis
C15	Malignant neoplasm of esophagus	ICD-10-CM	Diagnosis
C15.9	Malignant neoplasm of esophagus, unspecified	ICD-10-CM	Diagnosis
C31.1	Malignant neoplasm of ethmoidal sinus	ICD-10-CM	Diagnosis
C53.1	Malignant neoplasm of exocervix	ICD-10-CM	Diagnosis
C00.2	Malignant neoplasm of external lip, unspecified	ICD-10-CM	Diagnosis
C00.1	Malignant neoplasm of external lower lip	ICD-10-CM	Diagnosis
C00.0	Malignant neoplasm of external upper lip	ICD-10-CM	Diagnosis
C24.0	Malignant neoplasm of extrahepatic bile duct	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
C69	Malignant neoplasm of eye and adnexa	ICD-10-CM	Diagnosis
C57.0	Malignant neoplasm of fallopian tube	ICD-10-CM	Diagnosis
C57.9	Malignant neoplasm of female genital organ, unspecified	ICD-10-CM	Diagnosis
C04	Malignant neoplasm of floor of mouth	ICD-10-CM	Diagnosis
C04.9	Malignant neoplasm of floor of mouth, unspecified	ICD-10-CM	Diagnosis
C71.1	Malignant neoplasm of frontal lobe	ICD-10-CM	Diagnosis
C31.2	Malignant neoplasm of frontal sinus	ICD-10-CM	Diagnosis
C16.1	Malignant neoplasm of fundus of stomach	ICD-10-CM	Diagnosis
C54.3	Malignant neoplasm of fundus uteri	ICD-10-CM	Diagnosis
C23	Malignant neoplasm of gallbladder	ICD-10-CM	Diagnosis
C60.1	Malignant neoplasm of glans penis	ICD-10-CM	Diagnosis
C32.0	Malignant neoplasm of glottis	ICD-10-CM	Diagnosis
C03	Malignant neoplasm of gum	ICD-10-CM	Diagnosis
C03.9	Malignant neoplasm of gum, unspecified	ICD-10-CM	Diagnosis
C05.0	Malignant neoplasm of hard palate	ICD-10-CM	Diagnosis
C76.0	Malignant neoplasm of head, face and neck	ICD-10-CM	Diagnosis
C25.0	Malignant neoplasm of head of pancreas	ICD-10-CM	Diagnosis
C38.0	Malignant neoplasm of heart	ICD-10-CM	Diagnosis
C38	Malignant neoplasm of heart, mediastinum and pleura	ICD-10-CM	Diagnosis
C18.3	Malignant neoplasm of hepatic flexure	ICD-10-CM	Diagnosis
C13	Malignant neoplasm of hypopharynx	ICD-10-CM	Diagnosis
C13.9	Malignant neoplasm of hypopharynx, unspecified	ICD-10-CM	Diagnosis
C17.2	Malignant neoplasm of ileum	ICD-10-CM	Diagnosis
C54.0	Malignant neoplasm of isthmus uteri	ICD-10-CM	Diagnosis
C17.1	Malignant neoplasm of jejunum	ICD-10-CM	Diagnosis
C64	Malignant neoplasm of kidney, except renal pelvis	ICD-10-CM	Diagnosis
C51.0	Malignant neoplasm of labium majus	ICD-10-CM	Diagnosis
C51.1	Malignant neoplasm of labium minus	ICD-10-CM	Diagnosis
C69.5	Malignant neoplasm of lacrimal gland and duct	ICD-10-CM	Diagnosis
C32.3	Malignant neoplasm of laryngeal cartilage	ICD-10-CM	Diagnosis
C32	Malignant neoplasm of larynx	ICD-10-CM	Diagnosis
C32.9	Malignant neoplasm of larynx, unspecified	ICD-10-CM	Diagnosis
C04.1	Malignant neoplasm of lateral floor of mouth	ICD-10-CM	Diagnosis
C67.2	Malignant neoplasm of lateral wall of bladder	ICD-10-CM	Diagnosis
C10.2	Malignant neoplasm of lateral wall of oropharynx	ICD-10-CM	Diagnosis
C72.42	Malignant neoplasm of left acoustic nerve	ICD-10-CM	Diagnosis
C57.12	Malignant neoplasm of left broad ligament	ICD-10-CM	Diagnosis
C69.32	Malignant neoplasm of left choroid	ICD-10-CM	Diagnosis
C69.42	Malignant neoplasm of left ciliary body	ICD-10-CM	Diagnosis
C69.02	Malignant neoplasm of left conjunctiva	ICD-10-CM	Diagnosis
C69.12	Malignant neoplasm of left cornea	ICD-10-CM	Diagnosis
C63.02	Malignant neoplasm of left epididymis	ICD-10-CM	Diagnosis
C57.02	Malignant neoplasm of left fallopian tube	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C76.52	Malignant neoplasm of left lower limb	ICD-10-CM	Diagnosis
C34.02	Malignant neoplasm of left main bronchus	ICD-10-CM	Diagnosis
C72.22	Malignant neoplasm of left olfactory nerve	ICD-10-CM	Diagnosis
C72.32	Malignant neoplasm of left optic nerve	ICD-10-CM	Diagnosis
C69.62	Malignant neoplasm of left orbit	ICD-10-CM	Diagnosis
C56.2	Malignant neoplasm of left ovary	ICD-10-CM	Diagnosis
C65.2	Malignant neoplasm of left renal pelvis	ICD-10-CM	Diagnosis
C69.22	Malignant neoplasm of left retina	ICD-10-CM	Diagnosis
C57.22	Malignant neoplasm of left round ligament	ICD-10-CM	Diagnosis
C63.12	Malignant neoplasm of left spermatic cord	ICD-10-CM	Diagnosis
C76.42	Malignant neoplasm of left upper limb	ICD-10-CM	Diagnosis
C66.2	Malignant neoplasm of left ureter	ICD-10-CM	Diagnosis
C02.4	Malignant neoplasm of lingual tonsil	ICD-10-CM	Diagnosis
C00	Malignant neoplasm of lip	ICD-10-CM	Diagnosis
C00.5	Malignant neoplasm of lip, unspecified, inner aspect	ICD-10-CM	Diagnosis
C00.9	Malignant neoplasm of lip, unspecified	ICD-10-CM	Diagnosis
C40.2	Malignant neoplasm of long bones of lower limb	ICD-10-CM	Diagnosis
C03.1	Malignant neoplasm of lower gum	ICD-10-CM	Diagnosis
C76.5	Malignant neoplasm of lower limb	ICD-10-CM	Diagnosis
C00.4	Malignant neoplasm of lower lip, inner aspect	ICD-10-CM	Diagnosis
C34.3	Malignant neoplasm of lower lobe, bronchus or lung	ICD-10-CM	Diagnosis
C15.5	Malignant neoplasm of lower third of esophagus	ICD-10-CM	Diagnosis
C34.0	Malignant neoplasm of main bronchus	ICD-10-CM	Diagnosis
C08.9	Malignant neoplasm of major salivary gland, unspecified	ICD-10-CM	Diagnosis
C41.1	Malignant neoplasm of mandible	ICD-10-CM	Diagnosis
C31.0	Malignant neoplasm of maxillary sinus	ICD-10-CM	Diagnosis
C38.3	Malignant neoplasm of mediastinum, part unspecified	ICD-10-CM	Diagnosis
C74.1	Malignant neoplasm of medulla of adrenal gland	ICD-10-CM	Diagnosis
C70	Malignant neoplasm of meninges	ICD-10-CM	Diagnosis
C70.9	Malignant neoplasm of meninges, unspecified	ICD-10-CM	Diagnosis
C30.1	Malignant neoplasm of middle ear	ICD-10-CM	Diagnosis
C34.2	Malignant neoplasm of middle lobe, bronchus or lung	ICD-10-CM	Diagnosis
C15.4	Malignant neoplasm of middle third of esophagus	ICD-10-CM	Diagnosis
C06.9	Malignant neoplasm of mouth, unspecified	ICD-10-CM	Diagnosis
C54.2	Malignant neoplasm of myometrium	ICD-10-CM	Diagnosis
C30.0	Malignant neoplasm of nasal cavity	ICD-10-CM	Diagnosis
C30	Malignant neoplasm of nasal cavity and middle ear	ICD-10-CM	Diagnosis
C11	Malignant neoplasm of nasopharynx	ICD-10-CM	Diagnosis
C11.9	Malignant neoplasm of nasopharynx, unspecified	ICD-10-CM	Diagnosis
C50.0	Malignant neoplasm of nipple and areola	ICD-10-CM	Diagnosis
C50.01	Malignant neoplasm of nipple and areola, female	ICD-10-CM	Diagnosis
C50.02	Malignant neoplasm of nipple and areola, male	ICD-10-CM	Diagnosis
C71.4	Malignant neoplasm of occipital lobe	ICD-10-CM	Diagnosis



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Code	Description	Code Type	Code Category
C72.2	Malignant neoplasm of olfactory nerve	ICD-10-CM	Diagnosis
C72.3	Malignant neoplasm of optic nerve	ICD-10-CM	Diagnosis
C69.6	Malignant neoplasm of orbit	ICD-10-CM	Diagnosis
C10	Malignant neoplasm of oropharynx	ICD-10-CM	Diagnosis
C10.9	Malignant neoplasm of oropharynx, unspecified	ICD-10-CM	Diagnosis
C02	Malignant neoplasm of other and unspecified parts of tongue	ICD-10-CM	Diagnosis
C39	Malignant neoplasm of other and ill-defined sites in the respiratory system and intrathoracic organs	ICD-10-CM	Diagnosis
C72.59	Malignant neoplasm of other cranial nerves	ICD-10-CM	Diagnosis
C25.7	Malignant neoplasm of other parts of pancreas	ICD-10-CM	Diagnosis
C56	Malignant neoplasm of ovary	ICD-10-CM	Diagnosis
C50.8	Malignant neoplasm of overlapping sites of breast	ICD-10-CM	Diagnosis
C32.8	Malignant neoplasm of overlapping sites of larynx	ICD-10-CM	Diagnosis
C71.8	Malignant neoplasm of overlapping sites of brain	ICD-10-CM	Diagnosis
C18.8	Malignant neoplasm of overlapping sites of colon	ICD-10-CM	Diagnosis
C00.8	Malignant neoplasm of overlapping sites of lip	ICD-10-CM	Diagnosis
C60.8	Malignant neoplasm of overlapping sites of penis	ICD-10-CM	Diagnosis
C51.8	Malignant neoplasm of overlapping sites of vulva	ICD-10-CM	Diagnosis
C09.8	Malignant neoplasm of overlapping sites of tonsil	ICD-10-CM	Diagnosis
C05	Malignant neoplasm of palate	ICD-10-CM	Diagnosis
C05.9	Malignant neoplasm of palate, unspecified	ICD-10-CM	Diagnosis
C25	Malignant neoplasm of pancreas	ICD-10-CM	Diagnosis
C25.9	Malignant neoplasm of pancreas, unspecified	ICD-10-CM	Diagnosis
C25.3	Malignant neoplasm of pancreatic duct	ICD-10-CM	Diagnosis
C57.3	Malignant neoplasm of parametrium	ICD-10-CM	Diagnosis
C75.0	Malignant neoplasm of parathyroid gland	ICD-10-CM	Diagnosis
C68.1	Malignant neoplasm of paraurethral glands	ICD-10-CM	Diagnosis
C71.3	Malignant neoplasm of parietal lobe	ICD-10-CM	Diagnosis
C07	Malignant neoplasm of parotid gland	ICD-10-CM	Diagnosis
C76.3	Malignant neoplasm of pelvis	ICD-10-CM	Diagnosis
C60	Malignant neoplasm of penis	ICD-10-CM	Diagnosis
C60.9	Malignant neoplasm of penis, unspecified	ICD-10-CM	Diagnosis
C48.2	Malignant neoplasm of peritoneum, unspecified	ICD-10-CM	Diagnosis
C14.0	Malignant neoplasm of pharynx, unspecified	ICD-10-CM	Diagnosis
C75.3	Malignant neoplasm of pineal gland	ICD-10-CM	Diagnosis
C75.1	Malignant neoplasm of pituitary gland	ICD-10-CM	Diagnosis
C58	Malignant neoplasm of placenta	ICD-10-CM	Diagnosis
C38.4	Malignant neoplasm of pleura	ICD-10-CM	Diagnosis
C13.0	Malignant neoplasm of postcricoid region	ICD-10-CM	Diagnosis
C38.2	Malignant neoplasm of posterior mediastinum	ICD-10-CM	Diagnosis
C67.4	Malignant neoplasm of posterior wall of bladder	ICD-10-CM	Diagnosis
C10.3	Malignant neoplasm of posterior wall of oropharynx	ICD-10-CM	Diagnosis
C60.0	Malignant neoplasm of prepuce	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C61	Malignant neoplasm of prostate	ICD-10-CM	Diagnosis
C16.3	Malignant neoplasm of pyloric antrum	ICD-10-CM	Diagnosis
C16.4	Malignant neoplasm of pylorus	ICD-10-CM	Diagnosis
C12	Malignant neoplasm of pyriform sinus	ICD-10-CM	Diagnosis
C19	Malignant neoplasm of rectosigmoid junction	ICD-10-CM	Diagnosis
C20	Malignant neoplasm of rectum	ICD-10-CM	Diagnosis
C65	Malignant neoplasm of renal pelvis	ICD-10-CM	Diagnosis
C69.2	Malignant neoplasm of retina	ICD-10-CM	Diagnosis
C06.2	Malignant neoplasm of retromolar area	ICD-10-CM	Diagnosis
C48.0	Malignant neoplasm of retroperitoneum	ICD-10-CM	Diagnosis
C41.3	Malignant neoplasm of ribs, sternum and clavicle	ICD-10-CM	Diagnosis
C72.41	Malignant neoplasm of right acoustic nerve	ICD-10-CM	Diagnosis
C57.11	Malignant neoplasm of right broad ligament	ICD-10-CM	Diagnosis
C69.31	Malignant neoplasm of right choroid	ICD-10-CM	Diagnosis
C69.41	Malignant neoplasm of right ciliary body	ICD-10-CM	Diagnosis
C69.01	Malignant neoplasm of right conjunctiva	ICD-10-CM	Diagnosis
C69.11	Malignant neoplasm of right cornea	ICD-10-CM	Diagnosis
C63.01	Malignant neoplasm of right epididymis	ICD-10-CM	Diagnosis
C57.01	Malignant neoplasm of right fallopian tube	ICD-10-CM	Diagnosis
C76.51	Malignant neoplasm of right lower limb	ICD-10-CM	Diagnosis
C34.01	Malignant neoplasm of right main bronchus	ICD-10-CM	Diagnosis
C72.21	Malignant neoplasm of right olfactory nerve	ICD-10-CM	Diagnosis
C72.31	Malignant neoplasm of right optic nerve	ICD-10-CM	Diagnosis
C69.61	Malignant neoplasm of right orbit	ICD-10-CM	Diagnosis
C56.1	Malignant neoplasm of right ovary	ICD-10-CM	Diagnosis
C65.1	Malignant neoplasm of right renal pelvis	ICD-10-CM	Diagnosis
C69.21	Malignant neoplasm of right retina	ICD-10-CM	Diagnosis
C57.21	Malignant neoplasm of right round ligament	ICD-10-CM	Diagnosis
C63.11	Malignant neoplasm of right spermatic cord	ICD-10-CM	Diagnosis
C76.41	Malignant neoplasm of right upper limb	ICD-10-CM	Diagnosis
C66.1	Malignant neoplasm of right ureter	ICD-10-CM	Diagnosis
C57.2	Malignant neoplasm of round ligament	ICD-10-CM	Diagnosis
C63.2	Malignant neoplasm of scrotum	ICD-10-CM	Diagnosis
C40.3	Malignant neoplasm of short bones of lower limb	ICD-10-CM	Diagnosis
C40.1	Malignant neoplasm of short bones of upper limb	ICD-10-CM	Diagnosis
C18.7	Malignant neoplasm of sigmoid colon	ICD-10-CM	Diagnosis
C17	Malignant neoplasm of small intestine	ICD-10-CM	Diagnosis
C05.1	Malignant neoplasm of soft palate	ICD-10-CM	Diagnosis
C48.1	Malignant neoplasm of specified parts of peritoneum	ICD-10-CM	Diagnosis
C63.1	Malignant neoplasm of spermatic cord	ICD-10-CM	Diagnosis
C31.3	Malignant neoplasm of sphenoid sinus	ICD-10-CM	Diagnosis
C72.0	Malignant neoplasm of spinal cord	ICD-10-CM	Diagnosis
C70.1	Malignant neoplasm of spinal meninges	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
C26.1	Malignant neoplasm of spleen	ICD-10-CM	Diagnosis
C18.5	Malignant neoplasm of splenic flexure	ICD-10-CM	Diagnosis
C16	Malignant neoplasm of stomach	ICD-10-CM	Diagnosis
C16.9	Malignant neoplasm of stomach, unspecified	ICD-10-CM	Diagnosis
C32.2	Malignant neoplasm of subglottis	ICD-10-CM	Diagnosis
C08.1	Malignant neoplasm of sublingual gland	ICD-10-CM	Diagnosis
C08.0	Malignant neoplasm of submandibular gland	ICD-10-CM	Diagnosis
C32.1	Malignant neoplasm of supraglottis	ICD-10-CM	Diagnosis
C25.2	Malignant neoplasm of tail of pancreas	ICD-10-CM	Diagnosis
C71.2	Malignant neoplasm of temporal lobe	ICD-10-CM	Diagnosis
C62	Malignant neoplasm of testis	ICD-10-CM	Diagnosis
C62.9	Malignant neoplasm of testis, unspecified whether descended or undescended	ICD-10-CM	Diagnosis
C76.1	Malignant neoplasm of thorax	ICD-10-CM	Diagnosis
C37	Malignant neoplasm of thymus	ICD-10-CM	Diagnosis
C73	Malignant neoplasm of thyroid gland	ICD-10-CM	Diagnosis
C02.9	Malignant neoplasm of tongue, unspecified	ICD-10-CM	Diagnosis
C09	Malignant neoplasm of tonsil	ICD-10-CM	Diagnosis
C09.9	Malignant neoplasm of tonsil, unspecified	ICD-10-CM	Diagnosis
C09.0	Malignant neoplasm of tonsillar fossa	ICD-10-CM	Diagnosis
C09.1	Malignant neoplasm of tonsillar pillar (anterior) (posterior)	ICD-10-CM	Diagnosis
C33	Malignant neoplasm of trachea	ICD-10-CM	Diagnosis
C18.4	Malignant neoplasm of transverse colon	ICD-10-CM	Diagnosis
C67.0	Malignant neoplasm of trigone of bladder	ICD-10-CM	Diagnosis
C62.02	Malignant neoplasm of undescended left testis	ICD-10-CM	Diagnosis
C62.01	Malignant neoplasm of undescended right testis	ICD-10-CM	Diagnosis
C62.0	Malignant neoplasm of undescended testis	ICD-10-CM	Diagnosis
C34.9	Malignant neoplasm of unspecified part of bronchus or lung	ICD-10-CM	Diagnosis
C50.922	Malignant neoplasm of unspecified site of left male breast	ICD-10-CM	Diagnosis
C50.921	Malignant neoplasm of unspecified site of right male breast	ICD-10-CM	Diagnosis
C50.929	Malignant neoplasm of unspecified site of unspecified male breast	ICD-10-CM	Diagnosis
C57.20	Malignant neoplasm of unspecified round ligament	ICD-10-CM	Diagnosis
C72.40	Malignant neoplasm of unspecified acoustic nerve	ICD-10-CM	Diagnosis
C57.10	Malignant neoplasm of unspecified broad ligament	ICD-10-CM	Diagnosis
C69.30	Malignant neoplasm of unspecified choroid	ICD-10-CM	Diagnosis
C69.40	Malignant neoplasm of unspecified ciliary body	ICD-10-CM	Diagnosis
C69.00	Malignant neoplasm of unspecified conjunctiva	ICD-10-CM	Diagnosis
C69.10	Malignant neoplasm of unspecified cornea	ICD-10-CM	Diagnosis
C72.50	Malignant neoplasm of unspecified cranial nerve	ICD-10-CM	Diagnosis
C63.00	Malignant neoplasm of unspecified epididymis	ICD-10-CM	Diagnosis
C57.00	Malignant neoplasm of unspecified fallopian tube	ICD-10-CM	Diagnosis
C76.50	Malignant neoplasm of unspecified lower limb	ICD-10-CM	Diagnosis
C34.00	Malignant neoplasm of unspecified main bronchus	ICD-10-CM	Diagnosis
C72.30	Malignant neoplasm of unspecified optic nerve	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C69.60	Malignant neoplasm of unspecified orbit	ICD-10-CM	Diagnosis
C56.9	Malignant neoplasm of unspecified ovary	ICD-10-CM	Diagnosis
C74.9	Malignant neoplasm of unspecified part of adrenal gland	ICD-10-CM	Diagnosis
C65.9	Malignant neoplasm of unspecified renal pelvis	ICD-10-CM	Diagnosis
C69.20	Malignant neoplasm of unspecified retina	ICD-10-CM	Diagnosis
C69.92	Malignant neoplasm of unspecified site of left eye	ICD-10-CM	Diagnosis
C69.9	Malignant neoplasm of unspecified site of eye	ICD-10-CM	Diagnosis
C69.91	Malignant neoplasm of unspecified site of right eye	ICD-10-CM	Diagnosis
C63.10	Malignant neoplasm of unspecified spermatic cord	ICD-10-CM	Diagnosis
C76.40	Malignant neoplasm of unspecified upper limb	ICD-10-CM	Diagnosis
C66.9	Malignant neoplasm of unspecified ureter	ICD-10-CM	Diagnosis
C03.0	Malignant neoplasm of upper gum	ICD-10-CM	Diagnosis
C76.4	Malignant neoplasm of upper limb	ICD-10-CM	Diagnosis
C00.3	Malignant neoplasm of upper lip, inner aspect	ICD-10-CM	Diagnosis
C34.1	Malignant neoplasm of upper lobe, bronchus or lung	ICD-10-CM	Diagnosis
C15.3	Malignant neoplasm of upper third of esophagus	ICD-10-CM	Diagnosis
C67.7	Malignant neoplasm of urachus	ICD-10-CM	Diagnosis
C66	Malignant neoplasm of ureter	ICD-10-CM	Diagnosis
C67.6	Malignant neoplasm of ureteric orifice	ICD-10-CM	Diagnosis
C68.0	Malignant neoplasm of urethra	ICD-10-CM	Diagnosis
C68.9	Malignant neoplasm of urinary organ, unspecified	ICD-10-CM	Diagnosis
C57.4	Malignant neoplasm of uterine adnexa, unspecified	ICD-10-CM	Diagnosis
C55	Malignant neoplasm of uterus, part unspecified	ICD-10-CM	Diagnosis
C05.2	Malignant neoplasm of uvula	ICD-10-CM	Diagnosis
C52	Malignant neoplasm of vagina	ICD-10-CM	Diagnosis
C10.0	Malignant neoplasm of vallecule	ICD-10-CM	Diagnosis
C02.2	Malignant neoplasm of ventral surface of tongue	ICD-10-CM	Diagnosis
C41.2	Malignant neoplasm of vertebral column	ICD-10-CM	Diagnosis
C06.1	Malignant neoplasm of vestibule of mouth	ICD-10-CM	Diagnosis
C51	Malignant neoplasm of vulva	ICD-10-CM	Diagnosis
C51.9	Malignant neoplasm of vulva, unspecified	ICD-10-CM	Diagnosis
C14.2	Malignant neoplasm of Waldeyer's ring	ICD-10-CM	Diagnosis
C26	Malignant neoplasm of other and ill-defined digestive organs	ICD-10-CM	Diagnosis
C08	Malignant neoplasm of other and unspecified major salivary glands	ICD-10-CM	Diagnosis
C63	Malignant neoplasm of other and unspecified male genital organs	ICD-10-CM	Diagnosis
C24	Malignant neoplasm of other and unspecified parts of biliary tract	ICD-10-CM	Diagnosis
C06	Malignant neoplasm of other and unspecified parts of mouth	ICD-10-CM	Diagnosis
C72.5	Malignant neoplasm of other and unspecified cranial nerves	ICD-10-CM	Diagnosis
C68	Malignant neoplasm of other and unspecified urinary organs	ICD-10-CM	Diagnosis
C49	Malignant neoplasm of other connective and soft tissue	ICD-10-CM	Diagnosis
C63.7	Malignant neoplasm of other specified male genital organs	ICD-10-CM	Diagnosis
C57	Malignant neoplasm of other and unspecified female genital organs	ICD-10-CM	Diagnosis
C76	Malignant neoplasm of other and ill-defined sites	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C40.80	Malignant neoplasm of overlapping sites of bone and articular cartilage of unspecified limb	ICD-10-CM	Diagnosis
C34.8	Malignant neoplasm of overlapping sites of bronchus and lung	ICD-10-CM	Diagnosis
C34.82	Malignant neoplasm of overlapping sites of left bronchus and lung	ICD-10-CM	Diagnosis
C50.812	Malignant neoplasm of overlapping sites of left female breast	ICD-10-CM	Diagnosis
C24.8	Malignant neoplasm of overlapping sites of biliary tract	ICD-10-CM	Diagnosis
C34.81	Malignant neoplasm of overlapping sites of right bronchus and lung	ICD-10-CM	Diagnosis
C50.811	Malignant neoplasm of overlapping sites of right female breast	ICD-10-CM	Diagnosis
C50.819	Malignant neoplasm of overlapping sites of unspecified female breast	ICD-10-CM	Diagnosis
C31.8	Malignant neoplasm of overlapping sites of accessory sinuses	ICD-10-CM	Diagnosis
C40.8	Malignant neoplasm of overlapping sites of bone and articular cartilage of limb	ICD-10-CM	Diagnosis
C40.82	Malignant neoplasm of overlapping sites of bone and articular cartilage of left limb	ICD-10-CM	Diagnosis
C40.81	Malignant neoplasm of overlapping sites of bone and articular cartilage of right limb	ICD-10-CM	Diagnosis
C50.81	Malignant neoplasm of overlapping sites of breast, female	ICD-10-CM	Diagnosis
C49.8	Malignant neoplasm of overlapping sites of connective and soft tissue	ICD-10-CM	Diagnosis
C69.8	Malignant neoplasm of overlapping sites of eye and adnexa	ICD-10-CM	Diagnosis
C69.82	Malignant neoplasm of overlapping sites of left eye and adnexa	ICD-10-CM	Diagnosis
C50.822	Malignant neoplasm of overlapping sites of left male breast	ICD-10-CM	Diagnosis
C06.89	Malignant neoplasm of overlapping sites of other parts of mouth	ICD-10-CM	Diagnosis
C47.8	Malignant neoplasm of overlapping sites of peripheral nerves and autonomic nervous system	ICD-10-CM	Diagnosis
C48.8	Malignant neoplasm of overlapping sites of retroperitoneum and peritoneum	ICD-10-CM	Diagnosis
C69.81	Malignant neoplasm of overlapping sites of right eye and adnexa	ICD-10-CM	Diagnosis
C50.821	Malignant neoplasm of overlapping sites of right male breast	ICD-10-CM	Diagnosis
C17.8	Malignant neoplasm of overlapping sites of small intestine	ICD-10-CM	Diagnosis
C69.80	Malignant neoplasm of overlapping sites of unspecified eye and adnexa	ICD-10-CM	Diagnosis
C50.829	Malignant neoplasm of overlapping sites of unspecified male breast	ICD-10-CM	Diagnosis
C06.80	Malignant neoplasm of overlapping sites of unspecified parts of mouth	ICD-10-CM	Diagnosis
C68.8	Malignant neoplasm of overlapping sites of urinary organs	ICD-10-CM	Diagnosis
C53.8	Malignant neoplasm of overlapping sites of cervix uteri	ICD-10-CM	Diagnosis
C54.8	Malignant neoplasm of overlapping sites of corpus uteri	ICD-10-CM	Diagnosis
C50.82	Malignant neoplasm of overlapping sites of breast, male	ICD-10-CM	Diagnosis
C15.8	Malignant neoplasm of overlapping sites of esophagus	ICD-10-CM	Diagnosis
C04.8	Malignant neoplasm of overlapping sites of floor of mouth	ICD-10-CM	Diagnosis
C13.8	Malignant neoplasm of overlapping sites of hypopharynx	ICD-10-CM	Diagnosis
C11.8	Malignant neoplasm of overlapping sites of nasopharynx	ICD-10-CM	Diagnosis
C67.8	Malignant neoplasm of overlapping sites of bladder	ICD-10-CM	Diagnosis
C05.8	Malignant neoplasm of overlapping sites of palate	ICD-10-CM	Diagnosis
C25.8	Malignant neoplasm of overlapping sites of pancreas	ICD-10-CM	Diagnosis
C16.8	Malignant neoplasm of overlapping sites of stomach	ICD-10-CM	Diagnosis
C02.8	Malignant neoplasm of overlapping sites of tongue	ICD-10-CM	Diagnosis
C10.8	Malignant neoplasm of overlapping sites of oropharynx	ICD-10-CM	Diagnosis
C34.80	Malignant neoplasm of overlapping sites of unspecified bronchus and lung	ICD-10-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C41.4	Malignant neoplasm of pelvic bones, sacrum and coccyx	ICD-10-CM	Diagnosis
C47.9	Malignant neoplasm of peripheral nerves and autonomic nervous system, unspecified	ICD-10-CM	Diagnosis
C47	Malignant neoplasm of peripheral nerves and autonomic nervous system	ICD-10-CM	Diagnosis
C47.0	Malignant neoplasm of peripheral nerves of head, face and neck	ICD-10-CM	Diagnosis
C47.4	Malignant neoplasm of peripheral nerves of abdomen	ICD-10-CM	Diagnosis
C47.5	Malignant neoplasm of peripheral nerves of pelvis	ICD-10-CM	Diagnosis
C47.3	Malignant neoplasm of peripheral nerves of thorax	ICD-10-CM	Diagnosis
C47.6	Malignant neoplasm of peripheral nerves of trunk, unspecified	ICD-10-CM	Diagnosis
C13.2	Malignant neoplasm of posterior wall of hypopharynx	ICD-10-CM	Diagnosis
C11.1	Malignant neoplasm of posterior wall of nasopharynx	ICD-10-CM	Diagnosis
C48	Malignant neoplasm of retroperitoneum and peritoneum	ICD-10-CM	Diagnosis
C69.51	Malignant neoplasm of right lacrimal gland and duct	ICD-10-CM	Diagnosis
C64.1	Malignant neoplasm of right kidney, except renal pelvis	ICD-10-CM	Diagnosis
C62.91	Malignant neoplasm of right testis, unspecified whether descended or undescended	ICD-10-CM	Diagnosis
C40.02	Malignant neoplasm of scapula and long bones of left upper limb	ICD-10-CM	Diagnosis
C40.01	Malignant neoplasm of scapula and long bones of right upper limb	ICD-10-CM	Diagnosis
C40.00	Malignant neoplasm of scapula and long bones of unspecified upper limb	ICD-10-CM	Diagnosis
C40.0	Malignant neoplasm of scapula and long bones of upper limb	ICD-10-CM	Diagnosis
C40.32	Malignant neoplasm of short bones of left lower limb	ICD-10-CM	Diagnosis
C40.12	Malignant neoplasm of short bones of left upper limb	ICD-10-CM	Diagnosis
C40.31	Malignant neoplasm of short bones of right lower limb	ICD-10-CM	Diagnosis
C40.11	Malignant neoplasm of short bones of right upper limb	ICD-10-CM	Diagnosis
C40.30	Malignant neoplasm of short bones of unspecified lower limb	ICD-10-CM	Diagnosis
C40.10	Malignant neoplasm of short bones of unspecified upper limb	ICD-10-CM	Diagnosis
C11.0	Malignant neoplasm of superior wall of nasopharynx	ICD-10-CM	Diagnosis
C40.92	Malignant neoplasm of unspecified bones and articular cartilage of left limb	ICD-10-CM	Diagnosis
C40.91	Malignant neoplasm of unspecified bones and articular cartilage of right limb	ICD-10-CM	Diagnosis
C40.90	Malignant neoplasm of unspecified bones and articular cartilage of unspecified limb	ICD-10-CM	Diagnosis
C40.9	Malignant neoplasm of unspecified bones and articular cartilage of limb	ICD-10-CM	Diagnosis
C64.9	Malignant neoplasm of unspecified kidney, except renal pelvis	ICD-10-CM	Diagnosis
C69.50	Malignant neoplasm of unspecified lacrimal gland and duct	ICD-10-CM	Diagnosis
C74.92	Malignant neoplasm of unspecified part of left adrenal gland	ICD-10-CM	Diagnosis
C34.92	Malignant neoplasm of unspecified part of left bronchus or lung	ICD-10-CM	Diagnosis
C74.91	Malignant neoplasm of unspecified part of right adrenal gland	ICD-10-CM	Diagnosis
C34.91	Malignant neoplasm of unspecified part of right bronchus or lung	ICD-10-CM	Diagnosis
C74.90	Malignant neoplasm of unspecified part of unspecified adrenal gland	ICD-10-CM	Diagnosis
C34.90	Malignant neoplasm of unspecified part of unspecified bronchus or lung	ICD-10-CM	Diagnosis
C50.912	Malignant neoplasm of unspecified site of left female breast	ICD-10-CM	Diagnosis
C50.911	Malignant neoplasm of unspecified site of right female breast	ICD-10-CM	Diagnosis
C50.919	Malignant neoplasm of unspecified site of unspecified female breast	ICD-10-CM	Diagnosis
C62.90	Malignant neoplasm of unspecified testis, unspecified whether descended or undescended	ICD-10-CM	Diagnosis
C62.00	Malignant neoplasm of unspecified undescended testis	ICD-10-CM	Diagnosis

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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
C62.10	Malignant neoplasm of unspecified descended testis	ICD-10-CM	Diagnosis
C72.20	Malignant neoplasm of unspecified olfactory nerve	ICD-10-CM	Diagnosis
C69.90	Malignant neoplasm of unspecified site of unspecified eye	ICD-10-CM	Diagnosis
C50.22	Malignant neoplasm of upper-inner quadrant of breast, male	ICD-10-CM	Diagnosis
C50.2	Malignant neoplasm of upper-inner quadrant of breast	ICD-10-CM	Diagnosis
C50.4	Malignant neoplasm of upper-outer quadrant of breast	ICD-10-CM	Diagnosis
C34.12	Malignant neoplasm of upper lobe, left bronchus or lung	ICD-10-CM	Diagnosis
C34.11	Malignant neoplasm of upper lobe, right bronchus or lung	ICD-10-CM	Diagnosis
C34.10	Malignant neoplasm of upper lobe, unspecified bronchus or lung	ICD-10-CM	Diagnosis
C39.0	Malignant neoplasm of upper respiratory tract, part unspecified	ICD-10-CM	Diagnosis
C75.8	Malignant neoplasm with pluriglandular involvement, unspecified	ICD-10-CM	Diagnosis
C80	Malignant neoplasm without specification of site	ICD-10-CM	Diagnosis
C75	Malignant neoplasm of other endocrine glands and related structures	ICD-10-CM	Diagnosis
C06.8	Malignant neoplasm of overlapping sites of other and unspecified parts of mouth	ICD-10-CM	Diagnosis
C7A	Malignant neuroendocrine tumors	ICD-10-CM	Diagnosis
C7A.1	Malignant poorly differentiated neuroendocrine tumors	ICD-10-CM	Diagnosis
C80.1	Malignant (primary) neoplasm, unspecified	ICD-10-CM	Diagnosis
C83.1	Mantle cell lymphoma	ICD-10-CM	Diagnosis
C83.13	Mantle cell lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.16	Mantle cell lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.12	Mantle cell lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.11	Mantle cell lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.14	Mantle cell lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.18	Mantle cell lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.15	Mantle cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.17	Mantle cell lymphoma, spleen	ICD-10-CM	Diagnosis
C83.10	Mantle cell lymphoma, unspecified site	ICD-10-CM	Diagnosis
C83.19	Mantle cell lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C94.3	Mast cell leukemia	ICD-10-CM	Diagnosis
C94.32	Mast cell leukemia, in relapse	ICD-10-CM	Diagnosis
C94.31	Mast cell leukemia, in remission	ICD-10-CM	Diagnosis
C94.30	Mast cell leukemia not having achieved remission	ICD-10-CM	Diagnosis
C96.22	Mast cell sarcoma	ICD-10-CM	Diagnosis
C91.A	Mature B-cell leukemia Burkitt-type	ICD-10-CM	Diagnosis
C91.A2	Mature B-cell leukemia Burkitt-type, in relapse	ICD-10-CM	Diagnosis
C91.A1	Mature B-cell leukemia Burkitt-type, in remission	ICD-10-CM	Diagnosis
C91.A0	Mature B-cell leukemia Burkitt-type not having achieved remission	ICD-10-CM	Diagnosis
C84.99	Mature T/NK-cell lymphomas, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84	Mature T/NK-cell lymphomas	ICD-10-CM	Diagnosis
C84.93	Mature T/NK-cell lymphomas, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.96	Mature T/NK-cell lymphomas, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.92	Mature T/NK-cell lymphomas, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.98	Mature T/NK-cell lymphomas, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C84.94	Mature T/NK-cell lymphomas, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.91	Mature T/NK-cell lymphomas, unspecified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.95	Mature T/NK-cell lymphomas, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.90	Mature T/NK-cell lymphomas, unspecified, unspecified site	ICD-10-CM	Diagnosis
C84.9	Mature T/NK-cell lymphomas, unspecified	ICD-10-CM	Diagnosis
C84.97	Mature T/NK-cell lymphomas, unspecified, spleen	ICD-10-CM	Diagnosis
C81.29	Mixed cellularity Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.23	Mixed cellularity Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.26	Mixed cellularity Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.22	Mixed cellularity Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.25	Mixed cellularity Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.24	Mixed cellularity Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.21	Mixed cellularity Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C17.3	Meckel's diverticulum, malignant	ICD-10-CM	Diagnosis
C85.29	Mediastinal (thymic) large B-cell lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C85.23	Mediastinal (thymic) large B-cell lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C85.26	Mediastinal (thymic) large B-cell lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C85.22	Mediastinal (thymic) large B-cell lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C85.24	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C85.21	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C85.25	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C85.28	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C85.20	Mediastinal (thymic) large B-cell lymphoma, unspecified site	ICD-10-CM	Diagnosis
C85.27	Mediastinal (thymic) large B-cell lymphoma, spleen	ICD-10-CM	Diagnosis
C85.2	Mediastinal (thymic) large B-cell lymphoma	ICD-10-CM	Diagnosis
D03.22	Melanoma in situ of left ear and external auricular canal	ICD-10-CM	Diagnosis
D03.62	Melanoma in situ of left upper limb, including shoulder	ICD-10-CM	Diagnosis
D03.51	Melanoma in situ of anal skin	ICD-10-CM	Diagnosis
D03.52	Melanoma in situ of breast (skin) (soft tissue)	ICD-10-CM	Diagnosis
D03.12	Melanoma in situ of left eyelid, including canthus	ICD-10-CM	Diagnosis
D03.72	Melanoma in situ of left lower limb, including hip	ICD-10-CM	Diagnosis
D03.0	Melanoma in situ of lip	ICD-10-CM	Diagnosis
D03.59	Melanoma in situ of other part of trunk	ICD-10-CM	Diagnosis
D03.39	Melanoma in situ of other parts of face	ICD-10-CM	Diagnosis
D03.8	Melanoma in situ of other sites	ICD-10-CM	Diagnosis
D03.11	Melanoma in situ of right eyelid, including canthus	ICD-10-CM	Diagnosis
D03.71	Melanoma in situ of right lower limb, including hip	ICD-10-CM	Diagnosis
D03.4	Melanoma in situ of scalp and neck	ICD-10-CM	Diagnosis
D03.70	Melanoma in situ of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
D03.30	Melanoma in situ of unspecified part of face	ICD-10-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
D03.21	Melanoma in situ of right ear and external auricular canal	ICD-10-CM	Diagnosis
D03.61	Melanoma in situ of right upper limb, including shoulder	ICD-10-CM	Diagnosis
D03.20	Melanoma in situ of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
D03.60	Melanoma in situ of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
D03.9	Melanoma in situ, unspecified	ICD-10-CM	Diagnosis
D03.10	Melanoma in situ of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
C4A	Merkel cell carcinoma	ICD-10-CM	Diagnosis
C4A.2	Merkel cell carcinoma of ear and external auricular canal	ICD-10-CM	Diagnosis
C4A.1	Merkel cell carcinoma of eyelid, including canthus	ICD-10-CM	Diagnosis
C4A.12	Merkel cell carcinoma of left eyelid, including canthus	ICD-10-CM	Diagnosis
C4A.72	Merkel cell carcinoma of left lower limb, including hip	ICD-10-CM	Diagnosis
C4A.62	Merkel cell carcinoma of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C4A.7	Merkel cell carcinoma of lower limb, including hip	ICD-10-CM	Diagnosis
C4A.22	Merkel cell carcinoma of left ear and external auricular canal	ICD-10-CM	Diagnosis
C4A.122	Merkel cell carcinoma of left lower eyelid, including canthus	ICD-10-CM	Diagnosis
C4A.121	Merkel cell carcinoma of left upper eyelid, including canthus	ICD-10-CM	Diagnosis
C4A.51	Merkel cell carcinoma of anal skin	ICD-10-CM	Diagnosis
C4A.0	Merkel cell carcinoma of lip	ICD-10-CM	Diagnosis
C4A.31	Merkel cell carcinoma of nose	ICD-10-CM	Diagnosis
C4A.59	Merkel cell carcinoma of other part of trunk	ICD-10-CM	Diagnosis
C4A.39	Merkel cell carcinoma of other parts of face	ICD-10-CM	Diagnosis
C4A.8	Merkel cell carcinoma of overlapping sites	ICD-10-CM	Diagnosis
C4A.4	Merkel cell carcinoma of scalp and neck	ICD-10-CM	Diagnosis
C4A.52	Merkel cell carcinoma of skin of breast	ICD-10-CM	Diagnosis
C4A.5	Merkel cell carcinoma of trunk	ICD-10-CM	Diagnosis
C4A.3	Merkel cell carcinoma of other and unspecified parts of face	ICD-10-CM	Diagnosis
C4A.11	Merkel cell carcinoma of right eyelid, including canthus	ICD-10-CM	Diagnosis
C4A.71	Merkel cell carcinoma of right lower limb, including hip	ICD-10-CM	Diagnosis
C4A.61	Merkel cell carcinoma of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C4A.21	Merkel cell carcinoma of right ear and external auricular canal	ICD-10-CM	Diagnosis
C4A.112	Merkel cell carcinoma of right lower eyelid, including canthus	ICD-10-CM	Diagnosis
C4A.111	Merkel cell carcinoma of right upper eyelid, including canthus	ICD-10-CM	Diagnosis
C4A.20	Merkel cell carcinoma of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
C4A.10	Merkel cell carcinoma of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
C4A.70	Merkel cell carcinoma of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C4A.60	Merkel cell carcinoma of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C4A.9	Merkel cell carcinoma, unspecified	ICD-10-CM	Diagnosis
C4A.30	Merkel cell carcinoma of unspecified part of face	ICD-10-CM	Diagnosis
C4A.6	Merkel cell carcinoma of upper limb, including shoulder	ICD-10-CM	Diagnosis
C45	Mesothelioma	ICD-10-CM	Diagnosis
C45.7	Mesothelioma of other sites	ICD-10-CM	Diagnosis
C45.2	Mesothelioma of pericardium	ICD-10-CM	Diagnosis
C45.1	Mesothelioma of peritoneum	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
C45.0	Mesothelioma of pleura	ICD-10-CM	Diagnosis
C45.9	Mesothelioma, unspecified	ICD-10-CM	Diagnosis
C81.2	Mixed cellularity Hodgkin lymphoma	ICD-10-CM	Diagnosis
C81.28	Mixed cellularity Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C81.27	Mixed cellularity Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C81.20	Mixed cellularity Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C93	Monocytic leukemia	ICD-10-CM	Diagnosis
C93.90	Monocytic leukemia, unspecified, not having achieved remission	ICD-10-CM	Diagnosis
C93.9	Monocytic leukemia, unspecified	ICD-10-CM	Diagnosis
C93.92	Monocytic leukemia, unspecified in relapse	ICD-10-CM	Diagnosis
C93.91	Monocytic leukemia, unspecified in remission	ICD-10-CM	Diagnosis
C96.0	Multifocal and multisystemic (disseminated) Langerhans-cell histiocytosis	ICD-10-CM	Diagnosis
C96.5	Multifocal and unisystemic Langerhans-cell histiocytosis	ICD-10-CM	Diagnosis
C90.0	Multiple myeloma	ICD-10-CM	Diagnosis
C90	Multiple myeloma and malignant plasma cell neoplasms	ICD-10-CM	Diagnosis
C90.02	Multiple myeloma in relapse	ICD-10-CM	Diagnosis
C90.01	Multiple myeloma in remission	ICD-10-CM	Diagnosis
C90.00	Multiple myeloma not having achieved remission	ICD-10-CM	Diagnosis
C84.0	Mycosis fungoides	ICD-10-CM	Diagnosis
C84.09	Mycosis fungoides, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.03	Mycosis fungoides, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.06	Mycosis fungoides, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.02	Mycosis fungoides, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.04	Mycosis fungoides, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.01	Mycosis fungoides, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.05	Mycosis fungoides, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.08	Mycosis fungoides, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.07	Mycosis fungoides, spleen	ICD-10-CM	Diagnosis
C84.00	Mycosis fungoides, unspecified site	ICD-10-CM	Diagnosis
C94.6	Myelodysplastic disease, not classified	ICD-10-CM	Diagnosis
C92	Myeloid leukemia	ICD-10-CM	Diagnosis
C92.90	Myeloid leukemia, unspecified, not having achieved remission	ICD-10-CM	Diagnosis
C92.9	Myeloid leukemia, unspecified	ICD-10-CM	Diagnosis
C92.92	Myeloid leukemia, unspecified in relapse	ICD-10-CM	Diagnosis
C92.91	Myeloid leukemia, unspecified in remission	ICD-10-CM	Diagnosis
C92.3	Myeloid sarcoma	ICD-10-CM	Diagnosis
C92.32	Myeloid sarcoma, in relapse	ICD-10-CM	Diagnosis
C92.31	Myeloid sarcoma, in remission	ICD-10-CM	Diagnosis
C92.30	Myeloid sarcoma, not having achieved remission	ICD-10-CM	Diagnosis
C81.0	Nodular lymphocyte predominant Hodgkin lymphoma	ICD-10-CM	Diagnosis
C81.13	Nodular sclerosis Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.12	Nodular sclerosis Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.14	Nodular sclerosis Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C81.1	Nodular sclerosis Hodgkin lymphoma	ICD-10-CM	Diagnosis
C81.18	Nodular sclerosis Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C81.17	Nodular sclerosis Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C81.10	Nodular sclerosis Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C81.09	Nodular lymphocyte predominant Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.05	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.03	Nodular lymphocyte predominant Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.06	Nodular lymphocyte predominant Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.02	Nodular lymphocyte predominant Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.08	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C81.04	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.01	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C81.07	Nodular lymphocyte predominant Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C81.00	Nodular lymphocyte predominant Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C81.15	Nodular sclerosis Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.16	Nodular sclerosis Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.9	Non-follicular (diffuse) lymphoma, unspecified	ICD-10-CM	Diagnosis
C83.99	Non-follicular (diffuse) lymphoma, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83	Non-follicular lymphoma	ICD-10-CM	Diagnosis
C83.93	Non-follicular (diffuse) lymphoma, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.96	Non-follicular (diffuse) lymphoma, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.92	Non-follicular (diffuse) lymphoma, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.98	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.94	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.91	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.95	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.90	Non-follicular (diffuse) lymphoma, unspecified, unspecified site	ICD-10-CM	Diagnosis
C83.97	Non-follicular (diffuse) lymphoma, unspecified, spleen	ICD-10-CM	Diagnosis
C85.99	Non-Hodgkin lymphoma, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C85.93	Non-Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C85.96	Non-Hodgkin lymphoma, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C85.92	Non-Hodgkin lymphoma, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C85.94	Non-Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C85.91	Non-Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C85.95	Non-Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C85.98	Non-Hodgkin lymphoma, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C85.90	Non-Hodgkin lymphoma, unspecified, unspecified site	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
C85.9	Non-Hodgkin lymphoma, unspecified	ICD-10-CM	Diagnosis
C85.97	Non-Hodgkin lymphoma, unspecified, spleen	ICD-10-CM	Diagnosis
C81.19	Nodular sclerosis Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.11	Nodular sclerosis Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C96	Other and unspecified malignant neoplasms of lymphoid, hematopoietic and related tissue	ICD-10-CM	Diagnosis
C96.Z	Other specified malignant neoplasms of lymphoid, hematopoietic and related tissue	ICD-10-CM	Diagnosis
C84.Z9	Other mature T/NK-cell lymphomas, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.Z3	Other mature T/NK-cell lymphomas, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.Z6	Other mature T/NK-cell lymphomas, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.Z2	Other mature T/NK-cell lymphomas, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.Z4	Other mature T/NK-cell lymphomas, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.Z1	Other mature T/NK-cell lymphomas, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.Z5	Other mature T/NK-cell lymphomas, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.Z8	Other mature T/NK-cell lymphomas, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.Z7	Other mature T/NK-cell lymphomas, spleen	ICD-10-CM	Diagnosis
C83.89	Other non-follicular lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83.83	Other non-follicular lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.86	Other non-follicular lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.82	Other non-follicular lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.84	Other non-follicular lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.81	Other non-follicular lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.85	Other non-follicular lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.88	Other non-follicular lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.89	Other types of follicular lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.84	Other types of follicular lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.81	Other types of follicular lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.83	Other types of follicular lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.86	Other types of follicular lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.82	Other types of follicular lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.85	Other types of follicular lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.88	Other types of follicular lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C85.89	Other specified types of non-Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C85.81	Other specified types of non-Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C85.83	Other specified types of non-Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C85.86	Other specified types of non-Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C85.82	Other specified types of non-Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C85.85	Other specified types of non-Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C85.84	Other specified types of non-Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C85.88	Other specified types of non-Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C85.87	Other specified types of non-Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C85.80	Other specified types of non-Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C85	Other specified and unspecified types of non-Hodgkin lymphoma	ICD-10-CM	Diagnosis
C81.7	Other Hodgkin lymphoma	ICD-10-CM	Diagnosis
C81.73	Other Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.76	Other Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.72	Other Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.71	Other Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C81.74	Other Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.77	Other Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C81.70	Other Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C81.79	Other Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.75	Other Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.78	Other Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C94	Other leukemias of specified cell type	ICD-10-CM	Diagnosis
C91.Z	Other lymphoid leukemia	ICD-10-CM	Diagnosis
C91.Z2	Other lymphoid leukemia, in relapse	ICD-10-CM	Diagnosis
C91.Z1	Other lymphoid leukemia, in remission	ICD-10-CM	Diagnosis
C91.Z0	Other lymphoid leukemia not having achieved remission	ICD-10-CM	Diagnosis
C88.8	Other malignant immunoproliferative diseases	ICD-10-CM	Diagnosis
C96.29	Other malignant mast cell neoplasm	ICD-10-CM	Diagnosis
C7A.8	Other malignant neuroendocrine tumors	ICD-10-CM	Diagnosis
C84.Z	Other mature T/NK-cell lymphomas	ICD-10-CM	Diagnosis
C84.Z0	Other mature T/NK-cell lymphomas, unspecified site	ICD-10-CM	Diagnosis
C93.Z0	Other monocytic leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C93.Z	Other monocytic leukemia	ICD-10-CM	Diagnosis
C93.Z2	Other monocytic leukemia, in relapse	ICD-10-CM	Diagnosis
C93.Z1	Other monocytic leukemia, in remission	ICD-10-CM	Diagnosis
C92.Z	Other myeloid leukemia	ICD-10-CM	Diagnosis
C92.Z2	Other myeloid leukemia, in relapse	ICD-10-CM	Diagnosis
C92.Z1	Other myeloid leukemia, in remission	ICD-10-CM	Diagnosis
C92.Z0	Other myeloid leukemia not having achieved remission	ICD-10-CM	Diagnosis
C83.8	Other non-follicular lymphoma	ICD-10-CM	Diagnosis
C83.87	Other non-follicular lymphoma, spleen	ICD-10-CM	Diagnosis
C83.80	Other non-follicular lymphoma, unspecified site	ICD-10-CM	Diagnosis
C22.4	Other sarcomas of liver	ICD-10-CM	Diagnosis
C7B.8	Other secondary neuroendocrine tumors	ICD-10-CM	Diagnosis
C22.7	Other specified carcinomas of liver	ICD-10-CM	Diagnosis
C94.8	Other specified leukemias	ICD-10-CM	Diagnosis
C94.82	Other specified leukemias, in relapse	ICD-10-CM	Diagnosis
C94.81	Other specified leukemias, in remission	ICD-10-CM	Diagnosis
C94.80	Other specified leukemias not having achieved remission	ICD-10-CM	Diagnosis
C85.8	Other specified types of non-Hodgkin lymphoma	ICD-10-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C86	Other specified types of T/NK-cell lymphoma	ICD-10-CM	Diagnosis
C82.8	Other types of follicular lymphoma	ICD-10-CM	Diagnosis
C82.87	Other types of follicular lymphoma, spleen	ICD-10-CM	Diagnosis
C82.80	Other types of follicular lymphoma, unspecified site	ICD-10-CM	Diagnosis
C84.49	Peripheral T-cell lymphoma, not classified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.43	Peripheral T-cell lymphoma, not classified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.46	Peripheral T-cell lymphoma, not classified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.42	Peripheral T-cell lymphoma, not classified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.44	Peripheral T-cell lymphoma, not classified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.41	Peripheral T-cell lymphoma, not classified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.45	Peripheral T-cell lymphoma, not classified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.48	Peripheral T-cell lymphoma, not classified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.47	Peripheral T-cell lymphoma, not classified, spleen	ICD-10-CM	Diagnosis
C84.40	Peripheral T-cell lymphoma, not classified, unspecified site	ICD-10-CM	Diagnosis
C84.4	Peripheral T-cell lymphoma, not classified	ICD-10-CM	Diagnosis
Z85.520	Personal history of malignant carcinoid tumor of kidney	ICD-10-CM	Diagnosis
Z85.230	Personal history of malignant carcinoid tumor of thymus	ICD-10-CM	Diagnosis
Z85.040	Personal history of malignant carcinoid tumor of rectum	ICD-10-CM	Diagnosis
Z85.020	Personal history of malignant carcinoid tumor of stomach	ICD-10-CM	Diagnosis
Z85.42	Personal history of malignant neoplasm of other parts of uterus	ICD-10-CM	Diagnosis
Z85.06	Personal history of malignant neoplasm of small intestine	ICD-10-CM	Diagnosis
Z85.41	Personal history of malignant neoplasm of cervix uteri	ICD-10-CM	Diagnosis
Z85.48	Personal history of malignant neoplasm of epididymis	ICD-10-CM	Diagnosis
Z85.51	Personal history of malignant neoplasm of bladder	ICD-10-CM	Diagnosis
Z85.01	Personal history of malignant neoplasm of esophagus	ICD-10-CM	Diagnosis
Z85.07	Personal history of malignant neoplasm of pancreas	ICD-10-CM	Diagnosis
Z85.46	Personal history of malignant neoplasm of prostate	ICD-10-CM	Diagnosis
Z85.02	Personal history of malignant neoplasm of stomach	ICD-10-CM	Diagnosis
Z85.850	Personal history of malignant neoplasm of thyroid	ICD-10-CM	Diagnosis
Z85.12	Personal history of malignant neoplasm of trachea	ICD-10-CM	Diagnosis
Z85.53	Personal history of malignant neoplasm of renal pelvis	ICD-10-CM	Diagnosis
Z85.831	Personal history of malignant neoplasm of soft tissue	ICD-10-CM	Diagnosis
Z85.9	Personal history of malignant neoplasm, unspecified	ICD-10-CM	Diagnosis
Z85.71	Personal history of Hodgkin lymphoma	ICD-10-CM	Diagnosis
Z85.6	Personal history of leukemia	ICD-10-CM	Diagnosis
Z85.820	Personal history of malignant melanoma of skin	ICD-10-CM	Diagnosis
Z85	Personal history of malignant neoplasm	ICD-10-CM	Diagnosis
Z85.830	Personal history of malignant neoplasm of bone	ICD-10-CM	Diagnosis
Z85.841	Personal history of malignant neoplasm of brain	ICD-10-CM	Diagnosis
Z85.840	Personal history of malignant neoplasm of eye	ICD-10-CM	Diagnosis
Z85.52	Personal history of malignant neoplasm of kidney	ICD-10-CM	Diagnosis
Z85.21	Personal history of malignant neoplasm of larynx	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
Z85.05	Personal history of malignant neoplasm of liver	ICD-10-CM	Diagnosis
Z85.43	Personal history of malignant neoplasm of ovary	ICD-10-CM	Diagnosis
Z85.82	Personal history of malignant neoplasm of skin	ICD-10-CM	Diagnosis
Z85.47	Personal history of malignant neoplasm of testis	ICD-10-CM	Diagnosis
Z85.23	Personal history of malignant neoplasm of thymus	ICD-10-CM	Diagnosis
Z85.810	Personal history of malignant neoplasm of tongue	ICD-10-CM	Diagnosis
Z85.54	Personal history of malignant neoplasm of ureter	ICD-10-CM	Diagnosis
Z85.821	Personal history of Merkel cell carcinoma	ICD-10-CM	Diagnosis
Z85.72	Personal history of non-Hodgkin lymphomas	ICD-10-CM	Diagnosis
Z85.028	Personal history of other malignant neoplasm of stomach	ICD-10-CM	Diagnosis
Z85.528	Personal history of other malignant neoplasm of kidney	ICD-10-CM	Diagnosis
Z85.828	Personal history of other malignant neoplasm of skin	ICD-10-CM	Diagnosis
Z85.238	Personal history of other malignant neoplasm of thymus	ICD-10-CM	Diagnosis
Z85.3	Personal history of malignant neoplasm of breast	ICD-10-CM	Diagnosis
Z85.22	Personal history of malignant neoplasm of nasal cavities, middle ear, and accessory sinuses	ICD-10-CM	Diagnosis
Z85.2	Personal history of malignant neoplasm of other respiratory and intrathoracic organs	ICD-10-CM	Diagnosis
Z85.29	Personal history of malignant neoplasm of other respiratory and intrathoracic organs	ICD-10-CM	Diagnosis
Z85.818	Personal history of malignant neoplasm of other sites of lip, oral cavity, and pharynx	ICD-10-CM	Diagnosis
Z85.819	Personal history of malignant neoplasm of unspecified site of lip, oral cavity, and pharynx	ICD-10-CM	Diagnosis
Z85.81	Personal history of malignant neoplasm of lip, oral cavity, and pharynx	ICD-10-CM	Diagnosis
Z85.8	Personal history of malignant neoplasms of other organs and systems	ICD-10-CM	Diagnosis
Z85.04	Personal history of malignant neoplasm of rectum, rectosigmoid junction, and anus	ICD-10-CM	Diagnosis
Z85.110	Personal history of malignant carcinoid tumor of bronchus and lung	ICD-10-CM	Diagnosis
Z85.030	Personal history of malignant carcinoid tumor of large intestine	ICD-10-CM	Diagnosis
Z85.060	Personal history of malignant carcinoid tumor of small intestine	ICD-10-CM	Diagnosis
Z85.84	Personal history of malignant neoplasm of eye and nervous tissue	ICD-10-CM	Diagnosis
Z85.83	Personal history of malignant neoplasm of bone and soft tissue	ICD-10-CM	Diagnosis
Z85.09	Personal history of malignant neoplasm of other digestive organs	ICD-10-CM	Diagnosis
Z85.858	Personal history of malignant neoplasm of other endocrine glands	ICD-10-CM	Diagnosis
Z85.44	Personal history of malignant neoplasm of other female genital organs	ICD-10-CM	Diagnosis
Z85.49	Personal history of malignant neoplasm of other male genital organs	ICD-10-CM	Diagnosis
Z85.89	Personal history of malignant neoplasm of other organs and systems	ICD-10-CM	Diagnosis
Z85.848	Personal history of malignant neoplasm of other parts of nervous tissue	ICD-10-CM	Diagnosis
Z85.00	Personal history of malignant neoplasm of unspecified digestive organ	ICD-10-CM	Diagnosis
Z85.40	Personal history of malignant neoplasm of unspecified female genital organ	ICD-10-CM	Diagnosis
Z85.20	Personal history of malignant neoplasm of unspecified respiratory organ	ICD-10-CM	Diagnosis
Z85.59	Personal history of malignant neoplasm of other urinary tract organ	ICD-10-CM	Diagnosis
Z85.45	Personal history of malignant neoplasm of unspecified male genital organ	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
Z85.50	Personal history of malignant neoplasm of unspecified urinary tract organ	ICD-10-CM	Diagnosis
Z85.11	Personal history of malignant neoplasm of bronchus and lung	ICD-10-CM	Diagnosis
Z85.0	Personal history of malignant neoplasm of digestive organs	ICD-10-CM	Diagnosis
Z85.85	Personal history of malignant neoplasm of endocrine glands	ICD-10-CM	Diagnosis
Z85.4	Personal history of malignant neoplasm of genital organs	ICD-10-CM	Diagnosis
Z85.03	Personal history of malignant neoplasm of large intestine	ICD-10-CM	Diagnosis
Z85.5	Personal history of malignant neoplasm of urinary tract	ICD-10-CM	Diagnosis
Z85.1	Personal history of malignant neoplasm of trachea, bronchus and lung	ICD-10-CM	Diagnosis
Z85.79	Personal history of other malignant neoplasms of lymphoid, hematopoietic and related tissues	ICD-10-CM	Diagnosis
Z85.7	Personal history of other malignant neoplasms of lymphoid, hematopoietic and related tissues	ICD-10-CM	Diagnosis
Z85.048	Personal history of other malignant neoplasm of rectum, rectosigmoid junction, and anus	ICD-10-CM	Diagnosis
Z85.118	Personal history of other malignant neoplasm of bronchus and lung	ICD-10-CM	Diagnosis
Z85.038	Personal history of other malignant neoplasm of large intestine	ICD-10-CM	Diagnosis
Z85.068	Personal history of other malignant neoplasm of small intestine	ICD-10-CM	Diagnosis
C90.1	Plasma cell leukemia	ICD-10-CM	Diagnosis
C90.12	Plasma cell leukemia in relapse	ICD-10-CM	Diagnosis
C90.11	Plasma cell leukemia in remission	ICD-10-CM	Diagnosis
C90.10	Plasma cell leukemia not having achieved remission	ICD-10-CM	Diagnosis
D45	Polycythemia vera	ICD-10-CM	Diagnosis
C86.6	Primary cutaneous CD30-positive T-cell proliferations	ICD-10-CM	Diagnosis
C91.32	Prolymphocytic leukemia of B-cell type, in relapse	ICD-10-CM	Diagnosis
C91.31	Prolymphocytic leukemia of B-cell type, in remission	ICD-10-CM	Diagnosis
C91.30	Prolymphocytic leukemia of B-cell type not having achieved remission	ICD-10-CM	Diagnosis
C91.3	Prolymphocytic leukemia of B-cell type	ICD-10-CM	Diagnosis
C91.6	Prolymphocytic leukemia of T-cell type	ICD-10-CM	Diagnosis
C91.62	Prolymphocytic leukemia of T-cell type, in relapse	ICD-10-CM	Diagnosis
C91.61	Prolymphocytic leukemia of T-cell type, in remission	ICD-10-CM	Diagnosis
C91.60	Prolymphocytic leukemia of T-cell type not having achieved remission	ICD-10-CM	Diagnosis
R97.21	Rising PSA following treatment for malignant neoplasm of prostate	ICD-10-CM	Diagnosis
C96.4	Sarcoma of dendritic cells (accessory cells)	ICD-10-CM	Diagnosis
C77.3	Secondary and unspecified malignant neoplasm of axilla and upper limb lymph nodes	ICD-10-CM	Diagnosis
C77.1	Secondary and unspecified malignant neoplasm of intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C77.0	Secondary and unspecified malignant neoplasm of lymph nodes of head, face and neck	ICD-10-CM	Diagnosis
C77.4	Secondary and unspecified malignant neoplasm of inguinal and lower limb lymph nodes	ICD-10-CM	Diagnosis
C77.2	Secondary and unspecified malignant neoplasm of intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C77.5	Secondary and unspecified malignant neoplasm of intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C77.8	Secondary and unspecified malignant neoplasm of lymph nodes of multiple regions	ICD-10-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
C78.6	Secondary malignant neoplasm of retroperitoneum and peritoneum	ICD-10-CM	Diagnosis
C79.8	Secondary malignant neoplasm of other specified sites	ICD-10-CM	Diagnosis
C77.9	Secondary and unspecified malignant neoplasm of lymph node, unspecified	ICD-10-CM	Diagnosis
C77	Secondary and unspecified malignant neoplasm of lymph nodes	ICD-10-CM	Diagnosis
C7B.0	Secondary carcinoid tumors	ICD-10-CM	Diagnosis
C7B.01	Secondary carcinoid tumors of distant lymph nodes	ICD-10-CM	Diagnosis
C7B.03	Secondary carcinoid tumors of bone	ICD-10-CM	Diagnosis
C7B.02	Secondary carcinoid tumors of liver	ICD-10-CM	Diagnosis
C7B.09	Secondary carcinoid tumors of other sites	ICD-10-CM	Diagnosis
C7B.04	Secondary carcinoid tumors of peritoneum	ICD-10-CM	Diagnosis
C7B.00	Secondary carcinoid tumors, unspecified site	ICD-10-CM	Diagnosis
C78.5	Secondary malignant neoplasm of large intestine and rectum	ICD-10-CM	Diagnosis
C79.1	Secondary malignant neoplasm of bladder and other and unspecified urinary organs	ICD-10-CM	Diagnosis
C79.3	Secondary malignant neoplasm of brain and cerebral meninges	ICD-10-CM	Diagnosis
C78.7	Secondary malignant neoplasm of liver and intrahepatic bile duct	ICD-10-CM	Diagnosis
C79.02	Secondary malignant neoplasm of left kidney and renal pelvis	ICD-10-CM	Diagnosis
C78.89	Secondary malignant neoplasm of other digestive organs	ICD-10-CM	Diagnosis
C78.8	Secondary malignant neoplasm of other and unspecified digestive organs	ICD-10-CM	Diagnosis
C78.3	Secondary malignant neoplasm of other and unspecified respiratory organs	ICD-10-CM	Diagnosis
C79.4	Secondary malignant neoplasm of other and unspecified parts of nervous system	ICD-10-CM	Diagnosis
C78	Secondary malignant neoplasm of respiratory and digestive organs	ICD-10-CM	Diagnosis
C79.01	Secondary malignant neoplasm of right kidney and renal pelvis	ICD-10-CM	Diagnosis
C78.80	Secondary malignant neoplasm of unspecified digestive organ	ICD-10-CM	Diagnosis
C79.00	Secondary malignant neoplasm of unspecified kidney and renal pelvis	ICD-10-CM	Diagnosis
C78.30	Secondary malignant neoplasm of unspecified respiratory organ	ICD-10-CM	Diagnosis
C79.5	Secondary malignant neoplasm of bone and bone marrow	ICD-10-CM	Diagnosis
C79.32	Secondary malignant neoplasm of cerebral meninges	ICD-10-CM	Diagnosis
C79.0	Secondary malignant neoplasm of kidney and renal pelvis	ICD-10-CM	Diagnosis
C79.72	Secondary malignant neoplasm of left adrenal gland	ICD-10-CM	Diagnosis
C79.7	Secondary malignant neoplasm of adrenal gland	ICD-10-CM	Diagnosis
C79.11	Secondary malignant neoplasm of bladder	ICD-10-CM	Diagnosis
C79.51	Secondary malignant neoplasm of bone	ICD-10-CM	Diagnosis
C79.52	Secondary malignant neoplasm of bone marrow	ICD-10-CM	Diagnosis
C79.31	Secondary malignant neoplasm of brain	ICD-10-CM	Diagnosis
C79.81	Secondary malignant neoplasm of breast	ICD-10-CM	Diagnosis
C79.82	Secondary malignant neoplasm of genital organs	ICD-10-CM	Diagnosis
C78.02	Secondary malignant neoplasm of left lung	ICD-10-CM	Diagnosis
C79.62	Secondary malignant neoplasm of left ovary	ICD-10-CM	Diagnosis
C78.0	Secondary malignant neoplasm of lung	ICD-10-CM	Diagnosis
C78.1	Secondary malignant neoplasm of mediastinum	ICD-10-CM	Diagnosis
C79	Secondary malignant neoplasm of other and unspecified sites	ICD-10-CM	Diagnosis
C78.39	Secondary malignant neoplasm of other respiratory organs	ICD-10-CM	Diagnosis
C79.6	Secondary malignant neoplasm of ovary	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
C78.2	Secondary malignant neoplasm of pleura	ICD-10-CM	Diagnosis
C78.01	Secondary malignant neoplasm of right lung	ICD-10-CM	Diagnosis
C79.61	Secondary malignant neoplasm of right ovary	ICD-10-CM	Diagnosis
C79.2	Secondary malignant neoplasm of skin	ICD-10-CM	Diagnosis
C78.4	Secondary malignant neoplasm of small intestine	ICD-10-CM	Diagnosis
C78.00	Secondary malignant neoplasm of unspecified lung	ICD-10-CM	Diagnosis
C79.9	Secondary malignant neoplasm of unspecified site	ICD-10-CM	Diagnosis
C79.49	Secondary malignant neoplasm of other parts of nervous system	ICD-10-CM	Diagnosis
C79.89	Secondary malignant neoplasm of other specified sites	ICD-10-CM	Diagnosis
C79.19	Secondary malignant neoplasm of other urinary organs	ICD-10-CM	Diagnosis
C79.71	Secondary malignant neoplasm of right adrenal gland	ICD-10-CM	Diagnosis
C79.70	Secondary malignant neoplasm of unspecified adrenal gland	ICD-10-CM	Diagnosis
C79.40	Secondary malignant neoplasm of unspecified part of nervous system	ICD-10-CM	Diagnosis
C79.10	Secondary malignant neoplasm of unspecified urinary organs	ICD-10-CM	Diagnosis
C79.60	Secondary malignant neoplasm of unspecified ovary	ICD-10-CM	Diagnosis
C7B.1	Secondary Merkel cell carcinoma	ICD-10-CM	Diagnosis
C7B	Secondary neuroendocrine tumors	ICD-10-CM	Diagnosis
C84.1	Sezary disease	ICD-10-CM	Diagnosis
C84.19	Sezary disease, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.13	Sezary disease, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.16	Sezary disease, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.12	Sezary disease, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.14	Sezary disease, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.15	Sezary disease, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.11	Sezary disease, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.18	Sezary disease, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.17	Sezary disease, spleen	ICD-10-CM	Diagnosis
C84.10	Sezary disease, unspecified site	ICD-10-CM	Diagnosis
C83.0	Small cell B-cell lymphoma	ICD-10-CM	Diagnosis
C83.09	Small cell B-cell lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83.03	Small cell B-cell lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.06	Small cell B-cell lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.02	Small cell B-cell lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.04	Small cell B-cell lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.01	Small cell B-cell lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.05	Small cell B-cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.08	Small cell B-cell lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.07	Small cell B-cell lymphoma, spleen	ICD-10-CM	Diagnosis
C83.00	Small cell B-cell lymphoma, unspecified site	ICD-10-CM	Diagnosis
C90.3	Solitary plasmacytoma	ICD-10-CM	Diagnosis
C90.32	Solitary plasmacytoma in relapse	ICD-10-CM	Diagnosis
C90.31	Solitary plasmacytoma in remission	ICD-10-CM	Diagnosis
C90.30	Solitary plasmacytoma not having achieved remission	ICD-10-CM	Diagnosis

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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
C86.3	Subcutaneous panniculitis-like T-cell lymphoma	ICD-10-CM	Diagnosis
C96.6	Unifocal Langerhans-cell histiocytosis	ICD-10-CM	Diagnosis
C85.19	Unspecified B-cell lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C85.13	Unspecified B-cell lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C85.16	Unspecified B-cell lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C85.12	Unspecified B-cell lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C85.11	Unspecified B-cell lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C85.18	Unspecified B-cell lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C85.14	Unspecified B-cell lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C85.15	Unspecified B-cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C85.1	Unspecified B-cell lymphoma	ICD-10-CM	Diagnosis
C85.17	Unspecified B-cell lymphoma, spleen	ICD-10-CM	Diagnosis
C85.10	Unspecified B-cell lymphoma, unspecified site	ICD-10-CM	Diagnosis
C88.0	Waldenstrom macroglobulinemia	ICD-10-CM	Diagnosis
207.00	Acute erythremia and erythroleukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
207.0	Acute erythremia and erythroleukemia	ICD-09-CM	Diagnosis
207.02	Acute erythremia and erythroleukemia, in relapse	ICD-09-CM	Diagnosis
207.01	Acute erythremia and erythroleukemia in remission	ICD-09-CM	Diagnosis
208.0	Acute leukemia of unspecified cell type	ICD-09-CM	Diagnosis
208.00	Acute leukemia of unspecified cell type, without mention of having achieved remission	ICD-09-CM	Diagnosis
208.02	Acute leukemia of unspecified cell type, in relapse	ICD-09-CM	Diagnosis
208.01	Acute leukemia of unspecified cell type in remission	ICD-09-CM	Diagnosis
204.0	Acute lymphoid leukemia	ICD-09-CM	Diagnosis
204.02	Acute lymphoid leukemia, in relapse	ICD-09-CM	Diagnosis
204.01	Acute lymphoid leukemia in remission	ICD-09-CM	Diagnosis
204.00	Acute lymphoid leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
206.0	Acute monocytic leukemia	ICD-09-CM	Diagnosis
206.02	Acute monocytic leukemia, in relapse	ICD-09-CM	Diagnosis
206.01	Acute monocytic leukemia in remission	ICD-09-CM	Diagnosis
206.00	Acute monocytic leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
205.0	Acute myeloid leukemia	ICD-09-CM	Diagnosis
205.02	Acute myeloid leukemia, in relapse	ICD-09-CM	Diagnosis
205.01	Acute myeloid leukemia in remission	ICD-09-CM	Diagnosis
205.00	Acute myeloid leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
200.60	Anaplastic large cell lymphoma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
200.6	Anaplastic large cell lymphoma	ICD-09-CM	Diagnosis
200.66	Anaplastic large cell lymphoma, intrapelvic lymph nodes	ICD-09-CM	Diagnosis
200.67	Anaplastic large cell lymphoma, spleen	ICD-09-CM	Diagnosis
200.64	Anaplastic large cell lymphoma, lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
200.63	Anaplastic large cell lymphoma, intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
200.62	Anaplastic large cell lymphoma, intrathoracic lymph nodes	ICD-09-CM	Diagnosis
200.61	Anaplastic large cell lymphoma, lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis

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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
200.65	Anaplastic large cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
200.68	Anaplastic large cell lymphoma, lymph nodes of multiple sites	ICD-09-CM	Diagnosis
200.2	Burkitt's tumor or lymphoma	ICD-09-CM	Diagnosis
200.27	Burkitt's tumor or lymphoma of spleen	ICD-09-CM	Diagnosis
200.23	Burkitt's tumor or lymphoma of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
200.26	Burkitt's tumor or lymphoma of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
200.22	Burkitt's tumor or lymphoma of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
200.24	Burkitt's tumor or lymphoma of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
200.21	Burkitt's tumor or lymphoma of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
200.28	Burkitt's tumor or lymphoma of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
200.20	Burkitt's tumor or lymphoma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
200.25	Burkitt's tumor or lymphoma of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
207.10	Chronic erythremia, without mention of having achieved remission	ICD-09-CM	Diagnosis
208.10	Chronic leukemia of unspecified cell type, without mention of having achieved remission	ICD-09-CM	Diagnosis
206.10	Chronic monocytic leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
205.10	Chronic myeloid leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
207.1	Chronic erythremia	ICD-09-CM	Diagnosis
207.12	Chronic erythremia, in relapse	ICD-09-CM	Diagnosis
207.11	Chronic erythremia in remission	ICD-09-CM	Diagnosis
208.1	Chronic leukemia of unspecified cell type	ICD-09-CM	Diagnosis
208.12	Chronic leukemia of unspecified cell type, in relapse	ICD-09-CM	Diagnosis
208.11	Chronic leukemia of unspecified cell type in remission	ICD-09-CM	Diagnosis
204.1	Chronic lymphoid leukemia	ICD-09-CM	Diagnosis
204.12	Chronic lymphoid leukemia, in relapse	ICD-09-CM	Diagnosis
204.11	Chronic lymphoid leukemia in remission	ICD-09-CM	Diagnosis
204.10	Chronic lymphoid leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
206.1	Chronic monocytic leukemia	ICD-09-CM	Diagnosis
206.12	Chronic monocytic leukemia, in relapse	ICD-09-CM	Diagnosis
206.11	Chronic monocytic leukemia in remission	ICD-09-CM	Diagnosis
205.1	Chronic myeloid leukemia	ICD-09-CM	Diagnosis
205.12	Chronic myeloid leukemia, in relapse	ICD-09-CM	Diagnosis
205.11	Chronic myeloid leukemia in remission	ICD-09-CM	Diagnosis
199.0	Disseminated malignant neoplasm	ICD-09-CM	Diagnosis
201.40	Hodgkin's disease, lymphocytic-histiocytic predominance, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
201.43	Hodgkin's disease, lymphocytic-histiocytic predominance of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
201.46	Hodgkin's disease, lymphocytic-histiocytic predominance of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
201.42	Hodgkin's disease, lymphocytic-histiocytic predominance of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
201.44	Hodgkin's disease, lymphocytic-histiocytic predominance of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
201.41	Hodgkin's disease, lymphocytic-histiocytic predominance of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
201.45	Hodgkin's disease, lymphocytic-histiocytic predominance of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
201.48	Hodgkin's disease, lymphocytic-histiocytic predominance of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
201.70	Hodgkin's disease, lymphocytic depletion, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
201.50	Hodgkin's disease, nodular sclerosis, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
201	Hodgkin's disease	ICD-09-CM	Diagnosis
201.7	Hodgkin's disease, lymphocytic depletion	ICD-09-CM	Diagnosis
201.77	Hodgkin's disease, lymphocytic depletion, of spleen	ICD-09-CM	Diagnosis
201.6	Hodgkin's disease, mixed cellularity	ICD-09-CM	Diagnosis
201.67	Hodgkin's disease, mixed cellularity, of spleen	ICD-09-CM	Diagnosis
201.5	Hodgkin's disease, nodular sclerosis	ICD-09-CM	Diagnosis
201.57	Hodgkin's disease, nodular sclerosis, of spleen	ICD-09-CM	Diagnosis
201.97	Hodgkin's disease, unspecified type, of spleen	ICD-09-CM	Diagnosis
201.9	Hodgkin's disease, unspecified type	ICD-09-CM	Diagnosis
201.1	Hodgkin's granuloma	ICD-09-CM	Diagnosis
201.13	Hodgkin's granuloma of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
201.14	Hodgkin's granuloma of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
201.11	Hodgkin's granuloma of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
201.18	Hodgkin's granuloma of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
201.15	Hodgkin's granuloma of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
201.16	Hodgkin's granuloma of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
201.12	Hodgkin's granuloma of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
201.17	Hodgkin's granuloma of spleen	ICD-09-CM	Diagnosis
201.10	Hodgkin's granuloma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
201.47	Hodgkin's disease, lymphocytic-histiocytic predominance of spleen	ICD-09-CM	Diagnosis
201.74	Hodgkin's disease, lymphocytic depletion, of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
201.75	Hodgkin's disease, lymphocytic depletion, of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
201.4	Hodgkin's disease, lymphocytic-histiocytic predominance	ICD-09-CM	Diagnosis
201.73	Hodgkin's disease, lymphocytic depletion, of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
201.76	Hodgkin's disease, lymphocytic depletion, of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
201.72	Hodgkin's disease, lymphocytic depletion, of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
201.71	Hodgkin's disease, lymphocytic depletion, of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
201.78	Hodgkin's disease, lymphocytic depletion, of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
201.60	Hodgkin's disease, mixed cellularity, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
201.66	Hodgkin's disease, mixed cellularity, of intrapelvic lymph nodes	ICD-09-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
201.62	Hodgkin's disease, mixed cellularity, of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
201.61	Hodgkin's disease, mixed cellularity, involving lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
201.68	Hodgkin's disease, mixed cellularity, of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
201.64	Hodgkin's disease, mixed cellularity, of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
201.65	Hodgkin's disease, mixed cellularity, of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
201.63	Hodgkin's disease, mixed cellularity, of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
201.53	Hodgkin's disease, nodular sclerosis, of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
201.56	Hodgkin's disease, nodular sclerosis, of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
201.52	Hodgkin's disease, nodular sclerosis, of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
201.54	Hodgkin's disease, nodular sclerosis, of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
201.51	Hodgkin's disease, nodular sclerosis, of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
201.58	Hodgkin's disease, nodular sclerosis, of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
201.55	Hodgkin's disease, nodular sclerosis, of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
201.0	Hodgkin's paragranuloma	ICD-09-CM	Diagnosis
201.03	Hodgkin's paragranuloma of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
201.06	Hodgkin's paragranuloma of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
201.02	Hodgkin's paragranuloma of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
201.04	Hodgkin's paragranuloma of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
201.01	Hodgkin's paragranuloma of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
201.08	Hodgkin's paragranuloma of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
201.07	Hodgkin's paragranuloma of spleen	ICD-09-CM	Diagnosis
201.05	Hodgkin's paragranuloma of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
201.00	Hodgkin's paragranuloma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
201.2	Hodgkin's sarcoma	ICD-09-CM	Diagnosis
201.24	Hodgkin's sarcoma of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
201.21	Hodgkin's sarcoma of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
201.28	Hodgkin's sarcoma of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
201.25	Hodgkin's sarcoma of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
201.23	Hodgkin's sarcoma of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
201.26	Hodgkin's sarcoma of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
201.22	Hodgkin's sarcoma of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
201.27	Hodgkin's sarcoma of spleen	ICD-09-CM	Diagnosis
201.20	Hodgkin's sarcoma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
201.90	Hodgkin's disease, unspecified type, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
201.93	Hodgkin's disease, unspecified type, of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
201.96	Hodgkin's disease, unspecified type, of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
201.92	Hodgkin's disease, unspecified type, of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
201.91	Hodgkin's disease, unspecified type, of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
201.98	Hodgkin's disease, unspecified type, of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
201.94	Hodgkin's disease, unspecified type, of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
201.95	Hodgkin's disease, unspecified type, of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
176	Kaposi's sarcoma	ICD-09-CM	Diagnosis
176.3	Kaposi's sarcoma of gastrointestinal sites	ICD-09-CM	Diagnosis
176.4	Kaposi's sarcoma of lung	ICD-09-CM	Diagnosis
176.5	Kaposi's sarcoma of lymph nodes	ICD-09-CM	Diagnosis
176.8	Kaposi's sarcoma of other specified sites	ICD-09-CM	Diagnosis
176.2	Kaposi's sarcoma of palate	ICD-09-CM	Diagnosis
176.0	Kaposi's sarcoma of skin	ICD-09-CM	Diagnosis
176.1	Kaposi's sarcoma of soft tissue	ICD-09-CM	Diagnosis
176.9	Kaposi's sarcoma of unspecified site	ICD-09-CM	Diagnosis
200.7	Large cell lymphoma	ICD-09-CM	Diagnosis
200.73	Large cell lymphoma, intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
200.76	Large cell lymphoma, intrapelvic lymph nodes	ICD-09-CM	Diagnosis
200.72	Large cell lymphoma, intrathoracic lymph nodes	ICD-09-CM	Diagnosis
200.71	Large cell lymphoma, lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
200.78	Large cell lymphoma, lymph nodes of multiple sites	ICD-09-CM	Diagnosis
200.74	Large cell lymphoma, lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
200.75	Large cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
200.77	Large cell lymphoma, spleen	ICD-09-CM	Diagnosis
200.70	Large cell lymphoma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
202.5	Letterer-Siwe disease	ICD-09-CM	Diagnosis
202.53	Letterer-Siwe disease of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
202.52	Letterer-Siwe disease of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
202.51	Letterer-Siwe disease of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
202.58	Letterer-Siwe disease of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
202.54	Letterer-Siwe disease of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
202.55	Letterer-Siwe disease of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
202.56	Letterer-Siwe disease of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
202.57	Letterer-Siwe disease of spleen	ICD-09-CM	Diagnosis
202.50	Letterer-Siwe disease, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
202.45	Leukemic reticuloendotheliosis of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
202.48	Leukemic reticuloendotheliosis of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
202.40	Leukemic reticuloendotheliosis, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
208	Leukemia of unspecified cell type	ICD-09-CM	Diagnosis
202.42	Leukemic reticuloendotheliosis of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
202.44	Leukemic reticuloendotheliosis of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
202.41	Leukemic reticuloendotheliosis of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
202.4	Leukemic reticuloendotheliosis	ICD-09-CM	Diagnosis
202.43	Leukemic reticuloendotheliosis of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
202.46	Leukemic reticuloendotheliosis of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
202.47	Leukemic reticuloendotheliosis of spleen	ICD-09-CM	Diagnosis
200	Lymphosarcoma and reticulosarcoma and other specified malignant tumors of lymphatic tissue	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
204	Lymphoid leukemia	ICD-09-CM	Diagnosis
200.1	Lymphosarcoma	ICD-09-CM	Diagnosis
200.14	Lymphosarcoma of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
200.15	Lymphosarcoma of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
200.13	Lymphosarcoma of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
200.16	Lymphosarcoma of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
200.12	Lymphosarcoma of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
200.11	Lymphosarcoma of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
200.18	Lymphosarcoma of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
200.17	Lymphosarcoma of spleen	ICD-09-CM	Diagnosis
200.10	Lymphosarcoma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
273.3	Macroglobulinemia	ICD-09-CM	Diagnosis
202.60	Malignant mast cell tumors, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
165	Malignant neoplasm of other and ill-defined sites within the respiratory system and intrathoracic organs	ICD-09-CM	Diagnosis
160.8	Malignant neoplasm of other sites of nasal cavities, middle ear, and accessory sinuses	ICD-09-CM	Diagnosis
148.2	Malignant neoplasm of aryepiglottic fold, hypopharyngeal aspect	ICD-09-CM	Diagnosis
160.1	Malignant neoplasm of auditory tube, middle ear, and mastoid air cells	ICD-09-CM	Diagnosis
190.0	Malignant neoplasm of eyeball, except conjunctiva, cornea, retina, and choroid	ICD-09-CM	Diagnosis
160.9	Malignant neoplasm of site of nasal cavities, middle ear, and accessory sinus, unspecified site	ICD-09-CM	Diagnosis
165.8	Malignant neoplasm of other sites within the respiratory system and intrathoracic organs	ICD-09-CM	Diagnosis
194.3	Malignant neoplasm of pituitary gland and craniopharyngeal duct	ICD-09-CM	Diagnosis
149	Malignant neoplasm of other and ill-defined sites within the lip, oral cavity, and pharynx	ICD-09-CM	Diagnosis
159.9	Malignant neoplasm of ill-defined sites of digestive organs and peritoneum	ICD-09-CM	Diagnosis
159.8	Malignant neoplasm of other sites of digestive system and intra-abdominal organs	ICD-09-CM	Diagnosis
154.8	Malignant neoplasm of other sites of rectum, rectosigmoid junction, and anus	ICD-09-CM	Diagnosis
209.10	Malignant carcinoid tumor of the large intestine, unspecified portion	ICD-09-CM	Diagnosis
209.00	Malignant carcinoid tumor of the small intestine, unspecified portion	ICD-09-CM	Diagnosis
202.33	Malignant histiocytosis of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
202.32	Malignant histiocytosis of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
202.31	Malignant histiocytosis of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
202.38	Malignant histiocytosis of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
202.34	Malignant histiocytosis of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
202.35	Malignant histiocytosis of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
202.30	Malignant histiocytosis, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
202.63	Malignant mast cell tumors of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
202.66	Malignant mast cell tumors of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
202.62	Malignant mast cell tumors of intrathoracic lymph nodes	ICD-09-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
202.64	Malignant mast cell tumors of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
202.61	Malignant mast cell tumors of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
202.68	Malignant mast cell tumors of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
202.65	Malignant mast cell tumors of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
172.2	Malignant melanoma of skin of ear and external auditory canal	ICD-09-CM	Diagnosis
172.6	Malignant melanoma of skin of upper limb, including shoulder	ICD-09-CM	Diagnosis
159	Malignant neoplasm of other and ill-defined sites within the digestive organs and peritoneum	ICD-09-CM	Diagnosis
141.4	Malignant neoplasm of anterior two-thirds of tongue, part unspecified	ICD-09-CM	Diagnosis
156.9	Malignant neoplasm of biliary tract, part unspecified site	ICD-09-CM	Diagnosis
170.9	Malignant neoplasm of bone and articular cartilage, site unspecified	ICD-09-CM	Diagnosis
170.0	Malignant neoplasm of bones of skull and face, except mandible	ICD-09-CM	Diagnosis
191.0	Malignant neoplasm of cerebrum, except lobes and ventricles	ICD-09-CM	Diagnosis
171.9	Malignant neoplasm of connective and other soft tissue, site unspecified	ICD-09-CM	Diagnosis
171.5	Malignant neoplasm of connective and other soft tissue of abdomen	ICD-09-CM	Diagnosis
171.6	Malignant neoplasm of connective and other soft tissue of pelvis	ICD-09-CM	Diagnosis
171.4	Malignant neoplasm of connective and other soft tissue of thorax	ICD-09-CM	Diagnosis
184.9	Malignant neoplasm of female genital organ, site unspecified	ICD-09-CM	Diagnosis
149.9	Malignant neoplasm of ill-defined sites of lip and oral cavity	ICD-09-CM	Diagnosis
189	Malignant neoplasm of kidney and other and unspecified urinary organs	ICD-09-CM	Diagnosis
174.3	Malignant neoplasm of lower-inner quadrant of female breast	ICD-09-CM	Diagnosis
174.5	Malignant neoplasm of lower-outer quadrant of female breast	ICD-09-CM	Diagnosis
187.9	Malignant neoplasm of male genital organ, site unspecified	ICD-09-CM	Diagnosis
194	Malignant neoplasm of other endocrine glands and related structures	ICD-09-CM	Diagnosis
194.8	Malignant neoplasm of other endocrine glands and related structures	ICD-09-CM	Diagnosis
149.8	Malignant neoplasm of other sites within the lip and oral cavity	ICD-09-CM	Diagnosis
184.8	Malignant neoplasm of other specified sites of female genital organs	ICD-09-CM	Diagnosis
187.8	Malignant neoplasm of other specified sites of male genital organs	ICD-09-CM	Diagnosis
184	Malignant neoplasm of other and unspecified female genital organs	ICD-09-CM	Diagnosis
174.8	Malignant neoplasm of other specified sites of female breast	ICD-09-CM	Diagnosis
153.8	Malignant neoplasm of other specified sites of large intestine	ICD-09-CM	Diagnosis
192.8	Malignant neoplasm of other specified sites of nervous system	ICD-09-CM	Diagnosis
152.8	Malignant neoplasm of other specified sites of small intestine	ICD-09-CM	Diagnosis
189.8	Malignant neoplasm of other specified sites of urinary organs	ICD-09-CM	Diagnosis
183.8	Malignant neoplasm of other specified sites of uterine adnexa	ICD-09-CM	Diagnosis
192	Malignant neoplasm of other and unspecified parts of nervous system	ICD-09-CM	Diagnosis
175.9	Malignant neoplasm of other and unspecified sites of male breast	ICD-09-CM	Diagnosis
187	Malignant neoplasm of penis and other male genital organs	ICD-09-CM	Diagnosis
148.0	Malignant neoplasm of postcricoid region of hypopharynx	ICD-09-CM	Diagnosis
188.4	Malignant neoplasm of posterior wall of urinary bladder	ICD-09-CM	Diagnosis
154	Malignant neoplasm of rectum, rectosigmoid junction, and anus	ICD-09-CM	Diagnosis
152	Malignant neoplasm of small intestine, including duodenum	ICD-09-CM	Diagnosis
174.2	Malignant neoplasm of upper-inner quadrant of female breast	ICD-09-CM	Diagnosis

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Code	Description	Code Type	Code Category
174.4	Malignant neoplasm of upper-outer quadrant of female breast	ICD-09-CM	Diagnosis
165.0	Malignant neoplasm of upper respiratory tract, part unspecified	ICD-09-CM	Diagnosis
170.2	Malignant neoplasm of vertebral column, excluding sacrum and coccyx	ICD-09-CM	Diagnosis
171.3	Malignant neoplasm of connective and other soft tissue of lower limb, including hip	ICD-09-CM	Diagnosis
171.7	Malignant neoplasm of connective and other soft tissue of trunk, unspecified site	ICD-09-CM	Diagnosis
171.2	Malignant neoplasm of connective and other soft tissue of upper limb, including shoulder	ICD-09-CM	Diagnosis
171.0	Malignant neoplasm of connective and other soft tissue of head, face, and neck	ICD-09-CM	Diagnosis
165.9	Malignant neoplasm of ill-defined sites within the respiratory system	ICD-09-CM	Diagnosis
140.5	Malignant neoplasm of lip, inner aspect, unspecified as to upper or lower	ICD-09-CM	Diagnosis
140.9	Malignant neoplasm of lip, vermilion border, unspecified as to upper or lower	ICD-09-CM	Diagnosis
160	Malignant neoplasm of nasal cavities, middle ear, and accessory sinuses	ICD-09-CM	Diagnosis
171.8	Malignant neoplasm of other specified sites of connective and other soft tissue	ICD-09-CM	Diagnosis
156.8	Malignant neoplasm of other specified sites of gallbladder and extrahepatic bile ducts	ICD-09-CM	Diagnosis
209.30	Malignant poorly differentiated neuroendocrine carcinoma, any site	ICD-09-CM	Diagnosis
209.21	Malignant carcinoid tumor of the bronchus and lung	ICD-09-CM	Diagnosis
209.15	Malignant carcinoid tumor of the descending colon	ICD-09-CM	Diagnosis
209.25	Malignant carcinoid tumor of foregut, not otherwise specified	ICD-09-CM	Diagnosis
209.27	Malignant carcinoid tumor of hindgut, not otherwise specified	ICD-09-CM	Diagnosis
209.26	Malignant carcinoid tumor of midgut, not otherwise specified	ICD-09-CM	Diagnosis
209.29	Malignant carcinoid tumor of other sites	ICD-09-CM	Diagnosis
209.11	Malignant carcinoid tumor of the appendix	ICD-09-CM	Diagnosis
209.13	Malignant carcinoid tumor of the ascending colon	ICD-09-CM	Diagnosis
209.12	Malignant carcinoid tumor of the cecum	ICD-09-CM	Diagnosis
209.01	Malignant carcinoid tumor of the duodenum	ICD-09-CM	Diagnosis
209.03	Malignant carcinoid tumor of the ileum	ICD-09-CM	Diagnosis
209.02	Malignant carcinoid tumor of the jejunum	ICD-09-CM	Diagnosis
209.24	Malignant carcinoid tumor of the kidney	ICD-09-CM	Diagnosis
209.17	Malignant carcinoid tumor of the rectum	ICD-09-CM	Diagnosis
209.16	Malignant carcinoid tumor of the sigmoid colon	ICD-09-CM	Diagnosis
209.23	Malignant carcinoid tumor of the stomach	ICD-09-CM	Diagnosis
209.22	Malignant carcinoid tumor of the thymus	ICD-09-CM	Diagnosis
209.14	Malignant carcinoid tumor of the transverse colon	ICD-09-CM	Diagnosis
209.20	Malignant carcinoid tumor of unknown primary site	ICD-09-CM	Diagnosis
202.3	Malignant histiocytosis	ICD-09-CM	Diagnosis
202.36	Malignant histiocytosis of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
202.37	Malignant histiocytosis of spleen	ICD-09-CM	Diagnosis
202.6	Malignant mast cell tumors	ICD-09-CM	Diagnosis
202.67	Malignant mast cell tumors of spleen	ICD-09-CM	Diagnosis
172	Malignant melanoma of skin	ICD-09-CM	Diagnosis
172.0	Malignant melanoma of skin of lip	ICD-09-CM	Diagnosis
172.4	Malignant melanoma of skin of scalp and neck	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
172.8	Malignant melanoma of other specified sites of skin	ICD-09-CM	Diagnosis
172.1	Malignant melanoma of skin of eyelid, including canthus	ICD-09-CM	Diagnosis
172.7	Malignant melanoma of skin of lower limb, including hip	ICD-09-CM	Diagnosis
172.3	Malignant melanoma of skin of other and unspecified parts of face	ICD-09-CM	Diagnosis
172.5	Malignant melanoma of skin of trunk, except scrotum	ICD-09-CM	Diagnosis
146.4	Malignant neoplasm of anterior aspect of epiglottis	ICD-09-CM	Diagnosis
144.0	Malignant neoplasm of anterior portion of floor of mouth	ICD-09-CM	Diagnosis
147.3	Malignant neoplasm of anterior wall of nasopharynx	ICD-09-CM	Diagnosis
188.3	Malignant neoplasm of anterior wall of urinary bladder	ICD-09-CM	Diagnosis
194.6	Malignant neoplasm of aortic body and other paraganglia	ICD-09-CM	Diagnosis
199.2	Malignant neoplasm associated with transplanted organ	ICD-09-CM	Diagnosis
174.6	Malignant neoplasm of axillary tail of female breast	ICD-09-CM	Diagnosis
162.9	Malignant neoplasm of bronchus and lung, unspecified site	ICD-09-CM	Diagnosis
174.1	Malignant neoplasm of central portion of female breast	ICD-09-CM	Diagnosis
180.9	Malignant neoplasm of cervix uteri, unspecified site	ICD-09-CM	Diagnosis
171	Malignant neoplasm of connective and other soft tissue	ICD-09-CM	Diagnosis
182.0	Malignant neoplasm of corpus uteri, except isthmus	ICD-09-CM	Diagnosis
194.9	Malignant neoplasm of endocrine gland, site unspecified	ICD-09-CM	Diagnosis
144.9	Malignant neoplasm of floor of mouth, part unspecified	ICD-09-CM	Diagnosis
156	Malignant neoplasm of gallbladder and extrahepatic bile ducts	ICD-09-CM	Diagnosis
151.6	Malignant neoplasm of greater curvature of stomach, unspecified	ICD-09-CM	Diagnosis
148.9	Malignant neoplasm of hypopharynx, unspecified site	ICD-09-CM	Diagnosis
159.0	Malignant neoplasm of intestinal tract, part unspecified	ICD-09-CM	Diagnosis
146.5	Malignant neoplasm of junctional region of oropharynx	ICD-09-CM	Diagnosis
144.1	Malignant neoplasm of lateral portion of floor of mouth	ICD-09-CM	Diagnosis
147.2	Malignant neoplasm of lateral wall of nasopharynx	ICD-09-CM	Diagnosis
188.2	Malignant neoplasm of lateral wall of urinary bladder	ICD-09-CM	Diagnosis
151.5	Malignant neoplasm of lesser curvature of stomach, unspecified	ICD-09-CM	Diagnosis
155.2	Malignant neoplasm of liver, not specified as primary or secondary	ICD-09-CM	Diagnosis
162.5	Malignant neoplasm of lower lobe, bronchus, or lung	ICD-09-CM	Diagnosis
164.9	Malignant neoplasm of mediastinum, part unspecified	ICD-09-CM	Diagnosis
162.4	Malignant neoplasm of middle lobe, bronchus, or lung	ICD-09-CM	Diagnosis
147.9	Malignant neoplasm of nasopharynx, unspecified site	ICD-09-CM	Diagnosis
192.9	Malignant neoplasm of nervous system, part unspecified	ICD-09-CM	Diagnosis
174.0	Malignant neoplasm of nipple and areola of female breast	ICD-09-CM	Diagnosis
175.0	Malignant neoplasm of nipple and areola of male breast	ICD-09-CM	Diagnosis
195.2	Malignant neoplasm of abdomen	ICD-09-CM	Diagnosis
150.2	Malignant neoplasm of abdominal esophagus	ICD-09-CM	Diagnosis
194.0	Malignant neoplasm of adrenal gland	ICD-09-CM	Diagnosis
156.2	Malignant neoplasm of ampulla of Vater	ICD-09-CM	Diagnosis
154.2	Malignant neoplasm of anal canal	ICD-09-CM	Diagnosis
164.2	Malignant neoplasm of anterior mediastinum	ICD-09-CM	Diagnosis
154.3	Malignant neoplasm of anus, unspecified site	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
153.5	Malignant neoplasm of appendix	ICD-09-CM	Diagnosis
153.6	Malignant neoplasm of ascending colon	ICD-09-CM	Diagnosis
141.0	Malignant neoplasm of base of tongue	ICD-09-CM	Diagnosis
188	Malignant neoplasm of bladder	ICD-09-CM	Diagnosis
188.5	Malignant neoplasm of bladder neck	ICD-09-CM	Diagnosis
188.9	Malignant neoplasm of bladder, part unspecified	ICD-09-CM	Diagnosis
157.1	Malignant neoplasm of body of pancreas	ICD-09-CM	Diagnosis
187.3	Malignant neoplasm of body of penis	ICD-09-CM	Diagnosis
151.4	Malignant neoplasm of body of stomach	ICD-09-CM	Diagnosis
182	Malignant neoplasm of body of uterus	ICD-09-CM	Diagnosis
170	Malignant neoplasm of bone and articular cartilage	ICD-09-CM	Diagnosis
191	Malignant neoplasm of brain	ICD-09-CM	Diagnosis
191.7	Malignant neoplasm of brain stem	ICD-09-CM	Diagnosis
191.9	Malignant neoplasm of brain, unspecified site	ICD-09-CM	Diagnosis
174.9	Malignant neoplasm of breast (female), unspecified site	ICD-09-CM	Diagnosis
183.3	Malignant neoplasm of broad ligament of uterus	ICD-09-CM	Diagnosis
151.0	Malignant neoplasm of cardia	ICD-09-CM	Diagnosis
194.5	Malignant neoplasm of carotid body	ICD-09-CM	Diagnosis
153.4	Malignant neoplasm of cecum	ICD-09-CM	Diagnosis
191.6	Malignant neoplasm of cerebellum NOS	ICD-09-CM	Diagnosis
192.1	Malignant neoplasm of cerebral meninges	ICD-09-CM	Diagnosis
150.0	Malignant neoplasm of cervical esophagus	ICD-09-CM	Diagnosis
180	Malignant neoplasm of cervix uteri	ICD-09-CM	Diagnosis
145.0	Malignant neoplasm of cheek mucosa	ICD-09-CM	Diagnosis
190.6	Malignant neoplasm of choroid	ICD-09-CM	Diagnosis
184.3	Malignant neoplasm of clitoris	ICD-09-CM	Diagnosis
153	Malignant neoplasm of colon	ICD-09-CM	Diagnosis
153.9	Malignant neoplasm of colon, unspecified site	ICD-09-CM	Diagnosis
140.6	Malignant neoplasm of commissure of lip	ICD-09-CM	Diagnosis
190.3	Malignant neoplasm of conjunctiva	ICD-09-CM	Diagnosis
190.4	Malignant neoplasm of cornea	ICD-09-CM	Diagnosis
192.0	Malignant neoplasm of cranial nerves	ICD-09-CM	Diagnosis
153.2	Malignant neoplasm of descending colon	ICD-09-CM	Diagnosis
188.1	Malignant neoplasm of dome of urinary bladder	ICD-09-CM	Diagnosis
141.1	Malignant neoplasm of dorsal surface of tongue	ICD-09-CM	Diagnosis
152.0	Malignant neoplasm of duodenum	ICD-09-CM	Diagnosis
180.0	Malignant neoplasm of endocervix	ICD-09-CM	Diagnosis
187.5	Malignant neoplasm of epididymis	ICD-09-CM	Diagnosis
150	Malignant neoplasm of esophagus	ICD-09-CM	Diagnosis
150.9	Malignant neoplasm of esophagus, unspecified site	ICD-09-CM	Diagnosis
160.3	Malignant neoplasm of ethmoidal sinus	ICD-09-CM	Diagnosis
180.1	Malignant neoplasm of exocervix	ICD-09-CM	Diagnosis
156.1	Malignant neoplasm of extrahepatic bile ducts	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
190	Malignant neoplasm of eye	ICD-09-CM	Diagnosis
190.9	Malignant neoplasm of eye, part unspecified	ICD-09-CM	Diagnosis
183.2	Malignant neoplasm of fallopian tube	ICD-09-CM	Diagnosis
174	Malignant neoplasm of female breast	ICD-09-CM	Diagnosis
144	Malignant neoplasm of floor of mouth	ICD-09-CM	Diagnosis
191.1	Malignant neoplasm of frontal lobe of brain	ICD-09-CM	Diagnosis
160.4	Malignant neoplasm of frontal sinus	ICD-09-CM	Diagnosis
151.3	Malignant neoplasm of fundus of stomach	ICD-09-CM	Diagnosis
156.0	Malignant neoplasm of gallbladder	ICD-09-CM	Diagnosis
187.2	Malignant neoplasm of glans penis	ICD-09-CM	Diagnosis
161.0	Malignant neoplasm of glottis	ICD-09-CM	Diagnosis
143	Malignant neoplasm of gum	ICD-09-CM	Diagnosis
143.9	Malignant neoplasm of gum, unspecified site	ICD-09-CM	Diagnosis
145.2	Malignant neoplasm of hard palate	ICD-09-CM	Diagnosis
195.0	Malignant neoplasm of head, face, and neck	ICD-09-CM	Diagnosis
157.0	Malignant neoplasm of head of pancreas	ICD-09-CM	Diagnosis
164.1	Malignant neoplasm of heart	ICD-09-CM	Diagnosis
153.0	Malignant neoplasm of hepatic flexure	ICD-09-CM	Diagnosis
148	Malignant neoplasm of hypopharynx	ICD-09-CM	Diagnosis
152.2	Malignant neoplasm of ileum	ICD-09-CM	Diagnosis
155.1	Malignant neoplasm of intrahepatic bile ducts	ICD-09-CM	Diagnosis
157.4	Malignant neoplasm of islets of Langerhans	ICD-09-CM	Diagnosis
182.1	Malignant neoplasm of isthmus	ICD-09-CM	Diagnosis
152.1	Malignant neoplasm of jejunum	ICD-09-CM	Diagnosis
141.5	Malignant neoplasm of junctional zone of tongue	ICD-09-CM	Diagnosis
189.0	Malignant neoplasm of kidney, except pelvis	ICD-09-CM	Diagnosis
184.1	Malignant neoplasm of labia majora	ICD-09-CM	Diagnosis
184.2	Malignant neoplasm of labia minora	ICD-09-CM	Diagnosis
190.7	Malignant neoplasm of lacrimal duct	ICD-09-CM	Diagnosis
190.2	Malignant neoplasm of lacrimal gland	ICD-09-CM	Diagnosis
161.3	Malignant neoplasm of laryngeal cartilages	ICD-09-CM	Diagnosis
161	Malignant neoplasm of larynx	ICD-09-CM	Diagnosis
161.9	Malignant neoplasm of larynx, unspecified site	ICD-09-CM	Diagnosis
146.6	Malignant neoplasm of lateral wall of oropharynx	ICD-09-CM	Diagnosis
141.6	Malignant neoplasm of lingual tonsil	ICD-09-CM	Diagnosis
140	Malignant neoplasm of lip	ICD-09-CM	Diagnosis
155	Malignant neoplasm of liver and intrahepatic bile ducts	ICD-09-CM	Diagnosis
155.0	Malignant neoplasm of liver, primary	ICD-09-CM	Diagnosis
170.7	Malignant neoplasm of long bones of lower limb	ICD-09-CM	Diagnosis
143.1	Malignant neoplasm of lower gum	ICD-09-CM	Diagnosis
195.5	Malignant neoplasm of lower limb	ICD-09-CM	Diagnosis
140.4	Malignant neoplasm of lower lip, inner aspect	ICD-09-CM	Diagnosis
140.1	Malignant neoplasm of lower lip, vermilion border	ICD-09-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
150.5	Malignant neoplasm of lower third of esophagus	ICD-09-CM	Diagnosis
162.2	Malignant neoplasm of main bronchus	ICD-09-CM	Diagnosis
142	Malignant neoplasm of major salivary glands	ICD-09-CM	Diagnosis
175	Malignant neoplasm of male breast	ICD-09-CM	Diagnosis
170.1	Malignant neoplasm of mandible	ICD-09-CM	Diagnosis
160.2	Malignant neoplasm of maxillary sinus	ICD-09-CM	Diagnosis
152.3	Malignant neoplasm of Meckel's diverticulum	ICD-09-CM	Diagnosis
150.4	Malignant neoplasm of middle third of esophagus	ICD-09-CM	Diagnosis
145.9	Malignant neoplasm of mouth, unspecified site	ICD-09-CM	Diagnosis
160.0	Malignant neoplasm of nasal cavities	ICD-09-CM	Diagnosis
147	Malignant neoplasm of nasopharynx	ICD-09-CM	Diagnosis
191.4	Malignant neoplasm of occipital lobe of brain	ICD-09-CM	Diagnosis
190.1	Malignant neoplasm of orbit	ICD-09-CM	Diagnosis
146	Malignant neoplasm of oropharynx	ICD-09-CM	Diagnosis
191.8	Malignant neoplasm of other parts of brain	ICD-09-CM	Diagnosis
164.8	Malignant neoplasm of other parts of mediastinum	ICD-09-CM	Diagnosis
143.8	Malignant neoplasm of other sites of gum	ICD-09-CM	Diagnosis
140.8	Malignant neoplasm of other sites of lip	ICD-09-CM	Diagnosis
141.8	Malignant neoplasm of other sites of tongue	ICD-09-CM	Diagnosis
195.8	Malignant neoplasm of other specified sites	ICD-09-CM	Diagnosis
195	Malignant neoplasm of other and ill-defined sites	ICD-09-CM	Diagnosis
186.9	Malignant neoplasm of other and unspecified testis	ICD-09-CM	Diagnosis
183.0	Malignant neoplasm of ovary	ICD-09-CM	Diagnosis
183	Malignant neoplasm of ovary and other uterine adnexa	ICD-09-CM	Diagnosis
145.5	Malignant neoplasm of palate, unspecified	ICD-09-CM	Diagnosis
157	Malignant neoplasm of pancreas	ICD-09-CM	Diagnosis
157.9	Malignant neoplasm of pancreas, part unspecified	ICD-09-CM	Diagnosis
157.3	Malignant neoplasm of pancreatic duct	ICD-09-CM	Diagnosis
183.4	Malignant neoplasm of parametrium of uterus	ICD-09-CM	Diagnosis
194.1	Malignant neoplasm of parathyroid gland	ICD-09-CM	Diagnosis
189.4	Malignant neoplasm of paraurethral glands	ICD-09-CM	Diagnosis
191.3	Malignant neoplasm of parietal lobe of brain	ICD-09-CM	Diagnosis
163.0	Malignant neoplasm of parietal pleura	ICD-09-CM	Diagnosis
142.0	Malignant neoplasm of parotid gland	ICD-09-CM	Diagnosis
170.6	Malignant neoplasm of pelvic bones, sacrum, and coccyx	ICD-09-CM	Diagnosis
195.3	Malignant neoplasm of pelvis	ICD-09-CM	Diagnosis
187.4	Malignant neoplasm of penis, part unspecified	ICD-09-CM	Diagnosis
158.9	Malignant neoplasm of peritoneum, unspecified	ICD-09-CM	Diagnosis
149.0	Malignant neoplasm of pharynx, unspecified	ICD-09-CM	Diagnosis
194.4	Malignant neoplasm of pineal gland	ICD-09-CM	Diagnosis
181	Malignant neoplasm of placenta	ICD-09-CM	Diagnosis
163	Malignant neoplasm of pleura	ICD-09-CM	Diagnosis
163.9	Malignant neoplasm of pleura, unspecified site	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
164.3	Malignant neoplasm of posterior mediastinum	ICD-09-CM	Diagnosis
187.1	Malignant neoplasm of prepuce	ICD-09-CM	Diagnosis
185	Malignant neoplasm of prostate	ICD-09-CM	Diagnosis
151.2	Malignant neoplasm of pyloric antrum	ICD-09-CM	Diagnosis
151.1	Malignant neoplasm of pylorus	ICD-09-CM	Diagnosis
148.1	Malignant neoplasm of pyriform sinus	ICD-09-CM	Diagnosis
154.0	Malignant neoplasm of rectosigmoid junction	ICD-09-CM	Diagnosis
154.1	Malignant neoplasm of rectum	ICD-09-CM	Diagnosis
189.1	Malignant neoplasm of renal pelvis	ICD-09-CM	Diagnosis
190.5	Malignant neoplasm of retina	ICD-09-CM	Diagnosis
145.6	Malignant neoplasm of retromolar area	ICD-09-CM	Diagnosis
158.0	Malignant neoplasm of retroperitoneum	ICD-09-CM	Diagnosis
158	Malignant neoplasm of retroperitoneum and peritoneum	ICD-09-CM	Diagnosis
170.3	Malignant neoplasm of ribs, sternum, and clavicle	ICD-09-CM	Diagnosis
183.5	Malignant neoplasm of round ligament of uterus	ICD-09-CM	Diagnosis
142.9	Malignant neoplasm of salivary gland, unspecified	ICD-09-CM	Diagnosis
187.7	Malignant neoplasm of scrotum	ICD-09-CM	Diagnosis
170.8	Malignant neoplasm of short bones of lower limb	ICD-09-CM	Diagnosis
170.5	Malignant neoplasm of short bones of upper limb	ICD-09-CM	Diagnosis
153.3	Malignant neoplasm of sigmoid colon	ICD-09-CM	Diagnosis
145.3	Malignant neoplasm of soft palate	ICD-09-CM	Diagnosis
187.6	Malignant neoplasm of spermatic cord	ICD-09-CM	Diagnosis
160.5	Malignant neoplasm of sphenoidal sinus	ICD-09-CM	Diagnosis
192.2	Malignant neoplasm of spinal cord	ICD-09-CM	Diagnosis
192.3	Malignant neoplasm of spinal meninges	ICD-09-CM	Diagnosis
159.1	Malignant neoplasm of spleen, not elsewhere classified	ICD-09-CM	Diagnosis
153.7	Malignant neoplasm of splenic flexure	ICD-09-CM	Diagnosis
151	Malignant neoplasm of stomach	ICD-09-CM	Diagnosis
151.9	Malignant neoplasm of stomach, unspecified site	ICD-09-CM	Diagnosis
161.2	Malignant neoplasm of subglottis	ICD-09-CM	Diagnosis
142.2	Malignant neoplasm of sublingual gland	ICD-09-CM	Diagnosis
142.1	Malignant neoplasm of submandibular gland	ICD-09-CM	Diagnosis
161.1	Malignant neoplasm of supraglottis	ICD-09-CM	Diagnosis
157.2	Malignant neoplasm of tail of pancreas	ICD-09-CM	Diagnosis
191.2	Malignant neoplasm of temporal lobe of brain	ICD-09-CM	Diagnosis
186	Malignant neoplasm of testis	ICD-09-CM	Diagnosis
150.1	Malignant neoplasm of thoracic esophagus	ICD-09-CM	Diagnosis
195.1	Malignant neoplasm of thorax	ICD-09-CM	Diagnosis
164.0	Malignant neoplasm of thymus	ICD-09-CM	Diagnosis
164	Malignant neoplasm of thymus, heart, and mediastinum	ICD-09-CM	Diagnosis
193	Malignant neoplasm of thyroid gland	ICD-09-CM	Diagnosis
141	Malignant neoplasm of tongue	ICD-09-CM	Diagnosis
141.9	Malignant neoplasm of tongue, unspecified site	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
146.0	Malignant neoplasm of tonsil	ICD-09-CM	Diagnosis
146.1	Malignant neoplasm of tonsillar fossa	ICD-09-CM	Diagnosis
146.2	Malignant neoplasm of tonsillar pillars (anterior) (posterior)	ICD-09-CM	Diagnosis
162.0	Malignant neoplasm of trachea	ICD-09-CM	Diagnosis
162	Malignant neoplasm of trachea, bronchus, and lung	ICD-09-CM	Diagnosis
153.1	Malignant neoplasm of transverse colon	ICD-09-CM	Diagnosis
188.0	Malignant neoplasm of trigone of urinary bladder	ICD-09-CM	Diagnosis
186.0	Malignant neoplasm of undescended testis	ICD-09-CM	Diagnosis
143.0	Malignant neoplasm of upper gum	ICD-09-CM	Diagnosis
195.4	Malignant neoplasm of upper limb	ICD-09-CM	Diagnosis
140.3	Malignant neoplasm of upper lip, inner aspect	ICD-09-CM	Diagnosis
140.0	Malignant neoplasm of upper lip, vermilion border	ICD-09-CM	Diagnosis
150.3	Malignant neoplasm of upper third of esophagus	ICD-09-CM	Diagnosis
188.7	Malignant neoplasm of urachus	ICD-09-CM	Diagnosis
189.2	Malignant neoplasm of ureter	ICD-09-CM	Diagnosis
188.6	Malignant neoplasm of ureteric orifice	ICD-09-CM	Diagnosis
189.3	Malignant neoplasm of urethra	ICD-09-CM	Diagnosis
179	Malignant neoplasm of uterus, part unspecified	ICD-09-CM	Diagnosis
145.4	Malignant neoplasm of uvula	ICD-09-CM	Diagnosis
184.0	Malignant neoplasm of vagina	ICD-09-CM	Diagnosis
146.3	Malignant neoplasm of vallecula	ICD-09-CM	Diagnosis
141.3	Malignant neoplasm of ventral surface of tongue	ICD-09-CM	Diagnosis
191.5	Malignant neoplasm of ventricles of brain	ICD-09-CM	Diagnosis
145.1	Malignant neoplasm of vestibule of mouth	ICD-09-CM	Diagnosis
163.1	Malignant neoplasm of visceral pleura	ICD-09-CM	Diagnosis
184.4	Malignant neoplasm of vulva, unspecified site	ICD-09-CM	Diagnosis
149.1	Malignant neoplasm of Waldeyer's ring	ICD-09-CM	Diagnosis
146.9	Malignant neoplasm of oropharynx, unspecified site	ICD-09-CM	Diagnosis
142.8	Malignant neoplasm of other major salivary glands	ICD-09-CM	Diagnosis
162.8	Malignant neoplasm of other parts of bronchus or lung	ICD-09-CM	Diagnosis
144.8	Malignant neoplasm of other sites of floor of mouth	ICD-09-CM	Diagnosis
150.8	Malignant neoplasm of other specified part of esophagus	ICD-09-CM	Diagnosis
182.8	Malignant neoplasm of other specified sites of body of uterus	ICD-09-CM	Diagnosis
148.8	Malignant neoplasm of other specified sites of hypopharynx	ICD-09-CM	Diagnosis
147.8	Malignant neoplasm of other specified sites of nasopharynx	ICD-09-CM	Diagnosis
146.8	Malignant neoplasm of other specified sites of oropharynx	ICD-09-CM	Diagnosis
157.8	Malignant neoplasm of other specified sites of pancreas	ICD-09-CM	Diagnosis
145.8	Malignant neoplasm of other specified parts of mouth	ICD-09-CM	Diagnosis
188.8	Malignant neoplasm of other specified sites of bladder	ICD-09-CM	Diagnosis
180.8	Malignant neoplasm of other specified sites of cervix	ICD-09-CM	Diagnosis
190.8	Malignant neoplasm of other specified sites of eye	ICD-09-CM	Diagnosis
161.8	Malignant neoplasm of other specified sites of larynx	ICD-09-CM	Diagnosis
163.8	Malignant neoplasm of other specified sites of pleura	ICD-09-CM	Diagnosis



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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
151.8	Malignant neoplasm of other specified sites of stomach	ICD-09-CM	Diagnosis
145	Malignant neoplasm of other and unspecified parts of mouth	ICD-09-CM	Diagnosis
148.3	Malignant neoplasm of posterior hypopharyngeal wall	ICD-09-CM	Diagnosis
147.1	Malignant neoplasm of posterior wall of nasopharynx	ICD-09-CM	Diagnosis
146.7	Malignant neoplasm of posterior wall of oropharynx	ICD-09-CM	Diagnosis
170.4	Malignant neoplasm of scapula and long bones of upper limb	ICD-09-CM	Diagnosis
152.9	Malignant neoplasm of small intestine, unspecified site	ICD-09-CM	Diagnosis
158.8	Malignant neoplasm of specified parts of peritoneum	ICD-09-CM	Diagnosis
147.0	Malignant neoplasm of superior wall of nasopharynx	ICD-09-CM	Diagnosis
141.2	Malignant neoplasm of tip and lateral border of tongue	ICD-09-CM	Diagnosis
162.3	Malignant neoplasm of upper lobe, bronchus, or lung	ICD-09-CM	Diagnosis
189.9	Malignant neoplasm of urinary organ, site unspecified	ICD-09-CM	Diagnosis
183.9	Malignant neoplasm of uterine adnexa, unspecified site	ICD-09-CM	Diagnosis
199	Malignant neoplasm without specification of site	ICD-09-CM	Diagnosis
200.4	Mantle cell lymphoma	ICD-09-CM	Diagnosis
200.43	Mantle cell lymphoma, intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
200.46	Mantle cell lymphoma, intrapelvic lymph nodes	ICD-09-CM	Diagnosis
200.42	Mantle cell lymphoma, intrathoracic lymph nodes	ICD-09-CM	Diagnosis
200.41	Mantle cell lymphoma, lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
200.48	Mantle cell lymphoma, lymph nodes of multiple sites	ICD-09-CM	Diagnosis
200.44	Mantle cell lymphoma, lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
200.45	Mantle cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
200.47	Mantle cell lymphoma, spleen	ICD-09-CM	Diagnosis
200.3	Marginal zone lymphoma	ICD-09-CM	Diagnosis
200.33	Marginal zone lymphoma, intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
200.36	Marginal zone lymphoma, intrapelvic lymph nodes	ICD-09-CM	Diagnosis
200.32	Marginal zone lymphoma, intrathoracic lymph nodes	ICD-09-CM	Diagnosis
200.31	Marginal zone lymphoma, lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
200.38	Marginal zone lymphoma, lymph nodes of multiple sites	ICD-09-CM	Diagnosis
200.34	Marginal zone lymphoma, lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
200.35	Marginal zone lymphoma, lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
200.37	Marginal zone lymphoma, spleen	ICD-09-CM	Diagnosis
200.40	Mantle cell lymphoma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
207.20	Megakaryocytic leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
207.2	Megakaryocytic leukemia	ICD-09-CM	Diagnosis
207.22	Megakaryocytic leukemia, in relapse	ICD-09-CM	Diagnosis
207.21	Megakaryocytic leukemia in remission	ICD-09-CM	Diagnosis
172.9	Melanoma of skin, site unspecified	ICD-09-CM	Diagnosis
209.36	Merkel cell carcinoma of other sites	ICD-09-CM	Diagnosis
209.31	Merkel cell carcinoma of the face	ICD-09-CM	Diagnosis
209.34	Merkel cell carcinoma of the lower limb	ICD-09-CM	Diagnosis
209.32	Merkel cell carcinoma of the scalp and neck	ICD-09-CM	Diagnosis
209.35	Merkel cell carcinoma of the trunk	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
209.33	Merkel cell carcinoma of the upper limb	ICD-09-CM	Diagnosis
206	Monocytic leukemia	ICD-09-CM	Diagnosis
203.0	Multiple myeloma	ICD-09-CM	Diagnosis
203.02	Multiple myeloma, in relapse	ICD-09-CM	Diagnosis
203.01	Multiple myeloma in remission	ICD-09-CM	Diagnosis
203.00	Multiple myeloma, without mention of having achieved remission	ICD-09-CM	Diagnosis
203	Multiple myeloma and immunoproliferative neoplasms	ICD-09-CM	Diagnosis
202.1	Mycosis fungoides	ICD-09-CM	Diagnosis
202.14	Mycosis fungoides of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
202.11	Mycosis fungoides of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
202.18	Mycosis fungoides of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
202.15	Mycosis fungoides of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
202.13	Mycosis fungoides of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
202.16	Mycosis fungoides of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
202.12	Mycosis fungoides of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
202.17	Mycosis fungoides of spleen	ICD-09-CM	Diagnosis
202.10	Mycosis fungoides, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
205	Myeloid leukemia	ICD-09-CM	Diagnosis
205.3	Myeloid sarcoma	ICD-09-CM	Diagnosis
205.32	Myeloid sarcoma, in relapse	ICD-09-CM	Diagnosis
205.31	Myeloid sarcoma in remission	ICD-09-CM	Diagnosis
205.30	Myeloid sarcoma, without mention of having achieved remission	ICD-09-CM	Diagnosis
200.30	Marginal zone lymphoma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
202.0	Nodular lymphoma	ICD-09-CM	Diagnosis
202.04	Nodular lymphoma of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
202.01	Nodular lymphoma of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
202.08	Nodular lymphoma of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
202.05	Nodular lymphoma of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
202.03	Nodular lymphoma of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
202.06	Nodular lymphoma of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
202.02	Nodular lymphoma of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
202.07	Nodular lymphoma of spleen	ICD-09-CM	Diagnosis
202.00	Nodular lymphoma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
202.94	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
202.95	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
202.93	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
202.90	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
202.96	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of intrapelvic lymph nodes	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
203.80	Other immunoproliferative neoplasms, without mention of having achieved remission	ICD-09-CM	Diagnosis
208.80	Other leukemia of unspecified cell type, without mention of having achieved remission	ICD-09-CM	Diagnosis
204.80	Other lymphoid leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
202.83	Other malignant lymphomas of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
202.84	Other malignant lymphomas of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
202.85	Other malignant lymphomas of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
202.80	Other malignant lymphomas, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
202	Other malignant neoplasms of lymphoid and histiocytic tissue	ICD-09-CM	Diagnosis
206.80	Other monocytic leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
200.87	Other named variants of lymphosarcoma and reticulosarcoma of spleen	ICD-09-CM	Diagnosis
200.88	Other named variants of lymphosarcoma and reticulosarcoma of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
200.85	Other named variants of lymphosarcoma and reticulosarcoma of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
200.83	Other named variants of lymphosarcoma and reticulosarcoma of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
200.86	Other named variants of lymphosarcoma and reticulosarcoma of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
200.82	Other named variants of lymphosarcoma and reticulosarcoma of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
200.84	Other named variants of lymphosarcoma and reticulosarcoma of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
200.81	Other named variants of lymphosarcoma and reticulosarcoma of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
202.91	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
202.92	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
202.97	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of spleen	ICD-09-CM	Diagnosis
202.9	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue	ICD-09-CM	Diagnosis
V10.9	Other and unspecified personal history of malignant neoplasm	ICD-09-CM	Diagnosis
203.8	Other immunoproliferative neoplasms	ICD-09-CM	Diagnosis
203.82	Other immunoproliferative neoplasms, in relapse	ICD-09-CM	Diagnosis
203.81	Other immunoproliferative neoplasms in remission	ICD-09-CM	Diagnosis
208.8	Other leukemia of unspecified cell type	ICD-09-CM	Diagnosis
208.82	Other leukemia of unspecified cell type, in relapse	ICD-09-CM	Diagnosis
208.81	Other leukemia of unspecified cell type in remission	ICD-09-CM	Diagnosis
238.79	Other lymphatic and hematopoietic tissues	ICD-09-CM	Diagnosis
204.8	Other lymphoid leukemia	ICD-09-CM	Diagnosis
204.82	Other lymphoid leukemia, in relapse	ICD-09-CM	Diagnosis
204.81	Other lymphoid leukemia in remission	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
202.86	Other malignant lymphomas of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
202.82	Other malignant lymphomas of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
202.81	Other malignant lymphomas of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
202.88	Other malignant lymphomas of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
202.8	Other malignant lymphomas	ICD-09-CM	Diagnosis
202.87	Other malignant lymphomas of spleen	ICD-09-CM	Diagnosis
199.1	Other malignant neoplasm of unspecified site	ICD-09-CM	Diagnosis
206.8	Other monocytic leukemia	ICD-09-CM	Diagnosis
206.82	Other monocytic leukemia, in relapse	ICD-09-CM	Diagnosis
206.81	Other monocytic leukemia in remission	ICD-09-CM	Diagnosis
205.8	Other myeloid leukemia	ICD-09-CM	Diagnosis
205.82	Other myeloid leukemia, in relapse	ICD-09-CM	Diagnosis
205.81	Other myeloid leukemia in remission	ICD-09-CM	Diagnosis
205.80	Other myeloid leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
207.80	Other specified leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
207	Other specified leukemia	ICD-09-CM	Diagnosis
207.8	Other specified leukemia	ICD-09-CM	Diagnosis
207.82	Other specified leukemia, in relapse	ICD-09-CM	Diagnosis
207.81	Other specified leukemia in remission	ICD-09-CM	Diagnosis
202.74	Peripheral T-cell lymphoma, lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
202.75	Peripheral T-cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
202.7	Peripheral T-cell lymphoma	ICD-09-CM	Diagnosis
202.73	Peripheral T-cell lymphoma, intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
202.76	Peripheral T-cell lymphoma, intrapelvic lymph nodes	ICD-09-CM	Diagnosis
202.72	Peripheral T-cell lymphoma, intrathoracic lymph nodes	ICD-09-CM	Diagnosis
202.78	Peripheral T-cell lymphoma, lymph nodes of multiple sites	ICD-09-CM	Diagnosis
202.71	Peripheral T-cell lymphoma, lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
202.77	Peripheral T-cell lymphoma, spleen	ICD-09-CM	Diagnosis
V10.29	Personal history of malignant neoplasm of other respiratory and intrathoracic organs	ICD-09-CM	Diagnosis
V10.02	Personal history of malignant neoplasm of other and unspecified parts of oral cavity and pharynx	ICD-09-CM	Diagnosis
V10.06	Personal history of malignant neoplasm of rectum, rectosigmoid junction, and anus	ICD-09-CM	Diagnosis
V10.40	Personal history of malignant neoplasm of unspecified female genital organ	ICD-09-CM	Diagnosis
V10.45	Personal history of malignant neoplasm of unspecified male genital organ	ICD-09-CM	Diagnosis
V10.20	Personal history of malignant neoplasm of unspecified respiratory organ	ICD-09-CM	Diagnosis
V10.88	Personal history of malignant neoplasm of other endocrine glands and related structures	ICD-09-CM	Diagnosis
V10.2	Personal history of malignant neoplasm of other respiratory and intrathoracic organs	ICD-09-CM	Diagnosis
V10.71	Personal history of lymphosarcoma and reticulosarcoma	ICD-09-CM	Diagnosis
V10.11	Personal history of malignant neoplasm of bronchus and lung	ICD-09-CM	Diagnosis
V10.4	Personal history of malignant neoplasm of genital organs	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
V10.0	Personal history of malignant neoplasm of gastrointestinal tract	ICD-09-CM	Diagnosis
V10.05	Personal history of malignant neoplasm of large intestine	ICD-09-CM	Diagnosis
V10.42	Personal history of malignant neoplasm of other parts of uterus	ICD-09-CM	Diagnosis
V10.5	Personal history of malignant neoplasm of urinary organs	ICD-09-CM	Diagnosis
V10.51	Personal history of malignant neoplasm of bladder	ICD-09-CM	Diagnosis
V10.41	Personal history of malignant neoplasm of cervix uteri	ICD-09-CM	Diagnosis
V10.48	Personal history of malignant neoplasm of epididymis	ICD-09-CM	Diagnosis
V10.03	Personal history of malignant neoplasm of esophagus	ICD-09-CM	Diagnosis
V10.89	Personal history of malignant neoplasm of other site	ICD-09-CM	Diagnosis
V10.8	Personal history of malignant neoplasm of other sites	ICD-09-CM	Diagnosis
V10.46	Personal history of malignant neoplasm of prostate	ICD-09-CM	Diagnosis
V10.53	Personal history of malignant neoplasm, renal pelvis	ICD-09-CM	Diagnosis
V10.04	Personal history of malignant neoplasm of stomach	ICD-09-CM	Diagnosis
V10.87	Personal history of malignant neoplasm of thyroid	ICD-09-CM	Diagnosis
V10.12	Personal history of malignant neoplasm of trachea	ICD-09-CM	Diagnosis
V10.91	Personal history of malignant neuroendocrine tumor	ICD-09-CM	Diagnosis
V10.72	Personal history of Hodgkin's disease	ICD-09-CM	Diagnosis
V10.6	Personal history of leukemia	ICD-09-CM	Diagnosis
V10.61	Personal history of lymphoid leukemia	ICD-09-CM	Diagnosis
V10.82	Personal history of malignant melanoma of skin	ICD-09-CM	Diagnosis
V10	Personal history of malignant neoplasm	ICD-09-CM	Diagnosis
V10.81	Personal history of malignant neoplasm of bone	ICD-09-CM	Diagnosis
V10.85	Personal history of malignant neoplasm of brain	ICD-09-CM	Diagnosis
V10.3	Personal history of malignant neoplasm of breast	ICD-09-CM	Diagnosis
V10.84	Personal history of malignant neoplasm of eye	ICD-09-CM	Diagnosis
V10.52	Personal history of malignant neoplasm of kidney	ICD-09-CM	Diagnosis
V10.21	Personal history of malignant neoplasm of larynx	ICD-09-CM	Diagnosis
V10.07	Personal history of malignant neoplasm of liver	ICD-09-CM	Diagnosis
V10.43	Personal history of malignant neoplasm of ovary	ICD-09-CM	Diagnosis
V10.47	Personal history of malignant neoplasm of testis	ICD-09-CM	Diagnosis
V10.01	Personal history of malignant neoplasm of tongue	ICD-09-CM	Diagnosis
V10.63	Personal history of monocytic leukemia	ICD-09-CM	Diagnosis
V10.62	Personal history of myeloid leukemia	ICD-09-CM	Diagnosis
V10.69	Personal history of other leukemia	ICD-09-CM	Diagnosis
V10.60	Personal history of unspecified leukemia	ICD-09-CM	Diagnosis
V10.83	Personal history of other malignant neoplasm of skin	ICD-09-CM	Diagnosis
V10.90	Personal history of unspecified malignant neoplasm	ICD-09-CM	Diagnosis
V10.44	Personal history of malignant neoplasm of other female genital organs	ICD-09-CM	Diagnosis
V10.49	Personal history of malignant neoplasm of other male genital organs	ICD-09-CM	Diagnosis
V10.86	Personal history of malignant neoplasm of other parts of nervous system	ICD-09-CM	Diagnosis
V10.09	Personal history of malignant neoplasm of other site in gastrointestinal tract	ICD-09-CM	Diagnosis
V10.59	Personal history of malignant neoplasm of other urinary organ	ICD-09-CM	Diagnosis
V10.1	Personal history of malignant neoplasm of trachea, bronchus, and lung	ICD-09-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
V10.00	Personal history of malignant neoplasm of unspecified site in gastrointestinal tract	ICD-09-CM	Diagnosis
V10.50	Personal history of malignant neoplasm of unspecified urinary organ	ICD-09-CM	Diagnosis
V10.7	Personal history of other lymphatic and hematopoietic neoplasms	ICD-09-CM	Diagnosis
V10.79	Personal history of other lymphatic and hematopoietic neoplasm	ICD-09-CM	Diagnosis
V10.22	Personal history of malignant neoplasm of nasal cavities, middle ear, and accessory sinuses	ICD-09-CM	Diagnosis
203.1	Plasma cell leukemia	ICD-09-CM	Diagnosis
203.12	Plasma cell leukemia, in relapse	ICD-09-CM	Diagnosis
203.11	Plasma cell leukemia in remission	ICD-09-CM	Diagnosis
203.10	Plasma cell leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
200.50	Primary central nervous system lymphoma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
200.5	Primary central nervous system lymphoma	ICD-09-CM	Diagnosis
200.57	Primary central nervous system lymphoma, spleen	ICD-09-CM	Diagnosis
200.53	Primary central nervous system lymphoma, intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
200.56	Primary central nervous system lymphoma, intrapelvic lymph nodes	ICD-09-CM	Diagnosis
200.52	Primary central nervous system lymphoma, intrathoracic lymph nodes	ICD-09-CM	Diagnosis
200.51	Primary central nervous system lymphoma, lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
200.58	Primary central nervous system lymphoma, lymph nodes of multiple sites	ICD-09-CM	Diagnosis
200.54	Primary central nervous system lymphoma, lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
200.55	Primary central nervous system lymphoma, lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
202.70	Peripheral T-cell lymphoma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
200.0	Reticulosarcoma	ICD-09-CM	Diagnosis
200.04	Reticulosarcoma of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
200.05	Reticulosarcoma of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
200.03	Reticulosarcoma of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
200.06	Reticulosarcoma of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
200.02	Reticulosarcoma of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
200.01	Reticulosarcoma of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
200.08	Reticulosarcoma of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
200.07	Reticulosarcoma of spleen	ICD-09-CM	Diagnosis
200.00	Reticulosarcoma, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
197.8	Secondary malignant neoplasm of other digestive organs and spleen	ICD-09-CM	Diagnosis
198.4	Secondary malignant neoplasm of other parts of nervous system	ICD-09-CM	Diagnosis
197	Secondary malignant neoplasm of respiratory and digestive systems	ICD-09-CM	Diagnosis
197.6	Secondary malignant neoplasm of retroperitoneum and peritoneum	ICD-09-CM	Diagnosis
197.4	Secondary malignant neoplasm of small intestine including duodenum	ICD-09-CM	Diagnosis
198.5	Secondary malignant neoplasm of bone and bone marrow	ICD-09-CM	Diagnosis
198.3	Secondary malignant neoplasm of brain and spinal cord	ICD-09-CM	Diagnosis
197.5	Secondary malignant neoplasm of large intestine and rectum	ICD-09-CM	Diagnosis
198	Secondary malignant neoplasm of other specified sites	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
198.8	Secondary malignant neoplasm of other specified sites	ICD-09-CM	Diagnosis
198.89	Secondary malignant neoplasm of other specified sites	ICD-09-CM	Diagnosis
198.1	Secondary malignant neoplasm of other urinary organs	ICD-09-CM	Diagnosis
197.3	Secondary malignant neoplasm of other respiratory organs	ICD-09-CM	Diagnosis
209.71	Secondary neuroendocrine tumor of distant lymph nodes	ICD-09-CM	Diagnosis
196.2	Secondary and unspecified malignant neoplasm of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
196.6	Secondary and unspecified malignant neoplasm of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
196.1	Secondary and unspecified malignant neoplasm of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
196.3	Secondary and unspecified malignant neoplasm of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
196.0	Secondary and unspecified malignant neoplasm of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
196.8	Secondary and unspecified malignant neoplasm of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
196.9	Secondary and unspecified malignant neoplasm of lymph nodes, site unspecified	ICD-09-CM	Diagnosis
196.5	Secondary and unspecified malignant neoplasm of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
196	Secondary and unspecified malignant neoplasm of lymph nodes	ICD-09-CM	Diagnosis
198.7	Secondary malignant neoplasm of adrenal gland	ICD-09-CM	Diagnosis
198.81	Secondary malignant neoplasm of breast	ICD-09-CM	Diagnosis
198.82	Secondary malignant neoplasm of genital organs	ICD-09-CM	Diagnosis
198.0	Secondary malignant neoplasm of kidney	ICD-09-CM	Diagnosis
197.7	Secondary malignant neoplasm of liver	ICD-09-CM	Diagnosis
197.0	Secondary malignant neoplasm of lung	ICD-09-CM	Diagnosis
197.1	Secondary malignant neoplasm of mediastinum	ICD-09-CM	Diagnosis
198.6	Secondary malignant neoplasm of ovary	ICD-09-CM	Diagnosis
197.2	Secondary malignant neoplasm of pleura	ICD-09-CM	Diagnosis
198.2	Secondary malignant neoplasm of skin	ICD-09-CM	Diagnosis
209.75	Secondary Merkel cell carcinoma	ICD-09-CM	Diagnosis
209.73	Secondary neuroendocrine tumor of bone	ICD-09-CM	Diagnosis
209.72	Secondary neuroendocrine tumor of liver	ICD-09-CM	Diagnosis
209.79	Secondary neuroendocrine tumor of other sites	ICD-09-CM	Diagnosis
209.74	Secondary neuroendocrine tumor of peritoneum	ICD-09-CM	Diagnosis
209.70	Secondary neuroendocrine tumor, unspecified site	ICD-09-CM	Diagnosis
202.2	Sezary's disease	ICD-09-CM	Diagnosis
202.24	Sezary's disease of lymph nodes of axilla and upper limb	ICD-09-CM	Diagnosis
202.25	Sezary's disease of lymph nodes of inguinal region and lower limb	ICD-09-CM	Diagnosis
202.23	Sezary's disease of intra-abdominal lymph nodes	ICD-09-CM	Diagnosis
202.26	Sezary's disease of intrapelvic lymph nodes	ICD-09-CM	Diagnosis
202.22	Sezary's disease of intrathoracic lymph nodes	ICD-09-CM	Diagnosis
202.21	Sezary's disease of lymph nodes of head, face, and neck	ICD-09-CM	Diagnosis
202.28	Sezary's disease of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
202.27	Sezary's disease of spleen	ICD-09-CM	Diagnosis
202.20	Sezary's disease, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
208.21	Subacute leukemia of unspecified cell type in remission	ICD-09-CM	Diagnosis
206.20	Subacute monocytic leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
208.2	Subacute leukemia of unspecified cell type	ICD-09-CM	Diagnosis
208.22	Subacute leukemia of unspecified cell type, in relapse	ICD-09-CM	Diagnosis
208.20	Subacute leukemia of unspecified cell type, without mention of having achieved remission	ICD-09-CM	Diagnosis
204.2	Subacute lymphoid leukemia	ICD-09-CM	Diagnosis
204.22	Subacute lymphoid leukemia, in relapse	ICD-09-CM	Diagnosis
204.21	Subacute lymphoid leukemia in remission	ICD-09-CM	Diagnosis
204.20	Subacute lymphoid leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
206.2	Subacute monocytic leukemia	ICD-09-CM	Diagnosis
206.22	Subacute monocytic leukemia, in relapse	ICD-09-CM	Diagnosis
206.21	Subacute monocytic leukemia in remission	ICD-09-CM	Diagnosis
205.2	Subacute myeloid leukemia	ICD-09-CM	Diagnosis
205.22	Subacute myeloid leukemia, in relapse	ICD-09-CM	Diagnosis
205.21	Subacute myeloid leukemia in remission	ICD-09-CM	Diagnosis
205.20	Subacute myeloid leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
208.90	Unspecified leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
204.90	Unspecified lymphoid leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
202.98	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of lymph nodes of multiple sites	ICD-09-CM	Diagnosis
206.90	Unspecified monocytic leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
205.90	Unspecified myeloid leukemia, without mention of having achieved remission	ICD-09-CM	Diagnosis
208.9	Unspecified leukemia	ICD-09-CM	Diagnosis
208.92	Unspecified leukemia, in relapse	ICD-09-CM	Diagnosis
208.91	Unspecified leukemia in remission	ICD-09-CM	Diagnosis
204.9	Unspecified lymphoid leukemia	ICD-09-CM	Diagnosis
204.92	Unspecified lymphoid leukemia, in relapse	ICD-09-CM	Diagnosis
204.91	Unspecified lymphoid leukemia in remission	ICD-09-CM	Diagnosis
206.9	Unspecified monocytic leukemia	ICD-09-CM	Diagnosis
206.92	Unspecified monocytic leukemia, in relapse	ICD-09-CM	Diagnosis
206.91	Unspecified monocytic leukemia in remission	ICD-09-CM	Diagnosis
205.9	Unspecified myeloid leukemia	ICD-09-CM	Diagnosis
205.92	Unspecified myeloid leukemia, in relapse	ICD-09-CM	Diagnosis
205.91	Unspecified myeloid leukemia in remission	ICD-09-CM	Diagnosis
200.8	Other named variants of lymphosarcoma and reticulosarcoma	ICD-09-CM	Diagnosis
200.80	Other named variants, unspecified site, extranodal and solid organ sites	ICD-09-CM	Diagnosis
173.12	Squamous cell carcinoma of eyelid, including canthus	ICD-09-CM	Diagnosis
173.22	Squamous cell carcinoma of skin of ear and external auditory canal	ICD-09-CM	Diagnosis
173.32	Squamous cell carcinoma of skin of other and unspecified parts of face	ICD-09-CM	Diagnosis
173.42	Squamous cell carcinoma of scalp and skin of neck	ICD-09-CM	Diagnosis
173.52	Squamous cell carcinoma of skin of trunk, except scrotum	ICD-09-CM	Diagnosis
173.62	Squamous cell carcinoma of skin of upper limb, including shoulder	ICD-09-CM	Diagnosis



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Code	Description	Code Type	Code Category
173.72	Squamous cell carcinoma of skin of lower limb, including hip	ICD-09-CM	Diagnosis
173.82	Squamous cell carcinoma of other specified sites of skin	ICD-09-CM	Diagnosis
173.92	Squamous cell carcinoma of skin, site unspecified	ICD-09-CM	Diagnosis
C44.121	Squamous cell carcinoma of skin of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
C44.122	Squamous cell carcinoma of skin of right eyelid, including canthus	ICD-10-CM	Diagnosis
C44.129	Squamous cell carcinoma of skin of left eyelid, including canthus	ICD-10-CM	Diagnosis
C44.221	Squamous cell carcinoma of skin of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
C44.222	Squamous cell carcinoma of skin of right ear and external auricular canal	ICD-10-CM	Diagnosis
C44.229	Squamous cell carcinoma of skin of left ear and external auricular canal	ICD-10-CM	Diagnosis
C44.320	Squamous cell carcinoma of skin of unspecified parts of face	ICD-10-CM	Diagnosis
C44.321	Squamous cell carcinoma of skin of nose	ICD-10-CM	Diagnosis
C44.329	Squamous cell carcinoma of skin of other parts of face	ICD-10-CM	Diagnosis
C44.42	Squamous cell carcinoma of skin of scalp and neck	ICD-10-CM	Diagnosis
C44.520	Squamous cell carcinoma of anal skin	ICD-10-CM	Diagnosis
C44.521	Squamous cell carcinoma of skin of breast	ICD-10-CM	Diagnosis
C44.529	Squamous cell carcinoma of skin of other part of trunk	ICD-10-CM	Diagnosis
C44.621	Squamous cell carcinoma of skin of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.622	Squamous cell carcinoma of skin of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.629	Squamous cell carcinoma of skin of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.721	Squamous cell carcinoma of skin of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C44.722	Squamous cell carcinoma of skin of right lower limb, including hip	ICD-10-CM	Diagnosis
C44.729	Squamous cell carcinoma of skin of left lower limb, including hip	ICD-10-CM	Diagnosis
C44.82	Squamous cell carcinoma of overlapping sites of skin	ICD-10-CM	Diagnosis
C44.92	Squamous cell carcinoma of skin, unspecified	ICD-10-CM	Diagnosis
173.11	Basal cell carcinoma of eyelid, including canthus	ICD-09-CM	Diagnosis
173.21	Basal cell carcinoma of skin of ear and external auditory canal	ICD-09-CM	Diagnosis
173.31	Basal cell carcinoma of skin of other and unspecified parts of face	ICD-09-CM	Diagnosis
173.41	Basal cell carcinoma of scalp and skin of neck	ICD-09-CM	Diagnosis
173.51	Basal cell carcinoma of skin of trunk, except scrotum	ICD-09-CM	Diagnosis
173.61	Basal cell carcinoma of skin of upper limb, including shoulder	ICD-09-CM	Diagnosis
173.71	Basal cell carcinoma of skin of lower limb, including hip	ICD-09-CM	Diagnosis
173.81	Basal cell carcinoma of other specified sites of skin	ICD-09-CM	Diagnosis
173.91	Basal cell carcinoma of skin, site unspecified	ICD-09-CM	Diagnosis
C44.111	Basal cell carcinoma of skin of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
C44.112	Basal cell carcinoma of skin of right eyelid, including canthus	ICD-10-CM	Diagnosis
C44.119	Basal cell carcinoma of skin of left eyelid, including canthus	ICD-10-CM	Diagnosis
C44.211	Basal cell carcinoma of skin of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
C44.212	Basal cell carcinoma of skin of right ear and external auricular canal	ICD-10-CM	Diagnosis
C44.219	Basal cell carcinoma of skin of left ear and external auricular canal	ICD-10-CM	Diagnosis
C44.310	Basal cell carcinoma of skin of unspecified parts of face	ICD-10-CM	Diagnosis
C44.311	Basal cell carcinoma of skin of nose	ICD-10-CM	Diagnosis
C44.319	Basal cell carcinoma of skin of other parts of face	ICD-10-CM	Diagnosis
C44.41	Basal cell carcinoma of skin of scalp and neck	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C44.510	Basal cell carcinoma of anal skin	ICD-10-CM	Diagnosis
C44.511	Basal cell carcinoma of skin of breast	ICD-10-CM	Diagnosis
C44.519	Basal cell carcinoma of skin of other part of trunk	ICD-10-CM	Diagnosis
C44.611	Basal cell carcinoma of skin of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.612	Basal cell carcinoma of skin of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.619	Basal cell carcinoma of skin of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.711	Basal cell carcinoma of skin of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C44.712	Basal cell carcinoma of skin of right lower limb, including hip	ICD-10-CM	Diagnosis
C44.719	Basal cell carcinoma of skin of left lower limb, including hip	ICD-10-CM	Diagnosis
C44.81	Basal cell carcinoma of overlapping sites of skin	ICD-10-CM	Diagnosis
C44.91	Basal cell carcinoma of skin, unspecified	ICD-10-CM	Diagnosis
173	Other and unspecified malignant neoplasm of skin	ICD-09-CM	Diagnosis
173.0	Other and unspecified malignant neoplasm of skin of lip	ICD-09-CM	Diagnosis
173.00	Unspecified malignant neoplasm of skin of lip	ICD-09-CM	Diagnosis
173.01	Basal cell carcinoma of skin of lip	ICD-09-CM	Diagnosis
173.02	Squamous cell carcinoma of skin of lip	ICD-09-CM	Diagnosis
173.09	Other specified malignant neoplasm of skin of lip	ICD-09-CM	Diagnosis
173.1	Other and unspecified malignant neoplasm of eyelid, including canthus	ICD-09-CM	Diagnosis
173.10	Unspecified malignant neoplasm of eyelid, including canthus	ICD-09-CM	Diagnosis
173.19	Other specified malignant neoplasm of eyelid, including canthus	ICD-09-CM	Diagnosis
173.2	Other and unspecified malignant neoplasm of skin of ear and external auditory canal	ICD-09-CM	Diagnosis
173.20	Unspecified malignant neoplasm of skin of ear and external auditory canal	ICD-09-CM	Diagnosis
173.29	Other specified malignant neoplasm of skin of ear and external auditory canal	ICD-09-CM	Diagnosis
173.3	Other and unspecified malignant neoplasm of skin of other and unspecified parts of face	ICD-09-CM	Diagnosis
173.30	Unspecified malignant neoplasm of skin of other and unspecified parts of face	ICD-09-CM	Diagnosis
173.39	Other specified malignant neoplasm of skin of other and unspecified parts of face	ICD-09-CM	Diagnosis
173.4	Other and unspecified malignant neoplasm of scalp and skin of neck	ICD-09-CM	Diagnosis
173.40	Unspecified malignant neoplasm of scalp and skin of neck	ICD-09-CM	Diagnosis
173.49	Other specified malignant neoplasm of scalp and skin of neck	ICD-09-CM	Diagnosis
173.5	Other and unspecified malignant neoplasm of skin of trunk, except scrotum	ICD-09-CM	Diagnosis
173.50	Unspecified malignant neoplasm of skin of trunk, except scrotum	ICD-09-CM	Diagnosis
173.59	Other specified malignant neoplasm of skin of trunk, except scrotum	ICD-09-CM	Diagnosis
173.6	Other and unspecified malignant neoplasm of skin of upper limb, including shoulder	ICD-09-CM	Diagnosis
173.60	Unspecified malignant neoplasm of skin of upper limb, including shoulder	ICD-09-CM	Diagnosis
173.69	Other specified malignant neoplasm of skin of upper limb, including shoulder	ICD-09-CM	Diagnosis
173.7	Other and unspecified malignant neoplasm of skin of lower limb, including hip	ICD-09-CM	Diagnosis
173.70	Unspecified malignant neoplasm of skin of lower limb, including hip	ICD-09-CM	Diagnosis
173.79	Other specified malignant neoplasm of skin of lower limb, including hip	ICD-09-CM	Diagnosis
173.8	Other and unspecified malignant neoplasm of other specified sites of skin	ICD-09-CM	Diagnosis
173.80	Unspecified malignant neoplasm of other specified sites of skin	ICD-09-CM	Diagnosis
173.89	Other specified malignant neoplasm of other specified sites of skin	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
173.9	Other and unspecified malignant neoplasm of skin, site unspecified	ICD-09-CM	Diagnosis
173.90	Unspecified malignant neoplasm of skin, site unspecified	ICD-09-CM	Diagnosis
173.99	Other specified malignant neoplasm of skin, site unspecified	ICD-09-CM	Diagnosis
209	Neuroendocrine tumors	ICD-09-CM	Diagnosis
209.0	Malignant carcinoid tumors of the small intestine	ICD-09-CM	Diagnosis
209.1	Malignant carcinoid tumors of the appendix, large intestine, and rectum	ICD-09-CM	Diagnosis
209.2	Malignant carcinoid tumors of other and unspecified sites	ICD-09-CM	Diagnosis
209.3	Malignant poorly differentiated neuroendocrine tumors	ICD-09-CM	Diagnosis
209.4	Benign carcinoid tumors of the small intestine	ICD-09-CM	Diagnosis
209.40	Benign carcinoid tumor of the small intestine, unspecified portion	ICD-09-CM	Diagnosis
209.41	Benign carcinoid tumor of the duodenum	ICD-09-CM	Diagnosis
209.42	Benign carcinoid tumor of the jejunum	ICD-09-CM	Diagnosis
209.43	Benign carcinoid tumor of the ileum	ICD-09-CM	Diagnosis
209.5	Benign carcinoid tumors of the appendix, large intestine, and rectum	ICD-09-CM	Diagnosis
209.50	Benign carcinoid tumor of the large intestine, unspecified portion	ICD-09-CM	Diagnosis
209.51	Benign carcinoid tumor of the appendix	ICD-09-CM	Diagnosis
209.52	Benign carcinoid tumor of the cecum	ICD-09-CM	Diagnosis
209.53	Benign carcinoid tumor of the ascending colon	ICD-09-CM	Diagnosis
209.54	Benign carcinoid tumor of the transverse colon	ICD-09-CM	Diagnosis
209.55	Benign carcinoid tumor of the descending colon	ICD-09-CM	Diagnosis
209.56	Benign carcinoid tumor of the sigmoid colon	ICD-09-CM	Diagnosis
209.57	Benign carcinoid tumor of the rectum	ICD-09-CM	Diagnosis
209.6	Benign carcinoid tumors of other and unspecified sites	ICD-09-CM	Diagnosis
209.60	Benign carcinoid tumor of unknown primary site	ICD-09-CM	Diagnosis
209.61	Benign carcinoid tumor of the bronchus and lung	ICD-09-CM	Diagnosis
209.62	Benign carcinoid tumor of the thymus	ICD-09-CM	Diagnosis
209.63	Benign carcinoid tumor of the stomach	ICD-09-CM	Diagnosis
209.64	Benign carcinoid tumor of the kidney	ICD-09-CM	Diagnosis
209.65	Benign carcinoid tumor of foregut, not otherwise specified	ICD-09-CM	Diagnosis
209.66	Benign carcinoid tumor of midgut, not otherwise specified	ICD-09-CM	Diagnosis
209.67	Benign carcinoid tumor of hindgut, not otherwise specified	ICD-09-CM	Diagnosis
209.69	Benign carcinoid tumor of other sites	ICD-09-CM	Diagnosis
209.7	Secondary neuroendocrine tumors	ICD-09-CM	Diagnosis
230	Carcinoma in situ of digestive organs	ICD-09-CM	Diagnosis
230.0	Carcinoma in situ of lip, oral cavity, and pharynx	ICD-09-CM	Diagnosis
230.1	Carcinoma in situ of esophagus	ICD-09-CM	Diagnosis
230.2	Carcinoma in situ of stomach	ICD-09-CM	Diagnosis
230.3	Carcinoma in situ of colon	ICD-09-CM	Diagnosis
230.4	Carcinoma in situ of rectum	ICD-09-CM	Diagnosis
230.5	Carcinoma in situ of anal canal	ICD-09-CM	Diagnosis
230.6	Carcinoma in situ of anus, unspecified	ICD-09-CM	Diagnosis
230.7	Carcinoma in situ of other and unspecified parts of intestine	ICD-09-CM	Diagnosis
230.8	Carcinoma in situ of liver and biliary system	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
230.9	Carcinoma in situ of other and unspecified digestive organs	ICD-09-CM	Diagnosis
231	Carcinoma in situ of respiratory system	ICD-09-CM	Diagnosis
231.0	Carcinoma in situ of larynx	ICD-09-CM	Diagnosis
231.1	Carcinoma in situ of trachea	ICD-09-CM	Diagnosis
231.2	Carcinoma in situ of bronchus and lung	ICD-09-CM	Diagnosis
231.8	Carcinoma in situ of other specified parts of respiratory system	ICD-09-CM	Diagnosis
231.9	Carcinoma in situ of respiratory system, part unspecified	ICD-09-CM	Diagnosis
232	Carcinoma in situ of skin	ICD-09-CM	Diagnosis
232.0	Carcinoma in situ of skin of lip	ICD-09-CM	Diagnosis
232.1	Carcinoma in situ of eyelid, including canthus	ICD-09-CM	Diagnosis
232.2	Carcinoma in situ of skin of ear and external auditory canal	ICD-09-CM	Diagnosis
232.3	Carcinoma in situ of skin of other and unspecified parts of face	ICD-09-CM	Diagnosis
232.4	Carcinoma in situ of scalp and skin of neck	ICD-09-CM	Diagnosis
232.5	Carcinoma in situ of skin of trunk, except scrotum	ICD-09-CM	Diagnosis
232.6	Carcinoma in situ of skin of upper limb, including shoulder	ICD-09-CM	Diagnosis
232.7	Carcinoma in situ of skin of lower limb, including hip	ICD-09-CM	Diagnosis
232.8	Carcinoma in situ of other specified sites of skin	ICD-09-CM	Diagnosis
232.9	Carcinoma in situ of skin, site unspecified	ICD-09-CM	Diagnosis
233	Carcinoma in situ of breast and genitourinary system	ICD-09-CM	Diagnosis
233.0	Carcinoma in situ of breast	ICD-09-CM	Diagnosis
233.1	Carcinoma in situ of cervix uteri	ICD-09-CM	Diagnosis
233.2	Carcinoma in situ of other and unspecified parts of uterus	ICD-09-CM	Diagnosis
233.3	Carcinoma in situ, other and unspecified female genital organs	ICD-09-CM	Diagnosis
233.30	Carcinoma in situ, unspecified female genital organ	ICD-09-CM	Diagnosis
233.31	Carcinoma in situ, vagina	ICD-09-CM	Diagnosis
233.32	Carcinoma in situ, vulva	ICD-09-CM	Diagnosis
233.39	Carcinoma in situ, other female genital organ	ICD-09-CM	Diagnosis
233.4	Carcinoma in situ of prostate	ICD-09-CM	Diagnosis
233.5	Carcinoma in situ of penis	ICD-09-CM	Diagnosis
233.6	Carcinoma in situ of other and unspecified male genital organs	ICD-09-CM	Diagnosis
233.7	Carcinoma in situ of bladder	ICD-09-CM	Diagnosis
233.9	Carcinoma in situ of other and unspecified urinary organs	ICD-09-CM	Diagnosis
234	Carcinoma in situ of other and unspecified sites	ICD-09-CM	Diagnosis
234.0	Carcinoma in situ of eye	ICD-09-CM	Diagnosis
234.8	Carcinoma in situ of other specified sites	ICD-09-CM	Diagnosis
234.9	Carcinoma in situ, site unspecified	ICD-09-CM	Diagnosis
235	Neoplasm of uncertain behavior of digestive and respiratory systems	ICD-09-CM	Diagnosis
235.0	Neoplasm of uncertain behavior of major salivary glands	ICD-09-CM	Diagnosis
235.1	Neoplasm of uncertain behavior of lip, oral cavity, and pharynx	ICD-09-CM	Diagnosis
235.2	Neoplasm of uncertain behavior of stomach, intestines, and rectum	ICD-09-CM	Diagnosis
235.3	Neoplasm of uncertain behavior of liver and biliary passages	ICD-09-CM	Diagnosis
235.4	Neoplasm of uncertain behavior of retroperitoneum and peritoneum	ICD-09-CM	Diagnosis
235.5	Neoplasm of uncertain behavior of other and unspecified digestive organs	ICD-09-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
235.6	Neoplasm of uncertain behavior of larynx	ICD-09-CM	Diagnosis
235.7	Neoplasm of uncertain behavior of trachea, bronchus, and lung	ICD-09-CM	Diagnosis
235.8	Neoplasm of uncertain behavior of pleura, thymus, and mediastinum	ICD-09-CM	Diagnosis
235.9	Neoplasm of uncertain behavior of other and unspecified respiratory organs	ICD-09-CM	Diagnosis
236	Neoplasm of uncertain behavior of genitourinary organs	ICD-09-CM	Diagnosis
236.0	Neoplasm of uncertain behavior of uterus	ICD-09-CM	Diagnosis
236.1	Neoplasm of uncertain behavior of placenta	ICD-09-CM	Diagnosis
236.2	Neoplasm of uncertain behavior of ovary	ICD-09-CM	Diagnosis
236.3	Neoplasm of uncertain behavior of other and unspecified female genital organs	ICD-09-CM	Diagnosis
236.4	Neoplasm of uncertain behavior of testis	ICD-09-CM	Diagnosis
236.5	Neoplasm of uncertain behavior of prostate	ICD-09-CM	Diagnosis
236.6	Neoplasm of uncertain behavior of other and unspecified male genital organs	ICD-09-CM	Diagnosis
236.7	Neoplasm of uncertain behavior of bladder	ICD-09-CM	Diagnosis
236.9	Neoplasm of uncertain behavior of other and unspecified urinary organs	ICD-09-CM	Diagnosis
236.90	Neoplasm of uncertain behavior of urinary organ, unspecified	ICD-09-CM	Diagnosis
236.91	Neoplasm of uncertain behavior of kidney and ureter	ICD-09-CM	Diagnosis
236.99	Neoplasm of uncertain behavior of other and unspecified urinary organs	ICD-09-CM	Diagnosis
237	Neoplasm of uncertain behavior of endocrine glands and nervous system	ICD-09-CM	Diagnosis
237.0	Neoplasm of uncertain behavior of pituitary gland and craniopharyngeal duct	ICD-09-CM	Diagnosis
237.1	Neoplasm of uncertain behavior of pineal gland	ICD-09-CM	Diagnosis
237.2	Neoplasm of uncertain behavior of adrenal gland	ICD-09-CM	Diagnosis
237.3	Neoplasm of uncertain behavior of paraganglia	ICD-09-CM	Diagnosis
237.4	Neoplasm of uncertain behavior of other and unspecified endocrine glands	ICD-09-CM	Diagnosis
237.5	Neoplasm of uncertain behavior of brain and spinal cord	ICD-09-CM	Diagnosis
237.6	Neoplasm of uncertain behavior of meninges	ICD-09-CM	Diagnosis
237.7	Neurofibromatosis	ICD-09-CM	Diagnosis
237.70	Neurofibromatosis, unspecified	ICD-09-CM	Diagnosis
237.71	Neurofibromatosis, Type 1 (von Recklinghausen's disease)	ICD-09-CM	Diagnosis
237.72	Neurofibromatosis, Type 2 (acoustic neurofibromatosis)	ICD-09-CM	Diagnosis
237.73	Schwannomatosis	ICD-09-CM	Diagnosis
237.79	Other neurofibromatosis	ICD-09-CM	Diagnosis
237.9	Neoplasm of uncertain behavior of other and unspecified parts of nervous system	ICD-09-CM	Diagnosis
238	Neoplasm of uncertain behavior of other and unspecified sites and tissues	ICD-09-CM	Diagnosis
238.0	Neoplasm of uncertain behavior of bone and articular cartilage	ICD-09-CM	Diagnosis
238.1	Neoplasm of uncertain behavior of connective and other soft tissue	ICD-09-CM	Diagnosis
238.2	Neoplasm of uncertain behavior of skin	ICD-09-CM	Diagnosis
238.3	Neoplasm of uncertain behavior of breast	ICD-09-CM	Diagnosis
238.4	Neoplasm of uncertain behavior of polycythemia vera	ICD-09-CM	Diagnosis
238.5	Neoplasm of uncertain behavior of histiocytic and mast cells	ICD-09-CM	Diagnosis
238.6	Neoplasm of uncertain behavior of plasma cells	ICD-09-CM	Diagnosis
238.7	Other lymphatic and hematopoietic tissues	ICD-09-CM	Diagnosis
238.71	Essential thrombocythemia	ICD-09-CM	Diagnosis
238.72	Low grade myelodysplastic syndrome lesions	ICD-09-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
238.73	High grade myelodysplastic syndrome lesions	ICD-09-CM	Diagnosis
238.74	Myelodysplastic syndrome with 5q deletion	ICD-09-CM	Diagnosis
238.75	Myelodysplastic syndrome, unspecified	ICD-09-CM	Diagnosis
238.76	Myelofibrosis with myeloid metaplasia	ICD-09-CM	Diagnosis
238.77	Post-transplant lymphoproliferative disorder [PTLD]	ICD-09-CM	Diagnosis
238.8	Neoplasm of uncertain behavior of other specified sites	ICD-09-CM	Diagnosis
238.9	Neoplasm of uncertain behavior, site unspecified	ICD-09-CM	Diagnosis
239	Neoplasms of unspecified nature	ICD-09-CM	Diagnosis
239.0	Neoplasm of unspecified nature of digestive system	ICD-09-CM	Diagnosis
239.1	Neoplasm of unspecified nature of respiratory system	ICD-09-CM	Diagnosis
239.2	Neoplasms of unspecified nature of bone, soft tissue, and skin	ICD-09-CM	Diagnosis
239.3	Neoplasm of unspecified nature of breast	ICD-09-CM	Diagnosis
239.4	Neoplasm of unspecified nature of bladder	ICD-09-CM	Diagnosis
239.5	Neoplasm of unspecified nature of other genitourinary organs	ICD-09-CM	Diagnosis
239.6	Neoplasm of unspecified nature of brain	ICD-09-CM	Diagnosis
239.7	Neoplasm of unspecified nature of endocrine glands and other parts of nervous system	ICD-09-CM	Diagnosis
239.8	Neoplasm of unspecified nature of other specified sites	ICD-09-CM	Diagnosis
239.81	Neoplasms of unspecified nature, retina and choroid	ICD-09-CM	Diagnosis
239.89	Neoplasms of unspecified nature, other specified sites	ICD-09-CM	Diagnosis
239.9	Neoplasm of unspecified nature, site unspecified	ICD-09-CM	Diagnosis
C44.00	Unspecified malignant neoplasm of skin of lip	ICD-10-CM	Diagnosis
C44.01	Basal cell carcinoma of skin of lip	ICD-10-CM	Diagnosis
C44.02	Squamous cell carcinoma of skin of lip	ICD-10-CM	Diagnosis
C44.09	Other specified malignant neoplasm of skin of lip	ICD-10-CM	Diagnosis
C44.101	Unspecified malignant neoplasm of skin of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
C44.102	Unspecified malignant neoplasm of skin of right eyelid, including canthus	ICD-10-CM	Diagnosis
C44.109	Unspecified malignant neoplasm of skin of left eyelid, including canthus	ICD-10-CM	Diagnosis
C44.191	Other specified malignant neoplasm of skin of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
C44.192	Other specified malignant neoplasm of skin of right eyelid, including canthus	ICD-10-CM	Diagnosis
C44.199	Other specified malignant neoplasm of skin of left eyelid, including canthus	ICD-10-CM	Diagnosis
C44.201	Unspecified malignant neoplasm of skin of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
C44.202	Unspecified malignant neoplasm of skin of right ear and external auricular canal	ICD-10-CM	Diagnosis
C44.209	Unspecified malignant neoplasm of skin of left ear and external auricular canal	ICD-10-CM	Diagnosis
C44.291	Other specified malignant neoplasm of skin of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
C44.292	Other specified malignant neoplasm of skin of right ear and external auricular canal	ICD-10-CM	Diagnosis
C44.299	Other specified malignant neoplasm of skin of left ear and external auricular canal	ICD-10-CM	Diagnosis
C44.300	Unspecified malignant neoplasm of skin of unspecified part of face	ICD-10-CM	Diagnosis
C44.301	Unspecified malignant neoplasm of skin of nose	ICD-10-CM	Diagnosis
C44.309	Unspecified malignant neoplasm of skin of other parts of face	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
C44.390	Other specified malignant neoplasm of skin of unspecified parts of face	ICD-10-CM	Diagnosis
C44.391	Other specified malignant neoplasm of skin of nose	ICD-10-CM	Diagnosis
C44.399	Other specified malignant neoplasm of skin of other parts of face	ICD-10-CM	Diagnosis
C44.40	Unspecified malignant neoplasm of skin of scalp and neck	ICD-10-CM	Diagnosis
C44.49	Other specified malignant neoplasm of skin of scalp and neck	ICD-10-CM	Diagnosis
C44.500	Unspecified malignant neoplasm of anal skin	ICD-10-CM	Diagnosis
C44.501	Unspecified malignant neoplasm of skin of breast	ICD-10-CM	Diagnosis
C44.509	Unspecified malignant neoplasm of skin of other part of trunk	ICD-10-CM	Diagnosis
C44.590	Other specified malignant neoplasm of anal skin	ICD-10-CM	Diagnosis
C44.591	Other specified malignant neoplasm of skin of breast	ICD-10-CM	Diagnosis
C44.599	Other specified malignant neoplasm of skin of other part of trunk	ICD-10-CM	Diagnosis
C44.601	Unspecified malignant neoplasm of skin of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.602	Unspecified malignant neoplasm of skin of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.609	Unspecified malignant neoplasm of skin of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.691	Other specified malignant neoplasm of skin of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.692	Other specified malignant neoplasm of skin of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.699	Other specified malignant neoplasm of skin of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.701	Unspecified malignant neoplasm of skin of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C44.702	Unspecified malignant neoplasm of skin of right lower limb, including hip	ICD-10-CM	Diagnosis
C44.709	Unspecified malignant neoplasm of skin of left lower limb, including hip	ICD-10-CM	Diagnosis
C44.791	Other specified malignant neoplasm of skin of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C44.792	Other specified malignant neoplasm of skin of right lower limb, including hip	ICD-10-CM	Diagnosis
C44.799	Other specified malignant neoplasm of skin of left lower limb, including hip	ICD-10-CM	Diagnosis
C44.80	Unspecified malignant neoplasm of overlapping sites of skin	ICD-10-CM	Diagnosis
C44.89	Other specified malignant neoplasm of overlapping sites of skin	ICD-10-CM	Diagnosis
C44.90	Unspecified malignant neoplasm of skin, unspecified	ICD-10-CM	Diagnosis
C44.99	Other specified malignant neoplasm of skin, unspecified	ICD-10-CM	Diagnosis
D00.00	Carcinoma in situ of oral cavity, unspecified site	ICD-10-CM	Diagnosis
D00.01	Carcinoma in situ of labial mucosa and vermilion border	ICD-10-CM	Diagnosis
D00.02	Carcinoma in situ of buccal mucosa	ICD-10-CM	Diagnosis
D00.03	Carcinoma in situ of gingiva and edentulous alveolar ridge	ICD-10-CM	Diagnosis
D00.04	Carcinoma in situ of soft palate	ICD-10-CM	Diagnosis
D00.05	Carcinoma in situ of hard palate	ICD-10-CM	Diagnosis
D00.06	Carcinoma in situ of floor of mouth	ICD-10-CM	Diagnosis
D00.07	Carcinoma in situ of tongue	ICD-10-CM	Diagnosis
D00.08	Carcinoma in situ of pharynx	ICD-10-CM	Diagnosis
D00.1	Carcinoma in situ of esophagus	ICD-10-CM	Diagnosis
D00.2	Carcinoma in situ of stomach	ICD-10-CM	Diagnosis
D01.0	Carcinoma in situ of colon	ICD-10-CM	Diagnosis
D01.1	Carcinoma in situ of rectosigmoid junction	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
D01.2	Carcinoma in situ of rectum	ICD-10-CM	Diagnosis
D01.3	Carcinoma in situ of anus and anal canal	ICD-10-CM	Diagnosis
D01.40	Carcinoma in situ of unspecified part of intestine	ICD-10-CM	Diagnosis
D01.49	Carcinoma in situ of other parts of intestine	ICD-10-CM	Diagnosis
D01.5	Carcinoma in situ of liver, gallbladder and bile ducts	ICD-10-CM	Diagnosis
D01.7	Carcinoma in situ of other specified digestive organs	ICD-10-CM	Diagnosis
D01.9	Carcinoma in situ of digestive organ, unspecified	ICD-10-CM	Diagnosis
D02.0	Carcinoma in situ of larynx	ICD-10-CM	Diagnosis
D02.1	Carcinoma in situ of trachea	ICD-10-CM	Diagnosis
D02.20	Carcinoma in situ of unspecified bronchus and lung	ICD-10-CM	Diagnosis
D02.21	Carcinoma in situ of right bronchus and lung	ICD-10-CM	Diagnosis
D02.22	Carcinoma in situ of left bronchus and lung	ICD-10-CM	Diagnosis
D02.3	Carcinoma in situ of other parts of respiratory system	ICD-10-CM	Diagnosis
D02.4	Carcinoma in situ of respiratory system, unspecified	ICD-10-CM	Diagnosis
D04.0	Carcinoma in situ of skin of lip	ICD-10-CM	Diagnosis
D04.10	Carcinoma in situ of skin of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
D04.11	Carcinoma in situ of skin of right eyelid, including canthus	ICD-10-CM	Diagnosis
D04.12	Carcinoma in situ of skin of left eyelid, including canthus	ICD-10-CM	Diagnosis
D04.20	Carcinoma in situ of skin of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
D04.21	Carcinoma in situ of skin of right ear and external auricular canal	ICD-10-CM	Diagnosis
D04.22	Carcinoma in situ of skin of left ear and external auricular canal	ICD-10-CM	Diagnosis
D04.30	Carcinoma in situ of skin of unspecified part of face	ICD-10-CM	Diagnosis
D04.39	Carcinoma in situ of skin of other parts of face	ICD-10-CM	Diagnosis
D04.4	Carcinoma in situ of skin of scalp and neck	ICD-10-CM	Diagnosis
D04.5	Carcinoma in situ of skin of trunk	ICD-10-CM	Diagnosis
D04.60	Carcinoma in situ of skin of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
D04.61	Carcinoma in situ of skin of right upper limb, including shoulder	ICD-10-CM	Diagnosis
D04.62	Carcinoma in situ of skin of left upper limb, including shoulder	ICD-10-CM	Diagnosis
D04.70	Carcinoma in situ of skin of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
D04.71	Carcinoma in situ of skin of right lower limb, including hip	ICD-10-CM	Diagnosis
D04.72	Carcinoma in situ of skin of left lower limb, including hip	ICD-10-CM	Diagnosis
D04.8	Carcinoma in situ of skin of other sites	ICD-10-CM	Diagnosis
D04.9	Carcinoma in situ of skin, unspecified	ICD-10-CM	Diagnosis
D05.00	Lobular carcinoma in situ of unspecified breast	ICD-10-CM	Diagnosis
D05.01	Lobular carcinoma in situ of right breast	ICD-10-CM	Diagnosis
D05.02	Lobular carcinoma in situ of left breast	ICD-10-CM	Diagnosis
D05.10	Intraductal carcinoma in situ of unspecified breast	ICD-10-CM	Diagnosis
D05.11	Intraductal carcinoma in situ of right breast	ICD-10-CM	Diagnosis
D05.12	Intraductal carcinoma in situ of left breast	ICD-10-CM	Diagnosis
D05.80	Other specified type of carcinoma in situ of unspecified breast	ICD-10-CM	Diagnosis
D05.81	Other specified type of carcinoma in situ of right breast	ICD-10-CM	Diagnosis
D05.82	Other specified type of carcinoma in situ of left breast	ICD-10-CM	Diagnosis
D05.90	Unspecified type of carcinoma in situ of unspecified breast	ICD-10-CM	Diagnosis



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
D05.91	Unspecified type of carcinoma in situ of right breast	ICD-10-CM	Diagnosis
D05.92	Unspecified type of carcinoma in situ of left breast	ICD-10-CM	Diagnosis
D06.0	Carcinoma in situ of endocervix	ICD-10-CM	Diagnosis
D06.1	Carcinoma in situ of exocervix	ICD-10-CM	Diagnosis
D06.7	Carcinoma in situ of other parts of cervix	ICD-10-CM	Diagnosis
D06.9	Carcinoma in situ of cervix, unspecified	ICD-10-CM	Diagnosis
D07.0	Carcinoma in situ of endometrium	ICD-10-CM	Diagnosis
D07.1	Carcinoma in situ of vulva	ICD-10-CM	Diagnosis
D07.2	Carcinoma in situ of vagina	ICD-10-CM	Diagnosis
D07.30	Carcinoma in situ of unspecified female genital organs	ICD-10-CM	Diagnosis
D07.39	Carcinoma in situ of other female genital organs	ICD-10-CM	Diagnosis
D07.4	Carcinoma in situ of penis	ICD-10-CM	Diagnosis
D07.5	Carcinoma in situ of prostate	ICD-10-CM	Diagnosis
D07.60	Carcinoma in situ of unspecified male genital organs	ICD-10-CM	Diagnosis
D07.61	Carcinoma in situ of scrotum	ICD-10-CM	Diagnosis
D07.69	Carcinoma in situ of other male genital organs	ICD-10-CM	Diagnosis
D09.0	Carcinoma in situ of bladder	ICD-10-CM	Diagnosis
D09.10	Carcinoma in situ of unspecified urinary organ	ICD-10-CM	Diagnosis
D09.19	Carcinoma in situ of other urinary organs	ICD-10-CM	Diagnosis
D09.20	Carcinoma in situ of unspecified eye	ICD-10-CM	Diagnosis
D09.21	Carcinoma in situ of right eye	ICD-10-CM	Diagnosis
D09.22	Carcinoma in situ of left eye	ICD-10-CM	Diagnosis
D09.3	Carcinoma in situ of thyroid and other endocrine glands	ICD-10-CM	Diagnosis
D09.8	Carcinoma in situ of other specified sites	ICD-10-CM	Diagnosis
D09.9	Carcinoma in situ, unspecified	ICD-10-CM	Diagnosis
D25.0	Submucous leiomyoma of uterus	ICD-10-CM	Diagnosis
D25.1	Intramural leiomyoma of uterus	ICD-10-CM	Diagnosis
D25.2	Subserosal leiomyoma of uterus	ICD-10-CM	Diagnosis
D25.9	Leiomyoma of uterus, unspecified	ICD-10-CM	Diagnosis
D37.01	Neoplasm of uncertain behavior of lip	ICD-10-CM	Diagnosis
D37.02	Neoplasm of uncertain behavior of tongue	ICD-10-CM	Diagnosis
D37.030	Neoplasm of uncertain behavior of the parotid salivary glands	ICD-10-CM	Diagnosis
D37.031	Neoplasm of uncertain behavior of the sublingual salivary glands	ICD-10-CM	Diagnosis
D37.032	Neoplasm of uncertain behavior of the submandibular salivary glands	ICD-10-CM	Diagnosis
D37.039	Neoplasm of uncertain behavior of the major salivary glands, unspecified	ICD-10-CM	Diagnosis
D37.04	Neoplasm of uncertain behavior of the minor salivary glands	ICD-10-CM	Diagnosis
D37.05	Neoplasm of uncertain behavior of pharynx	ICD-10-CM	Diagnosis
D37.09	Neoplasm of uncertain behavior of other specified sites of the oral cavity	ICD-10-CM	Diagnosis
D37.1	Neoplasm of uncertain behavior of stomach	ICD-10-CM	Diagnosis
D37.2	Neoplasm of uncertain behavior of small intestine	ICD-10-CM	Diagnosis
D37.3	Neoplasm of uncertain behavior of appendix	ICD-10-CM	Diagnosis
D37.4	Neoplasm of uncertain behavior of colon	ICD-10-CM	Diagnosis
D37.5	Neoplasm of uncertain behavior of rectum	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
D37.6	Neoplasm of uncertain behavior of liver, gallbladder and bile ducts	ICD-10-CM	Diagnosis
D37.8	Neoplasm of uncertain behavior of other specified digestive organs	ICD-10-CM	Diagnosis
D37.9	Neoplasm of uncertain behavior of digestive organ, unspecified	ICD-10-CM	Diagnosis
D38.0	Neoplasm of uncertain behavior of larynx	ICD-10-CM	Diagnosis
D38.1	Neoplasm of uncertain behavior of trachea, bronchus and lung	ICD-10-CM	Diagnosis
D38.2	Neoplasm of uncertain behavior of pleura	ICD-10-CM	Diagnosis
D38.3	Neoplasm of uncertain behavior of mediastinum	ICD-10-CM	Diagnosis
D38.4	Neoplasm of uncertain behavior of thymus	ICD-10-CM	Diagnosis
D38.5	Neoplasm of uncertain behavior of other respiratory organs	ICD-10-CM	Diagnosis
D38.6	Neoplasm of uncertain behavior of respiratory organ, unspecified	ICD-10-CM	Diagnosis
D39.0	Neoplasm of uncertain behavior of uterus	ICD-10-CM	Diagnosis
D39.10	Neoplasm of uncertain behavior of unspecified ovary	ICD-10-CM	Diagnosis
D39.11	Neoplasm of uncertain behavior of right ovary	ICD-10-CM	Diagnosis
D39.12	Neoplasm of uncertain behavior of left ovary	ICD-10-CM	Diagnosis
D39.2	Neoplasm of uncertain behavior of placenta	ICD-10-CM	Diagnosis
D39.8	Neoplasm of uncertain behavior of other specified female genital organs	ICD-10-CM	Diagnosis
D39.9	Neoplasm of uncertain behavior of female genital organ, unspecified	ICD-10-CM	Diagnosis
D3A.00	Benign carcinoid tumor of unspecified site	ICD-10-CM	Diagnosis
D3A.010	Benign carcinoid tumor of the duodenum	ICD-10-CM	Diagnosis
D3A.011	Benign carcinoid tumor of the jejunum	ICD-10-CM	Diagnosis
D3A.012	Benign carcinoid tumor of the ileum	ICD-10-CM	Diagnosis
D3A.019	Benign carcinoid tumor of the small intestine, unspecified portion	ICD-10-CM	Diagnosis
D3A.020	Benign carcinoid tumor of the appendix	ICD-10-CM	Diagnosis
D3A.021	Benign carcinoid tumor of the cecum	ICD-10-CM	Diagnosis
D3A.022	Benign carcinoid tumor of the ascending colon	ICD-10-CM	Diagnosis
D3A.023	Benign carcinoid tumor of the transverse colon	ICD-10-CM	Diagnosis
D3A.024	Benign carcinoid tumor of the descending colon	ICD-10-CM	Diagnosis
D3A.025	Benign carcinoid tumor of the sigmoid colon	ICD-10-CM	Diagnosis
D3A.026	Benign carcinoid tumor of the rectum	ICD-10-CM	Diagnosis
D3A.029	Benign carcinoid tumor of the large intestine, unspecified portion	ICD-10-CM	Diagnosis
D3A.090	Benign carcinoid tumor of the bronchus and lung	ICD-10-CM	Diagnosis
D3A.091	Benign carcinoid tumor of the thymus	ICD-10-CM	Diagnosis
D3A.092	Benign carcinoid tumor of the stomach	ICD-10-CM	Diagnosis
D3A.093	Benign carcinoid tumor of the kidney	ICD-10-CM	Diagnosis
D3A.094	Benign carcinoid tumor of the foregut, unspecified	ICD-10-CM	Diagnosis
D3A.095	Benign carcinoid tumor of the midgut, unspecified	ICD-10-CM	Diagnosis
D3A.096	Benign carcinoid tumor of the hindgut, unspecified	ICD-10-CM	Diagnosis
D3A.098	Benign carcinoid tumors of other sites	ICD-10-CM	Diagnosis
D3A.8	Other benign neuroendocrine tumors	ICD-10-CM	Diagnosis
D40.0	Neoplasm of uncertain behavior of prostate	ICD-10-CM	Diagnosis
D40.10	Neoplasm of uncertain behavior of unspecified testis	ICD-10-CM	Diagnosis
D40.11	Neoplasm of uncertain behavior of right testis	ICD-10-CM	Diagnosis
D40.12	Neoplasm of uncertain behavior of left testis	ICD-10-CM	Diagnosis

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
D40.8	Neoplasm of uncertain behavior of other specified male genital organs	ICD-10-CM	Diagnosis
D40.9	Neoplasm of uncertain behavior of male genital organ, unspecified	ICD-10-CM	Diagnosis
D41.00	Neoplasm of uncertain behavior of unspecified kidney	ICD-10-CM	Diagnosis
D41.01	Neoplasm of uncertain behavior of right kidney	ICD-10-CM	Diagnosis
D41.02	Neoplasm of uncertain behavior of left kidney	ICD-10-CM	Diagnosis
D41.10	Neoplasm of uncertain behavior of unspecified renal pelvis	ICD-10-CM	Diagnosis
D41.11	Neoplasm of uncertain behavior of right renal pelvis	ICD-10-CM	Diagnosis
D41.12	Neoplasm of uncertain behavior of left renal pelvis	ICD-10-CM	Diagnosis
D41.20	Neoplasm of uncertain behavior of unspecified ureter	ICD-10-CM	Diagnosis
D41.21	Neoplasm of uncertain behavior of right ureter	ICD-10-CM	Diagnosis
D41.22	Neoplasm of uncertain behavior of left ureter	ICD-10-CM	Diagnosis
D41.3	Neoplasm of uncertain behavior of urethra	ICD-10-CM	Diagnosis
D41.4	Neoplasm of uncertain behavior of bladder	ICD-10-CM	Diagnosis
D41.8	Neoplasm of uncertain behavior of other specified urinary organs	ICD-10-CM	Diagnosis
D41.9	Neoplasm of uncertain behavior of unspecified urinary organ	ICD-10-CM	Diagnosis
D42.0	Neoplasm of uncertain behavior of cerebral meninges	ICD-10-CM	Diagnosis
D42.1	Neoplasm of uncertain behavior of spinal meninges	ICD-10-CM	Diagnosis
D42.9	Neoplasm of uncertain behavior of meninges, unspecified	ICD-10-CM	Diagnosis
D43.0	Neoplasm of uncertain behavior of brain, supratentorial	ICD-10-CM	Diagnosis
D43.1	Neoplasm of uncertain behavior of brain, infratentorial	ICD-10-CM	Diagnosis
D43.2	Neoplasm of uncertain behavior of brain, unspecified	ICD-10-CM	Diagnosis
D43.3	Neoplasm of uncertain behavior of cranial nerves	ICD-10-CM	Diagnosis
D43.4	Neoplasm of uncertain behavior of spinal cord	ICD-10-CM	Diagnosis
D43.8	Neoplasm of uncertain behavior of other specified parts of central nervous system	ICD-10-CM	Diagnosis
D43.9	Neoplasm of uncertain behavior of central nervous system, unspecified	ICD-10-CM	Diagnosis
D44.0	Neoplasm of uncertain behavior of thyroid gland	ICD-10-CM	Diagnosis
D44.10	Neoplasm of uncertain behavior of unspecified adrenal gland	ICD-10-CM	Diagnosis
D44.11	Neoplasm of uncertain behavior of right adrenal gland	ICD-10-CM	Diagnosis
D44.12	Neoplasm of uncertain behavior of left adrenal gland	ICD-10-CM	Diagnosis
D44.2	Neoplasm of uncertain behavior of parathyroid gland	ICD-10-CM	Diagnosis
D44.3	Neoplasm of uncertain behavior of pituitary gland	ICD-10-CM	Diagnosis
D44.4	Neoplasm of uncertain behavior of craniopharyngeal duct	ICD-10-CM	Diagnosis
D44.5	Neoplasm of uncertain behavior of pineal gland	ICD-10-CM	Diagnosis
D44.6	Neoplasm of uncertain behavior of carotid body	ICD-10-CM	Diagnosis
D44.7	Neoplasm of uncertain behavior of aortic body and other paraganglia	ICD-10-CM	Diagnosis
D44.9	Neoplasm of uncertain behavior of unspecified endocrine gland	ICD-10-CM	Diagnosis
D46.0	Refractory anemia without ring sideroblasts, so stated	ICD-10-CM	Diagnosis
D46.1	Refractory anemia with ring sideroblasts	ICD-10-CM	Diagnosis
D46.20	Refractory anemia with excess of blasts, unspecified	ICD-10-CM	Diagnosis
D46.21	Refractory anemia with excess of blasts 1	ICD-10-CM	Diagnosis
D46.22	Refractory anemia with excess of blasts 2	ICD-10-CM	Diagnosis
D46.4	Refractory anemia, unspecified	ICD-10-CM	Diagnosis
D46.9	Myelodysplastic syndrome, unspecified	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
D46.A	Refractory cytopenia with multilineage dysplasia	ICD-10-CM	Diagnosis
D46.B	Refractory cytopenia with multilineage dysplasia and ring sideroblasts	ICD-10-CM	Diagnosis
D46.C	Myelodysplastic syndrome with isolated del(5q) chromosomal abnormality	ICD-10-CM	Diagnosis
D46.Z	Other myelodysplastic syndromes	ICD-10-CM	Diagnosis
D47.01	Cutaneous mastocytosis	ICD-10-CM	Diagnosis
D47.02	Systemic mastocytosis	ICD-10-CM	Diagnosis
D47.09	Other mast cell neoplasms of uncertain behavior	ICD-10-CM	Diagnosis
D47.1	Chronic myeloproliferative disease	ICD-10-CM	Diagnosis
D47.3	Essential (hemorrhagic) thrombocythemia	ICD-10-CM	Diagnosis
D47.9	Neoplasm of uncertain behavior of lymphoid, hematopoietic and related tissue, unspecified	ICD-10-CM	Diagnosis
D47.Z1	Post-transplant lymphoproliferative disorder (PTLD)	ICD-10-CM	Diagnosis
D47.Z2	Castleman disease	ICD-10-CM	Diagnosis
D47.Z9	Other specified neoplasms of uncertain behavior of lymphoid, hematopoietic and related tissue	ICD-10-CM	Diagnosis
D48.0	Neoplasm of uncertain behavior of bone and articular cartilage	ICD-10-CM	Diagnosis
D48.1	Neoplasm of uncertain behavior of connective and other soft tissue	ICD-10-CM	Diagnosis
D48.2	Neoplasm of uncertain behavior of peripheral nerves and autonomic nervous system	ICD-10-CM	Diagnosis
D48.3	Neoplasm of uncertain behavior of retroperitoneum	ICD-10-CM	Diagnosis
D48.4	Neoplasm of uncertain behavior of peritoneum	ICD-10-CM	Diagnosis
D48.5	Neoplasm of uncertain behavior of skin	ICD-10-CM	Diagnosis
D48.60	Neoplasm of uncertain behavior of unspecified breast	ICD-10-CM	Diagnosis
D48.61	Neoplasm of uncertain behavior of right breast	ICD-10-CM	Diagnosis
D48.62	Neoplasm of uncertain behavior of left breast	ICD-10-CM	Diagnosis
D48.7	Neoplasm of uncertain behavior of other specified sites	ICD-10-CM	Diagnosis
D48.9	Neoplasm of uncertain behavior, unspecified	ICD-10-CM	Diagnosis
D49.0	Neoplasm of unspecified behavior of digestive system	ICD-10-CM	Diagnosis
D49.1	Neoplasm of unspecified behavior of respiratory system	ICD-10-CM	Diagnosis
D49.2	Neoplasm of unspecified behavior of bone, soft tissue, and skin	ICD-10-CM	Diagnosis
D49.3	Neoplasm of unspecified behavior of breast	ICD-10-CM	Diagnosis
D49.4	Neoplasm of unspecified behavior of bladder	ICD-10-CM	Diagnosis
D49.511	Neoplasm of unspecified behavior of right kidney	ICD-10-CM	Diagnosis
D49.512	Neoplasm of unspecified behavior of left kidney	ICD-10-CM	Diagnosis
D49.519	Neoplasm of unspecified behavior of unspecified kidney	ICD-10-CM	Diagnosis
D49.59	Neoplasm of unspecified behavior of other genitourinary organ	ICD-10-CM	Diagnosis
D49.6	Neoplasm of unspecified behavior of brain	ICD-10-CM	Diagnosis
D49.7	Neoplasm of unspecified behavior of endocrine glands and other parts of nervous system	ICD-10-CM	Diagnosis
D49.81	Neoplasm of unspecified behavior of retina and choroid	ICD-10-CM	Diagnosis
D49.89	Neoplasm of unspecified behavior of other specified sites	ICD-10-CM	Diagnosis
D49.9	Neoplasm of unspecified behavior of unspecified site	ICD-10-CM	Diagnosis
Q85.00	Neurofibromatosis, unspecified	ICD-10-CM	Diagnosis
Q85.01	Neurofibromatosis, type 1	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
Q85.02	Neurofibromatosis, type 2	ICD-10-CM	Diagnosis
Q85.03	Schwannomatosis	ICD-10-CM	Diagnosis
Q85.09	Other neurofibromatosis	ICD-10-CM	Diagnosis
55859	Transperineal placement of needles or catheters into prostate for interstitial radioelement application, with or without cystoscopy	CPT-4	Procedure
55860	Exposure of prostate, any approach, for insertion of radioactive substance;	CPT-4	Procedure
55862	Exposure of prostate, any approach, for insertion of radioactive substance; with lymph node biopsy(s) (limited pelvic lymphadenectomy)	CPT-4	Procedure
55865	Exposure of prostate, any approach, for insertion of radioactive substance; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes	CPT-4	Procedure
55875	Transperineal placement of needles or catheters into prostate for interstitial radioelement application, with or without cystoscopy	CPT-4	Procedure
76950	Ultrasonic guidance for placement of radiation therapy fields	CPT-4	Procedure
76960	Ultrasonic guidance for placement of radiation therapy fields, except for B-scan echography	CPT-4	Procedure
77280	Therapeutic radiology simulation-aided field setting; simple	CPT-4	Procedure
77285	Therapeutic radiology simulation-aided field setting; intermediate	CPT-4	Procedure
77290	Therapeutic radiology simulation-aided field setting; complex	CPT-4	Procedure
77295	3-dimensional radiotherapy plan, including dose-volume histograms	CPT-4	Procedure
77299	Unlisted procedure, therapeutic radiology clinical treatment planning	CPT-4	Procedure
77300	Basic radiation dosimetry calculation, central axis depth dose calculation, TDF, NSD, gap calculation, off axis factor, tissue inhomogeneity factors, calculation of non-ionizing radiation surface and depth dose, as required during course of treatment, only when prescribed by the treating physician	CPT-4	Procedure
77305	Teletherapy, isodose plan (whether hand or computer calculated); simple (1 or 2 parallel opposed unmodified ports directed to a single area of interest)	CPT-4	Procedure
77310	Teletherapy, isodose plan (whether hand or computer calculated); intermediate (3 or more treatment ports directed to a single area of interest)	CPT-4	Procedure
77315	Teletherapy, isodose plan (whether hand or computer calculated); complex (mantle or inverted Y, tangential ports, the use of wedges, compensators, complex blocking, rotational beam, or special beam considerations)	CPT-4	Procedure
77321	Special teletherapy port plan, particles, hemibody, total body	CPT-4	Procedure
77326	Brachytherapy isodose plan; simple (calculation made from single plane, 1 to 4 sources/ribbon application, remote afterloading brachytherapy, 1 to 8 sources)	CPT-4	Procedure
77327	Brachytherapy isodose plan; intermediate (multiplane dosage calculations, application involving 5 to 10 sources/ribbons, remote afterloading brachytherapy, 9 to 12 sources)	CPT-4	Procedure
77328	Brachytherapy isodose plan; complex (multiplane isodose plan, volume implant calculations, over 10 sources/ribbons used, special spatial reconstruction, remote afterloading brachytherapy, over 12 sources)	CPT-4	Procedure
77401	Radiation treatment delivery, superficial and/or ortho voltage, per day	CPT-4	Procedure
77402	Radiation treatment delivery, =>1 MeV; simple	CPT-4	Procedure



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Code	Description	Code Type	Code Category
77403	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks; 6-10 MeV	CPT-4	Procedure
77404	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks; 11-19 MeV	CPT-4	Procedure
77406	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks; 20 MeV or greater	CPT-4	Procedure
77407	Radiation treatment delivery, =>1 MeV; intermediate	CPT-4	Procedure
77408	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks; 6-10 MeV	CPT-4	Procedure
77409	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks; 11-19 MeV	CPT-4	Procedure
77411	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks; 20 MeV or greater	CPT-4	Procedure
77412	Radiation treatment delivery, =>1 MeV; complex	CPT-4	Procedure
77413	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 6-10 MeV	CPT-4	Procedure
77414	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 11-19 MeV	CPT-4	Procedure
77416	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 20 MeV or greater	CPT-4	Procedure
77427	Radiation treatment management, 5 treatments	CPT-4	Procedure
77432	Stereotactic radiation treatment management of cranial lesion(s) (complete course of treatment consisting of 1 session)	CPT-4	Procedure
77469	Intraoperative radiation treatment management	CPT-4	Procedure
77470	Special treatment procedure (eg, total body irradiation, hemibody radiation, per oral or endocavitary irradiation)	CPT-4	Procedure
77499	Unlisted procedure, therapeutic radiology treatment management	CPT-4	Procedure
77750	Infusion or instillation of radioelement solution (includes 3-month follow-up care)	CPT-4	Procedure
77761	Intracavitary radiation source application; simple	CPT-4	Procedure
77762	Intracavitary radiation source application; intermediate	CPT-4	Procedure
77763	Intracavitary radiation source application; complex	CPT-4	Procedure
77776	Interstitial radiation source application; simple	CPT-4	Procedure
77777	Interstitial radiation source application; intermediate	CPT-4	Procedure
77778	Interstitial radiation source application; complex	CPT-4	Procedure
77781	Remote afterloading high intensity brachytherapy; 1-4 source positions or catheters	CPT-4	Procedure
77782	Remote afterloading high intensity brachytherapy; 5-8 source positions or catheters	CPT-4	Procedure
77783	Remote afterloading high intensity brachytherapy; 9-12 source positions or catheters	CPT-4	Procedure
77784	Remote afterloading high intensity brachytherapy; over 12 source positions or catheters	CPT-4	Procedure
77785	Remote afterloading high dose rate radionuclide brachytherapy; 1 channel	CPT-4	Procedure
77786	Remote afterloading high dose rate radionuclide brachytherapy; 2-12 channels	CPT-4	Procedure

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
77787	Remote afterloading high dose rate radionuclide brachytherapy; over 12 channels	CPT-4	Procedure
77789	Surface application of low dose rate radionuclide source	CPT-4	Procedure
77799	Unlisted procedure, clinical brachytherapy	CPT-4	Procedure
79005	Radiopharmaceutical therapy, by oral administration	CPT-4	Procedure
79101	Radiopharmaceutical therapy, by intravenous administration	CPT-4	Procedure
79200	Radiopharmaceutical therapy, by intracavitary administration	CPT-4	Procedure
79300	Radiopharmaceutical therapy, by interstitial radioactive colloid administration	CPT-4	Procedure
79400	Radiopharmaceutical therapy, nonthyroid, nonhematologic by intervenous injection	CPT-4	Procedure
79403	Radiopharmaceutical therapy, radiolabeled monoclonal antibody by intravenous infusion	CPT-4	Procedure
79420	Intravascular radiopharmaceutical therapy, particulate	CPT-4	Procedure
79440	Radiopharmaceutical therapy, by intra-articular administration	CPT-4	Procedure
79900	Provision of therapeutic radiopharmaceutical(s)	CPT-4	Procedure
79999	Radiopharmaceutical therapy, unlisted procedure	CPT-4	Procedure
11600	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 0.5 cm or less	CPT-4	Procedure
11601	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 0.6 to 1.0 cm	CPT-4	Procedure
11602	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 1.1 to 2.0 cm	CPT-4	Procedure
11603	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 2.1 to 3.0 cm	CPT-4	Procedure
11604	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 3.1 to 4.0 cm	CPT-4	Procedure
11606	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter over 4.0 cm	CPT-4	Procedure
11620	Excision, malignant lesion including margins, scalp, neck, hands, feet, genitalia; excised diameter 0.5 cm or less	CPT-4	Procedure
11621	Excision, malignant lesion including margins, scalp, neck, hands, feet, genitalia; excised diameter 0.6 to 1.0 cm	CPT-4	Procedure
11622	Excision, malignant lesion including margins, scalp, neck, hands, feet, genitalia; excised diameter 1.1 to 2.0 cm	CPT-4	Procedure
11623	Excision, malignant lesion including margins, scalp, neck, hands, feet, genitalia; excised diameter 2.1 to 3.0 cm	CPT-4	Procedure
11624	Excision, malignant lesion including margins, scalp, neck, hands, feet, genitalia; excised diameter 3.1 to 4.0 cm	CPT-4	Procedure
11626	Excision, malignant lesion including margins, scalp, neck, hands, feet, genitalia; excised diameter over 4.0 cm	CPT-4	Procedure
11640	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 0.5 cm or less	CPT-4	Procedure
11641	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 0.6 to 1.0 cm	CPT-4	Procedure

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
11642	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 1.1 to 2.0 cm	CPT-4	Procedure
11643	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 2.1 to 3.0 cm	CPT-4	Procedure
11644	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 3.1 to 4.0 cm	CPT-4	Procedure
11646	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter over 4.0 cm	CPT-4	Procedure
17260	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter 0.5 cm or less	CPT-4	Procedure
17261	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter 0.6 to 1.0 cm	CPT-4	Procedure
17262	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter 1.1 to 2.0 cm	CPT-4	Procedure
17263	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter 2.1 to 3.0 cm	CPT-4	Procedure
17264	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter 3.1 to 4.0 cm	CPT-4	Procedure
17266	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter over 4.0 cm	CPT-4	Procedure
17270	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), scalp, neck, hands, feet, genitalia; lesion diameter 0.5 cm or less	CPT-4	Procedure
17271	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), scalp, neck, hands, feet, genitalia; lesion diameter 0.6 to 1.0 cm	CPT-4	Procedure
17272	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), scalp, neck, hands, feet, genitalia; lesion diameter 1.1 to 2.0 cm	CPT-4	Procedure
17273	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), scalp, neck, hands, feet, genitalia; lesion diameter 2.1 to 3.0 cm	CPT-4	Procedure
17274	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), scalp, neck, hands, feet, genitalia; lesion diameter 3.1 to 4.0 cm	CPT-4	Procedure



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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
17276	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), scalp, neck, hands, feet, genitalia; lesion diameter over 4.0 cm	CPT-4	Procedure
17280	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.5 cm or less	CPT-4	Procedure
17281	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.6 to 1.0 cm	CPT-4	Procedure
17282	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 1.1 to 2.0 cm	CPT-4	Procedure
17283	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 2.1 to 3.0 cm	CPT-4	Procedure
17284	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 3.1 to 4.0 cm	CPT-4	Procedure
17286	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter over 4.0 cm	CPT-4	Procedure
17304	Chemosurgery (Mohs micrographic technique), including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and complete histopathologic preparation including the first routine stain (eg, hematoxylin and eosin, toluidine blue); first stage, fresh tissue technique, up to 5 specimens	CPT-4	Procedure
17305	Chemosurgery (Mohs micrographic technique), including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and complete histopathologic preparation including the first routine stain (eg, hematoxylin and eosin, toluidine blue); second stage, fixed or fresh tissue, up to 5 specimens	CPT-4	Procedure
17306	Chemosurgery (Mohs micrographic technique), including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and complete histopathologic preparation including the first routine stain (eg, hematoxylin and eosin, toluidine blue); third stage, fixed or fresh tissue, up to 5 specimens	CPT-4	Procedure
17307	Chemosurgery (Mohs micrographic technique), including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and complete histopathologic preparation including the first routine stain (eg, hematoxylin and eosin, toluidine blue); additional stage(s), up to 5 specimens, each stage	CPT-4	Procedure

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Code	Description	Code Type	Code Category
17310	Chemosurgery (Mohs micrographic technique), including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and complete histopathologic preparation including the first routine stain (eg, hematoxylin and eosin, toluidine blue); each additional specimen, after the first 5 specimens, fixed or fresh tissue, any stage (List separately in addition to code for primary procedure)	CPT-4	Procedure
17311	Mohs micrographic technique, including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and histopathologic preparation including routine stain(s) (eg, hematoxylin and eosin, toluidine blue), head, neck, hands, feet, genitalia, or any location with surgery directly involving muscle, cartilage, bone, tendon, major nerves, or vessels; first stage, up to 5 tissue blocks	CPT-4	Procedure
17312	Mohs micrographic technique, including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and histopathologic preparation including routine stain(s) (eg, hematoxylin and eosin, toluidine blue), head, neck, hands, feet, genitalia, or any location with surgery directly involving muscle, cartilage, bone, tendon, major nerves, or vessels; each additional stage after the first stage, up to 5 tissue blocks (List separately in addition to code for primary procedure)	CPT-4	Procedure
17313	Mohs micrographic technique, including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and histopathologic preparation including routine stain(s) (eg, hematoxylin and eosin, toluidine blue), of the trunk, arms, or legs; first stage, up to 5 tissue blocks	CPT-4	Procedure
17314	Mohs micrographic technique, including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and histopathologic preparation including routine stain(s) (eg, hematoxylin and eosin, toluidine blue), of the trunk, arms, or legs; each additional stage after the first stage, up to 5 tissue blocks (List separately in addition to code for primary procedure)	CPT-4	Procedure
17315	Mohs micrographic technique, including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and histopathologic preparation including routine stain(s) (eg, hematoxylin and eosin, toluidine blue), each additional block after the first 5 tissue blocks, any stage (List separately in addition to code for primary procedure)	CPT-4	Procedure
<b>Radiation</b>			
55859	Transperineal placement of needles or catheters into prostate for interstitial radioelement application, with or without cystoscopy	CPT-4	Procedure
55860	Exposure of prostate, any approach, for insertion of radioactive substance;	CPT-4	Procedure
55862	Exposure of prostate, any approach, for insertion of radioactive substance; with lymph node biopsy(s) (limited pelvic lymphadenectomy)	CPT-4	Procedure

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Code	Description	Code Type	Code Category
55865	Exposure of prostate, any approach, for insertion of radioactive substance; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes	CPT-4	Procedure
55875	Transperineal placement of needles or catheters into prostate for interstitial radioelement application, with or without cystoscopy	CPT-4	Procedure
76950	Ultrasonic guidance for placement of radiation therapy fields	CPT-4	Procedure
76960	Ultrasonic guidance for placement of radiation therapy fields, except for B-scan echography	CPT-4	Procedure
77280	Therapeutic radiology simulation-aided field setting; simple	CPT-4	Procedure
77285	Therapeutic radiology simulation-aided field setting; intermediate	CPT-4	Procedure
77290	Therapeutic radiology simulation-aided field setting; complex	CPT-4	Procedure
77295	3-dimensional radiotherapy plan, including dose-volume histograms	CPT-4	Procedure
77299	Unlisted procedure, therapeutic radiology clinical treatment planning	CPT-4	Procedure
77300	Basic radiation dosimetry calculation, central axis depth dose calculation, TDF, NSD, gap calculation, off axis factor, tissue inhomogeneity factors, calculation of non-ionizing radiation surface and depth dose, as required during course of treatment, only when prescribed by the treating physician	CPT-4	Procedure
77305	Teletherapy, isodose plan (whether hand or computer calculated); simple (1 or 2 parallel opposed unmodified ports directed to a single area of interest)	CPT-4	Procedure
77310	Teletherapy, isodose plan (whether hand or computer calculated); intermediate (3 or more treatment ports directed to a single area of interest)	CPT-4	Procedure
77315	Teletherapy, isodose plan (whether hand or computer calculated); complex (mantle or inverted Y, tangential ports, the use of wedges, compensators, complex blocking, rotational beam, or special beam considerations)	CPT-4	Procedure
77321	Special teletherapy port plan, particles, hemibody, total body	CPT-4	Procedure
77326	Brachytherapy isodose plan; simple (calculation made from single plane, 1 to 4 sources/ribbon application, remote afterloading brachytherapy, 1 to 8 sources)	CPT-4	Procedure
77327	Brachytherapy isodose plan; intermediate (multiplane dosage calculations, application involving 5 to 10 sources/ribbons, remote afterloading brachytherapy, 9 to 12 sources)	CPT-4	Procedure
77328	Brachytherapy isodose plan; complex (multiplane isodose plan, volume implant calculations, over 10 sources/ribbons used, special spatial reconstruction, remote afterloading brachytherapy, over 12 sources)	CPT-4	Procedure
77401	Radiation treatment delivery, superficial and/or ortho voltage, per day	CPT-4	Procedure
77402	Radiation treatment delivery, =>1 MeV; simple	CPT-4	Procedure
77403	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks; 6-10 MeV	CPT-4	Procedure
77404	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks; 11-19 MeV	CPT-4	Procedure
77406	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks; 20 MeV or greater	CPT-4	Procedure
77407	Radiation treatment delivery, =>1 MeV; intermediate	CPT-4	Procedure

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Code	Description	Code Type	Code Category
77408	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks; 6-10 MeV	CPT-4	Procedure
77409	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks; 11-19 MeV	CPT-4	Procedure
77411	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks; 20 MeV or greater	CPT-4	Procedure
77412	Radiation treatment delivery, =>1 MeV; complex	CPT-4	Procedure
77413	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 6-10 MeV	CPT-4	Procedure
77414	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 11-19 MeV	CPT-4	Procedure
77416	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 20 MeV or greater	CPT-4	Procedure
77427	Radiation treatment management, 5 treatments	CPT-4	Procedure
77432	Stereotactic radiation treatment management of cranial lesion(s) (complete course of treatment consisting of 1 session)	CPT-4	Procedure
77469	Intraoperative radiation treatment management	CPT-4	Procedure
77470	Special treatment procedure (eg, total body irradiation, hemibody radiation, per oral or endocavitary irradiation)	CPT-4	Procedure
77499	Unlisted procedure, therapeutic radiology treatment management	CPT-4	Procedure
77750	Infusion or instillation of radioelement solution (includes 3-month follow-up care)	CPT-4	Procedure
77761	Intracavitary radiation source application; simple	CPT-4	Procedure
77762	Intracavitary radiation source application; intermediate	CPT-4	Procedure
77763	Intracavitary radiation source application; complex	CPT-4	Procedure
77776	Interstitial radiation source application; simple	CPT-4	Procedure
77777	Interstitial radiation source application; intermediate	CPT-4	Procedure
77778	Interstitial radiation source application; complex	CPT-4	Procedure
77781	Remote afterloading high intensity brachytherapy; 1-4 source positions or catheters	CPT-4	Procedure
77782	Remote afterloading high intensity brachytherapy; 5-8 source positions or catheters	CPT-4	Procedure
77783	Remote afterloading high intensity brachytherapy; 9-12 source positions or catheters	CPT-4	Procedure
77784	Remote afterloading high intensity brachytherapy; over 12 source positions or catheters	CPT-4	Procedure
77785	Remote afterloading high dose rate radionuclide brachytherapy; 1 channel	CPT-4	Procedure
77786	Remote afterloading high dose rate radionuclide brachytherapy; 2-12 channels	CPT-4	Procedure
77787	Remote afterloading high dose rate radionuclide brachytherapy; over 12 channels	CPT-4	Procedure
77789	Surface application of low dose rate radionuclide source	CPT-4	Procedure
77799	Unlisted procedure, clinical brachytherapy	CPT-4	Procedure
79005	Radiopharmaceutical therapy, by oral administration	CPT-4	Procedure
79101	Radiopharmaceutical therapy, by intravenous administration	CPT-4	Procedure
79200	Radiopharmaceutical therapy, by intracavitary administration	CPT-4	Procedure
79300	Radiopharmaceutical therapy, by interstitial radioactive colloid administration	CPT-4	Procedure

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Code	Description	Code Type	Code Category
79400	Radiopharmaceutical therapy, nonthyroid, nonhematologic by interavenous injection	CPT-4	Procedure
79403	Radiopharmaceutical therapy, radiolabeled monoclonal antibody by intravenous infusion	CPT-4	Procedure
79420	Intravascular radiopharmaceutical therapy, particulate	CPT-4	Procedure
79440	Radiopharmaceutical therapy, by intra-articular administration	CPT-4	Procedure
79900	Provision of therapeutic radiopharmaceutical(s)	CPT-4	Procedure
79999	Radiopharmaceutical therapy, unlisted procedure	CPT-4	Procedure
<b>Chemotherapy</b>			
96420	Chemotherapy administration, intra-arterial; push technique	CPT-4	Procedure
96411	Chemotherapy administration; intravenous, push technique, each additional substance/drug (List separately in addition to code for primary procedure)	CPT-4	Procedure
96415	Chemotherapy administration, intravenous infusion technique; each additional hour (List separately in addition to code for primary procedure)	CPT-4	Procedure
96402	Chemotherapy administration, subcutaneous or intramuscular; hormonal anti-neoplastic	CPT-4	Procedure
96417	Chemotherapy administration, intravenous infusion technique; each additional sequential infusion (different substance/drug), up to 1 hour (List separately in addition to code for primary procedure)	CPT-4	Procedure
96401	Chemotherapy administration, subcutaneous or intramuscular; non-hormonal anti-neoplastic	CPT-4	Procedure
96549	Unlisted chemotherapy procedure	CPT-4	Procedure
96425	Chemotherapy administration, intra-arterial; infusion technique, initiation of prolonged infusion (more than 8 hours), requiring the use of a portable or implantable pump	CPT-4	Procedure
96440	Chemotherapy administration into pleural cavity, requiring and including thoracentesis	CPT-4	Procedure
96450	Chemotherapy administration, into CNS (eg, intrathecal), requiring and including spinal puncture	CPT-4	Procedure
96542	Chemotherapy injection, subarachnoid or intraventricular via subcutaneous reservoir, single or multiple agents	CPT-4	Procedure
96409	Chemotherapy administration; intravenous, push technique, single or initial substance/drug	CPT-4	Procedure
96416	Chemotherapy administration, intravenous infusion technique; initiation of prolonged chemotherapy infusion (more than 8 hours), requiring use of a portable or implantable pump	CPT-4	Procedure
96413	Chemotherapy administration, intravenous infusion technique; up to 1 hour, single or initial substance/drug	CPT-4	Procedure
96423	Chemotherapy administration, intra-arterial; infusion technique, each additional hour (List separately in addition to code for primary procedure)	CPT-4	Procedure
96422	Chemotherapy administration, intra-arterial; infusion technique, up to 1 hour	CPT-4	Procedure
96446	Chemotherapy administration into the peritoneal cavity via indwelling port or catheter	CPT-4	Procedure
J9091	Cyclophosphamide, 1 g	HCPCS	Procedure

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Code	Description	Code Type	Code Category
C9280	Injection, eribulin mesylate, 1 mg	HCPCS	Procedure
J9057	Injection, copanlisib, 1 mg	HCPCS	Procedure
Q5116	Injection, trastuzumab-qyyp, biosimilar, (Trazimera), 10 mg	HCPCS	Procedure
S0168	Injection, azacitidine, 100 mg	HCPCS	Procedure
J9311	Injection, rituximab 10 mg and hyaluronidase	HCPCS	Procedure
J9093	Cyclophosphamide, lyophilized, 100 mg	HCPCS	Procedure
C9429	Idarubicin HCl, 5 mg, brand name	HCPCS	Procedure
J9080	Cyclophosphamide, 200 mg	HCPCS	Procedure
C9239	Injection, temsirolimus, 1 mg	HCPCS	Procedure
G3001	Administration and supply of tositumomab, 450 mg	HCPCS	Procedure
J9019	Injection, asparaginase (Erwinaze), 1,000 IU	HCPCS	Procedure
J9041	Injection, bortezomib (Velcade), 0.1 mg	HCPCS	Procedure
J9185	Injection, fludarabine phosphate, 50 mg	HCPCS	Procedure
C9273	Sipuleucel-T, minimum of 50 million autologous CD54+ cells activated with PAP-GM-CSF, including leukapheresis and all other preparatory procedures, per infusion	HCPCS	Procedure
J8561	Everolimus, oral, 0.25 mg	HCPCS	Procedure
J9055	Injection, cetuximab, 10 mg	HCPCS	Procedure
C9427	Ifosfamide, 1 gm, brand name	HCPCS	Procedure
J9312	Injection, rituximab, 10 mg	HCPCS	Procedure
C9284	Injection, ipilimumab, 1 mg	HCPCS	Procedure
C9231	Injection, decitabine, per 1 mg	HCPCS	Procedure
C9253	Injection, temozolomide, 1mg	HCPCS	Procedure
J9306	Injection, pertuzumab, 1 mg	HCPCS	Procedure
J9015	Injection, aldesleukin, per single use vial	HCPCS	Procedure
J9267	Injection, paclitaxel, 1 mg	HCPCS	Procedure
J9020	Injection, asparaginase, not otherwise specified, 10,000 units	HCPCS	Procedure
J9090	Cyclophosphamide, 500 mg	HCPCS	Procedure
J9261	Injection, nelarabine, 50 mg	HCPCS	Procedure
J9017	Injection, arsenic trioxide, 1 mg	HCPCS	Procedure
J9229	Injection, inotuzumab ozogamicin, 0.1 mg	HCPCS	Procedure
J9002	Injection, doxorubicin hydrochloride, liposomal, Doxil, 10 mg	HCPCS	Procedure
J9280	Injection, mitomycin, 5 mg	HCPCS	Procedure
J9042	Injection, brentuximab vedotin, 1 mg	HCPCS	Procedure
J9360	Injection, vinblastine sulfate, 1 mg	HCPCS	Procedure
J9330	Injection, temsirolimus, 1 mg	HCPCS	Procedure
J9034	Injection, bendamustine HCl (Bendeka), 1 mg	HCPCS	Procedure
C9292	Injection, pertuzumab, 10 mg	HCPCS	Procedure
J9001	Injection, doxorubicin HCl, all lipid formulations, 10 mg	HCPCS	Procedure
J9035	Injection, bevacizumab, 10 mg	HCPCS	Procedure
J9094	Cyclophosphamide, lyophilized, 200 mg	HCPCS	Procedure
J9027	Injection, clofarabine, 1 mg	HCPCS	Procedure
C9415	Doxorubicin HCl, 10 mg, brand name	HCPCS	Procedure
Q2048	Injection, doxorubicin hydrochloride, liposomal, DOXIL, 10 mg	HCPCS	Procedure



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
C9426	Floxuridine, 500 mg, brand name	HCPCS	Procedure
J9130	Dacarbazine, 100 mg	HCPCS	Procedure
J9065	Injection, cladribine, per 1 mg	HCPCS	Procedure
C9432	Mitomycin, 5 mg, brand name	HCPCS	Procedure
J8562	Fludarabine phosphate, oral, 10 mg	HCPCS	Procedure
J9170	Injection, docetaxel, 20 mg	HCPCS	Procedure
J9211	Injection, idarubicin HCl, 5 mg	HCPCS	Procedure
J9310	Injection, rituximab, 100 mg	HCPCS	Procedure
J9371	Injection, vincristine sulfate liposome, 1 mg	HCPCS	Procedure
J9043	Injection, cabazitaxel, 1 mg	HCPCS	Procedure
C9276	Injection, cabazitaxel, 1 mg	HCPCS	Procedure
J9340	Injection, thiotepa, 15 mg	HCPCS	Procedure
Q5115	Injection, rituximab-abbs, biosimilar, (Truxima), 10 mg	HCPCS	Procedure
J9302	Injection, ofatumumab, 10 mg	HCPCS	Procedure
J9171	Injection, docetaxel, 1 mg	HCPCS	Procedure
J9150	Injection, daunorubicin, 10 mg	HCPCS	Procedure
J0207	Injection, amifostine, 500 mg	HCPCS	Procedure
G9837	Trastuzumab not administered within 12 months of diagnosis	HCPCS	Procedure
J9205	Injection, irinotecan liposome, 1 mg	HCPCS	Procedure
J7527	Everolimus, oral, 0.25 mg	HCPCS	Procedure
J9120	Injection, dactinomycin, 0.5 mg	HCPCS	Procedure
C9425	Etoposide, 10 mg, brand name	HCPCS	Procedure
S0178	Lomustine, oral, 10 mg	HCPCS	Procedure
C9207	Injection, bortezomib, per 3.5 mg	HCPCS	Procedure
J9375	Vincristine sulfate, 2 mg	HCPCS	Procedure
J9033	Injection, bendamustine HCl (Treanda), 1 mg	HCPCS	Procedure
S0176	Hydroxyurea, oral, 500 mg	HCPCS	Procedure
J9000	Injection, doxorubicin HCl, 10 mg	HCPCS	Procedure
C9422	Cytarabine, 100 mg, brand name	HCPCS	Procedure
Q2050	Injection, doxorubicin HCl, liposomal, not otherwise specified, 10 mg	HCPCS	Procedure
J9201	Injection, gemcitabine HCl, not otherwise specified, 200 mg	HCPCS	Procedure
C9433	Thiotepa, 15 mg, brand name	HCPCS	Procedure
C9260	Injection, ofatumumab, 10 mg	HCPCS	Procedure
S0116	Bevacizumab, 100 mg	HCPCS	Procedure
J9010	Injection, alemtuzumab, 10 mg	HCPCS	Procedure
C9287	Injection, brentuximab vedotin, 1 mg	HCPCS	Procedure
J9263	Injection, oxaliplatin, 0.5 mg	HCPCS	Procedure
C9259	Injection, pralatrexate, 1 mg	HCPCS	Procedure
J9060	Injection, cisplatin, powder or solution, 10 mg	HCPCS	Procedure
J9180	Epirubicin HCl, 50 mg	HCPCS	Procedure

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Code	Description	Code Type	Code Category
G0498	Chemotherapy administration, intravenous infusion technique; initiation of infusion in the office/clinic setting using office/clinic pump/supplies, with continuation of the infusion in the community setting (e.g., home, domiciliary, rest home or assisted living) using a portable pump provided by the office/clinic, includes follow up office/clinic visit at the conclusion of the infusion	HCPCS	Procedure
C9004	Injection, gemtuzumab ozogamicin, per 5 mg	HCPCS	Procedure
J9355	Injection, trastuzumab, excludes biosimilar, 10 mg	HCPCS	Procedure
C9044	Injection, cemiplimab-rwlc, 1 mg	HCPCS	Procedure
C1178	Injection, busulfan, per 6 mg	HCPCS	Procedure
J8700	Temozolomide, oral, 5 mg	HCPCS	Procedure
J9260	Methotrexate sodium, 50 mg	HCPCS	Procedure
C9012	Injection, arsenic trioxide, per 1 mg/kg	HCPCS	Procedure
J9291	Mitomycin, 40 mg	HCPCS	Procedure
J9036	Injection, bendamustine hydrochloride, (Belrapzo/bendamustine), 1 mg	HCPCS	Procedure
C9421	Cyclophosphamide, lyophilized, 100 mg, brand name	HCPCS	Procedure
J9230	Injection, mechlorethamine HCl, (nitrogen mustard), 10 mg	HCPCS	Procedure
J8520	Capecitabine, oral, 150 mg	HCPCS	Procedure
J9999	Not otherwise classified, antineoplastic drugs	HCPCS	Procedure
S0172	Chlorambucil, oral, 2 mg	HCPCS	Procedure
J9269	Injection, tagraxofusp-erzs, 10 mcg	HCPCS	Procedure
J9140	Dacarbazine, 200 mg	HCPCS	Procedure
G9835	Trastuzumab administered within 12 months of diagnosis	HCPCS	Procedure
C9295	Injection, carfilzomib, 1 mg	HCPCS	Procedure
C9240	Injection, ixabepilone, 1 mg	HCPCS	Procedure
J9315	Injection, romidepsin, 1 mg	HCPCS	Procedure
C9243	Injection, bendamustine hcl, 1 mg	HCPCS	Procedure
C1166	Injection, cytarabine liposome, per 10 mg	HCPCS	Procedure
J9290	Mitomycin, 20 mg	HCPCS	Procedure
J9300	Injection, gemtuzumab ozogamicin, 5 mg	HCPCS	Procedure
J9264	Injection, paclitaxel protein-bound particles, 1 mg	HCPCS	Procedure
C9235	Injection, panitumumab, 10 mg	HCPCS	Procedure
J9095	Cyclophosphamide, lyophilized, 500 mg	HCPCS	Procedure
J9307	Injection, pralatrexate, 1 mg	HCPCS	Procedure
J9190	Injection, fluorouracil, 500 mg	HCPCS	Procedure
J9203	Injection, gemtuzumab ozogamicin, 0.1 mg	HCPCS	Procedure
J9047	Injection, carfilzomib, 1 mg	HCPCS	Procedure
C9431	Paclitaxel, 30 mg, brand name	HCPCS	Procedure
J9356	Injection, trastuzumab, 10 mg and hyaluronidase-oysk	HCPCS	Procedure
J9380	Vincristine sulfate, 5 mg	HCPCS	Procedure
C9017	Lomustine, 10 mg	HCPCS	Procedure
S0087	Injection, alemtuzumab, 30 mg	HCPCS	Procedure
C9474	Injection, irinotecan liposome, 1 mg	HCPCS	Procedure
C9420	Cyclophosphamide, 100 mg, brand name	HCPCS	Procedure



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Code	Description	Code Type	Code Category
J9110	Injection, cytarabine, 500 mg	HCPCS	Procedure
J9265	Injection, paclitaxel, 30 mg	HCPCS	Procedure
J9096	Cyclophosphamide, lyophilized, 1 g	HCPCS	Procedure
J9178	Injection, epirubicin HCl, 2 mg	HCPCS	Procedure
S0108	Mercaptopurine, oral, 50 mg	HCPCS	Procedure
C9418	Cisplatin, powder or solution, per 10 mg, brand name	HCPCS	Procedure
C9414	Etoposide; oral, 50 mg, brand name	HCPCS	Procedure
J9228	Injection, ipilimumab, 1 mg	HCPCS	Procedure
C9045	Injection, moxetumomab pasudotox-tdfk, 0.01 mg	HCPCS	Procedure
Q5112	Injection, trastuzumab-dttb, biosimilar, (Ontruzant), 10 mg	HCPCS	Procedure
J8510	Busulfan, oral, 2 mg	HCPCS	Procedure
J8999	Prescription drug, oral, chemotherapeutic, NOS	HCPCS	Procedure
A9545	Iodine I-131 tositumomab, therapeutic, per treatment dose	HCPCS	Procedure
J9320	Injection, streptozocin, 1 g	HCPCS	Procedure
C9205	Injection, oxaliplatin, per 5 mg	HCPCS	Procedure
J9151	Injection, daunorubicin citrate, liposomal formulation, 10 mg	HCPCS	Procedure
J9250	Methotrexate sodium, 5 mg	HCPCS	Procedure
C9265	Injection, romidepsin, 1 mg	HCPCS	Procedure
Q5117	Injection, trastuzumab-anns, biosimilar, (Kanjinti), 10 mg	HCPCS	Procedure
J9268	Injection, pentostatin, 10 mg	HCPCS	Procedure
C9424	Daunorubicin, 10 mg	HCPCS	Procedure
C9021	Injection, obinutuzumab, 10 mg	HCPCS	Procedure
C9215	Injection, cetuximab, per 10 mg	HCPCS	Procedure
J9200	Injection, floxuridine, 500 mg	HCPCS	Procedure
Q2049	Injection, doxorubicin HCl, liposomal, imported Lipodox, 10 mg	HCPCS	Procedure
C9437	Carmustine, brand name, 100 mg	HCPCS	Procedure
J9266	Injection, pegaspargase, per single dose vial	HCPCS	Procedure
J9040	Injection, bleomycin sulfate, 15 units	HCPCS	Procedure
J9293	Injection, mitoxantrone HCl, per 5 mg	HCPCS	Procedure
J9100	Injection, cytarabine, 100 mg	HCPCS	Procedure
C9042	Injection, bendamustine HCl (Belrapzo), 1 mg	HCPCS	Procedure
C9213	Injection, pemetrexed, per 10 mg	HCPCS	Procedure
C9297	Injection, omacetaxine mepesuccinate, 0.01 mg	HCPCS	Procedure
J9092	Cyclophosphamide, 2 g	HCPCS	Procedure
C9110	Injection, alemtuzumab, per 10 mg/ ml	HCPCS	Procedure
Q2043	Sipuleucel-T, minimum of 50 million autologous CD54+ cells activated with PAP-GM-CSF, including leukapheresis and all other preparatory procedures, per infusion	HCPCS	Procedure
J8521	Capecitabine, oral, 500 mg	HCPCS	Procedure
C9049	Injection, tagraxofusp-erzs, 10 mcg	HCPCS	Procedure
J9045	Injection, carboplatin, 50 mg	HCPCS	Procedure
J9206	Injection, irinotecan, 20 mg	HCPCS	Procedure
J8530	Cyclophosphamide, oral, 25 mg	HCPCS	Procedure
C1086	Temozolomide, 5 mg, temodar	HCPCS	Procedure

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Code	Description	Code Type	Code Category
C9127	Injection, paclitaxel protein-bound particles, per 1 mg	HCPCS	Procedure
C1084	Denileukin diftitox, 300 mcg, ontak iv	HCPCS	Procedure
J9173	Injection, durvalumab, 10 mg	HCPCS	Procedure
J8600	Melphalan, oral, 2 mg	HCPCS	Procedure
J9160	Injection, denileukin diftitox, 300 mcg	HCPCS	Procedure
J9208	Injection, ifosfamide, 1 g	HCPCS	Procedure
C9419	Injection, cladribine, per 1 mg, brand name	HCPCS	Procedure
Q9979	Injection, Alemtuzumab, 1 mg	HCPCS	Procedure
Q5114	Injection, Trastuzumab-dkst, biosimilar, (Ogivri), 10 mg	HCPCS	Procedure
C9417	Bleomycin sulfate, 15 units, brand name	HCPCS	Procedure
J9098	Injection, cytarabine liposome, 10 mg	HCPCS	Procedure
J9182	Etoposide, 100 mg	HCPCS	Procedure
C9218	Injection, azacitidine, per 1 mg	HCPCS	Procedure
J9181	Injection, etoposide, 10 mg	HCPCS	Procedure
J8705	Topotecan, oral, 0.25 mg	HCPCS	Procedure
J9050	Injection, carmustine, 100 mg	HCPCS	Procedure
J0202	Injection, alemtuzumab, 1 mg	HCPCS	Procedure
J8560	Etoposide, oral, 50 mg	HCPCS	Procedure
J9062	Cisplatin, 50 mg	HCPCS	Procedure
C9440	Vinorelbine tartrate, brand name, per 10 mg	HCPCS	Procedure
J9179	Injection, eribulin mesylate, 0.1 mg	HCPCS	Procedure
J9245	Injection, melphalan hydrochloride, not otherwise specified, 50 mg	HCPCS	Procedure
J9118	Injection, calaspargase pegol-mknl, 10 units	HCPCS	Procedure
J9305	Injection, pemetrexed, NOS, 10 mg	HCPCS	Procedure
J9262	Injection, omacetaxine mepesuccinate, 0.01 mg	HCPCS	Procedure
J9153	Injection, liposomal, 1 mg daunorubicin and 2.27 mg cytarabine	HCPCS	Procedure
J9070	Cyclophosphamide, 100 mg	HCPCS	Procedure
J9351	Injection, topotecan, 0.1 mg	HCPCS	Procedure
C9289	Injection, asparaginase Erwinia chrysanthemi, 1,000 IU	HCPCS	Procedure
J8610	Methotrexate, oral, 2.5 mg	HCPCS	Procedure
J9097	Cyclophosphamide, lyophilized, 2 g	HCPCS	Procedure
J9370	Vincristine sulfate, 1 mg	HCPCS	Procedure
J9301	Injection, obinutuzumab, 10 mg	HCPCS	Procedure
J9328	Injection, temozolomide, 1 mg	HCPCS	Procedure
J0594	Injection, busulfan, 1 mg	HCPCS	Procedure
C9050	Injection, emapalumab-lzsg, 1 mg	HCPCS	Procedure
C9423	Dacarbazine, 100 mg, brand name	HCPCS	Procedure
C9214	Injection, bevacizumab, per 10 mg	HCPCS	Procedure
J9025	Injection, azacitidine, 1 mg	HCPCS	Procedure
C9129	Injection, clofarabine, per 1 mg	HCPCS	Procedure
J9350	Injection, topotecan, 4 mg	HCPCS	Procedure
Q2025	Fludarabine phosphate, oral, 1 mg	HCPCS	Procedure
Q5113	Injection, trastuzumab-pkrb, biosimilar, (Herzuma), 10 mg	HCPCS	Procedure

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Code	Description	Code Type	Code Category
J8565	Gefitinib, oral, 250 mg	HCPCS	Procedure
J9270	Injection, plicamycin, 2.5 mg	HCPCS	Procedure
S0115	Bortezomib, 3.5 mg	HCPCS	Procedure
S0182	Procarbazine HCl, oral, 50 mg	HCPCS	Procedure
J9303	Injection, panitumumab, 10 mg	HCPCS	Procedure
C9024	Injection, liposomal, 1 mg daunorubicin and 2.27 mg cytarabine	HCPCS	Procedure
S0088	Imatinib, 100 mg	HCPCS	Procedure
C9262	Fludarabine phosphate, oral, 1 mg	HCPCS	Procedure
J9207	Injection, ixabepilone, 1 mg	HCPCS	Procedure
J0894	Injection, decitabine, 1 mg	HCPCS	Procedure
C1167	Injection, epirubicin HCl, 2 mg	HCPCS	Procedure
J9390	Injection, vinorelbine tartrate, 10 mg	HCPCS	Procedure
D61.810	Antineoplastic chemotherapy induced pancytopenia	ICD-10-CM	Diagnosis
D64.81	Anemia due to antineoplastic chemotherapy	ICD-10-CM	Diagnosis
D70.1	Agranulocytosis secondary to cancer chemotherapy	ICD-10-CM	Diagnosis
T80.810	Extravasation of vesicant antineoplastic chemotherapy	ICD-10-CM	Diagnosis
T80.810A	Extravasation of vesicant antineoplastic chemotherapy, initial encounter	ICD-10-CM	Diagnosis
T80.810D	Extravasation of vesicant antineoplastic chemotherapy, subsequent encounter	ICD-10-CM	Diagnosis
Z51.1	Encounter for antineoplastic chemotherapy and immunotherapy	ICD-10-CM	Diagnosis
Z51.11	Encounter for antineoplastic chemotherapy	ICD-10-CM	Diagnosis
Z51.12	Encounter for antineoplastic immunotherapy	ICD-10-CM	Diagnosis
3E0F80M	Introduction of Monoclonal Antibody into Respiratory Tract, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0W30M	Introduction of Monoclonal Antibody into Lymphatics, Percutaneous Approach	ICD-10-PCS	Procedure
3E0N805	Introduction of Other Antineoplastic into Male Reproductive, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0P705	Introduction of Other Antineoplastic into Female Reproductive, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0Y705	Introduction of Other Antineoplastic into Pericardial Cavity, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0J805	Introduction of Other Antineoplastic into Biliary and Pancreatic Tract, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0J705	Introduction of Other Antineoplastic into Biliary and Pancreatic Tract, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0P805	Introduction of Other Antineoplastic into Female Reproductive, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
XW033B3	Introduction of Cytarabine and Daunorubicin Liposome Antineoplastic into Peripheral Vein, Percutaneous Approach, New Technology Group 3	ICD-10-PCS	Procedure
XW043B3	Introduction of Cytarabine and Daunorubicin Liposome Antineoplastic into Central Vein, Percutaneous Approach, New Technology Group 3	ICD-10-PCS	Procedure
XW043C3	Introduction of Engineered Autologous Chimeric Antigen Receptor T-cell Immunotherapy into Central Vein, Percutaneous Approach, New Technology Group 3	ICD-10-PCS	Procedure

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Code	Description	Code Type	Code Category
XW033C3	Introduction of Engineered Autologous Chimeric Antigen Receptor T-cell Immunotherapy into Peripheral Vein, Percutaneous Approach, New Technology Group 3	ICD-10-PCS	Procedure
XW0DXL5	Introduction of Erdafitinib Antineoplastic into Mouth and Pharynx, External Approach, New Technology Group 5	ICD-10-PCS	Procedure
XW0DXV5	Introduction of Gilteritinib Antineoplastic into Mouth and Pharynx, External Approach, New Technology Group 5	ICD-10-PCS	Procedure
3E0S302	Introduction of High-dose Interleukin-2 into Epidural Space, Percutaneous Approach	ICD-10-PCS	Procedure
3E0R302	Introduction of High-dose Interleukin-2 into Spinal Canal, Percutaneous Approach	ICD-10-PCS	Procedure
XW043S5	Introduction of Iobenguane I-131 Antineoplastic into Central Vein, Percutaneous Approach, New Technology Group 5	ICD-10-PCS	Procedure
XW033S5	Introduction of Iobenguane I-131 Antineoplastic into Peripheral Vein, Percutaneous Approach, New Technology Group 5	ICD-10-PCS	Procedure
3E0R303	Introduction of Low-dose Interleukin-2 into Spinal Canal, Percutaneous Approach	ICD-10-PCS	Procedure
3E0S303	Introduction of Low-dose Interleukin-2 into Epidural Space, Percutaneous Approach	ICD-10-PCS	Procedure
3E0Q70M	Introduction of Monoclonal Antibody into Cranial Cavity and Brain, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0H80M	Introduction of Monoclonal Antibody into Lower GI, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0N70M	Introduction of Monoclonal Antibody into Male Reproductive, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0D70M	Introduction of Monoclonal Antibody into Mouth and Pharynx, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0Y70M	Introduction of Monoclonal Antibody into Pericardial Cavity, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0M70M	Introduction of Monoclonal Antibody into Peritoneal Cavity, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0L70M	Introduction of Monoclonal Antibody into Pleural Cavity, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0E80M	Introduction of Monoclonal Antibody into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0F70M	Introduction of Monoclonal Antibody into Respiratory Tract, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0Q00M	Introduction of Monoclonal Antibody into Cranial Cavity and Brain, Open Approach	ICD-10-PCS	Procedure
3E00X0M	Introduction of Monoclonal Antibody into Skin and Mucous Membranes, External Approach	ICD-10-PCS	Procedure
3E0J30M	Introduction of Monoclonal Antibody into Biliary and Pancreatic Tract, Percutaneous Approach	ICD-10-PCS	Procedure
3E0Q30M	Introduction of Monoclonal Antibody into Cranial Cavity and Brain, Percutaneous Approach	ICD-10-PCS	Procedure
3E0S30M	Introduction of Monoclonal Antibody into Epidural Space, Percutaneous Approach	ICD-10-PCS	Procedure

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Code	Description	Code Type	Code Category
3E0P30M	Introduction of Monoclonal Antibody into Female Reproductive, Percutaneous Approach	ICD-10-PCS	Procedure
3E0H70M	Introduction of Monoclonal Antibody into Lower GI, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0DX0M	Introduction of Monoclonal Antibody into Mouth and Pharynx, External Approach	ICD-10-PCS	Procedure
3E0970M	Introduction of Monoclonal Antibody into Nose, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0Y30M	Introduction of Monoclonal Antibody into Pericardial Cavity, Percutaneous Approach	ICD-10-PCS	Procedure
3E0R30M	Introduction of Monoclonal Antibody into Spinal Canal, Percutaneous Approach	ICD-10-PCS	Procedure
3E0J80M	Introduction of Monoclonal Antibody into Biliary and Pancreatic Tract, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0P80M	Introduction of Monoclonal Antibody into Female Reproductive, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0P70M	Introduction of Monoclonal Antibody into Female Reproductive, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0K70M	Introduction of Monoclonal Antibody into Genitourinary Tract, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0N80M	Introduction of Monoclonal Antibody into Male Reproductive, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0J70M	Introduction of Monoclonal Antibody into Biliary and Pancreatic Tract, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0F805	Introduction of Other Antineoplastic into Respiratory Tract, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0D705	Introduction of Other Antineoplastic into Mouth and Pharynx, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0L705	Introduction of Other Antineoplastic into Pleural Cavity, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0E805	Introduction of Other Antineoplastic into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0G805	Introduction of Other Antineoplastic into Upper GI, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0J305	Introduction of Other Antineoplastic into Biliary and Pancreatic Tract, Percutaneous Approach	ICD-10-PCS	Procedure
3E0Q005	Introduction of Other Antineoplastic into Cranial Cavity and Brain, Open Approach	ICD-10-PCS	Procedure
3E0Q305	Introduction of Other Antineoplastic into Cranial Cavity and Brain, Percutaneous Approach	ICD-10-PCS	Procedure
3E0S305	Introduction of Other Antineoplastic into Epidural Space, Percutaneous Approach	ICD-10-PCS	Procedure
3E0H705	Introduction of Other Antineoplastic into Lower GI, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0DX05	Introduction of Other Antineoplastic into Mouth and Pharynx, External Approach	ICD-10-PCS	Procedure
3E09705	Introduction of Other Antineoplastic into Nose, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0Y305	Introduction of Other Antineoplastic into Pericardial Cavity, Percutaneous Approach	ICD-10-PCS	Procedure
3E0E705	Introduction of Other Antineoplastic into Products of Conception, Via Natural or Artificial Opening	ICD-10-PCS	Procedure

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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
3E00X05	Introduction of Other Antineoplastic into Skin and Mucous Membranes, External Approach	ICD-10-PCS	Procedure
3E0R305	Introduction of Other Antineoplastic into Spinal Canal, Percutaneous Approach	ICD-10-PCS	Procedure
3E0H805	Introduction of Other Antineoplastic into Lower GI, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0N705	Introduction of Other Antineoplastic into Male Reproductive, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0M705	Introduction of Other Antineoplastic into Peritoneal Cavity, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0F705	Introduction of Other Antineoplastic into Respiratory Tract, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0Q705	Introduction of Other Antineoplastic into Cranial Cavity and Brain, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0K705	Introduction of Other Antineoplastic into Genitourinary Tract, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0P305	Introduction of Other Antineoplastic into Female Reproductive, Percutaneous Approach	ICD-10-PCS	Procedure
XW0DXT5	Introduction of Ruxolitinib into Mouth and Pharynx, External Approach, New Technology Group 5	ICD-10-PCS	Procedure
XW043Q5	Introduction of Tagraxofusp-erzs Antineoplastic into Central Vein, Percutaneous Approach, New Technology Group 5	ICD-10-PCS	Procedure
XW033Q5	Introduction of Tagraxofusp-erzs Antineoplastic into Peripheral Vein, Percutaneous Approach, New Technology Group 5	ICD-10-PCS	Procedure
XW0DXR5	Introduction of Venetoclax Antineoplastic into Mouth and Pharynx, External Approach, New Technology Group 5	ICD-10-PCS	Procedure
XW04351	Introduction of Blinatumomab Antineoplastic Immunotherapy into Central Vein, Percutaneous Approach, New Technology Group 1	ICD-10-PCS	Procedure
XW03351	Introduction of Blinatumomab Antineoplastic Immunotherapy into Peripheral Vein, Percutaneous Approach, New Technology Group 1	ICD-10-PCS	Procedure
3E0K805	Introduction of Other Antineoplastic into Genitourinary Tract, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0600P	Introduction of Clofarabine into Central Artery, Open Approach	ICD-10-PCS	Procedure
3E0630P	Introduction of Clofarabine into Central Artery, Percutaneous Approach	ICD-10-PCS	Procedure
3E0430P	Introduction of Clofarabine into Central Vein, Percutaneous Approach	ICD-10-PCS	Procedure
3E0400P	Introduction of Clofarabine into Central Vein, Open Approach	ICD-10-PCS	Procedure
3E0500P	Introduction of Clofarabine into Peripheral Artery, Open Approach	ICD-10-PCS	Procedure
3E0530P	Introduction of Clofarabine into Peripheral Artery, Percutaneous Approach	ICD-10-PCS	Procedure
3E0300P	Introduction of Clofarabine into Peripheral Vein, Open Approach	ICD-10-PCS	Procedure
3E0330P	Introduction of Clofarabine into Peripheral Vein, Percutaneous Approach	ICD-10-PCS	Procedure
3E04002	Introduction of High-dose Interleukin-2 into Central Vein, Open Approach	ICD-10-PCS	Procedure
3E04302	Introduction of High-dose Interleukin-2 into Central Vein, Percutaneous Approach	ICD-10-PCS	Procedure
3E03002	Introduction of High-dose Interleukin-2 into Peripheral Vein, Open Approach	ICD-10-PCS	Procedure
3E03302	Introduction of High-dose Interleukin-2 into Peripheral Vein, Percutaneous Approach	ICD-10-PCS	Procedure



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
3E06002	Introduction of High-dose Interleukin-2 into Central Artery, Open Approach	ICD-10-PCS	Procedure
3E06302	Introduction of High-dose Interleukin-2 into Central Artery, Percutaneous Approach	ICD-10-PCS	Procedure
3E05002	Introduction of High-dose Interleukin-2 into Peripheral Artery, Open Approach	ICD-10-PCS	Procedure
3E05302	Introduction of High-dose Interleukin-2 into Peripheral Artery, Percutaneous Approach	ICD-10-PCS	Procedure
3E06003	Introduction of Low-dose Interleukin-2 into Central Artery, Open Approach	ICD-10-PCS	Procedure
3E06303	Introduction of Low-dose Interleukin-2 into Central Artery, Percutaneous Approach	ICD-10-PCS	Procedure
3E05003	Introduction of Low-dose Interleukin-2 into Peripheral Artery, Open Approach	ICD-10-PCS	Procedure
3E05303	Introduction of Low-dose Interleukin-2 into Peripheral Artery, Percutaneous Approach	ICD-10-PCS	Procedure
3E03003	Introduction of Low-dose Interleukin-2 into Peripheral Vein, Open Approach	ICD-10-PCS	Procedure
3E03303	Introduction of Low-dose Interleukin-2 into Peripheral Vein, Percutaneous Approach	ICD-10-PCS	Procedure
3E04003	Introduction of Low-dose Interleukin-2 into Central Vein, Open Approach	ICD-10-PCS	Procedure
3E04303	Introduction of Low-dose Interleukin-2 into Central Vein, Percutaneous Approach	ICD-10-PCS	Procedure
3E0B70M	Introduction of Monoclonal Antibody into Ear, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0C70M	Introduction of Monoclonal Antibody into Eye, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0D30M	Introduction of Monoclonal Antibody into Mouth and Pharynx, Percutaneous Approach	ICD-10-PCS	Procedure
3E0M30M	Introduction of Monoclonal Antibody into Peritoneal Cavity, Percutaneous Approach	ICD-10-PCS	Procedure
3E0E70M	Introduction of Monoclonal Antibody into Products of Conception, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0G70M	Introduction of Monoclonal Antibody into Upper GI, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0A30M	Introduction of Monoclonal Antibody into Bone Marrow, Percutaneous Approach	ICD-10-PCS	Procedure
3E0N30M	Introduction of Monoclonal Antibody into Male Reproductive, Percutaneous Approach	ICD-10-PCS	Procedure
3E0L30M	Introduction of Monoclonal Antibody into Pleural Cavity, Percutaneous Approach	ICD-10-PCS	Procedure
3E0V30M	Introduction of Monoclonal Antibody into Bones, Percutaneous Approach	ICD-10-PCS	Procedure
3E0600M	Introduction of Monoclonal Antibody into Central Artery, Open Approach	ICD-10-PCS	Procedure
3E0630M	Introduction of Monoclonal Antibody into Central Artery, Percutaneous Approach	ICD-10-PCS	Procedure
3E0400M	Introduction of Monoclonal Antibody into Central Vein, Open Approach	ICD-10-PCS	Procedure
3E0430M	Introduction of Monoclonal Antibody into Central Vein, Percutaneous Approach	ICD-10-PCS	Procedure
3E0BX0M	Introduction of Monoclonal Antibody into Ear, External Approach	ICD-10-PCS	Procedure
3E0B30M	Introduction of Monoclonal Antibody into Ear, Percutaneous Approach	ICD-10-PCS	Procedure
3E0CX0M	Introduction of Monoclonal Antibody into Eye, External Approach	ICD-10-PCS	Procedure
3E0C30M	Introduction of Monoclonal Antibody into Eye, Percutaneous Approach	ICD-10-PCS	Procedure
3E0K30M	Introduction of Monoclonal Antibody into Genitourinary Tract, Percutaneous Approach	ICD-10-PCS	Procedure
3E0U30M	Introduction of Monoclonal Antibody into Joints, Percutaneous Approach	ICD-10-PCS	Procedure
3E0H30M	Introduction of Monoclonal Antibody into Lower GI, Percutaneous Approach	ICD-10-PCS	Procedure
3E0230M	Introduction of Monoclonal Antibody into Muscle, Percutaneous Approach	ICD-10-PCS	Procedure
3E09X0M	Introduction of Monoclonal Antibody into Nose, External Approach	ICD-10-PCS	Procedure
3E0930M	Introduction of Monoclonal Antibody into Nose, Percutaneous Approach	ICD-10-PCS	Procedure
3E0500M	Introduction of Monoclonal Antibody into Peripheral Artery, Open Approach	ICD-10-PCS	Procedure

**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

Code	Description	Code Type	Code Category
3E0530M	Introduction of Monoclonal Antibody into Peripheral Artery, Percutaneous Approach	ICD-10-PCS	Procedure
3E0300M	Introduction of Monoclonal Antibody into Peripheral Vein, Open Approach	ICD-10-PCS	Procedure
3E0330M	Introduction of Monoclonal Antibody into Peripheral Vein, Percutaneous Approach	ICD-10-PCS	Procedure
3E0E30M	Introduction of Monoclonal Antibody into Products of Conception, Percutaneous Approach	ICD-10-PCS	Procedure
3E0F30M	Introduction of Monoclonal Antibody into Respiratory Tract, Percutaneous Approach	ICD-10-PCS	Procedure
3E0130M	Introduction of Monoclonal Antibody into Subcutaneous Tissue, Percutaneous Approach	ICD-10-PCS	Procedure
3E0G30M	Introduction of Monoclonal Antibody into Upper GI, Percutaneous Approach	ICD-10-PCS	Procedure
3E0K80M	Introduction of Monoclonal Antibody into Genitourinary Tract, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0G80M	Introduction of Monoclonal Antibody into Upper GI, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
3E0A305	Introduction of Other Antineoplastic into Bone Marrow, Percutaneous Approach	ICD-10-PCS	Procedure
3E0V305	Introduction of Other Antineoplastic into Bones, Percutaneous Approach	ICD-10-PCS	Procedure
3E06305	Introduction of Other Antineoplastic into Central Artery, Percutaneous Approach	ICD-10-PCS	Procedure
3E06005	Introduction of Other Antineoplastic into Central Artery, Open Approach	ICD-10-PCS	Procedure
3E04005	Introduction of Other Antineoplastic into Central Vein, Open Approach	ICD-10-PCS	Procedure
3E04305	Introduction of Other Antineoplastic into Central Vein, Percutaneous Approach	ICD-10-PCS	Procedure
3E0BX05	Introduction of Other Antineoplastic into Ear, External Approach	ICD-10-PCS	Procedure
3E0B305	Introduction of Other Antineoplastic into Ear, Percutaneous Approach	ICD-10-PCS	Procedure
3E0CX05	Introduction of Other Antineoplastic into Eye, External Approach	ICD-10-PCS	Procedure
3E0C305	Introduction of Other Antineoplastic into Eye, Percutaneous Approach	ICD-10-PCS	Procedure
3E0H305	Introduction of Other Antineoplastic into Lower GI, Percutaneous Approach	ICD-10-PCS	Procedure
3E0W305	Introduction of Other Antineoplastic into Lymphatics, Percutaneous Approach	ICD-10-PCS	Procedure
3E0N305	Introduction of Other Antineoplastic into Male Reproductive, Percutaneous Approach	ICD-10-PCS	Procedure
3E0D305	Introduction of Other Antineoplastic into Mouth and Pharynx, Percutaneous Approach	ICD-10-PCS	Procedure
3E09X05	Introduction of Other Antineoplastic into Nose, External Approach	ICD-10-PCS	Procedure
3E09305	Introduction of Other Antineoplastic into Nose, Percutaneous Approach	ICD-10-PCS	Procedure
3E05005	Introduction of Other Antineoplastic into Peripheral Artery, Open Approach	ICD-10-PCS	Procedure
3E05305	Introduction of Other Antineoplastic into Peripheral Artery, Percutaneous Approach	ICD-10-PCS	Procedure
3E03005	Introduction of Other Antineoplastic into Peripheral Vein, Open Approach	ICD-10-PCS	Procedure
3E03305	Introduction of Other Antineoplastic into Peripheral Vein, Percutaneous Approach	ICD-10-PCS	Procedure
3E0L305	Introduction of Other Antineoplastic into Pleural Cavity, Percutaneous Approach	ICD-10-PCS	Procedure
3E0F305	Introduction of Other Antineoplastic into Respiratory Tract, Percutaneous Approach	ICD-10-PCS	Procedure
3E01305	Introduction of Other Antineoplastic into Subcutaneous Tissue, Percutaneous Approach	ICD-10-PCS	Procedure
3E0G305	Introduction of Other Antineoplastic into Upper GI, Percutaneous Approach	ICD-10-PCS	Procedure
3E0B705	Introduction of Other Antineoplastic into Ear, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0C705	Introduction of Other Antineoplastic into Eye, Via Natural or Artificial Opening	ICD-10-PCS	Procedure



**Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Diagnosis and Procedure Codes Assessed in the Procedure Table Used to Define Exclusion Criteria in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
3E0M305	Introduction of Other Antineoplastic into Peritoneal Cavity, Percutaneous Approach	ICD-10-PCS	Procedure
3E0G705	Introduction of Other Antineoplastic into Upper GI, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
3E0E305	Introduction of Other Antineoplastic into Products of Conception, Percutaneous Approach	ICD-10-PCS	Procedure
3E0K305	Introduction of Other Antineoplastic into Genitourinary Tract, Percutaneous Approach	ICD-10-PCS	Procedure
3E0U305	Introduction of Other Antineoplastic into Joints, Percutaneous Approach	ICD-10-PCS	Procedure
3E02305	Introduction of Other Antineoplastic into Muscle, Percutaneous Approach	ICD-10-PCS	Procedure
284.11	Antineoplastic chemotherapy induced pancytopenia	ICD-9-CM	Diagnosis
285.3	Antineoplastic chemotherapy induced anemia	ICD-9-CM	Diagnosis
999.81	Extravasation of vesicant chemotherapy	ICD-9-CM	Diagnosis
V58.11	Encounter for antineoplastic chemotherapy	ICD-9-CM	Diagnosis
V58.12	Encounter for antineoplastic immunotherapy	ICD-9-CM	Diagnosis
00.10	Implantation of chemotherapeutic agent	ICD-9-CM	Procedure
00.15	High-dose infusion interleukin-2 [IL-2]	ICD-9-CM	Procedure
00.18	Infusion of immunosuppressive antibody therapy	ICD-9-CM	Procedure
17.70	Intravenous infusion of clofarabine	ICD-9-CM	Procedure
99.25	Injection or infusion of cancer chemotherapeutic substance	ICD-9-CM	Procedure
99.28	Injection or infusion of biological response modifier [BRM] as an antineoplastic agent	ICD-9-CM	Procedure

**Appendix D. List of Generic and Brand Names of Medical Products Used to Define Exclusion Criteria in this Request**

Generic Name	Brand Name
<b>Chemotherapy</b>	
abarelix	Plenaxis
abemaciclib	Verzenio
abiraterone acetate	abiraterone
abiraterone acetate	Zytiga
abiraterone acetate, submicronized	Yonsa
acalabrutinib	Calquence
ado-trastuzumab emtansine	Kadcyla
afatinib dimaleate	Gilotrif
aldesleukin	Proleukin
alectinib HCl	Alecensa
alemtuzumab	Lemtrada
alemtuzumab	Campath
alpelisib	Piqray
altretamine	Hexalen
amifostine crystalline	Ethyol
amifostine crystalline	amifostine crystalline
aminoglutethimide	Cytadren
amivantamab-vmjw	Rybrevant
anastrozole	anastrozole
anastrozole	Arimidex
anastrozole	Arimidex 30-day Pack
anastrozole	anastrozole (bulk)
apalutamide	Erleada
arsenic trioxide	arsenic trioxide (bulk)
arsenic trioxide	arsenic trioxide
arsenic trioxide	Trisenox
asparaginase	Elspar
asparaginase (Erwinia chrysanthemi)	Erwinaze
asparaginase (Erwinia chrysanthemi)	Erwinase
asparaginase Erwinia chrysanthemi (recombinant)-rywn	Rylaze
atezolizumab	Tecentriq
avapritinib	Ayvakit
avelumab	Bavencio
axicabtagene ciloleucel	Yescarta
axitinib	Inlyta
azacitidine	azacitidine
azacitidine	Vidaza
azacitidine	Onureg
BCG live	Tice BCG
BCG live	Theracys
BCG vaccine, live	Tice BCG Vaccine
belantamab mafodotin-blmf	Blenrep
belinostat	Beleodaq
bendamustine HCl	bendamustine
bendamustine HCl	Belrapzo
bendamustine HCl	Bendeka
bendamustine HCl	Treanda

**Appendix D. List of Generic and Brand Names of Medical Products Used to Define Exclusion Criteria in this Request**


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<b>Generic Name</b>	<b>Brand Name</b>
bevacizumab	bevacizumab
bevacizumab	Avastin
bevacizumab-awwb	Mvasi
bevacizumab-bvzr	Zirabev
bexarotene	Targretin
bexarotene	bexarotene
bicalutamide	bicalutamide
bicalutamide	Casodex
binimetinib	Mektovi
bleomycin sulfate	bleomycin
bleomycin sulfate	Blenoxane
bleomycin sulfate	Bleo 15K
blinatumomab	Blinicyto
bortezomib	bortezomib
bortezomib	Velcade
bosutinib	Bosulif
brentuximab vedotin	Adcetris
brexucabtagene autoleucl	Tecartus
brigatinib	Alunbrig
busulfan	Myleran
busulfan	busulfan
busulfan	Busulfex
cabazitaxel	Jevtana
cabozantinib s-malate	Cometriq
cabozantinib s-malate	Cabometyx
calaspargase pegol-mknl	Asparlas
capecitabine	Xeloda
capecitabine	capecitabine
capmatinib hydrochloride	Tabrecta
carboplatin	Paraplatin
carboplatin	carboplatin
carfilzomib	Kyprolis
carmustine	BiCNU
carmustine	carmustine
carmustine in polifeprosan 20	Gliadel Wafer
cemiplimab-rwlc	Libtayo
ceritinib	Zykadia
cetuximab	Erbitux
chlorambucil	chlorambucil (bulk)
chlorambucil	Leukeran
cisplatin	cisplatin (bulk)
cisplatin	Platinol AQ
cisplatin	cisplatin
cladribine	Mavenclad (4 tablet pack)
cladribine	Mavenclad (5 tablet pack)
cladribine	Mavenclad (6 tablet pack)
cladribine	Mavenclad (7 tablet pack)
cladribine	Mavenclad (8 tablet pack)

**Appendix D. List of Generic and Brand Names of Medical Products Used to Define Exclusion Criteria in this Request**

<b>Generic Name</b>	<b>Brand Name</b>
cladribine	Mavenclad (9 tablet pack)
cladribine	Mavenclad (10 tablet pack)
cladribine	cladribine
cladribine	Leustatin
clofarabine	Clolar
clofarabine	clofarabine
cobimetinib fumarate	Cotellic
copanlisib di-HCl	Aliqopa
crizotinib	Xalkori
cromolyn sodium	Gastrocrom
cromolyn sodium	cromolyn
cromolyn sodium	cromolyn (bulk)
cyclophosphamide	cyclophosphamide (bulk)
cyclophosphamide	Neosar
cyclophosphamide	Cytoxan
cyclophosphamide	Cytoxan Lyophilized
cyclophosphamide	cyclophosphamide
cytarabine	Cytosar-U
cytarabine	Tarabine Pfs
cytarabine	cytarabine
cytarabine liposome/PF	DepoCyt (PF)
cytarabine/PF	cytarabine (PF)
dabrafenib mesylate	Tafinlar
dacarbazine	dacarbazine (bulk)
dacarbazine	DTIC-Dome
dacarbazine	dacarbazine
dacomitinib	Vizimpro
dactinomycin	Cosmegen
dactinomycin	dactinomycin
daratumumab	Darzalex
daratumumab-hyaluronidase-fihj	Darzalex Faspro
darolutamide	Nubeqa
dasatinib	Sprycel
daunorubicin citrate liposomal	DaunoXome
daunorubicin HCl	daunorubicin
daunorubicin HCl	Cerubidine
daunorubicin/cytarabine liposomal	Vyxeos
decitabine	decitabine
decitabine	Dacogen
decitabine/cedazuridine	Inqovi
degarelix acetate	Firmagon
degarelix acetate	Firmagon kit w diluent syringe
denileukin diftitox	Ontak
dexrazoxane HCl	Zinecard (as HCl)
dexrazoxane HCl	dexrazoxane HCl
dexrazoxane HCl	Totect
diethylstilbestrol	diethylstilbestrol (bulk)
diethylstilbestrol diphosphate	Stilphostrol

**Appendix D. List of Generic and Brand Names of Medical Products Used to Define Exclusion Criteria in this Request**

<b>Generic Name</b>	<b>Brand Name</b>
dinutuximab	Unituxin
docetaxel	docetaxel
docetaxel	Taxotere
docetaxel	Docefrez
dostarlimab-gxly	Jemperli
doxorubicin HCl	Adriamycin RDF
doxorubicin HCl	Adriamycin PFS
doxorubicin HCl	Rubex
doxorubicin HCl	doxorubicin
doxorubicin HCl	Adriamycin
doxorubicin HCl pegylated liposomal	Doxil
doxorubicin HCl pegylated liposomal	doxorubicin, peg-liposomal
doxorubicin HCl pegylated liposomal	Lipodox
doxorubicin HCl pegylated liposomal	Lipodox 50
durvalumab	Imfinzi
duvelisib	Copiktra
elotuzumab	Empliciti
enasidenib mesylate	Idhifa
encorafenib	Braftovi
enfortumab vedotin-ejfv	Padcev
entrectinib	Rozlytrek
enzalutamide	Xtandi
epirubicin HCl	Ellence
epirubicin HCl	epirubicin
erdafitinib	Balversa
eribulin mesylate	Halaven
erlotinib HCl	erlotinib
erlotinib HCl	Tarceva
estramustine phosphate sodium	Emcyt
etoposide	etoposide (bulk)
etoposide	Toposar
etoposide	VePesid
etoposide	etoposide
etoposide phosphate	Etopophos
everolimus	everolimus (immunosuppressive)
everolimus	Zortress
everolimus	everolimus (antineoplastic)
everolimus	Afinitor
everolimus	Afinitor Disperz
exemestane	Aromasin
exemestane	exemestane
fam-trastuzumab deruxtecan-nxki	Enhertu
fedratinib dihydrochloride	Inrebic
floxuridine	floxuridine (bulk)
floxuridine	FUDR
floxuridine	floxuridine
fludarabine phosphate	Oforta
fludarabine phosphate	fludarabine

**Appendix D. List of Generic and Brand Names of Medical Products Used to Define Exclusion Criteria in this Request**

<b>Generic Name</b>	<b>Brand Name</b>
fludarabine phosphate	Fludara
fluorouracil	Efudex
fluorouracil	Fluoroplex
fluorouracil	Carac
fluorouracil	fluorouracil
fluorouracil	Tolak
fluorouracil	fluorouracil (bulk)
fluorouracil	Adrucil
flutamide	Eulexin
flutamide	flutamide
fostamatinib disodium	Tavalisse
fulvestrant	Faslodex
fulvestrant	fulvestrant
gefitinib	Iressa
gemcitabine HCl	Gemzar
gemcitabine HCl	gemcitabine
gemcitabine HCl in 0.9 % sodium chloride	Infugem
gemtuzumab ozogamicin	Mylotarg
gilteritinib fumarate	Xospata
glasdegib maleate	Daurismo
glucarpidase	Voraxaze
goserelin acetate	Zoladex
histrelin acetate	Vantas
hydroxyurea	Droxia
hydroxyurea	Siklos
hydroxyurea	hydroxyurea (bulk)
hydroxyurea	Hydrea
hydroxyurea	hydroxyurea
hydroxyurea	Mylocel
ibrutinib	Imbruvica
idarubicin HCl	Idamycin PFS
idarubicin HCl	Idamycin
idarubicin HCl	idarubicin
idecabtagene vicleucel	Abecma
idelalisib	Zydelig
ifosfamide	Ifex
ifosfamide	ifosfamide
ifosfamide/mesna	Ifex/Mesnex
ifosfamide/mesna	ifosfamide-mesna
imatinib mesylate	imatinib
imatinib mesylate	Gleevec
infigratinib phosphate	Truseltiq
inotuzumab ozogamicin	Besponsa
interferon alfa-2a, recomb.	Roferon-A
interferon alfa-2b, recomb.	Intron A
interferon alfa-n3	Alferon N
interferon gamma-1b, recomb.	Actimmune
iobenguane iodine-131	Azedra Dosimetric

**Appendix D. List of Generic and Brand Names of Medical Products Used to Define Exclusion Criteria in this Request**

<b>Generic Name</b>	<b>Brand Name</b>
iobenguane iodine-131	Azedra Therapeutic
ipilimumab	Yervoy
irinotecan HCl	Camptosar
irinotecan HCl	irinotecan
irinotecan liposomal	Onivyde
isatuximab-irfc	Sarclisa
ivosidenib	Tibsovo
ixabepilone	Ixempra
ixazomib citrate	Ninlaro
kit for prep indium-111/ibritumomab tiuxetan/albumin human	Zevalin (In-111)
kit for prep yttrium-90/ibritumomab tiuxetan/albumin human	Zevalin (Y-90)
lapatinib ditosylate	Tykerb
lapatinib ditosylate	lapatinib
larotrectinib sulfate	Vitrakvi
lenalidomide	Revlimid
lenvatinib mesylate	Lenvima
letrozole	letrozole
letrozole	Femara
letrozole	letrozole (bulk)
leucovorin calcium	leucovorin calcium
leucovorin calcium	Calcium Folate (leucovorin)
leuprolide acetate	Eligard (3 month)
leuprolide acetate	Eligard
leuprolide acetate	Eligard (6 month)
leuprolide acetate	Eligard (4 month)
leuprolide acetate	Lupron Depot (3 month)
leuprolide acetate	Lupron Depot (6 Month)
leuprolide acetate	Lupron Depot
leuprolide acetate	Lupron Depot (4 month)
leuprolide acetate	leuprolide
leuprolide acetate	Lupron
leuprolide acetate	leuprolide (bulk)
leuprolide acetate/lidocaine HCl	Viadur
levamisole HCl	levamisole (bulk)
levamisole HCl	Ergamisol
levoleucovorin	Khapzory
levoleucovorin calcium	levoleucovorin calcium
levoleucovorin calcium	Fusilev
lisocabtagene maraleucel	Breyanzi
lisocabtagene maraleucel, CD4 component, 2 of 2	Breyanzi CD4 Component (2of 2)
lisocabtagene maraleucel, CD8 component, 1 of 2	Breyanzi CD8 Component (1of 2)
lomustine	CeeNU
lomustine	lomustine
lomustine	Gleostine
loncastuximab tesirine-lpyl	Zynlonta
lorlatinib	Lorbrena
lurbinectedin	Zepzelca
lutetium Lu 177 dotatate	Lutathera

**Appendix D. List of Generic and Brand Names of Medical Products Used to Define Exclusion Criteria in this Request**

<b>Generic Name</b>	<b>Brand Name</b>
margetuximab-cmkb	Margenza
mechlorethamine HCl	Valchlor
mechlorethamine HCl	mechlorethamine (bulk)
mechlorethamine HCl	Mustargen
medroxyprogesterone acetate	Depo-Provera
megestrol acetate	Megace
megestrol acetate	megestrol
megestrol acetate,micronized	megestrol acetate,micro (bulk)
melphalan	Alkeran
melphalan	melphalan
melphalan flufenamide hydrochloride	Pepaxto
melphalan HCl	Alkeran (as HCl)
melphalan HCl	melphalan HCl
melphalan HCl/betadex sulfobutyl ether sodium	Evomela
mercaptopurine	mercaptopurine (bulk)
mercaptopurine	mercaptopurine
mercaptopurine	Purinethol
mercaptopurine	Purixan
mesna	Mesnex
mesna	mesna
methotrexate	methotrexate (bulk)
methotrexate	Xatmep
methotrexate sodium	methotrexate sodium
methotrexate sodium	Trexall
methotrexate sodium	Rheumatrex
methotrexate sodium	Methotrexate (Anti-Rheumatic)
methotrexate sodium/PF	methotrexate sodium (PF)
methotrexate sodium/PF	Methotrexate LPF
methotrexate/PF	Otrexup (PF)
methotrexate/PF	Rasuvo (PF)
methotrexate/PF	RediTrex (PF)
methoxsalen	methoxsalen (bulk)
methoxsalen	Uvadex
midostaurin	Rydapt
mitomycin	Mitosol
mitomycin	mitomycin (bulk)
mitomycin	Mutamycin
mitomycin	mitomycin
mitomycin	Jelmyto
mitotane	Lysodren
mitotane	mitotane (bulk)
mitoxantrone HCl	mitoxantrone
mitoxantrone HCl	Novantrone
mogamulizumab-kpkc	Poteligeo
moxetumomab pasudotox-tdfk	Lumoxiti
naxitamab-gqgk	Danyelza
necitumumab	Portrazza
nelarabine	Arranon



**Appendix D. List of Generic and Brand Names of Medical Products Used to Define Exclusion Criteria in this Request**

<b>Generic Name</b>	<b>Brand Name</b>
neratinib maleate	Nerlynx
nilotinib HCl	Tasigna
nilutamide	Nilandron
nilutamide	nilutamide
nintedanib esylate	Ofev
niraparib tosylate	Zejula
nivolumab	Opdivo
obinutuzumab	Gazyva
ofatumumab	Kesimpta Pen
ofatumumab	Arzerra
olaparib	Lynparza
olaratumab	Lartruvo
omacetaxine mepesuccinate	Synribo
osimertinib mesylate	Tagrisso
oxaliplatin	Eloxatin
oxaliplatin	oxaliplatin
paclitaxel	Taxol
paclitaxel	paclitaxel
paclitaxel	Onxol
paclitaxel protein-bound	Abraxane
palbociclib	Ibrance
panitumumab	Vectibix
panobinostat lactate	Farydak
pazopanib HCl	Votrient
pegaspargase	Oncaspar
peginterferon alfa-2b	Sylatron
peginterferon alfa-2b	Sylatron 4-Pack
peginterferon alfa-2b	PegIntron
peginterferon alfa-2b	PegIntron Redipen
pembrolizumab	Keytruda
pemetrexed disodium	Alimta
pemigatinib	Pemazyre
pentostatin	Nipent
pentostatin	pentostatin
pertuzumab	Perjeta
pertuzumab-trastuzumab-hyaluronidase-zzxf	Phesgo
pexidartinib hydrochloride	Turalio
plicamycin	Mithracin
polatuzumab vedotin-piiq	Polivy
pomalidomide	Pomalyst
ponatinib HCl	Iclusig
porfimer sodium	Photofrin
pralatrexate	Folotyn
pralsetinib	Gavreto
procarbazine HCl	procarbazine HCl (bulk)
procarbazine HCl	Matulane
radium-223 dichloride	Xofigo
ramucirumab	Cyramza

**Appendix D. List of Generic and Brand Names of Medical Products Used to Define Exclusion Criteria in this Request**

<b>Generic Name</b>	<b>Brand Name</b>
regorafenib	Stivarga
relugolix	Orgovyx
ribociclib succinate	Kisqali
ribociclib succinate/letrozole	Kisqali Femara Co-Pack
ripretinib	Qinlock
rituximab	Rituxan
rituximab/hyaluronidase, human recombinant	Rituxan Hycela
rituximab-abbs	Truxima
rituximab-arrx	Riabni
rituximab-pvvr	Ruxience
romidepsin	romidepsin
romidepsin	Istodax
rucaparib camsylate	Rubraca
ruxolitinib phosphate	Jakafi
sacituzumab govitecan-hziy	Trodelyv
samarium Sm 153 lexidronam	Quadramet
selinexor	Xpovio
selpercatinib	Retevmo
selumetinib sulfate/vitamin E TPGS	Koselugo
siltuximab	Sylvant
sipuleucel-T/lactated ringers solution	Provenge
sodium butyrate	sodium butyrate (bulk)
sodium iodide-131	Hicon
sonidegib phosphate	Odomzo
sorafenib tosylate	Nexavar
sotorasib	Lumakras
streptozocin	Zanosar
strontium-89 chloride	Metastron
strontium-89 chloride	strontium-89 chloride
sunitinib malate	Sutent
tafasitamab-cxix	Monjuvi
tagraxofusp-erzs	Elzonris
talazoparib tosylate	Talzenna
talimogene laherparepvec	Imlygic
tamoxifen citrate	tamoxifen
tamoxifen citrate	Nolvadex
tamoxifen citrate	Soltamox
tamoxifen citrate	tamoxifen (bulk)
tazemetostat hydrobromide	Tazverik
temozolomide	temozolomide
temozolomide	Temodar
temsirolimus	Torisel
temsirolimus	temsirolimus
teniposide	Vumon
teniposide	teniposide
tepotinib HCl	Tepmetko
testolactone	Teslac
thalidomide	Thalomid

**Appendix D. List of Generic and Brand Names of Medical Products Used to Define Exclusion Criteria in this Request**

<b>Generic Name</b>	<b>Brand Name</b>
thioguanine	thioguanine (bulk)
thioguanine	Tabloid
thiotepa	thiotepa (bulk)
thiotepa	thiotepa
thiotepa	Tepadina
thiotepa	Thioplex
tisagenlecleucel	Kymriah
tivozanib HCl	Fotivda
topotecan HCl	Hycamtin
topotecan HCl	topotecan
toremifene citrate	Fareston
toremifene citrate	toremifene
tositumomab (with maltose)	Bexxar Dosimetric
tositumomab (with maltose)	Bexxar Therapeutic
Tositumomab Iodine-131 (with Maltose)	Bexxar 131 Iodine
trabectedin	Yondelis
trametinib dimethyl sulfoxide	Mekinist
trastuzumab	Herceptin
trastuzumab-anns	Kanjinti
trastuzumab-dkst	Ogivri
trastuzumab-dttb	Ontruzant
trastuzumab-hyaluronidase-oysk	Herceptin Hylecta
trastuzumab-pkrb	Herzuma
trastuzumab-qyyp	Trazimera
tretinoin	Vesanoid
tretinoin	tretinoin (antineoplastic)
trifluridine/tipiracil HCl	Lonsurf
trilaciclib dihydrochloride	Cosela
triptorelin pamoate	Trelstar LA
triptorelin pamoate	Trelstar Depot
triptorelin pamoate	Trelstar
tucatinib	Tukysa
umbralisib tosylate	Ukoniq
uracil mustard	uracil mustard
uridine	uridine (bulk)
uridine triacetate	Vistogard
valrubicin	valrubicin
valrubicin	Valstar
vandetanib	vandetanib
vandetanib	Caprelsa
vemurafenib	Zelboraf
venetoclax	Venclexta
venetoclax	Venclexta Starting Pack
vinblastine sulfate	Velban
vinblastine sulfate	vinblastine
vincristine sulfate	Oncovin
vincristine sulfate	Vincasar PFS
vincristine sulfate	vincristine

**Appendix D. List of Generic and Brand Names of Medical Products Used to Define Exclusion Criteria in this Request**

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<b>Generic Name</b>	<b>Brand Name</b>
vincristine sulfate liposomal	Marqibo
vinorelbine tartrate	vinorelbine
vinorelbine tartrate	Navelbine
vismodegib	Erivedge
vorinostat	Zolinza
zanubrutinib	Brukinsa
ziv-aflibercept	Zaltrap

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
<b>Acute Myocardial Infarction</b>			
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery	Diagnosis	ICD-10-CM
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery	Diagnosis	ICD-10-CM
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall	Diagnosis	ICD-10-CM
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery	Diagnosis	ICD-10-CM
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall	Diagnosis	ICD-10-CM
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery	Diagnosis	ICD-10-CM
I21.29	ST elevation (STEMI) myocardial infarction involving other sites	Diagnosis	ICD-10-CM
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site	Diagnosis	ICD-10-CM
I21.4	Non-ST elevation (NSTEMI) myocardial infarction	Diagnosis	ICD-10-CM
I21.9	Acute myocardial infarction, unspecified	Diagnosis	ICD-10-CM
I21.A1	Myocardial infarction type 2	Diagnosis	ICD-10-CM
I21.A9	Other myocardial infarction type	Diagnosis	ICD-10-CM
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall	Diagnosis	ICD-10-CM
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall	Diagnosis	ICD-10-CM
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction	Diagnosis	ICD-10-CM
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites	Diagnosis	ICD-10-CM
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site	Diagnosis	ICD-10-CM
410.01	Acute myocardial infarction of anterolateral wall, initial episode of care	Diagnosis	ICD-9-CM
410.21	Acute myocardial infarction of inferolateral wall, initial episode of care	Diagnosis	ICD-9-CM
410.31	Acute myocardial infarction of inferoposterior wall, initial episode of care	Diagnosis	ICD-9-CM
410.71	Acute myocardial infarction, subendocardial infarction, initial episode of care	Diagnosis	ICD-9-CM
410.61	Acute myocardial infarction, true posterior wall infarction, initial episode of care	Diagnosis	ICD-9-CM
410.11	Acute myocardial infarction of other anterior wall, initial episode of care	Diagnosis	ICD-9-CM
410.41	Acute myocardial infarction of other inferior wall, initial episode of care	Diagnosis	ICD-9-CM
410.51	Acute myocardial infarction of other lateral wall, initial episode of care	Diagnosis	ICD-9-CM
410.81	Acute myocardial infarction of other specified sites, initial episode of care	Diagnosis	ICD-9-CM
410.91	Acute myocardial infarction, unspecified site, initial episode of care	Diagnosis	ICD-9-CM
<b>Alzheimer's Disease and Related Conditions</b>			
F01.50	Vascular dementia without behavioral disturbance	Diagnosis	ICD-10-CM
F01.51	Vascular dementia with behavioral disturbance	Diagnosis	ICD-10-CM
F02.80	Dementia in other diseases classified elsewhere without behavioral disturbance	Diagnosis	ICD-10-CM
F02.81	Dementia in other diseases classified elsewhere with behavioral disturbance	Diagnosis	ICD-10-CM
F03.90	Unspecified dementia without behavioral disturbance	Diagnosis	ICD-10-CM
F03.91	Unspecified dementia with behavioral disturbance	Diagnosis	ICD-10-CM
F04	Amnesic disorder due to known physiological condition	Diagnosis	ICD-10-CM
F05	Delirium due to known physiological condition	Diagnosis	ICD-10-CM
F06.1	Catatonic disorder due to known physiological condition	Diagnosis	ICD-10-CM
F06.8	Other specified mental disorders due to known physiological condition	Diagnosis	ICD-10-CM
G13.8	Systemic atrophy primarily affecting central nervous system in other diseases classified elsewhere	Diagnosis	ICD-10-CM
G30.0	Alzheimer's disease with early onset	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
G30.1	Alzheimer's disease with late onset	Diagnosis	ICD-10-CM
G30.8	Other Alzheimer's disease	Diagnosis	ICD-10-CM
G30.9	Alzheimer's disease, unspecified	Diagnosis	ICD-10-CM
G31.01	Pick's disease	Diagnosis	ICD-10-CM
G31.09	Other frontotemporal dementia	Diagnosis	ICD-10-CM
G31.1	Senile degeneration of brain, not elsewhere classified	Diagnosis	ICD-10-CM
G31.2	Degeneration of nervous system due to alcohol	Diagnosis	ICD-10-CM
G94	Other disorders of brain in diseases classified elsewhere	Diagnosis	ICD-10-CM
R41.81	Age-related cognitive decline	Diagnosis	ICD-10-CM
R54	Age-related physical debility	Diagnosis	ICD-10-CM
331.0	Alzheimer's disease	Diagnosis	ICD-9-CM
294.0	Amnestic disorder in conditions classified elsewhere	Diagnosis	ICD-9-CM
331.7	Cerebral degeneration in diseases classified elsewhere	Diagnosis	ICD-9-CM
294.11	Dementia in conditions classified elsewhere with behavioral disturbance	Diagnosis	ICD-9-CM
294.10	Dementia in conditions classified elsewhere without behavioral disturbance	Diagnosis	ICD-9-CM
294.20	Dementia, unspecified, without behavioral disturbance	Diagnosis	ICD-9-CM
294.21	Dementia, unspecified, with behavioral disturbance	Diagnosis	ICD-9-CM
294.8	Other persistent mental disorders due to conditions classified elsewhere	Diagnosis	ICD-9-CM
331.19	Other frontotemporal dementia	Diagnosis	ICD-9-CM
331.11	Pick's disease	Diagnosis	ICD-9-CM
290.11	Presenile dementia with delirium	Diagnosis	ICD-9-CM
290.12	Presenile dementia with delusional features	Diagnosis	ICD-9-CM
290.13	Presenile dementia with depressive features	Diagnosis	ICD-9-CM
290.10	Presenile dementia, uncomplicated	Diagnosis	ICD-9-CM
331.2	Senile degeneration of brain	Diagnosis	ICD-9-CM
290.3	Senile dementia with delirium	Diagnosis	ICD-9-CM
290.20	Senile dementia with delusional features	Diagnosis	ICD-9-CM
290.21	Senile dementia with depressive features	Diagnosis	ICD-9-CM
290.0	Senile dementia, uncomplicated	Diagnosis	ICD-9-CM
797	Senility without mention of psychosis	Diagnosis	ICD-9-CM
290.40	Vascular dementia, uncomplicated	Diagnosis	ICD-9-CM
290.41	Vascular dementia, with delirium	Diagnosis	ICD-9-CM
290.42	Vascular dementia, with delusions	Diagnosis	ICD-9-CM
290.43	Vascular dementia, with depressed mood	Diagnosis	ICD-9-CM
<b>Atrial Fibrillation</b>			
I48.2	Chronic atrial fibrillation	Diagnosis	ICD-10-CM
I48.0	Paroxysmal atrial fibrillation	Diagnosis	ICD-10-CM
I48.1	Persistent atrial fibrillation	Diagnosis	ICD-10-CM
I48.91	Unspecified atrial fibrillation	Diagnosis	ICD-10-CM
I48.11	Longstanding persistent atrial fibrillation	Diagnosis	ICD-10-CM
I48.19	Other persistent atrial fibrillation	Diagnosis	ICD-10-CM
I48.20	Chronic atrial fibrillation, unspecified	Diagnosis	ICD-10-CM
I48.21	Permanent atrial fibrillation	Diagnosis	ICD-10-CM
427.31	Atrial fibrillation	Diagnosis	ICD-9-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

Code	Description	Code Type	Code
			Category
<b>Diabetes</b>			
E08.00	Diabetes mellitus due to underlying condition with hyperosmolarity without nonketotic	Diagnosis	ICD-10-CM
E08.01	Diabetes mellitus due to underlying condition with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E08.10	Diabetes mellitus due to underlying condition with ketoacidosis without coma	Diagnosis	ICD-10-CM
E08.11	Diabetes mellitus due to underlying condition with ketoacidosis with coma	Diagnosis	ICD-10-CM
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy	Diagnosis	ICD-10-CM
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication	Diagnosis	ICD-10-CM
E08.311	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy with	Diagnosis	ICD-10-CM
E08.319	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy	Diagnosis	ICD-10-CM
E08.321	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic	Diagnosis	ICD-10-CM
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3212	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic	Diagnosis	ICD-10-CM
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3219	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic	Diagnosis	ICD-10-CM
E08.329	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic	Diagnosis	ICD-10-CM
E08.3292	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic	Diagnosis	ICD-10-CM
E08.3299	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.331	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic	Diagnosis	ICD-10-CM
E08.3312	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic	Diagnosis	ICD-10-CM
E08.3319	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.339	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic	Diagnosis	ICD-10-CM
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3392	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic	Diagnosis	ICD-10-CM
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3399	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.341	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E08.3411	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3413	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3419	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.349	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.3491	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3493	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3499	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.351	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.3511	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3519	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.3521	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E08.3522	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E08.3523	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E08.3529	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E08.3531	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E08.3532	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E08.3533	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E08.3539	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E08.3541	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E08.3542	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E08.3543	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E08.3549	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E08.3551	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E08.3552	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E08.3553	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E08.3559	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E08.359	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.3591	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3599	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract	Diagnosis	ICD-10-CM
E08.37X1	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E08.37X2	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E08.37X3	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E08.37X9	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E08.39	Diabetes mellitus due to underlying condition with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E08.40	Diabetes mellitus due to underlying condition with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E08.41	Diabetes mellitus due to underlying condition with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E08.42	Diabetes mellitus due to underlying condition with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E08.43	Diabetes mellitus due to underlying condition with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E08.44	Diabetes mellitus due to underlying condition with diabetic amyotrophy	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E08.49	Diabetes mellitus due to underlying condition with other diabetic neurological complication	Diagnosis	ICD-10-CM
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E08.59	Diabetes mellitus due to underlying condition with other circulatory complications	Diagnosis	ICD-10-CM
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy	Diagnosis	ICD-10-CM
E08.620	Diabetes mellitus due to underlying condition with diabetic dermatitis	Diagnosis	ICD-10-CM
E08.621	Diabetes mellitus due to underlying condition with foot ulcer	Diagnosis	ICD-10-CM
E08.622	Diabetes mellitus due to underlying condition with other skin ulcer	Diagnosis	ICD-10-CM
E08.628	Diabetes mellitus due to underlying condition with other skin complications	Diagnosis	ICD-10-CM
E08.630	Diabetes mellitus due to underlying condition with periodontal disease	Diagnosis	ICD-10-CM
E08.638	Diabetes mellitus due to underlying condition with other oral complications	Diagnosis	ICD-10-CM
E08.641	Diabetes mellitus due to underlying condition with hypoglycemia with coma	Diagnosis	ICD-10-CM
E08.649	Diabetes mellitus due to underlying condition with hypoglycemia without coma	Diagnosis	ICD-10-CM
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia	Diagnosis	ICD-10-CM
E08.69	Diabetes mellitus due to underlying condition with other specified complication	Diagnosis	ICD-10-CM
E08.8	Diabetes mellitus due to underlying condition with unspecified complications	Diagnosis	ICD-10-CM
E08.9	Diabetes mellitus due to underlying condition without complications	Diagnosis	ICD-10-CM
E09.00	Drug or chemical induced diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E09.01	Drug or chemical induced diabetes mellitus with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E09.10	Drug or chemical induced diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E09.11	Drug or chemical induced diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E09.311	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.319	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.321	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3212	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3219	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E09.329	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3292	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3299	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.331	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3312	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3319	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.339	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3392	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3399	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.341	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3412	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3419	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.349	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E09.3492	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3499	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.351	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3513	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3519	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.3521	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E09.3522	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E09.3523	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E09.3529	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E09.3531	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E09.3532	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E09.3533	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E09.3539	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E09.3541	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E09.3542	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E09.3543	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E09.3549	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E09.3551	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E09.3552	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E09.3553	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E09.3559	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E09.359	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.3591	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3599	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E09.37X1	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E09.37X2	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E09.37X3	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E09.37X9	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E09.39	Drug or chemical induced diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E09.40	Drug or chemical induced diabetes mellitus with neurological complications with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E09.41	Drug or chemical induced diabetes mellitus with neurological complications with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E09.42	Drug or chemical induced diabetes mellitus with neurological complications with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E09.43	Drug or chemical induced diabetes mellitus with neurological complications with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E09.44	Drug or chemical induced diabetes mellitus with neurological complications with diabetic amyotrophy	Diagnosis	ICD-10-CM
E09.49	Drug or chemical induced diabetes mellitus with neurological complications with other diabetic neurological complication	Diagnosis	ICD-10-CM
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E09.59	Drug or chemical induced diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E09.620	Drug or chemical induced diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E09.621	Drug or chemical induced diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E09.622	Drug or chemical induced diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E09.628	Drug or chemical induced diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E09.630	Drug or chemical induced diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E09.638	Drug or chemical induced diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E09.641	Drug or chemical induced diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E09.649	Drug or chemical induced diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E09.65	Drug or chemical induced diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E09.69	Drug or chemical induced diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E09.8	Drug or chemical induced diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E09.9	Drug or chemical induced diabetes mellitus without complications	Diagnosis	ICD-10-CM
E10.10	Type 1 diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E10.11	Type 1 diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E10.21	Type 1 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E10.311	Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.319	Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.321	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3219	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.329	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3299	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.331	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3319	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.339	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3399	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.341	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3419	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.349	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3499	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.351	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E10.3519	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.359	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.36	Type 1 diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E10.37X1	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E10.37X2	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E10.37X3	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E10.37X9	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy	Diagnosis	ICD-10-CM
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication	Diagnosis	ICD-10-CM
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E10.59	Type 1 diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E10.620	Type 1 diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E10.621	Type 1 diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E10.622	Type 1 diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E10.628	Type 1 diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E10.630	Type 1 diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E10.638	Type 1 diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E10.641	Type 1 diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E10.649	Type 1 diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E10.65	Type 1 diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E10.69	Type 1 diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E10.8	Type 1 diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E10.9	Type 1 diabetes mellitus without complications	Diagnosis	ICD-10-CM
E11.00	Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E11.01	Type 2 diabetes mellitus with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E11.10	Type 2 diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E11.11	Type 2 diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E11.21	Type 2 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E11.311	Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.319	Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.321	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3219	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.329	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3299	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.331	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3319	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.339	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3399	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.341	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3419	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.349	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3499	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.351	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3519	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.3521	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E11.3522	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E11.3523	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E11.3529	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E11.3531	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E11.3532	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E11.3533	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E11.3539	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E11.3541	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E11.3542	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E11.3543	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E11.3549	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E11.3551	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E11.3552	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E11.3553	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E11.3559	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E11.359	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3599	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.36	Type 2 diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E11.37X1	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E11.37X2	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E11.37X3	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E11.37X9	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy	Diagnosis	ICD-10-CM
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication	Diagnosis	ICD-10-CM
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E11.59	Type 2 diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E11.620	Type 2 diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E11.621	Type 2 diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E11.622	Type 2 diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E11.628	Type 2 diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E11.630	Type 2 diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E11.638	Type 2 diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E11.641	Type 2 diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E11.649	Type 2 diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E11.65	Type 2 diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E11.69	Type 2 diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E11.8	Type 2 diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E11.9	Type 2 diabetes mellitus without complications	Diagnosis	ICD-10-CM
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E13.10	Other specified diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E13.11	Other specified diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E13.21	Other specified diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E13.29	Other specified diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E13.311	Other specified diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.319	Other specified diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.321	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.329	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.331	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.339	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.341	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.349	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.351	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.3521	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E13.3522	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E13.3523	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E13.3529	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E13.3531	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E13.3532	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E13.3533	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E13.3539	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E13.3541	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E13.3542	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E13.3543	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E13.3549	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E13.3551	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E13.3552	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E13.3553	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E13.3559	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E13.359	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.36	Other specified diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E13.40	Other specified diabetes mellitus with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E13.44	Other specified diabetes mellitus with diabetic amyotrophy	Diagnosis	ICD-10-CM
E13.49	Other specified diabetes mellitus with other diabetic neurological complication	Diagnosis	ICD-10-CM
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E13.59	Other specified diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E13.618	Other specified diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E13.620	Other specified diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E13.621	Other specified diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E13.622	Other specified diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E13.628	Other specified diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E13.630	Other specified diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E13.638	Other specified diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E13.641	Other specified diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E13.649	Other specified diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E13.65	Other specified diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E13.69	Other specified diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E13.8	Other specified diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E13.9	Other specified diabetes mellitus without complications	Diagnosis	ICD-10-CM
E10.3521	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E10.3522	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E10.3523	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E10.3529	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E10.3531	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E10.3532	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E10.3533	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E10.3539	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E10.3541	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E10.3542	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E10.3543	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E10.3549	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E10.3551	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E10.3552	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E10.3553	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E10.3559	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3599	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3599	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
362.01	Background diabetic retinopathy	Diagnosis	ICD-9-CM
250.23	Diabetes with hyperosmolarity, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.21	Diabetes with hyperosmolarity, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.20	Diabetes with hyperosmolarity, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.22	Diabetes with hyperosmolarity, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.11	Diabetes with ketoacidosis, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.10	Diabetes with ketoacidosis, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.63	Diabetes with neurological manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.61	Diabetes with neurological manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.60	Diabetes with neurological manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.62	Diabetes with neurological manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.01	Diabetes mellitus without mention of complication, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.00	Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.03	Diabetes mellitus without mention of complication, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.02	Diabetes mellitus without mention of complication, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.53	Diabetes with ophthalmic manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.51	Diabetes with ophthalmic manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.50	Diabetes with ophthalmic manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.52	Diabetes with ophthalmic manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.31	Diabetes with other coma, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.30	Diabetes with other coma, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.83	Diabetes with other specified manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
250.81	Diabetes with other specified manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.80	Diabetes with other specified manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.82	Diabetes with other specified manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.73	Diabetes with peripheral circulatory disorders, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.71	Diabetes with peripheral circulatory disorders, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.70	Diabetes with peripheral circulatory disorders, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.72	Diabetes with peripheral circulatory disorders, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.43	Diabetes with renal manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.41	Diabetes with renal manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.40	Diabetes with renal manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.42	Diabetes with renal manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.91	Diabetes with unspecified complication, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.90	Diabetes with unspecified complication, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.93	Diabetes with unspecified complication, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.92	Diabetes with unspecified complication, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.13	Diabetes with ketoacidosis, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.12	Diabetes with ketoacidosis, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.33	Diabetes with other coma, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.32	Diabetes with other coma, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
366.41	Diabetic cataract	Diagnosis	ICD-9-CM
362.04	Mild nonproliferative diabetic retinopathy	Diagnosis	ICD-9-CM
362.05	Moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-9-CM
362.03	Nonproliferative diabetic retinopathy NOS	Diagnosis	ICD-9-CM
357.2	Polyneuropathy in diabetes	Diagnosis	ICD-9-CM
362.02	Proliferative diabetic retinopathy	Diagnosis	ICD-9-CM
249.60	Secondary diabetes mellitus with neurological manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.50	Secondary diabetes mellitus with ophthalmic manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.20	Secondary diabetes mellitus with hyperosmolarity, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.10	Secondary diabetes mellitus with ketoacidosis, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.61	Secondary diabetes mellitus with neurological manifestations, uncontrolled	Diagnosis	ICD-9-CM
249.00	Secondary diabetes mellitus without mention of complication, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.01	Secondary diabetes mellitus without mention of complication, uncontrolled	Diagnosis	ICD-9-CM
249.51	Secondary diabetes mellitus with ophthalmic manifestations, uncontrolled	Diagnosis	ICD-9-CM
249.80	Secondary diabetes mellitus with other specified manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
249.81	Secondary diabetes mellitus with other specified manifestations, uncontrolled	Diagnosis	ICD-9-CM
249.30	Secondary diabetes mellitus with other coma, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.70	Secondary diabetes mellitus with peripheral circulatory disorders, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.71	Secondary diabetes mellitus with peripheral circulatory disorders, uncontrolled	Diagnosis	ICD-9-CM
249.40	Secondary diabetes mellitus with renal manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.41	Secondary diabetes mellitus with renal manifestations, uncontrolled	Diagnosis	ICD-9-CM
249.90	Secondary diabetes mellitus with unspecified complication, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.91	Secondary diabetes mellitus with unspecified complication, uncontrolled	Diagnosis	ICD-9-CM
249.21	Secondary diabetes mellitus with hyperosmolarity, uncontrolled	Diagnosis	ICD-9-CM
249.11	Secondary diabetes mellitus with ketoacidosis, uncontrolled	Diagnosis	ICD-9-CM
249.31	Secondary diabetes mellitus with other coma, uncontrolled	Diagnosis	ICD-9-CM
362.06	Severe nonproliferative diabetic retinopathy	Diagnosis	ICD-9-CM
<b>Heart Failure</b>			
I09.81	Rheumatic heart failure	Diagnosis	ICD-10-CM
I11.0	Hypertensive heart disease with heart failure	Diagnosis	ICD-10-CM
I13.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I50.1	Left ventricular failure, unspecified	Diagnosis	ICD-10-CM
I50.20	Unspecified systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.21	Acute systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.22	Chronic systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.23	Acute on chronic systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.30	Unspecified diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.31	Acute diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.32	Chronic diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.33	Acute on chronic diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.42	Chronic combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.810	Right heart failure, unspecified	Diagnosis	ICD-10-CM
I50.811	Acute right heart failure	Diagnosis	ICD-10-CM
I50.812	Chronic right heart failure	Diagnosis	ICD-10-CM
I50.813	Acute on chronic right heart failure	Diagnosis	ICD-10-CM
I50.814	Right heart failure due to left heart failure	Diagnosis	ICD-10-CM
I50.82	Biventricular heart failure	Diagnosis	ICD-10-CM
I50.83	High output heart failure	Diagnosis	ICD-10-CM
I50.84	End stage heart failure	Diagnosis	ICD-10-CM
I50.89	Other heart failure	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
150.9	Heart failure, unspecified	Diagnosis	ICD-10-CM
428.43	Acute on chronic combined systolic and diastolic heart failure	Diagnosis	ICD-9-CM
428.41	Acute combined systolic and diastolic heart failure	Diagnosis	ICD-9-CM
428.31	Acute diastolic heart failure	Diagnosis	ICD-9-CM
428.33	Acute on chronic diastolic heart failure	Diagnosis	ICD-9-CM
428.23	Acute on chronic systolic heart failure	Diagnosis	ICD-9-CM
428.21	Acute systolic heart failure	Diagnosis	ICD-9-CM
402.11	Benign hypertensive heart disease with heart failure	Diagnosis	ICD-9-CM
428.42	Chronic combined systolic and diastolic heart failure	Diagnosis	ICD-9-CM
428.32	Chronic diastolic heart failure	Diagnosis	ICD-9-CM
428.22	Chronic systolic heart failure	Diagnosis	ICD-9-CM
428.0	Congestive heart failure, unspecified	Diagnosis	ICD-9-CM
404.13	Hypertensive heart and chronic kidney disease, benign, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.93	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.11	Hypertensive heart and chronic kidney disease, benign, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.01	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.03	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.91	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
402.91	Hypertensive heart disease, unspecified, with heart failure	Diagnosis	ICD-9-CM
428.1	Left heart failure	Diagnosis	ICD-9-CM
402.01	Malignant hypertensive heart disease with heart failure	Diagnosis	ICD-9-CM
398.91	Rheumatic heart failure (congestive)	Diagnosis	ICD-9-CM
428.40	Unspecified combined systolic and diastolic heart failure	Diagnosis	ICD-9-CM
428.30	Unspecified diastolic heart failure	Diagnosis	ICD-9-CM
428.9	Unspecified heart failure	Diagnosis	ICD-9-CM
428.20	Unspecified systolic heart failure	Diagnosis	ICD-9-CM
<b>Hyperlipidemia</b>			
E78.0	Pure hypercholesterolemia	Diagnosis	ICD-10-CM
E78.00	Pure hypercholesterolemia, unspecified	Diagnosis	ICD-10-CM
E78.01	Familial hypercholesterolemia	Diagnosis	ICD-10-CM
E78.1	Pure hyperglyceridemia	Diagnosis	ICD-10-CM
E78.2	Mixed hyperlipidemia	Diagnosis	ICD-10-CM
E78.3	Hyperchylomicronemia	Diagnosis	ICD-10-CM
E78.4	Other hyperlipidemia	Diagnosis	ICD-10-CM
E78.41	Elevated Lipoprotein(a)	Diagnosis	ICD-10-CM
E78.49	Other hyperlipidemia	Diagnosis	ICD-10-CM
E78.5	Hyperlipidemia, unspecified	Diagnosis	ICD-10-CM
272.3	Hyperchylomicronemia	Diagnosis	ICD-9-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
272.2	Mixed hyperlipidemia	Diagnosis	ICD-9-CM
272.4	Other and unspecified hyperlipidemia	Diagnosis	ICD-9-CM
272.0	Pure hypercholesterolemia	Diagnosis	ICD-9-CM
272.1	Pure hyperglyceridemia	Diagnosis	ICD-9-CM
<b>Hypertension</b>			
H35.031	Hypertensive retinopathy, right eye	Diagnosis	ICD-10-CM
H35.032	Hypertensive retinopathy, left eye	Diagnosis	ICD-10-CM
H35.033	Hypertensive retinopathy, bilateral	Diagnosis	ICD-10-CM
H35.039	Hypertensive retinopathy, unspecified eye	Diagnosis	ICD-10-CM
I10	Essential (primary) hypertension	Diagnosis	ICD-10-CM
I11.0	Hypertensive heart disease with heart failure	Diagnosis	ICD-10-CM
I11.9	Hypertensive heart disease without heart failure	Diagnosis	ICD-10-CM
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease	Diagnosis	ICD-10-CM
I12.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.10	Hypertensive heart and chronic kidney disease without heart failure, with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I15.0	Renovascular hypertension	Diagnosis	ICD-10-CM
I15.1	Hypertension secondary to other renal disorders	Diagnosis	ICD-10-CM
I15.2	Hypertension secondary to endocrine disorders	Diagnosis	ICD-10-CM
I15.8	Other secondary hypertension	Diagnosis	ICD-10-CM
I15.9	Secondary hypertension, unspecified	Diagnosis	ICD-10-CM
I67.4	Hypertensive encephalopathy	Diagnosis	ICD-10-CM
N26.2	Page kidney	Diagnosis	ICD-10-CM
402.10	Benign hypertensive heart disease without heart failure	Diagnosis	ICD-9-CM
402.11	Benign hypertensive heart disease with heart failure	Diagnosis	ICD-9-CM
401.1	Essential hypertension, benign	Diagnosis	ICD-9-CM
401.0	Essential hypertension, malignant	Diagnosis	ICD-9-CM
403.00	Hypertensive chronic kidney disease, malignant, with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
403.01	Hypertensive chronic kidney disease, malignant, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
403.10	Hypertensive chronic kidney disease, benign, with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
403.11	Hypertensive chronic kidney disease, benign, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
403.90	Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
403.91	Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.13	Hypertensive heart and chronic kidney disease, benign, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.02	Hypertensive heart and chronic kidney disease, malignant, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.93	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.11	Hypertensive heart and chronic kidney disease, benign, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.10	Hypertensive heart and chronic kidney disease, benign, without heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.12	Hypertensive heart and chronic kidney disease, benign, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.01	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.00	Hypertensive heart and chronic kidney disease, malignant, without heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.03	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.91	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.90	Hypertensive heart and chronic kidney disease, unspecified, without heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.92	Hypertensive heart and chronic kidney disease, unspecified, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
437.2	Hypertensive encephalopathy	Diagnosis	ICD-9-CM
402.91	Hypertensive heart disease, unspecified, with heart failure	Diagnosis	ICD-9-CM
362.11	Hypertensive retinopathy	Diagnosis	ICD-9-CM
402.00	Malignant hypertensive heart disease without heart failure	Diagnosis	ICD-9-CM
402.01	Malignant hypertensive heart disease with heart failure	Diagnosis	ICD-9-CM
405.19	Other secondary hypertension, benign	Diagnosis	ICD-9-CM
405.09	Other secondary hypertension, malignant	Diagnosis	ICD-9-CM
405.99	Other secondary hypertension, unspecified	Diagnosis	ICD-9-CM
405.11	Secondary renovascular hypertension, benign	Diagnosis	ICD-9-CM
405.01	Secondary renovascular hypertension, malignant	Diagnosis	ICD-9-CM
405.91	Secondary renovascular hypertension, unspecified	Diagnosis	ICD-9-CM
402.90	Unspecified hypertensive heart disease without heart failure	Diagnosis	ICD-9-CM
401.9	Unspecified essential hypertension	Diagnosis	ICD-9-CM
<b>Depression</b>			
F31.30	Bipolar disorder, current episode depressed, mild or moderate severity, unspecified	Diagnosis	ICD-10-CM
F31.31	Bipolar disorder, current episode depressed, mild	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
F31.32	Bipolar disorder, current episode depressed, moderate	Diagnosis	ICD-10-CM
F31.4	Bipolar disorder, current episode depressed, severe, without psychotic features	Diagnosis	ICD-10-CM
F31.5	Bipolar disorder, current episode depressed, severe, with psychotic features	Diagnosis	ICD-10-CM
F31.60	Bipolar disorder, current episode mixed, unspecified	Diagnosis	ICD-10-CM
F31.61	Bipolar disorder, current episode mixed, mild	Diagnosis	ICD-10-CM
F31.62	Bipolar disorder, current episode mixed, moderate	Diagnosis	ICD-10-CM
F31.63	Bipolar disorder, current episode mixed, severe, without psychotic features	Diagnosis	ICD-10-CM
F31.64	Bipolar disorder, current episode mixed, severe, with psychotic features	Diagnosis	ICD-10-CM
F31.75	Bipolar disorder, in partial remission, most recent episode depressed	Diagnosis	ICD-10-CM
F31.76	Bipolar disorder, in full remission, most recent episode depressed	Diagnosis	ICD-10-CM
F31.77	Bipolar disorder, in partial remission, most recent episode mixed	Diagnosis	ICD-10-CM
F31.78	Bipolar disorder, in full remission, most recent episode mixed	Diagnosis	ICD-10-CM
F31.81	Bipolar II disorder	Diagnosis	ICD-10-CM
F32.0	Major depressive disorder, single episode, mild	Diagnosis	ICD-10-CM
F32.1	Major depressive disorder, single episode, moderate	Diagnosis	ICD-10-CM
F32.2	Major depressive disorder, single episode, severe without psychotic features	Diagnosis	ICD-10-CM
F32.3	Major depressive disorder, single episode, severe with psychotic features	Diagnosis	ICD-10-CM
F32.4	Major depressive disorder, single episode, in partial remission	Diagnosis	ICD-10-CM
F32.5	Major depressive disorder, single episode, in full remission	Diagnosis	ICD-10-CM
F32.9	Major depressive disorder, single episode, unspecified	Diagnosis	ICD-10-CM
F33.0	Major depressive disorder, recurrent, mild	Diagnosis	ICD-10-CM
F33.1	Major depressive disorder, recurrent, moderate	Diagnosis	ICD-10-CM
F33.2	Major depressive disorder, recurrent severe without psychotic features	Diagnosis	ICD-10-CM
F33.3	Major depressive disorder, recurrent, severe with psychotic symptoms	Diagnosis	ICD-10-CM
F33.40	Major depressive disorder, recurrent, in remission, unspecified	Diagnosis	ICD-10-CM
F33.41	Major depressive disorder, recurrent, in partial remission	Diagnosis	ICD-10-CM
F33.42	Major depressive disorder, recurrent, in full remission	Diagnosis	ICD-10-CM
F33.8	Other recurrent depressive disorders	Diagnosis	ICD-10-CM
F33.9	Major depressive disorder, recurrent, unspecified	Diagnosis	ICD-10-CM
F34.1	Dysthymic disorder	Diagnosis	ICD-10-CM
F43.21	Adjustment disorder with depressed mood	Diagnosis	ICD-10-CM
F43.23	Adjustment disorder with mixed anxiety and depressed mood	Diagnosis	ICD-10-CM
296.56	Bipolar I disorder, most recent episode (or current) depressed, in full remission	Diagnosis	ICD-9-CM
296.66	Bipolar I disorder, most recent episode (or current) mixed, in full remission	Diagnosis	ICD-9-CM
296.65	Bipolar I disorder, most recent episode (or current) mixed, in partial or unspecified remission	Diagnosis	ICD-9-CM
296.53	Bipolar I disorder, most recent episode (or current) depressed, severe, without mention of psychotic behavior	Diagnosis	ICD-9-CM
296.55	Bipolar I disorder, most recent episode (or current) depressed, in partial or unspecified remission	Diagnosis	ICD-9-CM
296.54	Bipolar I disorder, most recent episode (or current) depressed, severe, specified as with psychotic behavior	Diagnosis	ICD-9-CM
296.63	Bipolar I disorder, most recent episode (or current) mixed, severe, without mention of psychotic behavior	Diagnosis	ICD-9-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
296.64	Bipolar I disorder, most recent episode (or current) mixed, severe, specified as with psychotic behavior	Diagnosis	ICD-9-CM
296.51	Bipolar I disorder, most recent episode (or current) depressed, mild	Diagnosis	ICD-9-CM
296.52	Bipolar I disorder, most recent episode (or current) depressed, moderate	Diagnosis	ICD-9-CM
296.62	Bipolar I disorder, most recent episode (or current) mixed, moderate	Diagnosis	ICD-9-CM
296.61	Bipolar I disorder, most recent episode (or current) mixed, mild	Diagnosis	ICD-9-CM
296.60	Bipolar I disorder, most recent episode (or current) mixed, unspecified	Diagnosis	ICD-9-CM
311	Depressive disorder, not elsewhere classified	Diagnosis	ICD-9-CM
298.0	Depressive type psychosis	Diagnosis	ICD-9-CM
300.4	Dysthymic disorder	Diagnosis	ICD-9-CM
296.24	Major depressive disorder, single episode, severe, specified as with psychotic behavior	Diagnosis	ICD-9-CM
296.23	Major depressive disorder, single episode, severe, without mention of psychotic behavior	Diagnosis	ICD-9-CM
296.35	Major depressive disorder, recurrent episode, in partial or unspecified remission	Diagnosis	ICD-9-CM
296.34	Major depressive disorder, recurrent episode, severe, specified as with psychotic behavior	Diagnosis	ICD-9-CM
296.33	Major depressive disorder, recurrent episode, severe, without mention of psychotic behavior	Diagnosis	ICD-9-CM
296.25	Major depressive disorder, single episode, in partial or unspecified remission	Diagnosis	ICD-9-CM
296.31	Major depressive disorder, recurrent episode, mild	Diagnosis	ICD-9-CM
296.21	Major depressive disorder, single episode, mild	Diagnosis	ICD-9-CM
296.20	Major depressive disorder, single episode, unspecified	Diagnosis	ICD-9-CM
296.36	Major depressive disorder, recurrent episode, in full remission	Diagnosis	ICD-9-CM
296.32	Major depressive disorder, recurrent episode, moderate	Diagnosis	ICD-9-CM
296.30	Major depressive disorder, recurrent episode, unspecified	Diagnosis	ICD-9-CM
296.26	Major depressive disorder, single episode in full remission	Diagnosis	ICD-9-CM
296.22	Major depressive disorder, single episode, moderate	Diagnosis	ICD-9-CM
296.89	Other and unspecified bipolar disorders	Diagnosis	ICD-9-CM
309.1	Prolonged depressive reaction as adjustment reaction	Diagnosis	ICD-9-CM
<b>Ischemic Heart Disease</b>			
I20.0	Unstable angina	Diagnosis	ICD-10-CM
I20.1	Angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I20.8	Other forms of angina pectoris	Diagnosis	ICD-10-CM
I20.9	Angina pectoris, unspecified	Diagnosis	ICD-10-CM
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery	Diagnosis	ICD-10-CM
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery	Diagnosis	ICD-10-CM
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall	Diagnosis	ICD-10-CM
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery	Diagnosis	ICD-10-CM
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall	Diagnosis	ICD-10-CM
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery	Diagnosis	ICD-10-CM
I21.29	ST elevation (STEMI) myocardial infarction involving other sites	Diagnosis	ICD-10-CM
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site	Diagnosis	ICD-10-CM
I21.4	Non-ST elevation (NSTEMI) myocardial infarction	Diagnosis	ICD-10-CM
I21.A1	Myocardial infarction type 2	Diagnosis	ICD-10-CM

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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
I21.A9	Other myocardial infarction type	Diagnosis	ICD-10-CM
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall	Diagnosis	ICD-10-CM
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall	Diagnosis	ICD-10-CM
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction	Diagnosis	ICD-10-CM
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites	Diagnosis	ICD-10-CM
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site	Diagnosis	ICD-10-CM
I23.0	Hemopericardium as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.1	Atrial septal defect as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.2	Ventricular septal defect as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.3	Rupture of cardiac wall without hemopericardium as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.4	Rupture of chordae tendineae as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.5	Rupture of papillary muscle as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.6	Thrombosis of atrium, auricular appendage, and ventricle as current complications following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.7	Postinfarction angina	Diagnosis	ICD-10-CM
I23.8	Other current complications following acute myocardial infarction	Diagnosis	ICD-10-CM
I24.0	Acute coronary thrombosis not resulting in myocardial infarction	Diagnosis	ICD-10-CM
I24.1	Dressler's syndrome	Diagnosis	ICD-10-CM
I24.8	Other forms of acute ischemic heart disease	Diagnosis	ICD-10-CM
I24.9	Acute ischemic heart disease, unspecified	Diagnosis	ICD-10-CM
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris	Diagnosis	ICD-10-CM
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.2	Old myocardial infarction	Diagnosis	ICD-10-CM
I25.3	Aneurysm of heart	Diagnosis	ICD-10-CM
I25.41	Coronary artery aneurysm	Diagnosis	ICD-10-CM
I25.42	Coronary artery dissection	Diagnosis	ICD-10-CM
I25.5	Ischemic cardiomyopathy	Diagnosis	ICD-10-CM
I25.6	Silent myocardial ischemia	Diagnosis	ICD-10-CM
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.709	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unspecified angina pectoris	Diagnosis	ICD-10-CM



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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.719	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.729	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.730	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.731	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.738	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.739	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina	Diagnosis	ICD-10-CM
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.759	Atherosclerosis of native coronary artery of transplanted heart with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina	Diagnosis	ICD-10-CM
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.769	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM

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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
I25.799	Atherosclerosis of other coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.810	Atherosclerosis of coronary artery bypass graft(s) without angina pectoris	Diagnosis	ICD-10-CM
I25.811	Atherosclerosis of native coronary artery of transplanted heart without angina pectoris	Diagnosis	ICD-10-CM
I25.812	Atherosclerosis of bypass graft of coronary artery of transplanted heart without angina pectoris	Diagnosis	ICD-10-CM
I25.82	Chronic total occlusion of coronary artery	Diagnosis	ICD-10-CM
I25.83	Coronary atherosclerosis due to lipid rich plaque	Diagnosis	ICD-10-CM
I25.84	Coronary atherosclerosis due to calcified coronary lesion	Diagnosis	ICD-10-CM
I25.89	Other forms of chronic ischemic heart disease	Diagnosis	ICD-10-CM
I25.9	Chronic ischemic heart disease, unspecified	Diagnosis	ICD-10-CM
410.00	Acute myocardial infarction of anterolateral wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.01	Acute myocardial infarction of anterolateral wall, initial episode of care	Diagnosis	ICD-9-CM
410.02	Acute myocardial infarction of anterolateral wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.20	Acute myocardial infarction of inferolateral wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.21	Acute myocardial infarction of inferolateral wall, initial episode of care	Diagnosis	ICD-9-CM
410.22	Acute myocardial infarction of inferolateral wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.30	Acute myocardial infarction of inferoposterior wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.31	Acute myocardial infarction of inferoposterior wall, initial episode of care	Diagnosis	ICD-9-CM
410.32	Acute myocardial infarction of inferoposterior wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.12	Acute myocardial infarction of other anterior wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.42	Acute myocardial infarction of other inferior wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.52	Acute myocardial infarction of other lateral wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.70	Acute myocardial infarction, subendocardial infarction, episode of care unspecified	Diagnosis	ICD-9-CM
410.71	Acute myocardial infarction, subendocardial infarction, initial episode of care	Diagnosis	ICD-9-CM
410.72	Acute myocardial infarction, subendocardial infarction, subsequent episode of care	Diagnosis	ICD-9-CM
410.60	Acute myocardial infarction, true posterior wall infarction, episode of care unspecified	Diagnosis	ICD-9-CM
410.61	Acute myocardial infarction, true posterior wall infarction, initial episode of care	Diagnosis	ICD-9-CM
410.62	Acute myocardial infarction, true posterior wall infarction, subsequent episode of care	Diagnosis	ICD-9-CM
410.10	Acute myocardial infarction of other anterior wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.11	Acute myocardial infarction of other anterior wall, initial episode of care	Diagnosis	ICD-9-CM
410.40	Acute myocardial infarction of other inferior wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.41	Acute myocardial infarction of other inferior wall, initial episode of care	Diagnosis	ICD-9-CM
410.50	Acute myocardial infarction of other lateral wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.51	Acute myocardial infarction of other lateral wall, initial episode of care	Diagnosis	ICD-9-CM
410.81	Acute myocardial infarction of other specified sites, initial episode of care	Diagnosis	ICD-9-CM
410.82	Acute myocardial infarction of other specified sites, subsequent episode of care	Diagnosis	ICD-9-CM
410.80	Acute myocardial infarction of other specified sites, episode of care unspecified	Diagnosis	ICD-9-CM
410.90	Acute myocardial infarction, unspecified site, episode of care unspecified	Diagnosis	ICD-9-CM
410.92	Acute myocardial infarction, unspecified site, subsequent episode of care	Diagnosis	ICD-9-CM
411.81	Acute coronary occlusion without myocardial infarction	Diagnosis	ICD-9-CM
410.91	Acute myocardial infarction, unspecified site, initial episode of care	Diagnosis	ICD-9-CM
413.0	Angina decubitus	Diagnosis	ICD-9-CM
414.2	Chronic total occlusion of coronary artery	Diagnosis	ICD-9-CM
414.07	Coronary atherosclerosis, of bypass graft (artery) (vein) of transplanted heart	Diagnosis	ICD-9-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
414.06	Coronary atherosclerosis, of native coronary artery of transplanted heart	Diagnosis	ICD-9-CM
414.03	Coronary atherosclerosis of nonautologous biological bypass graft	Diagnosis	ICD-9-CM
414.00	Coronary atherosclerosis of unspecified type of vessel, native or graft	Diagnosis	ICD-9-CM
414.4	Coronary atherosclerosis due to calcified coronary lesion	Diagnosis	ICD-9-CM
414.3	Coronary atherosclerosis due to lipid rich plaque	Diagnosis	ICD-9-CM
414.01	Coronary atherosclerosis of native coronary artery	Diagnosis	ICD-9-CM
414.04	Coronary atherosclerosis of artery bypass graft	Diagnosis	ICD-9-CM
414.02	Coronary atherosclerosis of autologous vein bypass graft	Diagnosis	ICD-9-CM
414.05	Coronary atherosclerosis of unspecified type of bypass graft	Diagnosis	ICD-9-CM
414.12	Dissection of coronary artery	Diagnosis	ICD-9-CM
411.1	Intermediate coronary syndrome	Diagnosis	ICD-9-CM
412	Old myocardial infarction	Diagnosis	ICD-9-CM
411.89	Other acute and subacute form of ischemic heart disease	Diagnosis	ICD-9-CM
413.9	Other and unspecified angina pectoris	Diagnosis	ICD-9-CM
414.8	Other specified forms of chronic ischemic heart disease	Diagnosis	ICD-9-CM
411.0	Postmyocardial infarction syndrome	Diagnosis	ICD-9-CM
413.1	Prinzmetal angina	Diagnosis	ICD-9-CM
414.9	Unspecified chronic ischemic heart disease	Diagnosis	ICD-9-CM
<b>Rheumatoid Arthritis/Osteoarthritis</b>			
M05.00	Felty's syndrome, unspecified site	Diagnosis	ICD-10-CM
M05.011	Felty's syndrome, right shoulder	Diagnosis	ICD-10-CM
M05.012	Felty's syndrome, left shoulder	Diagnosis	ICD-10-CM
M05.019	Felty's syndrome, unspecified shoulder	Diagnosis	ICD-10-CM
M05.021	Felty's syndrome, right elbow	Diagnosis	ICD-10-CM
M05.022	Felty's syndrome, left elbow	Diagnosis	ICD-10-CM
M05.029	Felty's syndrome, unspecified elbow	Diagnosis	ICD-10-CM
M05.031	Felty's syndrome, right wrist	Diagnosis	ICD-10-CM
M05.032	Felty's syndrome, left wrist	Diagnosis	ICD-10-CM
M05.039	Felty's syndrome, unspecified wrist	Diagnosis	ICD-10-CM
M05.041	Felty's syndrome, right hand	Diagnosis	ICD-10-CM
M05.042	Felty's syndrome, left hand	Diagnosis	ICD-10-CM
M05.049	Felty's syndrome, unspecified hand	Diagnosis	ICD-10-CM
M05.051	Felty's syndrome, right hip	Diagnosis	ICD-10-CM
M05.052	Felty's syndrome, left hip	Diagnosis	ICD-10-CM
M05.059	Felty's syndrome, unspecified hip	Diagnosis	ICD-10-CM
M05.061	Felty's syndrome, right knee	Diagnosis	ICD-10-CM
M05.062	Felty's syndrome, left knee	Diagnosis	ICD-10-CM
M05.069	Felty's syndrome, unspecified knee	Diagnosis	ICD-10-CM
M05.071	Felty's syndrome, right ankle and foot	Diagnosis	ICD-10-CM
M05.072	Felty's syndrome, left ankle and foot	Diagnosis	ICD-10-CM
M05.079	Felty's syndrome, unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.09	Felty's syndrome, multiple sites	Diagnosis	ICD-10-CM
M05.20	Rheumatoid vasculitis with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.211	Rheumatoid vasculitis with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M05.212	Rheumatoid vasculitis with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.219	Rheumatoid vasculitis with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.221	Rheumatoid vasculitis with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.222	Rheumatoid vasculitis with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.229	Rheumatoid vasculitis with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM
M05.231	Rheumatoid vasculitis with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.232	Rheumatoid vasculitis with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM
M05.239	Rheumatoid vasculitis with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M05.241	Rheumatoid vasculitis with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.242	Rheumatoid vasculitis with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.249	Rheumatoid vasculitis with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.251	Rheumatoid vasculitis with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.252	Rheumatoid vasculitis with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM
M05.259	Rheumatoid vasculitis with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM
M05.261	Rheumatoid vasculitis with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.262	Rheumatoid vasculitis with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.269	Rheumatoid vasculitis with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.271	Rheumatoid vasculitis with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.272	Rheumatoid vasculitis with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM
M05.279	Rheumatoid vasculitis with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.29	Rheumatoid vasculitis with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM
M05.30	Rheumatoid heart disease with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.311	Rheumatoid heart disease with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM
M05.312	Rheumatoid heart disease with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.319	Rheumatoid heart disease with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.321	Rheumatoid heart disease with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.322	Rheumatoid heart disease with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.329	Rheumatoid heart disease with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM
M05.331	Rheumatoid heart disease with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.332	Rheumatoid heart disease with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM
M05.339	Rheumatoid heart disease with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M05.341	Rheumatoid heart disease with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.342	Rheumatoid heart disease with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.349	Rheumatoid heart disease with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.351	Rheumatoid heart disease with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.352	Rheumatoid heart disease with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM
M05.359	Rheumatoid heart disease with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM
M05.361	Rheumatoid heart disease with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.362	Rheumatoid heart disease with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.369	Rheumatoid heart disease with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.371	Rheumatoid heart disease with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.372	Rheumatoid heart disease with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM
M05.379	Rheumatoid heart disease with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.39	Rheumatoid heart disease with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M05.40	Rheumatoid myopathy with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.411	Rheumatoid myopathy with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM
M05.412	Rheumatoid myopathy with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.419	Rheumatoid myopathy with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.421	Rheumatoid myopathy with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.422	Rheumatoid myopathy with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.429	Rheumatoid myopathy with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM
M05.431	Rheumatoid myopathy with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.432	Rheumatoid myopathy with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM
M05.439	Rheumatoid myopathy with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M05.441	Rheumatoid myopathy with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.442	Rheumatoid myopathy with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.449	Rheumatoid myopathy with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.451	Rheumatoid myopathy with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.452	Rheumatoid myopathy with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM
M05.459	Rheumatoid myopathy with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM
M05.461	Rheumatoid myopathy with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.462	Rheumatoid myopathy with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.469	Rheumatoid myopathy with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.471	Rheumatoid myopathy with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.472	Rheumatoid myopathy with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM
M05.479	Rheumatoid myopathy with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.49	Rheumatoid myopathy with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM
M05.50	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.511	Rheumatoid polyneuropathy with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM
M05.512	Rheumatoid polyneuropathy with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.519	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.521	Rheumatoid polyneuropathy with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.522	Rheumatoid polyneuropathy with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.529	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM
M05.531	Rheumatoid polyneuropathy with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.532	Rheumatoid polyneuropathy with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM
M05.539	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M05.541	Rheumatoid polyneuropathy with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.542	Rheumatoid polyneuropathy with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.549	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.551	Rheumatoid polyneuropathy with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.552	Rheumatoid polyneuropathy with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM
M05.559	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM
M05.561	Rheumatoid polyneuropathy with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.562	Rheumatoid polyneuropathy with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.569	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.571	Rheumatoid polyneuropathy with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.572	Rheumatoid polyneuropathy with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M05.579	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.59	Rheumatoid polyneuropathy with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM
M05.60	Rheumatoid arthritis of unspecified site with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.611	Rheumatoid arthritis of right shoulder with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.612	Rheumatoid arthritis of left shoulder with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.619	Rheumatoid arthritis of unspecified shoulder with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.621	Rheumatoid arthritis of right elbow with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.622	Rheumatoid arthritis of left elbow with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.629	Rheumatoid arthritis of unspecified elbow with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.631	Rheumatoid arthritis of right wrist with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.632	Rheumatoid arthritis of left wrist with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.639	Rheumatoid arthritis of unspecified wrist with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.641	Rheumatoid arthritis of right hand with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.642	Rheumatoid arthritis of left hand with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.649	Rheumatoid arthritis of unspecified hand with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.651	Rheumatoid arthritis of right hip with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.652	Rheumatoid arthritis of left hip with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.659	Rheumatoid arthritis of unspecified hip with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.661	Rheumatoid arthritis of right knee with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.662	Rheumatoid arthritis of left knee with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.669	Rheumatoid arthritis of unspecified knee with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.671	Rheumatoid arthritis of right ankle and foot with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.672	Rheumatoid arthritis of left ankle and foot with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.679	Rheumatoid arthritis of unspecified ankle and foot with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.69	Rheumatoid arthritis of multiple sites with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.70	Rheumatoid arthritis with rheumatoid factor of unspecified site without organ or systems involvement	Diagnosis	ICD-10-CM
M05.711	Rheumatoid arthritis with rheumatoid factor of right shoulder without organ or systems involvement	Diagnosis	ICD-10-CM
M05.712	Rheumatoid arthritis with rheumatoid factor of left shoulder without organ or systems involvement	Diagnosis	ICD-10-CM
M05.719	Rheumatoid arthritis with rheumatoid factor of unspecified shoulder without organ or systems involvement	Diagnosis	ICD-10-CM
M05.721	Rheumatoid arthritis with rheumatoid factor of right elbow without organ or systems involvement	Diagnosis	ICD-10-CM
M05.722	Rheumatoid arthritis with rheumatoid factor of left elbow without organ or systems involvement	Diagnosis	ICD-10-CM
M05.729	Rheumatoid arthritis with rheumatoid factor of unspecified elbow without organ or systems involvement	Diagnosis	ICD-10-CM
M05.731	Rheumatoid arthritis with rheumatoid factor of right wrist without organ or systems involvement	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M05.732	Rheumatoid arthritis with rheumatoid factor of left wrist without organ or systems involvement	Diagnosis	ICD-10-CM
M05.739	Rheumatoid arthritis with rheumatoid factor of unspecified wrist without organ or systems involvement	Diagnosis	ICD-10-CM
M05.741	Rheumatoid arthritis with rheumatoid factor of right hand without organ or systems involvement	Diagnosis	ICD-10-CM
M05.742	Rheumatoid arthritis with rheumatoid factor of left hand without organ or systems involvement	Diagnosis	ICD-10-CM
M05.749	Rheumatoid arthritis with rheumatoid factor of unspecified hand without organ or systems involvement	Diagnosis	ICD-10-CM
M05.751	Rheumatoid arthritis with rheumatoid factor of right hip without organ or systems involvement	Diagnosis	ICD-10-CM
M05.752	Rheumatoid arthritis with rheumatoid factor of left hip without organ or systems involvement	Diagnosis	ICD-10-CM
M05.759	Rheumatoid arthritis with rheumatoid factor of unspecified hip without organ or systems involvement	Diagnosis	ICD-10-CM
M05.761	Rheumatoid arthritis with rheumatoid factor of right knee without organ or systems involvement	Diagnosis	ICD-10-CM
M05.762	Rheumatoid arthritis with rheumatoid factor of left knee without organ or systems involvement	Diagnosis	ICD-10-CM
M05.769	Rheumatoid arthritis with rheumatoid factor of unspecified knee without organ or systems involvement	Diagnosis	ICD-10-CM
M05.771	Rheumatoid arthritis with rheumatoid factor of right ankle and foot without organ or systems involvement	Diagnosis	ICD-10-CM
M05.772	Rheumatoid arthritis with rheumatoid factor of left ankle and foot without organ or systems involvement	Diagnosis	ICD-10-CM
M05.779	Rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot without organ or systems involvement	Diagnosis	ICD-10-CM
M05.79	Rheumatoid arthritis with rheumatoid factor of multiple sites without organ or systems involvement	Diagnosis	ICD-10-CM
M05.80	Other rheumatoid arthritis with rheumatoid factor of unspecified site	Diagnosis	ICD-10-CM
M05.811	Other rheumatoid arthritis with rheumatoid factor of right shoulder	Diagnosis	ICD-10-CM
M05.812	Other rheumatoid arthritis with rheumatoid factor of left shoulder	Diagnosis	ICD-10-CM
M05.819	Other rheumatoid arthritis with rheumatoid factor of unspecified shoulder	Diagnosis	ICD-10-CM
M05.821	Other rheumatoid arthritis with rheumatoid factor of right elbow	Diagnosis	ICD-10-CM
M05.822	Other rheumatoid arthritis with rheumatoid factor of left elbow	Diagnosis	ICD-10-CM
M05.829	Other rheumatoid arthritis with rheumatoid factor of unspecified elbow	Diagnosis	ICD-10-CM
M05.831	Other rheumatoid arthritis with rheumatoid factor of right wrist	Diagnosis	ICD-10-CM
M05.832	Other rheumatoid arthritis with rheumatoid factor of left wrist	Diagnosis	ICD-10-CM
M05.839	Other rheumatoid arthritis with rheumatoid factor of unspecified wrist	Diagnosis	ICD-10-CM
M05.841	Other rheumatoid arthritis with rheumatoid factor of right hand	Diagnosis	ICD-10-CM
M05.842	Other rheumatoid arthritis with rheumatoid factor of left hand	Diagnosis	ICD-10-CM
M05.849	Other rheumatoid arthritis with rheumatoid factor of unspecified hand	Diagnosis	ICD-10-CM
M05.851	Other rheumatoid arthritis with rheumatoid factor of right hip	Diagnosis	ICD-10-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M05.852	Other rheumatoid arthritis with rheumatoid factor of left hip	Diagnosis	ICD-10-CM
M05.859	Other rheumatoid arthritis with rheumatoid factor of unspecified hip	Diagnosis	ICD-10-CM
M05.861	Other rheumatoid arthritis with rheumatoid factor of right knee	Diagnosis	ICD-10-CM
M05.862	Other rheumatoid arthritis with rheumatoid factor of left knee	Diagnosis	ICD-10-CM
M05.869	Other rheumatoid arthritis with rheumatoid factor of unspecified knee	Diagnosis	ICD-10-CM
M05.871	Other rheumatoid arthritis with rheumatoid factor of right ankle and foot	Diagnosis	ICD-10-CM
M05.872	Other rheumatoid arthritis with rheumatoid factor of left ankle and foot	Diagnosis	ICD-10-CM
M05.879	Other rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.89	Other rheumatoid arthritis with rheumatoid factor of multiple sites	Diagnosis	ICD-10-CM
M05.9	Rheumatoid arthritis with rheumatoid factor, unspecified	Diagnosis	ICD-10-CM
M06.00	Rheumatoid arthritis without rheumatoid factor, unspecified site	Diagnosis	ICD-10-CM
M06.011	Rheumatoid arthritis without rheumatoid factor, right shoulder	Diagnosis	ICD-10-CM
M06.012	Rheumatoid arthritis without rheumatoid factor, left shoulder	Diagnosis	ICD-10-CM
M06.019	Rheumatoid arthritis without rheumatoid factor, unspecified shoulder	Diagnosis	ICD-10-CM
M06.021	Rheumatoid arthritis without rheumatoid factor, right elbow	Diagnosis	ICD-10-CM
M06.022	Rheumatoid arthritis without rheumatoid factor, left elbow	Diagnosis	ICD-10-CM
M06.029	Rheumatoid arthritis without rheumatoid factor, unspecified elbow	Diagnosis	ICD-10-CM
M06.031	Rheumatoid arthritis without rheumatoid factor, right wrist	Diagnosis	ICD-10-CM
M06.032	Rheumatoid arthritis without rheumatoid factor, left wrist	Diagnosis	ICD-10-CM
M06.039	Rheumatoid arthritis without rheumatoid factor, unspecified wrist	Diagnosis	ICD-10-CM
M06.041	Rheumatoid arthritis without rheumatoid factor, right hand	Diagnosis	ICD-10-CM
M06.042	Rheumatoid arthritis without rheumatoid factor, left hand	Diagnosis	ICD-10-CM
M06.049	Rheumatoid arthritis without rheumatoid factor, unspecified hand	Diagnosis	ICD-10-CM
M06.051	Rheumatoid arthritis without rheumatoid factor, right hip	Diagnosis	ICD-10-CM
M06.052	Rheumatoid arthritis without rheumatoid factor, left hip	Diagnosis	ICD-10-CM
M06.059	Rheumatoid arthritis without rheumatoid factor, unspecified hip	Diagnosis	ICD-10-CM
M06.061	Rheumatoid arthritis without rheumatoid factor, right knee	Diagnosis	ICD-10-CM
M06.062	Rheumatoid arthritis without rheumatoid factor, left knee	Diagnosis	ICD-10-CM
M06.069	Rheumatoid arthritis without rheumatoid factor, unspecified knee	Diagnosis	ICD-10-CM
M06.071	Rheumatoid arthritis without rheumatoid factor, right ankle and foot	Diagnosis	ICD-10-CM
M06.072	Rheumatoid arthritis without rheumatoid factor, left ankle and foot	Diagnosis	ICD-10-CM
M06.079	Rheumatoid arthritis without rheumatoid factor, unspecified ankle and foot	Diagnosis	ICD-10-CM
M06.08	Rheumatoid arthritis without rheumatoid factor, vertebrae	Diagnosis	ICD-10-CM
M06.09	Rheumatoid arthritis without rheumatoid factor, multiple sites	Diagnosis	ICD-10-CM
M06.1	Adult-onset Still's disease	Diagnosis	ICD-10-CM
M06.20	Rheumatoid bursitis, unspecified site	Diagnosis	ICD-10-CM
M06.211	Rheumatoid bursitis, right shoulder	Diagnosis	ICD-10-CM
M06.212	Rheumatoid bursitis, left shoulder	Diagnosis	ICD-10-CM
M06.219	Rheumatoid bursitis, unspecified shoulder	Diagnosis	ICD-10-CM
M06.221	Rheumatoid bursitis, right elbow	Diagnosis	ICD-10-CM
M06.222	Rheumatoid bursitis, left elbow	Diagnosis	ICD-10-CM
M06.229	Rheumatoid bursitis, unspecified elbow	Diagnosis	ICD-10-CM
M06.231	Rheumatoid bursitis, right wrist	Diagnosis	ICD-10-CM
M06.232	Rheumatoid bursitis, left wrist	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M06.239	Rheumatoid bursitis, unspecified wrist	Diagnosis	ICD-10-CM
M06.241	Rheumatoid bursitis, right hand	Diagnosis	ICD-10-CM
M06.242	Rheumatoid bursitis, left hand	Diagnosis	ICD-10-CM
M06.249	Rheumatoid bursitis, unspecified hand	Diagnosis	ICD-10-CM
M06.251	Rheumatoid bursitis, right hip	Diagnosis	ICD-10-CM
M06.252	Rheumatoid bursitis, left hip	Diagnosis	ICD-10-CM
M06.259	Rheumatoid bursitis, unspecified hip	Diagnosis	ICD-10-CM
M06.261	Rheumatoid bursitis, right knee	Diagnosis	ICD-10-CM
M06.262	Rheumatoid bursitis, left knee	Diagnosis	ICD-10-CM
M06.269	Rheumatoid bursitis, unspecified knee	Diagnosis	ICD-10-CM
M06.271	Rheumatoid bursitis, right ankle and foot	Diagnosis	ICD-10-CM
M06.272	Rheumatoid bursitis, left ankle and foot	Diagnosis	ICD-10-CM
M06.279	Rheumatoid bursitis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M06.28	Rheumatoid bursitis, vertebrae	Diagnosis	ICD-10-CM
M06.29	Rheumatoid bursitis, multiple sites	Diagnosis	ICD-10-CM
M06.30	Rheumatoid nodule, unspecified site	Diagnosis	ICD-10-CM
M06.311	Rheumatoid nodule, right shoulder	Diagnosis	ICD-10-CM
M06.312	Rheumatoid nodule, left shoulder	Diagnosis	ICD-10-CM
M06.319	Rheumatoid nodule, unspecified shoulder	Diagnosis	ICD-10-CM
M06.321	Rheumatoid nodule, right elbow	Diagnosis	ICD-10-CM
M06.322	Rheumatoid nodule, left elbow	Diagnosis	ICD-10-CM
M06.329	Rheumatoid nodule, unspecified elbow	Diagnosis	ICD-10-CM
M06.331	Rheumatoid nodule, right wrist	Diagnosis	ICD-10-CM
M06.332	Rheumatoid nodule, left wrist	Diagnosis	ICD-10-CM
M06.339	Rheumatoid nodule, unspecified wrist	Diagnosis	ICD-10-CM
M06.341	Rheumatoid nodule, right hand	Diagnosis	ICD-10-CM
M06.342	Rheumatoid nodule, left hand	Diagnosis	ICD-10-CM
M06.349	Rheumatoid nodule, unspecified hand	Diagnosis	ICD-10-CM
M06.351	Rheumatoid nodule, right hip	Diagnosis	ICD-10-CM
M06.352	Rheumatoid nodule, left hip	Diagnosis	ICD-10-CM
M06.359	Rheumatoid nodule, unspecified hip	Diagnosis	ICD-10-CM
M06.361	Rheumatoid nodule, right knee	Diagnosis	ICD-10-CM
M06.362	Rheumatoid nodule, left knee	Diagnosis	ICD-10-CM
M06.369	Rheumatoid nodule, unspecified knee	Diagnosis	ICD-10-CM
M06.371	Rheumatoid nodule, right ankle and foot	Diagnosis	ICD-10-CM
M06.372	Rheumatoid nodule, left ankle and foot	Diagnosis	ICD-10-CM
M06.379	Rheumatoid nodule, unspecified ankle and foot	Diagnosis	ICD-10-CM
M06.38	Rheumatoid nodule, vertebrae	Diagnosis	ICD-10-CM
M06.39	Rheumatoid nodule, multiple sites	Diagnosis	ICD-10-CM
M06.80	Other specified rheumatoid arthritis, unspecified site	Diagnosis	ICD-10-CM
M06.811	Other specified rheumatoid arthritis, right shoulder	Diagnosis	ICD-10-CM
M06.812	Other specified rheumatoid arthritis, left shoulder	Diagnosis	ICD-10-CM
M06.819	Other specified rheumatoid arthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M06.821	Other specified rheumatoid arthritis, right elbow	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M06.822	Other specified rheumatoid arthritis, left elbow	Diagnosis	ICD-10-CM
M06.829	Other specified rheumatoid arthritis, unspecified elbow	Diagnosis	ICD-10-CM
M06.831	Other specified rheumatoid arthritis, right wrist	Diagnosis	ICD-10-CM
M06.832	Other specified rheumatoid arthritis, left wrist	Diagnosis	ICD-10-CM
M06.839	Other specified rheumatoid arthritis, unspecified wrist	Diagnosis	ICD-10-CM
M06.841	Other specified rheumatoid arthritis, right hand	Diagnosis	ICD-10-CM
M06.842	Other specified rheumatoid arthritis, left hand	Diagnosis	ICD-10-CM
M06.849	Other specified rheumatoid arthritis, unspecified hand	Diagnosis	ICD-10-CM
M06.851	Other specified rheumatoid arthritis, right hip	Diagnosis	ICD-10-CM
M06.852	Other specified rheumatoid arthritis, left hip	Diagnosis	ICD-10-CM
M06.859	Other specified rheumatoid arthritis, unspecified hip	Diagnosis	ICD-10-CM
M06.861	Other specified rheumatoid arthritis, right knee	Diagnosis	ICD-10-CM
M06.862	Other specified rheumatoid arthritis, left knee	Diagnosis	ICD-10-CM
M06.869	Other specified rheumatoid arthritis, unspecified knee	Diagnosis	ICD-10-CM
M06.871	Other specified rheumatoid arthritis, right ankle and foot	Diagnosis	ICD-10-CM
M06.872	Other specified rheumatoid arthritis, left ankle and foot	Diagnosis	ICD-10-CM
M06.879	Other specified rheumatoid arthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M06.88	Other specified rheumatoid arthritis, vertebrae	Diagnosis	ICD-10-CM
M06.89	Other specified rheumatoid arthritis, multiple sites	Diagnosis	ICD-10-CM
M06.9	Rheumatoid arthritis, unspecified	Diagnosis	ICD-10-CM
M08.00	Unspecified juvenile rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M08.011	Unspecified juvenile rheumatoid arthritis, right shoulder	Diagnosis	ICD-10-CM
M08.012	Unspecified juvenile rheumatoid arthritis, left shoulder	Diagnosis	ICD-10-CM
M08.019	Unspecified juvenile rheumatoid arthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M08.021	Unspecified juvenile rheumatoid arthritis, right elbow	Diagnosis	ICD-10-CM
M08.022	Unspecified juvenile rheumatoid arthritis, left elbow	Diagnosis	ICD-10-CM
M08.029	Unspecified juvenile rheumatoid arthritis, unspecified elbow	Diagnosis	ICD-10-CM
M08.031	Unspecified juvenile rheumatoid arthritis, right wrist	Diagnosis	ICD-10-CM
M08.032	Unspecified juvenile rheumatoid arthritis, left wrist	Diagnosis	ICD-10-CM
M08.039	Unspecified juvenile rheumatoid arthritis, unspecified wrist	Diagnosis	ICD-10-CM
M08.041	Unspecified juvenile rheumatoid arthritis, right hand	Diagnosis	ICD-10-CM
M08.042	Unspecified juvenile rheumatoid arthritis, left hand	Diagnosis	ICD-10-CM
M08.049	Unspecified juvenile rheumatoid arthritis, unspecified hand	Diagnosis	ICD-10-CM
M08.051	Unspecified juvenile rheumatoid arthritis, right hip	Diagnosis	ICD-10-CM
M08.052	Unspecified juvenile rheumatoid arthritis, left hip	Diagnosis	ICD-10-CM
M08.059	Unspecified juvenile rheumatoid arthritis, unspecified hip	Diagnosis	ICD-10-CM
M08.061	Unspecified juvenile rheumatoid arthritis, right knee	Diagnosis	ICD-10-CM
M08.062	Unspecified juvenile rheumatoid arthritis, left knee	Diagnosis	ICD-10-CM
M08.069	Unspecified juvenile rheumatoid arthritis, unspecified knee	Diagnosis	ICD-10-CM
M08.071	Unspecified juvenile rheumatoid arthritis, right ankle and foot	Diagnosis	ICD-10-CM
M08.072	Unspecified juvenile rheumatoid arthritis, left ankle and foot	Diagnosis	ICD-10-CM
M08.079	Unspecified juvenile rheumatoid arthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.08	Unspecified juvenile rheumatoid arthritis, vertebrae	Diagnosis	ICD-10-CM
M08.09	Unspecified juvenile rheumatoid arthritis, multiple sites	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M08.1	Juvenile ankylosing spondylitis	Diagnosis	ICD-10-CM
M08.20	Juvenile rheumatoid arthritis with systemic onset, unspecified site	Diagnosis	ICD-10-CM
M08.211	Juvenile rheumatoid arthritis with systemic onset, right shoulder	Diagnosis	ICD-10-CM
M08.212	Juvenile rheumatoid arthritis with systemic onset, left shoulder	Diagnosis	ICD-10-CM
M08.219	Juvenile rheumatoid arthritis with systemic onset, unspecified shoulder	Diagnosis	ICD-10-CM
M08.221	Juvenile rheumatoid arthritis with systemic onset, right elbow	Diagnosis	ICD-10-CM
M08.222	Juvenile rheumatoid arthritis with systemic onset, left elbow	Diagnosis	ICD-10-CM
M08.229	Juvenile rheumatoid arthritis with systemic onset, unspecified elbow	Diagnosis	ICD-10-CM
M08.231	Juvenile rheumatoid arthritis with systemic onset, right wrist	Diagnosis	ICD-10-CM
M08.232	Juvenile rheumatoid arthritis with systemic onset, left wrist	Diagnosis	ICD-10-CM
M08.239	Juvenile rheumatoid arthritis with systemic onset, unspecified wrist	Diagnosis	ICD-10-CM
M08.241	Juvenile rheumatoid arthritis with systemic onset, right hand	Diagnosis	ICD-10-CM
M08.242	Juvenile rheumatoid arthritis with systemic onset, left hand	Diagnosis	ICD-10-CM
M08.249	Juvenile rheumatoid arthritis with systemic onset, unspecified hand	Diagnosis	ICD-10-CM
M08.251	Juvenile rheumatoid arthritis with systemic onset, right hip	Diagnosis	ICD-10-CM
M08.252	Juvenile rheumatoid arthritis with systemic onset, left hip	Diagnosis	ICD-10-CM
M08.259	Juvenile rheumatoid arthritis with systemic onset, unspecified hip	Diagnosis	ICD-10-CM
M08.261	Juvenile rheumatoid arthritis with systemic onset, right knee	Diagnosis	ICD-10-CM
M08.262	Juvenile rheumatoid arthritis with systemic onset, left knee	Diagnosis	ICD-10-CM
M08.269	Juvenile rheumatoid arthritis with systemic onset, unspecified knee	Diagnosis	ICD-10-CM
M08.271	Juvenile rheumatoid arthritis with systemic onset, right ankle and foot	Diagnosis	ICD-10-CM
M08.272	Juvenile rheumatoid arthritis with systemic onset, left ankle and foot	Diagnosis	ICD-10-CM
M08.279	Juvenile rheumatoid arthritis with systemic onset, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.28	Juvenile rheumatoid arthritis with systemic onset, vertebrae	Diagnosis	ICD-10-CM
M08.29	Juvenile rheumatoid arthritis with systemic onset, multiple sites	Diagnosis	ICD-10-CM
M08.3	Juvenile rheumatoid polyarthritis (seronegative)	Diagnosis	ICD-10-CM
M08.40	Pauciarticular juvenile rheumatoid arthritis, unspecified site	Diagnosis	ICD-10-CM
M08.411	Pauciarticular juvenile rheumatoid arthritis, right shoulder	Diagnosis	ICD-10-CM
M08.412	Pauciarticular juvenile rheumatoid arthritis, left shoulder	Diagnosis	ICD-10-CM
M08.419	Pauciarticular juvenile rheumatoid arthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M08.421	Pauciarticular juvenile rheumatoid arthritis, right elbow	Diagnosis	ICD-10-CM
M08.422	Pauciarticular juvenile rheumatoid arthritis, left elbow	Diagnosis	ICD-10-CM
M08.429	Pauciarticular juvenile rheumatoid arthritis, unspecified elbow	Diagnosis	ICD-10-CM
M08.431	Pauciarticular juvenile rheumatoid arthritis, right wrist	Diagnosis	ICD-10-CM
M08.432	Pauciarticular juvenile rheumatoid arthritis, left wrist	Diagnosis	ICD-10-CM
M08.439	Pauciarticular juvenile rheumatoid arthritis, unspecified wrist	Diagnosis	ICD-10-CM
M08.441	Pauciarticular juvenile rheumatoid arthritis, right hand	Diagnosis	ICD-10-CM
M08.442	Pauciarticular juvenile rheumatoid arthritis, left hand	Diagnosis	ICD-10-CM
M08.449	Pauciarticular juvenile rheumatoid arthritis, unspecified hand	Diagnosis	ICD-10-CM
M08.451	Pauciarticular juvenile rheumatoid arthritis, right hip	Diagnosis	ICD-10-CM
M08.452	Pauciarticular juvenile rheumatoid arthritis, left hip	Diagnosis	ICD-10-CM
M08.459	Pauciarticular juvenile rheumatoid arthritis, unspecified hip	Diagnosis	ICD-10-CM
M08.461	Pauciarticular juvenile rheumatoid arthritis, right knee	Diagnosis	ICD-10-CM
M08.462	Pauciarticular juvenile rheumatoid arthritis, left knee	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M08.469	Pauciarticular juvenile rheumatoid arthritis, unspecified knee	Diagnosis	ICD-10-CM
M08.471	Pauciarticular juvenile rheumatoid arthritis, right ankle and foot	Diagnosis	ICD-10-CM
M08.472	Pauciarticular juvenile rheumatoid arthritis, left ankle and foot	Diagnosis	ICD-10-CM
M08.479	Pauciarticular juvenile rheumatoid arthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.48	Pauciarticular juvenile rheumatoid arthritis, vertebrae	Diagnosis	ICD-10-CM
M08.80	Other juvenile arthritis, unspecified site	Diagnosis	ICD-10-CM
M08.811	Other juvenile arthritis, right shoulder	Diagnosis	ICD-10-CM
M08.812	Other juvenile arthritis, left shoulder	Diagnosis	ICD-10-CM
M08.819	Other juvenile arthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M08.821	Other juvenile arthritis, right elbow	Diagnosis	ICD-10-CM
M08.822	Other juvenile arthritis, left elbow	Diagnosis	ICD-10-CM
M08.829	Other juvenile arthritis, unspecified elbow	Diagnosis	ICD-10-CM
M08.831	Other juvenile arthritis, right wrist	Diagnosis	ICD-10-CM
M08.832	Other juvenile arthritis, left wrist	Diagnosis	ICD-10-CM
M08.839	Other juvenile arthritis, unspecified wrist	Diagnosis	ICD-10-CM
M08.841	Other juvenile arthritis, right hand	Diagnosis	ICD-10-CM
M08.842	Other juvenile arthritis, left hand	Diagnosis	ICD-10-CM
M08.849	Other juvenile arthritis, unspecified hand	Diagnosis	ICD-10-CM
M08.851	Other juvenile arthritis, right hip	Diagnosis	ICD-10-CM
M08.852	Other juvenile arthritis, left hip	Diagnosis	ICD-10-CM
M08.859	Other juvenile arthritis, unspecified hip	Diagnosis	ICD-10-CM
M08.861	Other juvenile arthritis, right knee	Diagnosis	ICD-10-CM
M08.862	Other juvenile arthritis, left knee	Diagnosis	ICD-10-CM
M08.869	Other juvenile arthritis, unspecified knee	Diagnosis	ICD-10-CM
M08.871	Other juvenile arthritis, right ankle and foot	Diagnosis	ICD-10-CM
M08.872	Other juvenile arthritis, left ankle and foot	Diagnosis	ICD-10-CM
M08.879	Other juvenile arthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.88	Other juvenile arthritis, other specified site	Diagnosis	ICD-10-CM
M08.89	Other juvenile arthritis, multiple sites	Diagnosis	ICD-10-CM
M08.90	Juvenile arthritis, unspecified, unspecified site	Diagnosis	ICD-10-CM
M08.911	Juvenile arthritis, unspecified, right shoulder	Diagnosis	ICD-10-CM
M08.912	Juvenile arthritis, unspecified, left shoulder	Diagnosis	ICD-10-CM
M08.919	Juvenile arthritis, unspecified, unspecified shoulder	Diagnosis	ICD-10-CM
M08.921	Juvenile arthritis, unspecified, right elbow	Diagnosis	ICD-10-CM
M08.922	Juvenile arthritis, unspecified, left elbow	Diagnosis	ICD-10-CM
M08.929	Juvenile arthritis, unspecified, unspecified elbow	Diagnosis	ICD-10-CM
M08.931	Juvenile arthritis, unspecified, right wrist	Diagnosis	ICD-10-CM
M08.932	Juvenile arthritis, unspecified, left wrist	Diagnosis	ICD-10-CM
M08.939	Juvenile arthritis, unspecified, unspecified wrist	Diagnosis	ICD-10-CM
M08.941	Juvenile arthritis, unspecified, right hand	Diagnosis	ICD-10-CM
M08.942	Juvenile arthritis, unspecified, left hand	Diagnosis	ICD-10-CM
M08.949	Juvenile arthritis, unspecified, unspecified hand	Diagnosis	ICD-10-CM
M08.951	Juvenile arthritis, unspecified, right hip	Diagnosis	ICD-10-CM
M08.952	Juvenile arthritis, unspecified, left hip	Diagnosis	ICD-10-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M08.959	Juvenile arthritis, unspecified, unspecified hip	Diagnosis	ICD-10-CM
M08.961	Juvenile arthritis, unspecified, right knee	Diagnosis	ICD-10-CM
M08.962	Juvenile arthritis, unspecified, left knee	Diagnosis	ICD-10-CM
M08.969	Juvenile arthritis, unspecified, unspecified knee	Diagnosis	ICD-10-CM
M08.971	Juvenile arthritis, unspecified, right ankle and foot	Diagnosis	ICD-10-CM
M08.972	Juvenile arthritis, unspecified, left ankle and foot	Diagnosis	ICD-10-CM
M08.979	Juvenile arthritis, unspecified, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.98	Juvenile arthritis, unspecified, vertebrae	Diagnosis	ICD-10-CM
M08.99	Juvenile arthritis, unspecified, multiple sites	Diagnosis	ICD-10-CM
M15.0	Primary generalized (osteo)arthritis	Diagnosis	ICD-10-CM
M15.1	Heberden's nodes (with arthropathy)	Diagnosis	ICD-10-CM
M15.2	Bouchard's nodes (with arthropathy)	Diagnosis	ICD-10-CM
M15.3	Secondary multiple arthritis	Diagnosis	ICD-10-CM
M15.4	Erosive (osteo)arthritis	Diagnosis	ICD-10-CM
M15.8	Other polyosteoarthritis	Diagnosis	ICD-10-CM
M15.9	Polyosteoarthritis, unspecified	Diagnosis	ICD-10-CM
M16.0	Bilateral primary osteoarthritis of hip	Diagnosis	ICD-10-CM
M16.10	Unilateral primary osteoarthritis, unspecified hip	Diagnosis	ICD-10-CM
M16.11	Unilateral primary osteoarthritis, right hip	Diagnosis	ICD-10-CM
M16.12	Unilateral primary osteoarthritis, left hip	Diagnosis	ICD-10-CM
M16.2	Bilateral osteoarthritis resulting from hip dysplasia	Diagnosis	ICD-10-CM
M16.30	Unilateral osteoarthritis resulting from hip dysplasia, unspecified hip	Diagnosis	ICD-10-CM
M16.31	Unilateral osteoarthritis resulting from hip dysplasia, right hip	Diagnosis	ICD-10-CM
M16.32	Unilateral osteoarthritis resulting from hip dysplasia, left hip	Diagnosis	ICD-10-CM
M16.4	Bilateral post-traumatic osteoarthritis of hip	Diagnosis	ICD-10-CM
M16.50	Unilateral post-traumatic osteoarthritis, unspecified hip	Diagnosis	ICD-10-CM
M16.51	Unilateral post-traumatic osteoarthritis, right hip	Diagnosis	ICD-10-CM
M16.52	Unilateral post-traumatic osteoarthritis, left hip	Diagnosis	ICD-10-CM
M16.6	Other bilateral secondary osteoarthritis of hip	Diagnosis	ICD-10-CM
M16.7	Other unilateral secondary osteoarthritis of hip	Diagnosis	ICD-10-CM
M16.9	Osteoarthritis of hip, unspecified	Diagnosis	ICD-10-CM
M17.0	Bilateral primary osteoarthritis of knee	Diagnosis	ICD-10-CM
M17.10	Unilateral primary osteoarthritis, unspecified knee	Diagnosis	ICD-10-CM
M17.11	Unilateral primary osteoarthritis, right knee	Diagnosis	ICD-10-CM
M17.12	Unilateral primary osteoarthritis, left knee	Diagnosis	ICD-10-CM
M17.2	Bilateral post-traumatic osteoarthritis of knee	Diagnosis	ICD-10-CM
M17.30	Unilateral post-traumatic osteoarthritis, unspecified knee	Diagnosis	ICD-10-CM
M17.31	Unilateral post-traumatic osteoarthritis, right knee	Diagnosis	ICD-10-CM
M17.32	Unilateral post-traumatic osteoarthritis, left knee	Diagnosis	ICD-10-CM
M17.4	Other bilateral secondary osteoarthritis of knee	Diagnosis	ICD-10-CM
M17.5	Other unilateral secondary osteoarthritis of knee	Diagnosis	ICD-10-CM
M17.9	Osteoarthritis of knee, unspecified	Diagnosis	ICD-10-CM
M18.0	Bilateral primary osteoarthritis of first carpometacarpal joints	Diagnosis	ICD-10-CM
M18.10	Unilateral primary osteoarthritis of first carpometacarpal joint, unspecified hand	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M18.11	Unilateral primary osteoarthritis of first carpometacarpal joint, right hand	Diagnosis	ICD-10-CM
M18.12	Unilateral primary osteoarthritis of first carpometacarpal joint, left hand	Diagnosis	ICD-10-CM
M18.2	Bilateral post-traumatic osteoarthritis of first carpometacarpal joints	Diagnosis	ICD-10-CM
M18.30	Unilateral post-traumatic osteoarthritis of first carpometacarpal joint, unspecified hand	Diagnosis	ICD-10-CM
M18.31	Unilateral post-traumatic osteoarthritis of first carpometacarpal joint, right hand	Diagnosis	ICD-10-CM
M18.32	Unilateral post-traumatic osteoarthritis of first carpometacarpal joint, left hand	Diagnosis	ICD-10-CM
M18.4	Other bilateral secondary osteoarthritis of first carpometacarpal joints	Diagnosis	ICD-10-CM
M18.50	Other unilateral secondary osteoarthritis of first carpometacarpal joint, unspecified hand	Diagnosis	ICD-10-CM
M18.51	Other unilateral secondary osteoarthritis of first carpometacarpal joint, right hand	Diagnosis	ICD-10-CM
M18.52	Other unilateral secondary osteoarthritis of first carpometacarpal joint, left hand	Diagnosis	ICD-10-CM
M18.9	Osteoarthritis of first carpometacarpal joint, unspecified	Diagnosis	ICD-10-CM
M19.011	Primary osteoarthritis, right shoulder	Diagnosis	ICD-10-CM
M19.012	Primary osteoarthritis, left shoulder	Diagnosis	ICD-10-CM
M19.019	Primary osteoarthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M19.021	Primary osteoarthritis, right elbow	Diagnosis	ICD-10-CM
M19.022	Primary osteoarthritis, left elbow	Diagnosis	ICD-10-CM
M19.029	Primary osteoarthritis, unspecified elbow	Diagnosis	ICD-10-CM
M19.031	Primary osteoarthritis, right wrist	Diagnosis	ICD-10-CM
M19.032	Primary osteoarthritis, left wrist	Diagnosis	ICD-10-CM
M19.039	Primary osteoarthritis, unspecified wrist	Diagnosis	ICD-10-CM
M19.041	Primary osteoarthritis, right hand	Diagnosis	ICD-10-CM
M19.042	Primary osteoarthritis, left hand	Diagnosis	ICD-10-CM
M19.049	Primary osteoarthritis, unspecified hand	Diagnosis	ICD-10-CM
M19.071	Primary osteoarthritis, right ankle and foot	Diagnosis	ICD-10-CM
M19.072	Primary osteoarthritis, left ankle and foot	Diagnosis	ICD-10-CM
M19.079	Primary osteoarthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M19.111	Post-traumatic osteoarthritis, right shoulder	Diagnosis	ICD-10-CM
M19.112	Post-traumatic osteoarthritis, left shoulder	Diagnosis	ICD-10-CM
M19.119	Post-traumatic osteoarthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M19.121	Post-traumatic osteoarthritis, right elbow	Diagnosis	ICD-10-CM
M19.122	Post-traumatic osteoarthritis, left elbow	Diagnosis	ICD-10-CM
M19.129	Post-traumatic osteoarthritis, unspecified elbow	Diagnosis	ICD-10-CM
M19.131	Post-traumatic osteoarthritis, right wrist	Diagnosis	ICD-10-CM
M19.132	Post-traumatic osteoarthritis, left wrist	Diagnosis	ICD-10-CM
M19.139	Post-traumatic osteoarthritis, unspecified wrist	Diagnosis	ICD-10-CM
M19.141	Post-traumatic osteoarthritis, right hand	Diagnosis	ICD-10-CM
M19.142	Post-traumatic osteoarthritis, left hand	Diagnosis	ICD-10-CM
M19.149	Post-traumatic osteoarthritis, unspecified hand	Diagnosis	ICD-10-CM
M19.171	Post-traumatic osteoarthritis, right ankle and foot	Diagnosis	ICD-10-CM
M19.172	Post-traumatic osteoarthritis, left ankle and foot	Diagnosis	ICD-10-CM
M19.179	Post-traumatic osteoarthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M19.211	Secondary osteoarthritis, right shoulder	Diagnosis	ICD-10-CM
M19.212	Secondary osteoarthritis, left shoulder	Diagnosis	ICD-10-CM
M19.219	Secondary osteoarthritis, unspecified shoulder	Diagnosis	ICD-10-CM



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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M19.221	Secondary osteoarthritis, right elbow	Diagnosis	ICD-10-CM
M19.222	Secondary osteoarthritis, left elbow	Diagnosis	ICD-10-CM
M19.229	Secondary osteoarthritis, unspecified elbow	Diagnosis	ICD-10-CM
M19.231	Secondary osteoarthritis, right wrist	Diagnosis	ICD-10-CM
M19.232	Secondary osteoarthritis, left wrist	Diagnosis	ICD-10-CM
M19.239	Secondary osteoarthritis, unspecified wrist	Diagnosis	ICD-10-CM
M19.241	Secondary osteoarthritis, right hand	Diagnosis	ICD-10-CM
M19.242	Secondary osteoarthritis, left hand	Diagnosis	ICD-10-CM
M19.249	Secondary osteoarthritis, unspecified hand	Diagnosis	ICD-10-CM
M19.271	Secondary osteoarthritis, right ankle and foot	Diagnosis	ICD-10-CM
M19.272	Secondary osteoarthritis, left ankle and foot	Diagnosis	ICD-10-CM
M19.279	Secondary osteoarthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M19.90	Unspecified osteoarthritis, unspecified site	Diagnosis	ICD-10-CM
M19.91	Primary osteoarthritis, unspecified site	Diagnosis	ICD-10-CM
M19.92	Post-traumatic osteoarthritis, unspecified site	Diagnosis	ICD-10-CM
M19.93	Secondary osteoarthritis, unspecified site	Diagnosis	ICD-10-CM
M45.0	Ankylosing spondylitis of multiple sites in spine	Diagnosis	ICD-10-CM
M45.1	Ankylosing spondylitis of occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M45.2	Ankylosing spondylitis of cervical region	Diagnosis	ICD-10-CM
M45.3	Ankylosing spondylitis of cervicothoracic region	Diagnosis	ICD-10-CM
M45.4	Ankylosing spondylitis of thoracic region	Diagnosis	ICD-10-CM
M45.5	Ankylosing spondylitis of thoracolumbar region	Diagnosis	ICD-10-CM
M45.6	Ankylosing spondylitis lumbar region	Diagnosis	ICD-10-CM
M45.7	Ankylosing spondylitis of lumbosacral region	Diagnosis	ICD-10-CM
M45.8	Ankylosing spondylitis sacral and sacrococcygeal region	Diagnosis	ICD-10-CM
M45.9	Ankylosing spondylitis of unspecified sites in spine	Diagnosis	ICD-10-CM
M47.011	Anterior spinal artery compression syndromes, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M47.012	Anterior spinal artery compression syndromes, cervical region	Diagnosis	ICD-10-CM
M47.013	Anterior spinal artery compression syndromes, cervicothoracic region	Diagnosis	ICD-10-CM
M47.014	Anterior spinal artery compression syndromes, thoracic region	Diagnosis	ICD-10-CM
M47.015	Anterior spinal artery compression syndromes, thoracolumbar region	Diagnosis	ICD-10-CM
M47.016	Anterior spinal artery compression syndromes, lumbar region	Diagnosis	ICD-10-CM
M47.019	Anterior spinal artery compression syndromes, site unspecified	Diagnosis	ICD-10-CM
M47.021	Vertebral artery compression syndromes, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M47.022	Vertebral artery compression syndromes, cervical region	Diagnosis	ICD-10-CM
M47.029	Vertebral artery compression syndromes, site unspecified	Diagnosis	ICD-10-CM
M47.10	Other spondylosis with myelopathy, site unspecified	Diagnosis	ICD-10-CM
M47.11	Other spondylosis with myelopathy, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M47.12	Other spondylosis with myelopathy, cervical region	Diagnosis	ICD-10-CM
M47.13	Other spondylosis with myelopathy, cervicothoracic region	Diagnosis	ICD-10-CM
M47.20	Other spondylosis with radiculopathy, site unspecified	Diagnosis	ICD-10-CM
M47.21	Other spondylosis with radiculopathy, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M47.22	Other spondylosis with radiculopathy, cervical region	Diagnosis	ICD-10-CM
M47.23	Other spondylosis with radiculopathy, cervicothoracic region	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M47.24	Other spondylosis with radiculopathy, thoracic region	Diagnosis	ICD-10-CM
M47.25	Other spondylosis with radiculopathy, thoracolumbar region	Diagnosis	ICD-10-CM
M47.26	Other spondylosis with radiculopathy, lumbar region	Diagnosis	ICD-10-CM
M47.27	Other spondylosis with radiculopathy, lumbosacral region	Diagnosis	ICD-10-CM
M47.28	Other spondylosis with radiculopathy, sacral and sacrococcygeal region	Diagnosis	ICD-10-CM
M47.811	Spondylosis without myelopathy or radiculopathy, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M47.812	Spondylosis without myelopathy or radiculopathy, cervical region	Diagnosis	ICD-10-CM
M47.813	Spondylosis without myelopathy or radiculopathy, cervicothoracic region	Diagnosis	ICD-10-CM
M47.814	Spondylosis without myelopathy or radiculopathy, thoracic region	Diagnosis	ICD-10-CM
M47.815	Spondylosis without myelopathy or radiculopathy, thoracolumbar region	Diagnosis	ICD-10-CM
M47.816	Spondylosis without myelopathy or radiculopathy, lumbar region	Diagnosis	ICD-10-CM
M47.817	Spondylosis without myelopathy or radiculopathy, lumbosacral region	Diagnosis	ICD-10-CM
M47.818	Spondylosis without myelopathy or radiculopathy, sacral and sacrococcygeal region	Diagnosis	ICD-10-CM
M47.819	Spondylosis without myelopathy or radiculopathy, site unspecified	Diagnosis	ICD-10-CM
M47.891	Other spondylosis, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M47.892	Other spondylosis, cervical region	Diagnosis	ICD-10-CM
M47.893	Other spondylosis, cervicothoracic region	Diagnosis	ICD-10-CM
M47.894	Other spondylosis, thoracic region	Diagnosis	ICD-10-CM
M47.895	Other spondylosis, thoracolumbar region	Diagnosis	ICD-10-CM
M47.896	Other spondylosis, lumbar region	Diagnosis	ICD-10-CM
M47.897	Other spondylosis, lumbosacral region	Diagnosis	ICD-10-CM
M47.898	Other spondylosis, sacral and sacrococcygeal region	Diagnosis	ICD-10-CM
M47.899	Other spondylosis, site unspecified	Diagnosis	ICD-10-CM
M47.9	Spondylosis, unspecified	Diagnosis	ICD-10-CM
M48.8X1	Other specified spondylopathies, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M48.8X2	Other specified spondylopathies, cervical region	Diagnosis	ICD-10-CM
M48.8X3	Other specified spondylopathies, cervicothoracic region	Diagnosis	ICD-10-CM
M48.8X4	Other specified spondylopathies, thoracic region	Diagnosis	ICD-10-CM
M48.8X5	Other specified spondylopathies, thoracolumbar region	Diagnosis	ICD-10-CM
M48.8X6	Other specified spondylopathies, lumbar region	Diagnosis	ICD-10-CM
M48.8X7	Other specified spondylopathies, lumbosacral region	Diagnosis	ICD-10-CM
M48.8X8	Other specified spondylopathies, sacral and sacrococcygeal region	Diagnosis	ICD-10-CM
M48.8X9	Other specified spondylopathies, site unspecified	Diagnosis	ICD-10-CM
M05.7A	Rheumatoid arthritis with rheumatoid factor of other specified site without organ or systems involvement	Diagnosis	ICD-10-CM
M05.8A	Other rheumatoid arthritis with rheumatoid factor of other specified site	Diagnosis	ICD-10-CM
M06.0A	Rheumatoid arthritis without rheumatoid factor, other specified site	Diagnosis	ICD-10-CM
M06.8A	Other specified rheumatoid arthritis, other specified site	Diagnosis	ICD-10-CM
M08.0A	Unspecified juvenile rheumatoid arthritis, other specified site	Diagnosis	ICD-10-CM
M08.2A	Juvenile rheumatoid arthritis with systemic onset, other specified site	Diagnosis	ICD-10-CM
M08.4A	Pauciarticular juvenile rheumatoid arthritis, other specified site	Diagnosis	ICD-10-CM
M08.9A	Juvenile arthritis, unspecified, other specified site	Diagnosis	ICD-10-CM
M19.09	Primary osteoarthritis, other specified site	Diagnosis	ICD-10-CM
M19.19	Post-traumatic osteoarthritis, other specified site	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
M19.29	Secondary osteoarthritis, other specified site	Diagnosis	ICD-10-CM
720.0	Ankylosing spondylitis	Diagnosis	ICD-9-CM
721.1	Cervical spondylosis with myelopathy	Diagnosis	ICD-9-CM
721.0	Cervical spondylosis without myelopathy	Diagnosis	ICD-9-CM
714.1	Felty's syndrome	Diagnosis	ICD-9-CM
715.09	Generalized osteoarthritis, involving multiple sites	Diagnosis	ICD-9-CM
715.04	Generalized osteoarthritis, involving hand	Diagnosis	ICD-9-CM
715.00	Generalized osteoarthritis, unspecified site	Diagnosis	ICD-9-CM
715.37	Localized osteoarthritis not specified whether primary or secondary, ankle and foot	Diagnosis	ICD-9-CM
715.33	Localized osteoarthritis not specified whether primary or secondary, forearm	Diagnosis	ICD-9-CM
715.36	Localized osteoarthritis not specified whether primary or secondary, lower leg	Diagnosis	ICD-9-CM
715.38	Localized osteoarthritis not specified whether primary or secondary, other specified sites	Diagnosis	ICD-9-CM
715.35	Localized osteoarthritis not specified whether primary or secondary, pelvic region and thigh	Diagnosis	ICD-9-CM
715.31	Localized osteoarthritis not specified whether primary or secondary, shoulder region	Diagnosis	ICD-9-CM
715.30	Localized osteoarthritis not specified whether primary or secondary, unspecified site	Diagnosis	ICD-9-CM
715.32	Localized osteoarthritis not specified whether primary or secondary, upper arm	Diagnosis	ICD-9-CM
715.34	Localized osteoarthritis not specified whether primary or secondary, hand	Diagnosis	ICD-9-CM
721.3	Lumbosacral spondylosis without myelopathy	Diagnosis	ICD-9-CM
714.33	Monoarticular juvenile rheumatoid arthritis	Diagnosis	ICD-9-CM
715.80	Osteoarthritis involving more than one site, but not specified as generalized, unspecified site	Diagnosis	ICD-9-CM
715.89	Osteoarthritis involving multiple sites, but not specified as generalized	Diagnosis	ICD-9-CM
715.98	Osteoarthritis, unspecified whether generalized or localized, other specified sites	Diagnosis	ICD-9-CM
715.95	Osteoarthritis, unspecified whether generalized or localized, pelvic region and thigh	Diagnosis	ICD-9-CM
715.91	Osteoarthritis, unspecified whether generalized or localized, shoulder region	Diagnosis	ICD-9-CM
715.90	Osteoarthritis, unspecified whether generalized or localized, unspecified site	Diagnosis	ICD-9-CM
715.97	Osteoarthritis, unspecified whether generalized or localized, ankle and foot	Diagnosis	ICD-9-CM
715.93	Osteoarthritis, unspecified whether generalized or localized, forearm	Diagnosis	ICD-9-CM
715.96	Osteoarthritis, unspecified whether generalized or localized, lower leg	Diagnosis	ICD-9-CM
715.92	Osteoarthritis, unspecified whether generalized or localized, upper arm	Diagnosis	ICD-9-CM
715.94	Osteoarthritis, unspecified whether generalized or localized, hand	Diagnosis	ICD-9-CM
714.2	Other rheumatoid arthritis with visceral or systemic involvement	Diagnosis	ICD-9-CM
714.32	Pauciarticular juvenile rheumatoid arthritis	Diagnosis	ICD-9-CM
714.31	Polyarticular juvenile rheumatoid arthritis, acute	Diagnosis	ICD-9-CM
714.30	Polyarticular juvenile rheumatoid arthritis, chronic or unspecified	Diagnosis	ICD-9-CM
715.15	Primary localized osteoarthritis, pelvic region and thigh	Diagnosis	ICD-9-CM
715.17	Primary localized osteoarthritis, ankle and foot	Diagnosis	ICD-9-CM
715.13	Primary localized osteoarthritis, forearm	Diagnosis	ICD-9-CM
715.14	Primary localized osteoarthritis, hand	Diagnosis	ICD-9-CM
715.16	Primary localized osteoarthritis, lower leg	Diagnosis	ICD-9-CM
715.18	Primary localized osteoarthritis, other specified sites	Diagnosis	ICD-9-CM
715.11	Primary localized osteoarthritis, shoulder region	Diagnosis	ICD-9-CM
715.10	Primary localized osteoarthritis, unspecified site	Diagnosis	ICD-9-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
715.12	Primary localized osteoarthritis, upper arm	Diagnosis	ICD-9-CM
714.0	Rheumatoid arthritis	Diagnosis	ICD-9-CM
715.27	Secondary localized osteoarthritis, ankle and foot	Diagnosis	ICD-9-CM
715.24	Secondary localized osteoarthritis, involving hand	Diagnosis	ICD-9-CM
715.28	Secondary localized osteoarthritis, other specified site	Diagnosis	ICD-9-CM
715.25	Secondary localized osteoarthritis, pelvic region and thigh	Diagnosis	ICD-9-CM
715.21	Secondary localized osteoarthritis, shoulder region	Diagnosis	ICD-9-CM
715.20	Secondary localized osteoarthritis, unspecified site	Diagnosis	ICD-9-CM
715.23	Secondary localized osteoarthritis, forearm	Diagnosis	ICD-9-CM
715.26	Secondary localized osteoarthritis, lower leg	Diagnosis	ICD-9-CM
715.22	Secondary localized osteoarthritis, upper arm	Diagnosis	ICD-9-CM
721.91	Spondylosis of unspecified site with myelopathy	Diagnosis	ICD-9-CM
721.90	Spondylosis of unspecified site without mention of myelopathy	Diagnosis	ICD-9-CM
721.2	Thoracic spondylosis without myelopathy	Diagnosis	ICD-9-CM
<b>Stroke/Transient ischemic attack (TIA)</b>			
G45.0	Vertebro-basilar artery syndrome	Diagnosis	ICD-10-CM
G45.1	Carotid artery syndrome (hemispheric)	Diagnosis	ICD-10-CM
G45.2	Multiple and bilateral precerebral artery syndromes	Diagnosis	ICD-10-CM
G45.8	Other transient cerebral ischemic attacks and related syndromes	Diagnosis	ICD-10-CM
G45.9	Transient cerebral ischemic attack, unspecified	Diagnosis	ICD-10-CM
G46.0	Middle cerebral artery syndrome	Diagnosis	ICD-10-CM
G46.1	Anterior cerebral artery syndrome	Diagnosis	ICD-10-CM
G46.2	Posterior cerebral artery syndrome	Diagnosis	ICD-10-CM
G46.3	Brain stem stroke syndrome	Diagnosis	ICD-10-CM
G46.4	Cerebellar stroke syndrome	Diagnosis	ICD-10-CM
G46.5	Pure motor lacunar syndrome	Diagnosis	ICD-10-CM
G46.6	Pure sensory lacunar syndrome	Diagnosis	ICD-10-CM
G46.7	Other lacunar syndromes	Diagnosis	ICD-10-CM
G46.8	Other vascular syndromes of brain in cerebrovascular diseases	Diagnosis	ICD-10-CM
G97.31	Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating a nervous system procedure	Diagnosis	ICD-10-CM
G97.32	Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating other procedure	Diagnosis	ICD-10-CM
I60.00	Nontraumatic subarachnoid hemorrhage from unspecified carotid siphon and bifurcation	Diagnosis	ICD-10-CM
I60.01	Nontraumatic subarachnoid hemorrhage from right carotid siphon and bifurcation	Diagnosis	ICD-10-CM
I60.02	Nontraumatic subarachnoid hemorrhage from left carotid siphon and bifurcation	Diagnosis	ICD-10-CM
I60.10	Nontraumatic subarachnoid hemorrhage from unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I60.11	Nontraumatic subarachnoid hemorrhage from right middle cerebral artery	Diagnosis	ICD-10-CM
I60.12	Nontraumatic subarachnoid hemorrhage from left middle cerebral artery	Diagnosis	ICD-10-CM
I60.20	Nontraumatic subarachnoid hemorrhage from unspecified anterior communicating artery	Diagnosis	ICD-10-CM
I60.21	Nontraumatic subarachnoid hemorrhage from right anterior communicating artery	Diagnosis	ICD-10-CM
I60.22	Nontraumatic subarachnoid hemorrhage from left anterior communicating artery	Diagnosis	ICD-10-CM
I60.30	Nontraumatic subarachnoid hemorrhage from unspecified posterior communicating artery	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
I60.31	Nontraumatic subarachnoid hemorrhage from right posterior communicating artery	Diagnosis	ICD-10-CM
I60.32	Nontraumatic subarachnoid hemorrhage from left posterior communicating artery	Diagnosis	ICD-10-CM
I60.4	Nontraumatic subarachnoid hemorrhage from basilar artery	Diagnosis	ICD-10-CM
I60.50	Nontraumatic subarachnoid hemorrhage from unspecified vertebral artery	Diagnosis	ICD-10-CM
I60.51	Nontraumatic subarachnoid hemorrhage from right vertebral artery	Diagnosis	ICD-10-CM
I60.52	Nontraumatic subarachnoid hemorrhage from left vertebral artery	Diagnosis	ICD-10-CM
I60.6	Nontraumatic subarachnoid hemorrhage from other intracranial arteries	Diagnosis	ICD-10-CM
I60.7	Nontraumatic subarachnoid hemorrhage from unspecified intracranial artery	Diagnosis	ICD-10-CM
I60.8	Other nontraumatic subarachnoid hemorrhage	Diagnosis	ICD-10-CM
I60.9	Nontraumatic subarachnoid hemorrhage, unspecified	Diagnosis	ICD-10-CM
I61.0	Nontraumatic intracerebral hemorrhage in hemisphere, subcortical	Diagnosis	ICD-10-CM
I61.1	Nontraumatic intracerebral hemorrhage in hemisphere, cortical	Diagnosis	ICD-10-CM
I61.2	Nontraumatic intracerebral hemorrhage in hemisphere, unspecified	Diagnosis	ICD-10-CM
I61.3	Nontraumatic intracerebral hemorrhage in brain stem	Diagnosis	ICD-10-CM
I61.4	Nontraumatic intracerebral hemorrhage in cerebellum	Diagnosis	ICD-10-CM
I61.5	Nontraumatic intracerebral hemorrhage, intraventricular	Diagnosis	ICD-10-CM
I61.6	Nontraumatic intracerebral hemorrhage, multiple localized	Diagnosis	ICD-10-CM
I61.8	Other nontraumatic intracerebral hemorrhage	Diagnosis	ICD-10-CM
I61.9	Nontraumatic intracerebral hemorrhage, unspecified	Diagnosis	ICD-10-CM
I63.00	Cerebral infarction due to thrombosis of unspecified precerebral artery	Diagnosis	ICD-10-CM
I63.011	Cerebral infarction due to thrombosis of right vertebral artery	Diagnosis	ICD-10-CM
I63.012	Cerebral infarction due to thrombosis of left vertebral artery	Diagnosis	ICD-10-CM
I63.013	Cerebral infarction due to thrombosis of bilateral vertebral arteries	Diagnosis	ICD-10-CM
I63.019	Cerebral infarction due to thrombosis of unspecified vertebral artery	Diagnosis	ICD-10-CM
I63.02	Cerebral infarction due to thrombosis of basilar artery	Diagnosis	ICD-10-CM
I63.031	Cerebral infarction due to thrombosis of right carotid artery	Diagnosis	ICD-10-CM
I63.032	Cerebral infarction due to thrombosis of left carotid artery	Diagnosis	ICD-10-CM
I63.039	Cerebral infarction due to thrombosis of unspecified carotid artery	Diagnosis	ICD-10-CM
I63.09	Cerebral infarction due to thrombosis of other precerebral artery	Diagnosis	ICD-10-CM
I63.10	Cerebral infarction due to embolism of unspecified precerebral artery	Diagnosis	ICD-10-CM
I63.111	Cerebral infarction due to embolism of right vertebral artery	Diagnosis	ICD-10-CM
I63.112	Cerebral infarction due to embolism of left vertebral artery	Diagnosis	ICD-10-CM
I63.119	Cerebral infarction due to embolism of unspecified vertebral artery	Diagnosis	ICD-10-CM
I63.12	Cerebral infarction due to embolism of basilar artery	Diagnosis	ICD-10-CM
I63.131	Cerebral infarction due to embolism of right carotid artery	Diagnosis	ICD-10-CM
I63.132	Cerebral infarction due to embolism of left carotid artery	Diagnosis	ICD-10-CM
I63.139	Cerebral infarction due to embolism of unspecified carotid artery	Diagnosis	ICD-10-CM
I63.19	Cerebral infarction due to embolism of other precerebral artery	Diagnosis	ICD-10-CM
I63.20	Cerebral infarction due to unspecified occlusion or stenosis of unspecified precerebral arteries	Diagnosis	ICD-10-CM
I63.211	Cerebral infarction due to unspecified occlusion or stenosis of right vertebral artery	Diagnosis	ICD-10-CM
I63.212	Cerebral infarction due to unspecified occlusion or stenosis of left vertebral artery	Diagnosis	ICD-10-CM
I63.213	Cerebral infarction due to unspecified occlusion or stenosis of bilateral vertebral arteries	Diagnosis	ICD-10-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
I63.219	Cerebral infarction due to unspecified occlusion or stenosis of unspecified vertebral arteries	Diagnosis	ICD-10-CM
I63.22	Cerebral infarction due to unspecified occlusion or stenosis of basilar artery	Diagnosis	ICD-10-CM
I63.231	Cerebral infarction due to unspecified occlusion or stenosis of right carotid arteries	Diagnosis	ICD-10-CM
I63.232	Cerebral infarction due to unspecified occlusion or stenosis of left carotid arteries	Diagnosis	ICD-10-CM
I63.233	Cerebral infarction due to unspecified occlusion or stenosis of bilateral carotid arteries	Diagnosis	ICD-10-CM
I63.239	Cerebral infarction due to unspecified occlusion or stenosis of unspecified carotid arteries	Diagnosis	ICD-10-CM
I63.29	Cerebral infarction due to unspecified occlusion or stenosis of other precerebral arteries	Diagnosis	ICD-10-CM
I63.30	Cerebral infarction due to thrombosis of unspecified cerebral artery	Diagnosis	ICD-10-CM
I63.311	Cerebral infarction due to thrombosis of right middle cerebral artery	Diagnosis	ICD-10-CM
I63.312	Cerebral infarction due to thrombosis of left middle cerebral artery	Diagnosis	ICD-10-CM
I63.313	Cerebral infarction due to thrombosis of bilateral middle cerebral arteries	Diagnosis	ICD-10-CM
I63.319	Cerebral infarction due to thrombosis of unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I63.321	Cerebral infarction due to thrombosis of right anterior cerebral artery	Diagnosis	ICD-10-CM
I63.322	Cerebral infarction due to thrombosis of left anterior cerebral artery	Diagnosis	ICD-10-CM
I63.323	Cerebral infarction due to thrombosis of bilateral anterior cerebral arteries	Diagnosis	ICD-10-CM
I63.329	Cerebral infarction due to thrombosis of unspecified anterior cerebral artery	Diagnosis	ICD-10-CM
I63.331	Cerebral infarction due to thrombosis of right posterior cerebral artery	Diagnosis	ICD-10-CM
I63.332	Cerebral infarction due to thrombosis of left posterior cerebral artery	Diagnosis	ICD-10-CM
I63.333	Cerebral infarction due to thrombosis of bilateral posterior cerebral arteries	Diagnosis	ICD-10-CM
I63.339	Cerebral infarction due to thrombosis of unspecified posterior cerebral artery	Diagnosis	ICD-10-CM
I63.341	Cerebral infarction due to thrombosis of right cerebellar artery	Diagnosis	ICD-10-CM
I63.342	Cerebral infarction due to thrombosis of left cerebellar artery	Diagnosis	ICD-10-CM
I63.343	Cerebral infarction due to thrombosis of bilateral cerebellar arteries	Diagnosis	ICD-10-CM
I63.349	Cerebral infarction due to thrombosis of unspecified cerebellar artery	Diagnosis	ICD-10-CM
I63.39	Cerebral infarction due to thrombosis of other cerebral artery	Diagnosis	ICD-10-CM
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery	Diagnosis	ICD-10-CM
I63.411	Cerebral infarction due to embolism of right middle cerebral artery	Diagnosis	ICD-10-CM
I63.412	Cerebral infarction due to embolism of left middle cerebral artery	Diagnosis	ICD-10-CM
I63.413	Cerebral infarction due to embolism of bilateral middle cerebral arteries	Diagnosis	ICD-10-CM
I63.419	Cerebral infarction due to embolism of unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I63.421	Cerebral infarction due to embolism of right anterior cerebral artery	Diagnosis	ICD-10-CM
I63.422	Cerebral infarction due to embolism of left anterior cerebral artery	Diagnosis	ICD-10-CM
I63.423	Cerebral infarction due to embolism of bilateral anterior cerebral arteries	Diagnosis	ICD-10-CM
I63.429	Cerebral infarction due to embolism of unspecified anterior cerebral artery	Diagnosis	ICD-10-CM
I63.431	Cerebral infarction due to embolism of right posterior cerebral artery	Diagnosis	ICD-10-CM
I63.432	Cerebral infarction due to embolism of left posterior cerebral artery	Diagnosis	ICD-10-CM
I63.433	Cerebral infarction due to embolism of bilateral posterior cerebral arteries	Diagnosis	ICD-10-CM
I63.439	Cerebral infarction due to embolism of unspecified posterior cerebral artery	Diagnosis	ICD-10-CM
I63.441	Cerebral infarction due to embolism of right cerebellar artery	Diagnosis	ICD-10-CM
I63.442	Cerebral infarction due to embolism of left cerebellar artery	Diagnosis	ICD-10-CM
I63.443	Cerebral infarction due to embolism of bilateral cerebellar arteries	Diagnosis	ICD-10-CM
I63.449	Cerebral infarction due to embolism of unspecified cerebellar artery	Diagnosis	ICD-10-CM

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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
I63.49	Cerebral infarction due to embolism of other cerebral artery	Diagnosis	ICD-10-CM
I63.50	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebral artery	Diagnosis	ICD-10-CM
I63.511	Cerebral infarction due to unspecified occlusion or stenosis of right middle cerebral artery	Diagnosis	ICD-10-CM
I63.512	Cerebral infarction due to unspecified occlusion or stenosis of left middle cerebral artery	Diagnosis	ICD-10-CM
I63.513	Cerebral infarction due to unspecified occlusion or stenosis of bilateral middle cerebral arteries	Diagnosis	ICD-10-CM
I63.519	Cerebral infarction due to unspecified occlusion or stenosis of unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I63.521	Cerebral infarction due to unspecified occlusion or stenosis of right anterior cerebral artery	Diagnosis	ICD-10-CM
I63.522	Cerebral infarction due to unspecified occlusion or stenosis of left anterior cerebral artery	Diagnosis	ICD-10-CM
I63.523	Cerebral infarction due to unspecified occlusion or stenosis of bilateral anterior cerebral arteries	Diagnosis	ICD-10-CM
I63.529	Cerebral infarction due to unspecified occlusion or stenosis of unspecified anterior cerebral artery	Diagnosis	ICD-10-CM
I63.531	Cerebral infarction due to unspecified occlusion or stenosis of right posterior cerebral artery	Diagnosis	ICD-10-CM
I63.532	Cerebral infarction due to unspecified occlusion or stenosis of left posterior cerebral artery	Diagnosis	ICD-10-CM
I63.533	Cerebral infarction due to unspecified occlusion or stenosis of bilateral posterior cerebral arteries	Diagnosis	ICD-10-CM
I63.539	Cerebral infarction due to unspecified occlusion or stenosis of unspecified posterior cerebral artery	Diagnosis	ICD-10-CM
I63.541	Cerebral infarction due to unspecified occlusion or stenosis of right cerebellar artery	Diagnosis	ICD-10-CM
I63.542	Cerebral infarction due to unspecified occlusion or stenosis of left cerebellar artery	Diagnosis	ICD-10-CM
I63.543	Cerebral infarction due to unspecified occlusion or stenosis of bilateral cerebellar arteries	Diagnosis	ICD-10-CM
I63.549	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebellar artery	Diagnosis	ICD-10-CM
I63.59	Cerebral infarction due to unspecified occlusion or stenosis of other cerebral artery	Diagnosis	ICD-10-CM
I63.6	Cerebral infarction due to cerebral venous thrombosis, nonpyogenic	Diagnosis	ICD-10-CM
I63.8	Other cerebral infarction	Diagnosis	ICD-10-CM
I63.9	Cerebral infarction, unspecified	Diagnosis	ICD-10-CM
I66.01	Occlusion and stenosis of right middle cerebral artery	Diagnosis	ICD-10-CM
I66.02	Occlusion and stenosis of left middle cerebral artery	Diagnosis	ICD-10-CM
I66.03	Occlusion and stenosis of bilateral middle cerebral arteries	Diagnosis	ICD-10-CM
I66.09	Occlusion and stenosis of unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I66.11	Occlusion and stenosis of right anterior cerebral artery	Diagnosis	ICD-10-CM
I66.12	Occlusion and stenosis of left anterior cerebral artery	Diagnosis	ICD-10-CM
I66.13	Occlusion and stenosis of bilateral anterior cerebral arteries	Diagnosis	ICD-10-CM
I66.19	Occlusion and stenosis of unspecified anterior cerebral artery	Diagnosis	ICD-10-CM
I66.21	Occlusion and stenosis of right posterior cerebral artery	Diagnosis	ICD-10-CM



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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
I66.22	Occlusion and stenosis of left posterior cerebral artery	Diagnosis	ICD-10-CM
I66.23	Occlusion and stenosis of bilateral posterior cerebral arteries	Diagnosis	ICD-10-CM
I66.29	Occlusion and stenosis of unspecified posterior cerebral artery	Diagnosis	ICD-10-CM
I66.3	Occlusion and stenosis of cerebellar arteries	Diagnosis	ICD-10-CM
I66.8	Occlusion and stenosis of other cerebral arteries	Diagnosis	ICD-10-CM
I66.9	Occlusion and stenosis of unspecified cerebral artery	Diagnosis	ICD-10-CM
I67.841	Reversible cerebrovascular vasoconstriction syndrome	Diagnosis	ICD-10-CM
I67.848	Other cerebrovascular vasospasm and vasoconstriction	Diagnosis	ICD-10-CM
I67.89	Other cerebrovascular disease	Diagnosis	ICD-10-CM
I97.810	Intraoperative cerebrovascular infarction during cardiac surgery	Diagnosis	ICD-10-CM
I97.811	Intraoperative cerebrovascular infarction during other surgery	Diagnosis	ICD-10-CM
I97.820	Postprocedural cerebrovascular infarction following cardiac surgery	Diagnosis	ICD-10-CM
I97.821	Postprocedural cerebrovascular infarction following other surgery	Diagnosis	ICD-10-CM
436	Acute, but ill-defined, cerebrovascular disease	Diagnosis	ICD-9-CM
435.0	Basilar artery syndrome	Diagnosis	ICD-9-CM
434.11	Cerebral embolism with cerebral infarction	Diagnosis	ICD-9-CM
434.10	Cerebral embolism without mention of cerebral infarction	Diagnosis	ICD-9-CM
434.01	Cerebral thrombosis with cerebral infarction	Diagnosis	ICD-9-CM
434.00	Cerebral thrombosis without mention of cerebral infarction	Diagnosis	ICD-9-CM
997.02	Iatrogenic cerebrovascular infarction or hemorrhage	Diagnosis	ICD-9-CM
431	Intracerebral hemorrhage	Diagnosis	ICD-9-CM
433.31	Occlusion and stenosis of multiple and bilateral precerebral arteries with cerebral infarction	Diagnosis	ICD-9-CM
433.81	Occlusion and stenosis of other specified precerebral artery with cerebral infarction	Diagnosis	ICD-9-CM
433.91	Occlusion and stenosis of unspecified precerebral artery with cerebral infarction	Diagnosis	ICD-9-CM
433.01	Occlusion and stenosis of basilar artery with cerebral infarction	Diagnosis	ICD-9-CM
433.11	Occlusion and stenosis of carotid artery with cerebral infarction	Diagnosis	ICD-9-CM
433.21	Occlusion and stenosis of vertebral artery with cerebral infarction	Diagnosis	ICD-9-CM
435.8	Other specified transient cerebral ischemias	Diagnosis	ICD-9-CM
430	Subarachnoid hemorrhage	Diagnosis	ICD-9-CM
434.90	Unspecified cerebral artery occlusion without mention of cerebral infarction	Diagnosis	ICD-9-CM
434.91	Unspecified cerebral artery occlusion with cerebral infarction	Diagnosis	ICD-9-CM
435.9	Unspecified transient cerebral ischemia	Diagnosis	ICD-9-CM
435.1	Vertebral artery syndrome	Diagnosis	ICD-9-CM
435.3	Vertebrobasilar artery syndrome	Diagnosis	ICD-9-CM
<b>Breast Cancer</b>			
C50.011	Malignant neoplasm of nipple and areola, right female breast	Diagnosis	ICD-10-CM
C50.012	Malignant neoplasm of nipple and areola, left female breast	Diagnosis	ICD-10-CM
C50.019	Malignant neoplasm of nipple and areola, unspecified female breast	Diagnosis	ICD-10-CM
C50.021	Malignant neoplasm of nipple and areola, right male breast	Diagnosis	ICD-10-CM
C50.022	Malignant neoplasm of nipple and areola, left male breast	Diagnosis	ICD-10-CM
C50.029	Malignant neoplasm of nipple and areola, unspecified male breast	Diagnosis	ICD-10-CM
C50.111	Malignant neoplasm of central portion of right female breast	Diagnosis	ICD-10-CM
C50.112	Malignant neoplasm of central portion of left female breast	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
C50.119	Malignant neoplasm of central portion of unspecified female breast	Diagnosis	ICD-10-CM
C50.121	Malignant neoplasm of central portion of right male breast	Diagnosis	ICD-10-CM
C50.122	Malignant neoplasm of central portion of left male breast	Diagnosis	ICD-10-CM
C50.129	Malignant neoplasm of central portion of unspecified male breast	Diagnosis	ICD-10-CM
C50.211	Malignant neoplasm of upper-inner quadrant of right female breast	Diagnosis	ICD-10-CM
C50.212	Malignant neoplasm of upper-inner quadrant of left female breast	Diagnosis	ICD-10-CM
C50.219	Malignant neoplasm of upper-inner quadrant of unspecified female breast	Diagnosis	ICD-10-CM
C50.221	Malignant neoplasm of upper-inner quadrant of right male breast	Diagnosis	ICD-10-CM
C50.222	Malignant neoplasm of upper-inner quadrant of left male breast	Diagnosis	ICD-10-CM
C50.229	Malignant neoplasm of upper-inner quadrant of unspecified male breast	Diagnosis	ICD-10-CM
C50.311	Malignant neoplasm of lower-inner quadrant of right female breast	Diagnosis	ICD-10-CM
C50.312	Malignant neoplasm of lower-inner quadrant of left female breast	Diagnosis	ICD-10-CM
C50.319	Malignant neoplasm of lower-inner quadrant of unspecified female breast	Diagnosis	ICD-10-CM
C50.321	Malignant neoplasm of lower-inner quadrant of right male breast	Diagnosis	ICD-10-CM
C50.322	Malignant neoplasm of lower-inner quadrant of left male breast	Diagnosis	ICD-10-CM
C50.329	Malignant neoplasm of lower-inner quadrant of unspecified male breast	Diagnosis	ICD-10-CM
C50.411	Malignant neoplasm of upper-outer quadrant of right female breast	Diagnosis	ICD-10-CM
C50.412	Malignant neoplasm of upper-outer quadrant of left female breast	Diagnosis	ICD-10-CM
C50.419	Malignant neoplasm of upper-outer quadrant of unspecified female breast	Diagnosis	ICD-10-CM
C50.421	Malignant neoplasm of upper-outer quadrant of right male breast	Diagnosis	ICD-10-CM
C50.422	Malignant neoplasm of upper-outer quadrant of left male breast	Diagnosis	ICD-10-CM
C50.429	Malignant neoplasm of upper-outer quadrant of unspecified male breast	Diagnosis	ICD-10-CM
C50.511	Malignant neoplasm of lower-outer quadrant of right female breast	Diagnosis	ICD-10-CM
C50.512	Malignant neoplasm of lower-outer quadrant of left female breast	Diagnosis	ICD-10-CM
C50.519	Malignant neoplasm of lower-outer quadrant of unspecified female breast	Diagnosis	ICD-10-CM
C50.521	Malignant neoplasm of lower-outer quadrant of right male breast	Diagnosis	ICD-10-CM
C50.522	Malignant neoplasm of lower-outer quadrant of left male breast	Diagnosis	ICD-10-CM
C50.529	Malignant neoplasm of lower-outer quadrant of unspecified male breast	Diagnosis	ICD-10-CM
C50.611	Malignant neoplasm of axillary tail of right female breast	Diagnosis	ICD-10-CM
C50.612	Malignant neoplasm of axillary tail of left female breast	Diagnosis	ICD-10-CM
C50.619	Malignant neoplasm of axillary tail of unspecified female breast	Diagnosis	ICD-10-CM
C50.621	Malignant neoplasm of axillary tail of right male breast	Diagnosis	ICD-10-CM
C50.622	Malignant neoplasm of axillary tail of left male breast	Diagnosis	ICD-10-CM
C50.629	Malignant neoplasm of axillary tail of unspecified male breast	Diagnosis	ICD-10-CM
C50.811	Malignant neoplasm of overlapping sites of right female breast	Diagnosis	ICD-10-CM
C50.812	Malignant neoplasm of overlapping sites of left female breast	Diagnosis	ICD-10-CM
C50.819	Malignant neoplasm of overlapping sites of unspecified female breast	Diagnosis	ICD-10-CM
C50.821	Malignant neoplasm of overlapping sites of right male breast	Diagnosis	ICD-10-CM
C50.822	Malignant neoplasm of overlapping sites of left male breast	Diagnosis	ICD-10-CM
C50.829	Malignant neoplasm of overlapping sites of unspecified male breast	Diagnosis	ICD-10-CM
C50.911	Malignant neoplasm of unspecified site of right female breast	Diagnosis	ICD-10-CM
C50.912	Malignant neoplasm of unspecified site of left female breast	Diagnosis	ICD-10-CM
C50.919	Malignant neoplasm of unspecified site of unspecified female breast	Diagnosis	ICD-10-CM
C50.921	Malignant neoplasm of unspecified site of right male breast	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
C50.922	Malignant neoplasm of unspecified site of left male breast	Diagnosis	ICD-10-CM
C50.929	Malignant neoplasm of unspecified site of unspecified male breast	Diagnosis	ICD-10-CM
D05.00	Lobular carcinoma in situ of unspecified breast	Diagnosis	ICD-10-CM
D05.01	Lobular carcinoma in situ of right breast	Diagnosis	ICD-10-CM
D05.02	Lobular carcinoma in situ of left breast	Diagnosis	ICD-10-CM
D05.10	Intraductal carcinoma in situ of unspecified breast	Diagnosis	ICD-10-CM
D05.11	Intraductal carcinoma in situ of right breast	Diagnosis	ICD-10-CM
D05.12	Intraductal carcinoma in situ of left breast	Diagnosis	ICD-10-CM
D05.80	Other specified type of carcinoma in situ of unspecified breast	Diagnosis	ICD-10-CM
D05.81	Other specified type of carcinoma in situ of right breast	Diagnosis	ICD-10-CM
D05.82	Other specified type of carcinoma in situ of left breast	Diagnosis	ICD-10-CM
D05.90	Unspecified type of carcinoma in situ of unspecified breast	Diagnosis	ICD-10-CM
D05.91	Unspecified type of carcinoma in situ of right breast	Diagnosis	ICD-10-CM
D05.92	Unspecified type of carcinoma in situ of left breast	Diagnosis	ICD-10-CM
Z85.3	Personal history of malignant neoplasm of breast	Diagnosis	ICD-10-CM
233.0	Carcinoma in situ of breast	Diagnosis	ICD-9-CM
174.3	Malignant neoplasm of lower-inner quadrant of female breast	Diagnosis	ICD-9-CM
174.5	Malignant neoplasm of lower-outer quadrant of female breast	Diagnosis	ICD-9-CM
174.8	Malignant neoplasm of other specified sites of female breast	Diagnosis	ICD-9-CM
175.9	Malignant neoplasm of other and unspecified sites of male breast	Diagnosis	ICD-9-CM
174.2	Malignant neoplasm of upper-inner quadrant of female breast	Diagnosis	ICD-9-CM
174.4	Malignant neoplasm of upper-outer quadrant of female breast	Diagnosis	ICD-9-CM
174.6	Malignant neoplasm of axillary tail of female breast	Diagnosis	ICD-9-CM
174.1	Malignant neoplasm of central portion of female breast	Diagnosis	ICD-9-CM
174.0	Malignant neoplasm of nipple and areola of female breast	Diagnosis	ICD-9-CM
175.0	Malignant neoplasm of nipple and areola of male breast	Diagnosis	ICD-9-CM
174.9	Malignant neoplasm of breast (female), unspecified site	Diagnosis	ICD-9-CM
V10.3	Personal history of malignant neoplasm of breast	Diagnosis	ICD-9-CM
<b>Colorectal Cancer</b>			
C18.0	Malignant neoplasm of cecum	Diagnosis	ICD-10-CM
C18.1	Malignant neoplasm of appendix	Diagnosis	ICD-10-CM
C18.2	Malignant neoplasm of ascending colon	Diagnosis	ICD-10-CM
C18.3	Malignant neoplasm of hepatic flexure	Diagnosis	ICD-10-CM
C18.4	Malignant neoplasm of transverse colon	Diagnosis	ICD-10-CM
C18.5	Malignant neoplasm of splenic flexure	Diagnosis	ICD-10-CM
C18.6	Malignant neoplasm of descending colon	Diagnosis	ICD-10-CM
C18.7	Malignant neoplasm of sigmoid colon	Diagnosis	ICD-10-CM
C18.8	Malignant neoplasm of overlapping sites of colon	Diagnosis	ICD-10-CM
C18.9	Malignant neoplasm of colon, unspecified	Diagnosis	ICD-10-CM
C19	Malignant neoplasm of rectosigmoid junction	Diagnosis	ICD-10-CM
C20	Malignant neoplasm of rectum	Diagnosis	ICD-10-CM
D01.0	Carcinoma in situ of colon	Diagnosis	ICD-10-CM
D01.1	Carcinoma in situ of rectosigmoid junction	Diagnosis	ICD-10-CM
D01.2	Carcinoma in situ of rectum	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
Z85.038	Personal history of other malignant neoplasm of large intestine	Diagnosis	ICD-10-CM
Z85.040	Personal history of malignant carcinoid tumor of rectum	Diagnosis	ICD-10-CM
Z85.048	Personal history of other malignant neoplasm of rectum, rectosigmoid junction, and anus	Diagnosis	ICD-10-CM
230.3	Carcinoma in situ of colon	Diagnosis	ICD-9-CM
230.4	Carcinoma in situ of rectum	Diagnosis	ICD-9-CM
153.8	Malignant neoplasm of other specified sites of large intestine	Diagnosis	ICD-9-CM
153.5	Malignant neoplasm of appendix	Diagnosis	ICD-9-CM
153.6	Malignant neoplasm of ascending colon	Diagnosis	ICD-9-CM
153.4	Malignant neoplasm of cecum	Diagnosis	ICD-9-CM
153.9	Malignant neoplasm of colon, unspecified site	Diagnosis	ICD-9-CM
153.2	Malignant neoplasm of descending colon	Diagnosis	ICD-9-CM
153.0	Malignant neoplasm of hepatic flexure	Diagnosis	ICD-9-CM
154.0	Malignant neoplasm of rectosigmoid junction	Diagnosis	ICD-9-CM
154.1	Malignant neoplasm of rectum	Diagnosis	ICD-9-CM
153.3	Malignant neoplasm of sigmoid colon	Diagnosis	ICD-9-CM
153.7	Malignant neoplasm of splenic flexure	Diagnosis	ICD-9-CM
153.1	Malignant neoplasm of transverse colon	Diagnosis	ICD-9-CM
V10.06	Personal history of malignant neoplasm of rectum, rectosigmoid junction, and anus	Diagnosis	ICD-9-CM
V10.05	Personal history of malignant neoplasm of large intestine	Diagnosis	ICD-9-CM
<b>Prostate Cancer</b>			
C61	Malignant neoplasm of prostate	Diagnosis	ICD-10-CM
D07.5	Carcinoma in situ of prostate	Diagnosis	ICD-10-CM
Z85.46	Personal history of malignant neoplasm of prostate	Diagnosis	ICD-10-CM
233.4	Carcinoma in situ of prostate	Diagnosis	ICD-9-CM
185	Malignant neoplasm of prostate	Diagnosis	ICD-9-CM
V10.46	Personal history of malignant neoplasm of prostate	Diagnosis	ICD-9-CM
<b>Lung Cancer</b>			
C34.00	Malignant neoplasm of unspecified main bronchus	Diagnosis	ICD-10-CM
C34.01	Malignant neoplasm of right main bronchus	Diagnosis	ICD-10-CM
C34.02	Malignant neoplasm of left main bronchus	Diagnosis	ICD-10-CM
C34.10	Malignant neoplasm of upper lobe, unspecified bronchus or lung	Diagnosis	ICD-10-CM
C34.11	Malignant neoplasm of upper lobe, right bronchus or lung	Diagnosis	ICD-10-CM
C34.12	Malignant neoplasm of upper lobe, left bronchus or lung	Diagnosis	ICD-10-CM
C34.2	Malignant neoplasm of middle lobe, bronchus or lung	Diagnosis	ICD-10-CM
C34.30	Malignant neoplasm of lower lobe, unspecified bronchus or lung	Diagnosis	ICD-10-CM
C34.31	Malignant neoplasm of lower lobe, right bronchus or lung	Diagnosis	ICD-10-CM
C34.32	Malignant neoplasm of lower lobe, left bronchus or lung	Diagnosis	ICD-10-CM
C34.80	Malignant neoplasm of overlapping sites of unspecified bronchus and lung	Diagnosis	ICD-10-CM
C34.81	Malignant neoplasm of overlapping sites of right bronchus and lung	Diagnosis	ICD-10-CM
C34.82	Malignant neoplasm of overlapping sites of left bronchus and lung	Diagnosis	ICD-10-CM
C34.90	Malignant neoplasm of unspecified part of unspecified bronchus or lung	Diagnosis	ICD-10-CM
C34.91	Malignant neoplasm of unspecified part of right bronchus or lung	Diagnosis	ICD-10-CM
C34.92	Malignant neoplasm of unspecified part of left bronchus or lung	Diagnosis	ICD-10-CM
D02.20	Carcinoma in situ of unspecified bronchus and lung	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
D02.21	Carcinoma in situ of right bronchus and lung	Diagnosis	ICD-10-CM
D02.22	Carcinoma in situ of left bronchus and lung	Diagnosis	ICD-10-CM
Z85.110	Personal history of malignant carcinoid tumor of bronchus and lung	Diagnosis	ICD-10-CM
Z85.118	Personal history of other malignant neoplasm of bronchus and lung	Diagnosis	ICD-10-CM
231.2	Carcinoma in situ of bronchus and lung	Diagnosis	ICD-9-CM
162.9	Malignant neoplasm of bronchus and lung, unspecified site	Diagnosis	ICD-9-CM
162.5	Malignant neoplasm of lower lobe, bronchus, or lung	Diagnosis	ICD-9-CM
162.4	Malignant neoplasm of middle lobe, bronchus, or lung	Diagnosis	ICD-9-CM
162.2	Malignant neoplasm of main bronchus	Diagnosis	ICD-9-CM
162.8	Malignant neoplasm of other parts of bronchus or lung	Diagnosis	ICD-9-CM
162.3	Malignant neoplasm of upper lobe, bronchus, or lung	Diagnosis	ICD-9-CM
V10.11	Personal history of malignant neoplasm of bronchus and lung	Diagnosis	ICD-9-CM
<b>Endometrial Cancer</b>			
C54.1	Malignant neoplasm of endometrium	Diagnosis	ICD-10-CM
C54.2	Malignant neoplasm of myometrium	Diagnosis	ICD-10-CM
C54.3	Malignant neoplasm of fundus uteri	Diagnosis	ICD-10-CM
C54.8	Malignant neoplasm of overlapping sites of corpus uteri	Diagnosis	ICD-10-CM
C54.9	Malignant neoplasm of corpus uteri, unspecified	Diagnosis	ICD-10-CM
D07.0	Carcinoma in situ of endometrium	Diagnosis	ICD-10-CM
Z85.42	Personal history of malignant neoplasm of other parts of uterus	Diagnosis	ICD-10-CM
233.2	Carcinoma in situ of other and unspecified parts of uterus	Diagnosis	ICD-9-CM
182.0	Malignant neoplasm of corpus uteri, except isthmus	Diagnosis	ICD-9-CM
V10.42	Personal history of malignant neoplasm of other parts of uterus	Diagnosis	ICD-9-CM
<b>Acquired Hypothyroidism</b>			
E01.8	Other iodine-deficiency related thyroid disorders and allied conditions	Diagnosis	ICD-10-CM
E02	Subclinical iodine-deficiency hypothyroidism	Diagnosis	ICD-10-CM
E03.2	Hypothyroidism due to medicaments and other exogenous substances	Diagnosis	ICD-10-CM
E03.3	Postinfectious hypothyroidism	Diagnosis	ICD-10-CM
E03.8	Other specified hypothyroidism	Diagnosis	ICD-10-CM
E03.9	Hypothyroidism, unspecified	Diagnosis	ICD-10-CM
E89.0	Postprocedural hypothyroidism	Diagnosis	ICD-10-CM
244.2	Iodine hypothyroidism	Diagnosis	ICD-9-CM
244.3	Other iatrogenic hypothyroidism	Diagnosis	ICD-9-CM
244.1	Other postablative hypothyroidism	Diagnosis	ICD-9-CM
244.8	Other specified acquired hypothyroidism	Diagnosis	ICD-9-CM
244.0	Postsurgical hypothyroidism	Diagnosis	ICD-9-CM
244.9	Unspecified hypothyroidism	Diagnosis	ICD-9-CM
<b>Anemia</b>			
D50.0	Iron deficiency anemia secondary to blood loss (chronic)	Diagnosis	ICD-10-CM
D50.1	Sideropenic dysphagia	Diagnosis	ICD-10-CM
D50.8	Other iron deficiency anemias	Diagnosis	ICD-10-CM
D50.9	Iron deficiency anemia, unspecified	Diagnosis	ICD-10-CM
D51.0	Vitamin B12 deficiency anemia due to intrinsic factor deficiency	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
D51.1	Vitamin B12 deficiency anemia due to selective vitamin B12 malabsorption with proteinuria	Diagnosis	ICD-10-CM
D51.2	Transcobalamin II deficiency	Diagnosis	ICD-10-CM
D51.3	Other dietary vitamin B12 deficiency anemia	Diagnosis	ICD-10-CM
D51.8	Other vitamin B12 deficiency anemias	Diagnosis	ICD-10-CM
D51.9	Vitamin B12 deficiency anemia, unspecified	Diagnosis	ICD-10-CM
D52.0	Dietary folate deficiency anemia	Diagnosis	ICD-10-CM
D52.1	Drug-induced folate deficiency anemia	Diagnosis	ICD-10-CM
D52.8	Other folate deficiency anemias	Diagnosis	ICD-10-CM
D52.9	Folate deficiency anemia, unspecified	Diagnosis	ICD-10-CM
D53.0	Protein deficiency anemia	Diagnosis	ICD-10-CM
D53.1	Other megaloblastic anemias, not elsewhere classified	Diagnosis	ICD-10-CM
D53.2	Scorbutic anemia	Diagnosis	ICD-10-CM
D53.8	Other specified nutritional anemias	Diagnosis	ICD-10-CM
D53.9	Nutritional anemia, unspecified	Diagnosis	ICD-10-CM
D55.0	Anemia due to glucose-6-phosphate dehydrogenase [G6PD] deficiency	Diagnosis	ICD-10-CM
D55.1	Anemia due to other disorders of glutathione metabolism	Diagnosis	ICD-10-CM
D55.2	Anemia due to disorders of glycolytic enzymes	Diagnosis	ICD-10-CM
D55.3	Anemia due to disorders of nucleotide metabolism	Diagnosis	ICD-10-CM
D55.8	Other anemias due to enzyme disorders	Diagnosis	ICD-10-CM
D55.9	Anemia due to enzyme disorder, unspecified	Diagnosis	ICD-10-CM
D56.0	Alpha thalassemia	Diagnosis	ICD-10-CM
D56.1	Beta thalassemia	Diagnosis	ICD-10-CM
D56.2	Delta-beta thalassemia	Diagnosis	ICD-10-CM
D56.3	Thalassemia minor	Diagnosis	ICD-10-CM
D56.4	Hereditary persistence of fetal hemoglobin [HPFH]	Diagnosis	ICD-10-CM
D56.5	Hemoglobin E-beta thalassemia	Diagnosis	ICD-10-CM
D56.8	Other thalassemias	Diagnosis	ICD-10-CM
D56.9	Thalassemia, unspecified	Diagnosis	ICD-10-CM
D57.00	Hb-SS disease with crisis, unspecified	Diagnosis	ICD-10-CM
D57.01	Hb-SS disease with acute chest syndrome	Diagnosis	ICD-10-CM
D57.02	Hb-SS disease with splenic sequestration	Diagnosis	ICD-10-CM
D57.1	Sickle-cell disease without crisis	Diagnosis	ICD-10-CM
D57.20	Sickle-cell/Hb-C disease without crisis	Diagnosis	ICD-10-CM
D57.211	Sickle-cell/Hb-C disease with acute chest syndrome	Diagnosis	ICD-10-CM
D57.212	Sickle-cell/Hb-C disease with splenic sequestration	Diagnosis	ICD-10-CM
D57.219	Sickle-cell/Hb-C disease with crisis, unspecified	Diagnosis	ICD-10-CM
D57.3	Sickle-cell trait	Diagnosis	ICD-10-CM
D57.40	Sickle-cell thalassemia without crisis	Diagnosis	ICD-10-CM
D57.411	Sickle-cell thalassemia with acute chest syndrome	Diagnosis	ICD-10-CM
D57.412	Sickle-cell thalassemia with splenic sequestration	Diagnosis	ICD-10-CM
D57.419	Sickle-cell thalassemia with crisis, unspecified	Diagnosis	ICD-10-CM
D57.80	Other sickle-cell disorders without crisis	Diagnosis	ICD-10-CM
D57.811	Other sickle-cell disorders with acute chest syndrome	Diagnosis	ICD-10-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
D57.812	Other sickle-cell disorders with splenic sequestration	Diagnosis	ICD-10-CM
D57.819	Other sickle-cell disorders with crisis, unspecified	Diagnosis	ICD-10-CM
D58.0	Hereditary spherocytosis	Diagnosis	ICD-10-CM
D58.1	Hereditary elliptocytosis	Diagnosis	ICD-10-CM
D58.2	Other hemoglobinopathies	Diagnosis	ICD-10-CM
D58.8	Other specified hereditary hemolytic anemias	Diagnosis	ICD-10-CM
D58.9	Hereditary hemolytic anemia, unspecified	Diagnosis	ICD-10-CM
D59.0	Drug-induced autoimmune hemolytic anemia	Diagnosis	ICD-10-CM
D59.1	Other autoimmune hemolytic anemias	Diagnosis	ICD-10-CM
D59.2	Drug-induced nonautoimmune hemolytic anemia	Diagnosis	ICD-10-CM
D59.3	Hemolytic-uremic syndrome	Diagnosis	ICD-10-CM
D59.4	Other nonautoimmune hemolytic anemias	Diagnosis	ICD-10-CM
D59.5	Paroxysmal nocturnal hemoglobinuria [Marchiafava-Micheli]	Diagnosis	ICD-10-CM
D59.6	Hemoglobinuria due to hemolysis from other external causes	Diagnosis	ICD-10-CM
D59.8	Other acquired hemolytic anemias	Diagnosis	ICD-10-CM
D59.9	Acquired hemolytic anemia, unspecified	Diagnosis	ICD-10-CM
D60.0	Chronic acquired pure red cell aplasia	Diagnosis	ICD-10-CM
D60.1	Transient acquired pure red cell aplasia	Diagnosis	ICD-10-CM
D60.8	Other acquired pure red cell aplasias	Diagnosis	ICD-10-CM
D60.9	Acquired pure red cell aplasia, unspecified	Diagnosis	ICD-10-CM
D61.01	Constitutional (pure) red blood cell aplasia	Diagnosis	ICD-10-CM
D61.09	Other constitutional aplastic anemia	Diagnosis	ICD-10-CM
D61.1	Drug-induced aplastic anemia	Diagnosis	ICD-10-CM
D61.2	Aplastic anemia due to other external agents	Diagnosis	ICD-10-CM
D61.3	Idiopathic aplastic anemia	Diagnosis	ICD-10-CM
D61.810	Antineoplastic chemotherapy induced pancytopenia	Diagnosis	ICD-10-CM
D61.811	Other drug-induced pancytopenia	Diagnosis	ICD-10-CM
D61.818	Other pancytopenia	Diagnosis	ICD-10-CM
D61.82	Myelophthisis	Diagnosis	ICD-10-CM
D61.89	Other specified aplastic anemias and other bone marrow failure syndromes	Diagnosis	ICD-10-CM
D61.9	Aplastic anemia, unspecified	Diagnosis	ICD-10-CM
D62	Acute posthemorrhagic anemia	Diagnosis	ICD-10-CM
D63.0	Anemia in neoplastic disease	Diagnosis	ICD-10-CM
D63.1	Anemia in chronic kidney disease	Diagnosis	ICD-10-CM
D63.8	Anemia in other chronic diseases classified elsewhere	Diagnosis	ICD-10-CM
D64.0	Hereditary sideroblastic anemia	Diagnosis	ICD-10-CM
D64.1	Secondary sideroblastic anemia due to disease	Diagnosis	ICD-10-CM
D64.2	Secondary sideroblastic anemia due to drugs and toxins	Diagnosis	ICD-10-CM
D64.3	Other sideroblastic anemias	Diagnosis	ICD-10-CM
D64.4	Congenital dyserythropoietic anemia	Diagnosis	ICD-10-CM
D64.81	Anemia due to antineoplastic chemotherapy	Diagnosis	ICD-10-CM
D64.89	Other specified anemias	Diagnosis	ICD-10-CM
D64.9	Anemia, unspecified	Diagnosis	ICD-10-CM
D57.03	Hb-SS disease with cerebral vascular involvement	Diagnosis	ICD-10-CM



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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
D57.09	Hb-SS disease with crisis with other specified complication	Diagnosis	ICD-10-CM
D57.213	Sickle-cell/Hb-C disease with cerebral vascular involvement	Diagnosis	ICD-10-CM
D57.218	Sickle-cell/Hb-C disease with crisis with other specified complication	Diagnosis	ICD-10-CM
D57.413	Sickle-cell thalassemia, unspecified, with cerebral vascular involvement	Diagnosis	ICD-10-CM
D57.418	Sickle-cell thalassemia, unspecified, with crisis with other specified complication	Diagnosis	ICD-10-CM
D57.42	Sickle-cell thalassemia beta zero without crisis	Diagnosis	ICD-10-CM
D57.431	Sickle-cell thalassemia beta zero with acute chest syndrome	Diagnosis	ICD-10-CM
D57.432	Sickle-cell thalassemia beta zero with splenic sequestration	Diagnosis	ICD-10-CM
D57.433	Sickle-cell thalassemia beta zero with cerebral vascular involvement	Diagnosis	ICD-10-CM
D57.438	Sickle-cell thalassemia beta zero with crisis with other specified complication	Diagnosis	ICD-10-CM
D57.439	Sickle-cell thalassemia beta zero with crisis, unspecified	Diagnosis	ICD-10-CM
D57.44	Sickle-cell thalassemia beta plus without crisis	Diagnosis	ICD-10-CM
D57.451	Sickle-cell thalassemia beta plus with acute chest syndrome	Diagnosis	ICD-10-CM
D57.452	Sickle-cell thalassemia beta plus with splenic sequestration	Diagnosis	ICD-10-CM
D57.453	Sickle-cell thalassemia beta plus with cerebral vascular involvement	Diagnosis	ICD-10-CM
D57.458	Sickle-cell thalassemia beta plus with crisis with other specified complication	Diagnosis	ICD-10-CM
D57.459	Sickle-cell thalassemia beta plus with crisis, unspecified	Diagnosis	ICD-10-CM
D57.813	Other sickle-cell disorders with cerebral vascular involvement	Diagnosis	ICD-10-CM
D57.818	Other sickle-cell disorders with crisis with other specified complication	Diagnosis	ICD-10-CM
D59.10	Autoimmune hemolytic anemia, unspecified	Diagnosis	ICD-10-CM
D59.11	Warm autoimmune hemolytic anemia	Diagnosis	ICD-10-CM
D59.12	Cold autoimmune hemolytic anemia	Diagnosis	ICD-10-CM
D59.13	Mixed type autoimmune hemolytic anemia	Diagnosis	ICD-10-CM
D59.19	Other autoimmune hemolytic anemia	Diagnosis	ICD-10-CM
283.9	Acquired hemolytic anemia, unspecified	Diagnosis	ICD-9-CM
285.1	Acute posthemorrhagic anemia	Diagnosis	ICD-9-CM
282.43	Alpha thalassemia	Diagnosis	ICD-9-CM
281.8	Anemia associated with other specified nutritional deficiency	Diagnosis	ICD-9-CM
285.21	Anemia in chronic kidney disease	Diagnosis	ICD-9-CM
285.22	Anemia in neoplastic disease	Diagnosis	ICD-9-CM
285.29	Anemia of other chronic disease	Diagnosis	ICD-9-CM
282.2	Anemias due to disorders of glutathione metabolism	Diagnosis	ICD-9-CM
285.3	Antineoplastic chemotherapy induced anemia	Diagnosis	ICD-9-CM
284.11	Antineoplastic chemotherapy induced pancytopenia	Diagnosis	ICD-9-CM
283.0	Autoimmune hemolytic anemias	Diagnosis	ICD-9-CM
282.44	Beta thalassemia	Diagnosis	ICD-9-CM
284.01	Constitutional red blood cell aplasia	Diagnosis	ICD-9-CM
282.45	Delta-beta thalassemia	Diagnosis	ICD-9-CM
281.2	Folate-deficiency anemia	Diagnosis	ICD-9-CM
282.62	Hb-SS disease with crisis	Diagnosis	ICD-9-CM
282.61	Hb-SS disease without crisis	Diagnosis	ICD-9-CM
282.47	Hemoglobin E-beta thalassemia	Diagnosis	ICD-9-CM
283.11	Hemolytic-uremic syndrome	Diagnosis	ICD-9-CM
282.1	Hereditary elliptocytosis	Diagnosis	ICD-9-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
282.0	Hereditary spherocytosis	Diagnosis	ICD-9-CM
283.2	Hemoglobinuria due to hemolysis from external causes	Diagnosis	ICD-9-CM
280.1	Iron deficiency anemia secondary to inadequate dietary iron intake	Diagnosis	ICD-9-CM
280.0	Iron deficiency anemia secondary to blood loss (chronic)	Diagnosis	ICD-9-CM
284.2	Myelophthisis	Diagnosis	ICD-9-CM
284.09	Other constitutional aplastic anemia	Diagnosis	ICD-9-CM
284.12	Other drug induced pancytopenia	Diagnosis	ICD-9-CM
282.7	Other hemoglobinopathies	Diagnosis	ICD-9-CM
282.3	Other hemolytic anemias due to enzyme deficiency	Diagnosis	ICD-9-CM
283.19	Other non-autoimmune hemolytic anemias	Diagnosis	ICD-9-CM
284.19	Other pancytopenia	Diagnosis	ICD-9-CM
282.69	Other sickle-cell disease with crisis	Diagnosis	ICD-9-CM
282.68	Other sickle-cell disease without crisis	Diagnosis	ICD-9-CM
285.8	Other specified anemias	Diagnosis	ICD-9-CM
284.89	Other specified aplastic anemias	Diagnosis	ICD-9-CM
282.8	Other specified hereditary hemolytic anemias	Diagnosis	ICD-9-CM
280.8	Other specified iron deficiency anemias	Diagnosis	ICD-9-CM
281.3	Other specified megaloblastic anemias not elsewhere classified	Diagnosis	ICD-9-CM
282.49	Other thalassemia	Diagnosis	ICD-9-CM
281.1	Other vitamin B12 deficiency anemia	Diagnosis	ICD-9-CM
281.0	Pernicious anemia	Diagnosis	ICD-9-CM
281.4	Protein-deficiency anemia	Diagnosis	ICD-9-CM
284.81	Red cell aplasia (acquired) (adult) (with thymoma)	Diagnosis	ICD-9-CM
282.60	Sickle-cell disease, unspecified	Diagnosis	ICD-9-CM
282.42	Sickle-cell thalassemia with crisis	Diagnosis	ICD-9-CM
282.41	Sickle-cell thalassemia without crisis	Diagnosis	ICD-9-CM
282.5	Sickle-cell trait	Diagnosis	ICD-9-CM
282.64	Sickle-cell/Hb-C disease with crisis	Diagnosis	ICD-9-CM
282.63	Sickle-cell/Hb-C disease without crisis	Diagnosis	ICD-9-CM
285.0	Sideroblastic anemia	Diagnosis	ICD-9-CM
282.46	Thalassemia minor	Diagnosis	ICD-9-CM
282.40	Thalassemia, unspecified	Diagnosis	ICD-9-CM
285.9	Unspecified anemia	Diagnosis	ICD-9-CM
284.9	Unspecified aplastic anemia	Diagnosis	ICD-9-CM
281.9	Unspecified deficiency anemia	Diagnosis	ICD-9-CM
282.9	Unspecified hereditary hemolytic anemia	Diagnosis	ICD-9-CM
280.9	Unspecified iron deficiency anemia	Diagnosis	ICD-9-CM
283.10	Unspecified non-autoimmune hemolytic anemia	Diagnosis	ICD-9-CM
<b>Asthma</b>			
J45.20	Mild intermittent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.21	Mild intermittent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.22	Mild intermittent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.30	Mild persistent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.31	Mild persistent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
J45.32	Mild persistent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.40	Moderate persistent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.41	Moderate persistent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.42	Moderate persistent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.50	Severe persistent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.51	Severe persistent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.52	Severe persistent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.901	Unspecified asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.902	Unspecified asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.909	Unspecified asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.990	Exercise induced bronchospasm	Diagnosis	ICD-10-CM
J45.991	Cough variant asthma	Diagnosis	ICD-10-CM
J45.998	Other asthma	Diagnosis	ICD-10-CM
J82.83	Eosinophilic asthma	Diagnosis	ICD-10-CM
493.92	Asthma, unspecified, with (acute) exacerbation	Diagnosis	ICD-9-CM
493.91	Asthma, unspecified with status asthmaticus	Diagnosis	ICD-9-CM
493.90	Asthma, unspecified, unspecified status	Diagnosis	ICD-9-CM
493.20	Chronic obstructive asthma, unspecified	Diagnosis	ICD-9-CM
493.21	Chronic obstructive asthma with status asthmaticus	Diagnosis	ICD-9-CM
493.22	Chronic obstructive asthma, with (acute) exacerbation	Diagnosis	ICD-9-CM
493.82	Cough variant asthma	Diagnosis	ICD-9-CM
493.81	Exercise induced bronchospasm	Diagnosis	ICD-9-CM
493.01	Extrinsic asthma with status asthmaticus	Diagnosis	ICD-9-CM
493.00	Extrinsic asthma, unspecified	Diagnosis	ICD-9-CM
493.02	Extrinsic asthma, with (acute) exacerbation	Diagnosis	ICD-9-CM
493.11	Intrinsic asthma with status asthmaticus	Diagnosis	ICD-9-CM
493.10	Intrinsic asthma, unspecified	Diagnosis	ICD-9-CM
493.12	Intrinsic asthma, with (acute) exacerbation	Diagnosis	ICD-9-CM
<b>Benign Prostatic Hyperplasia</b>			
N40.0	Benign prostatic hyperplasia without lower urinary tract symptoms	Diagnosis	ICD-10-CM
N40.1	Benign prostatic hyperplasia with lower urinary tract symptoms	Diagnosis	ICD-10-CM
N40.2	Nodular prostate without lower urinary tract symptoms	Diagnosis	ICD-10-CM
N40.3	Nodular prostate with lower urinary tract symptoms	Diagnosis	ICD-10-CM
N42.83	Cyst of prostate	Diagnosis	ICD-10-CM
600.20	Benign localized hyperplasia of prostate without urinary obstruction and other lower urinary tract symptoms [LUTS]	Diagnosis	ICD-9-CM
600.21	Benign localized hyperplasia of prostate with urinary obstruction and other lower urinary tract symptoms [LUTS]	Diagnosis	ICD-9-CM
600.3	Cyst of prostate	Diagnosis	ICD-9-CM
600.90	Hyperplasia of prostate, unspecified, without urinary obstruction and other lower urinary tract symptoms [LUTS]	Diagnosis	ICD-9-CM
600.91	Hyperplasia of prostate, unspecified, with urinary obstruction and other lower urinary tract symptoms [LUTS]	Diagnosis	ICD-9-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
600.00	Hypertrophy (benign) of prostate without urinary obstruction and other lower urinary tract symptoms [LUTS]	Diagnosis	ICD-9-CM
600.01	Hypertrophy (benign) of prostate with urinary obstruction and other lower urinary tract symptoms [LUTS]	Diagnosis	ICD-9-CM
600.11	Nodular prostate with urinary obstruction	Diagnosis	ICD-9-CM
600.10	Nodular prostate without urinary obstruction	Diagnosis	ICD-9-CM
<b>Chronic Kidney Disease</b>			
A18.11	Tuberculosis of kidney and ureter	Diagnosis	ICD-10-CM
A52.75	Syphilis of kidney and ureter	Diagnosis	ICD-10-CM
B52.0	Plasmodium malariae malaria with nephropathy	Diagnosis	ICD-10-CM
C64.1	Malignant neoplasm of right kidney, except renal pelvis	Diagnosis	ICD-10-CM
C64.2	Malignant neoplasm of left kidney, except renal pelvis	Diagnosis	ICD-10-CM
C64.9	Malignant neoplasm of unspecified kidney, except renal pelvis	Diagnosis	ICD-10-CM
C68.9	Malignant neoplasm of urinary organ, unspecified	Diagnosis	ICD-10-CM
D30.00	Benign neoplasm of unspecified kidney	Diagnosis	ICD-10-CM
D30.01	Benign neoplasm of right kidney	Diagnosis	ICD-10-CM
D30.02	Benign neoplasm of left kidney	Diagnosis	ICD-10-CM
D41.00	Neoplasm of uncertain behavior of unspecified kidney	Diagnosis	ICD-10-CM
D41.01	Neoplasm of uncertain behavior of right kidney	Diagnosis	ICD-10-CM
D41.02	Neoplasm of uncertain behavior of left kidney	Diagnosis	ICD-10-CM
D41.10	Neoplasm of uncertain behavior of unspecified renal pelvis	Diagnosis	ICD-10-CM
D41.11	Neoplasm of uncertain behavior of right renal pelvis	Diagnosis	ICD-10-CM
D41.12	Neoplasm of uncertain behavior of left renal pelvis	Diagnosis	ICD-10-CM
D41.20	Neoplasm of uncertain behavior of unspecified ureter	Diagnosis	ICD-10-CM
D41.21	Neoplasm of uncertain behavior of right ureter	Diagnosis	ICD-10-CM
D41.22	Neoplasm of uncertain behavior of left ureter	Diagnosis	ICD-10-CM
D59.3	Hemolytic-uremic syndrome	Diagnosis	ICD-10-CM
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy	Diagnosis	ICD-10-CM
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication	Diagnosis	ICD-10-CM
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia	Diagnosis	ICD-10-CM
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E10.21	Type 1 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E10.65	Type 1 diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E11.21	Type 2 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E11.65	Type 2 diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E13.21	Other specified diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
E13.29	Other specified diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E74.8	Other specified disorders of carbohydrate metabolism	Diagnosis	ICD-10-CM
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease	Diagnosis	ICD-10-CM
I12.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.10	Hypertensive heart and chronic kidney disease without heart failure, with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I70.1	Atherosclerosis of renal artery	Diagnosis	ICD-10-CM
I72.2	Aneurysm of renal artery	Diagnosis	ICD-10-CM
K76.7	Hepatorenal syndrome	Diagnosis	ICD-10-CM
M10.30	Gout due to renal impairment, unspecified site	Diagnosis	ICD-10-CM
M10.311	Gout due to renal impairment, right shoulder	Diagnosis	ICD-10-CM
M10.312	Gout due to renal impairment, left shoulder	Diagnosis	ICD-10-CM
M10.319	Gout due to renal impairment, unspecified shoulder	Diagnosis	ICD-10-CM
M10.321	Gout due to renal impairment, right elbow	Diagnosis	ICD-10-CM
M10.322	Gout due to renal impairment, left elbow	Diagnosis	ICD-10-CM
M10.329	Gout due to renal impairment, unspecified elbow	Diagnosis	ICD-10-CM
M10.331	Gout due to renal impairment, right wrist	Diagnosis	ICD-10-CM
M10.332	Gout due to renal impairment, left wrist	Diagnosis	ICD-10-CM
M10.339	Gout due to renal impairment, unspecified wrist	Diagnosis	ICD-10-CM
M10.341	Gout due to renal impairment, right hand	Diagnosis	ICD-10-CM
M10.342	Gout due to renal impairment, left hand	Diagnosis	ICD-10-CM
M10.349	Gout due to renal impairment, unspecified hand	Diagnosis	ICD-10-CM
M10.351	Gout due to renal impairment, right hip	Diagnosis	ICD-10-CM
M10.352	Gout due to renal impairment, left hip	Diagnosis	ICD-10-CM
M10.359	Gout due to renal impairment, unspecified hip	Diagnosis	ICD-10-CM
M10.361	Gout due to renal impairment, right knee	Diagnosis	ICD-10-CM
M10.362	Gout due to renal impairment, left knee	Diagnosis	ICD-10-CM
M10.369	Gout due to renal impairment, unspecified knee	Diagnosis	ICD-10-CM
M10.371	Gout due to renal impairment, right ankle and foot	Diagnosis	ICD-10-CM
M10.372	Gout due to renal impairment, left ankle and foot	Diagnosis	ICD-10-CM
M10.379	Gout due to renal impairment, unspecified ankle and foot	Diagnosis	ICD-10-CM
M10.38	Gout due to renal impairment, vertebrae	Diagnosis	ICD-10-CM
M10.39	Gout due to renal impairment, multiple sites	Diagnosis	ICD-10-CM
M32.14	Glomerular disease in systemic lupus erythematosus	Diagnosis	ICD-10-CM
M32.15	Tubulo-interstitial nephropathy in systemic lupus erythematosus	Diagnosis	ICD-10-CM
M35.04	Sicca syndrome with tubulo-interstitial nephropathy	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
N00.0	Acute nephritic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N00.1	Acute nephritic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N00.2	Acute nephritic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N00.3	Acute nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N00.4	Acute nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N00.5	Acute nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N00.6	Acute nephritic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N00.7	Acute nephritic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N00.8	Acute nephritic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N00.9	Acute nephritic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N01.0	Rapidly progressive nephritic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N01.1	Rapidly progressive nephritic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N01.2	Rapidly progressive nephritic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N01.3	Rapidly progressive nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N01.4	Rapidly progressive nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N01.5	Rapidly progressive nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N01.6	Rapidly progressive nephritic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N01.7	Rapidly progressive nephritic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N01.8	Rapidly progressive nephritic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N01.9	Rapidly progressive nephritic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N02.0	Recurrent and persistent hematuria with minor glomerular abnormality	Diagnosis	ICD-10-CM
N02.1	Recurrent and persistent hematuria with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N02.2	Recurrent and persistent hematuria with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N02.3	Recurrent and persistent hematuria with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N02.4	Recurrent and persistent hematuria with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N02.5	Recurrent and persistent hematuria with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N02.6	Recurrent and persistent hematuria with dense deposit disease	Diagnosis	ICD-10-CM
N02.7	Recurrent and persistent hematuria with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N02.8	Recurrent and persistent hematuria with other morphologic changes	Diagnosis	ICD-10-CM
N02.9	Recurrent and persistent hematuria with unspecified morphologic changes	Diagnosis	ICD-10-CM
N03.0	Chronic nephritic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N03.1	Chronic nephritic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N03.2	Chronic nephritic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N03.3	Chronic nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N03.4	Chronic nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N03.5	Chronic nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N03.6	Chronic nephritic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N03.7	Chronic nephritic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N03.8	Chronic nephritic syndrome with other morphologic changes	Diagnosis	ICD-10-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
N03.9	Chronic nephritic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N04.0	Nephrotic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N04.1	Nephrotic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N04.2	Nephrotic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N04.3	Nephrotic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N04.4	Nephrotic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N04.5	Nephrotic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N04.6	Nephrotic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N04.7	Nephrotic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N04.8	Nephrotic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N04.9	Nephrotic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N05.0	Unspecified nephritic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N05.1	Unspecified nephritic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N05.2	Unspecified nephritic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N05.3	Unspecified nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N05.4	Unspecified nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N05.5	Unspecified nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N05.6	Unspecified nephritic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N05.7	Unspecified nephritic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N05.8	Unspecified nephritic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N05.9	Unspecified nephritic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N06.0	Isolated proteinuria with minor glomerular abnormality	Diagnosis	ICD-10-CM
N06.1	Isolated proteinuria with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N06.2	Isolated proteinuria with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N06.3	Isolated proteinuria with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N06.4	Isolated proteinuria with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N06.5	Isolated proteinuria with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N06.6	Isolated proteinuria with dense deposit disease	Diagnosis	ICD-10-CM
N06.7	Isolated proteinuria with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N06.8	Isolated proteinuria with other morphologic lesion	Diagnosis	ICD-10-CM
N06.9	Isolated proteinuria with unspecified morphologic lesion	Diagnosis	ICD-10-CM
N07.0	Hereditary nephropathy, not elsewhere classified with minor glomerular abnormality	Diagnosis	ICD-10-CM
N07.1	Hereditary nephropathy, not elsewhere classified with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N07.2	Hereditary nephropathy, not elsewhere classified with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N07.3	Hereditary nephropathy, not elsewhere classified with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N07.4	Hereditary nephropathy, not elsewhere classified with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N07.5	Hereditary nephropathy, not elsewhere classified with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N07.6	Hereditary nephropathy, not elsewhere classified with dense deposit disease	Diagnosis	ICD-10-CM



**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
N07.7	Hereditary nephropathy, not elsewhere classified with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N07.8	Hereditary nephropathy, not elsewhere classified with other morphologic lesions	Diagnosis	ICD-10-CM
N07.9	Hereditary nephropathy, not elsewhere classified with unspecified morphologic lesions	Diagnosis	ICD-10-CM
N08	Glomerular disorders in diseases classified elsewhere	Diagnosis	ICD-10-CM
N13.1	Hydronephrosis with ureteral stricture, not elsewhere classified	Diagnosis	ICD-10-CM
N13.2	Hydronephrosis with renal and ureteral calculous obstruction	Diagnosis	ICD-10-CM
N13.30	Unspecified hydronephrosis	Diagnosis	ICD-10-CM
N13.39	Other hydronephrosis	Diagnosis	ICD-10-CM
N14.0	Analgesic nephropathy	Diagnosis	ICD-10-CM
N14.1	Nephropathy induced by other drugs, medicaments and biological substances	Diagnosis	ICD-10-CM
N14.2	Nephropathy induced by unspecified drug, medicament or biological substance	Diagnosis	ICD-10-CM
N14.3	Nephropathy induced by heavy metals	Diagnosis	ICD-10-CM
N14.4	Toxic nephropathy, not elsewhere classified	Diagnosis	ICD-10-CM
N15.0	Balkan nephropathy	Diagnosis	ICD-10-CM
N15.8	Other specified renal tubulo-interstitial diseases	Diagnosis	ICD-10-CM
N15.9	Renal tubulo-interstitial disease, unspecified	Diagnosis	ICD-10-CM
N16	Renal tubulo-interstitial disorders in diseases classified elsewhere	Diagnosis	ICD-10-CM
N17.0	Acute kidney failure with tubular necrosis	Diagnosis	ICD-10-CM
N17.1	Acute kidney failure with acute cortical necrosis	Diagnosis	ICD-10-CM
N17.2	Acute kidney failure with medullary necrosis	Diagnosis	ICD-10-CM
N17.8	Other acute kidney failure	Diagnosis	ICD-10-CM
N17.9	Acute kidney failure, unspecified	Diagnosis	ICD-10-CM
N18.1	Chronic kidney disease, stage 1	Diagnosis	ICD-10-CM
N18.2	Chronic kidney disease, stage 2 (mild)	Diagnosis	ICD-10-CM
N18.3	Chronic kidney disease, stage 3 (moderate)	Diagnosis	ICD-10-CM
N18.4	Chronic kidney disease, stage 4 (severe)	Diagnosis	ICD-10-CM
N18.5	Chronic kidney disease, stage 5	Diagnosis	ICD-10-CM
N18.6	End stage renal disease	Diagnosis	ICD-10-CM
N18.9	Chronic kidney disease, unspecified	Diagnosis	ICD-10-CM
N19	Unspecified kidney failure	Diagnosis	ICD-10-CM
N25.0	Renal osteodystrophy	Diagnosis	ICD-10-CM
N25.1	Nephrogenic diabetes insipidus	Diagnosis	ICD-10-CM
N25.81	Secondary hyperparathyroidism of renal origin	Diagnosis	ICD-10-CM
N25.89	Other disorders resulting from impaired renal tubular function	Diagnosis	ICD-10-CM
N25.9	Disorder resulting from impaired renal tubular function, unspecified	Diagnosis	ICD-10-CM
N26.1	Atrophy of kidney (terminal)	Diagnosis	ICD-10-CM
N26.9	Renal sclerosis, unspecified	Diagnosis	ICD-10-CM
Q61.02	Congenital multiple renal cysts	Diagnosis	ICD-10-CM
Q61.11	Cystic dilatation of collecting ducts	Diagnosis	ICD-10-CM
Q61.19	Other polycystic kidney, infantile type	Diagnosis	ICD-10-CM
Q61.2	Polycystic kidney, adult type	Diagnosis	ICD-10-CM
Q61.3	Polycystic kidney, unspecified	Diagnosis	ICD-10-CM
Q61.4	Renal dysplasia	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
Q61.5	Medullary cystic kidney	Diagnosis	ICD-10-CM
Q61.8	Other cystic kidney diseases	Diagnosis	ICD-10-CM
Q62.0	Congenital hydronephrosis	Diagnosis	ICD-10-CM
Q62.10	Congenital occlusion of ureter, unspecified	Diagnosis	ICD-10-CM
Q62.11	Congenital occlusion of ureteropelvic junction	Diagnosis	ICD-10-CM
Q62.12	Congenital occlusion of ureterovesical orifice	Diagnosis	ICD-10-CM
Q62.2	Congenital megaureter	Diagnosis	ICD-10-CM
Q62.31	Congenital ureterocele, orthotopic	Diagnosis	ICD-10-CM
Q62.32	Cecoureterocele	Diagnosis	ICD-10-CM
Q62.39	Other obstructive defects of renal pelvis and ureter	Diagnosis	ICD-10-CM
R94.4	Abnormal results of kidney function studies	Diagnosis	ICD-10-CM
N00.A	Acute nephritic syndrome with C3 glomerulonephritis	Diagnosis	ICD-10-CM
N01.A	Rapidly progressive nephritic syndrome with C3 glomerulonephritis	Diagnosis	ICD-10-CM
N02.A	Recurrent and persistent hematuria with C3 glomerulonephritis	Diagnosis	ICD-10-CM
N03.A	Chronic nephritic syndrome with C3 glomerulonephritis	Diagnosis	ICD-10-CM
N04.A	Nephrotic syndrome with C3 glomerulonephritis	Diagnosis	ICD-10-CM
N05.A	Unspecified nephritic syndrome with C3 glomerulonephritis	Diagnosis	ICD-10-CM
N06.A	Isolated proteinuria with C3 glomerulonephritis	Diagnosis	ICD-10-CM
N07.A	Hereditary nephropathy, not elsewhere classified with C3 glomerulonephritis	Diagnosis	ICD-10-CM
N18.30	Chronic kidney disease, stage 3 unspecified	Diagnosis	ICD-10-CM
N18.31	Chronic kidney disease, stage 3a	Diagnosis	ICD-10-CM
N18.32	Chronic kidney disease, stage 3b	Diagnosis	ICD-10-CM
584.8	Acute kidney failure with other specified pathological lesion in kidney	Diagnosis	ICD-9-CM
580.81	Acute glomerulonephritis with other specified pathological lesion in kidney in disease classified elsewhere	Diagnosis	ICD-9-CM
580.9	Acute glomerulonephritis with unspecified pathological lesion in kidney	Diagnosis	ICD-9-CM
580.0	Acute glomerulonephritis with lesion of proliferative glomerulonephritis	Diagnosis	ICD-9-CM
580.4	Acute glomerulonephritis with lesion of rapidly progressive glomerulonephritis	Diagnosis	ICD-9-CM
584.9	Acute kidney failure, unspecified	Diagnosis	ICD-9-CM
584.6	Acute kidney failure with lesion of renal cortical necrosis	Diagnosis	ICD-9-CM
584.7	Acute kidney failure with lesion of medullary [papillary] necrosis	Diagnosis	ICD-9-CM
584.5	Acute kidney failure with lesion of tubular necrosis	Diagnosis	ICD-9-CM
442.1	Aneurysm of renal artery	Diagnosis	ICD-9-CM
440.1	Atherosclerosis of renal artery	Diagnosis	ICD-9-CM
223.0	Benign neoplasm of kidney, except pelvis	Diagnosis	ICD-9-CM
582.89	Other chronic glomerulonephritis with specified pathological lesion in kidney	Diagnosis	ICD-9-CM
582.81	Chronic glomerulonephritis with other specified pathological lesion in kidney in diseases classified elsewhere	Diagnosis	ICD-9-CM
582.1	Chronic glomerulonephritis with lesion of membranous glomerulonephritis	Diagnosis	ICD-9-CM
582.2	Chronic glomerulonephritis with lesion of membranoproliferative glomerulonephritis	Diagnosis	ICD-9-CM
582.0	Chronic glomerulonephritis with lesion of proliferative glomerulonephritis	Diagnosis	ICD-9-CM
582.4	Chronic glomerulonephritis with lesion of rapidly progressive glomerulonephritis	Diagnosis	ICD-9-CM
582.9	Chronic glomerulonephritis with unspecified pathological lesion in kidney	Diagnosis	ICD-9-CM
585.1	Chronic kidney disease, Stage I	Diagnosis	ICD-9-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
585.2	Chronic kidney disease, Stage II (mild)	Diagnosis	ICD-9-CM
585.3	Chronic kidney disease, Stage III (moderate)	Diagnosis	ICD-9-CM
585.4	Chronic kidney disease, Stage IV (severe)	Diagnosis	ICD-9-CM
585.5	Chronic kidney disease, Stage V	Diagnosis	ICD-9-CM
585.9	Chronic kidney disease, unspecified	Diagnosis	ICD-9-CM
753.16	Congenital medullary cystic kidney	Diagnosis	ICD-9-CM
753.17	Congenital medullary sponge kidney	Diagnosis	ICD-9-CM
753.21	Congenital obstruction of ureteropelvic junction	Diagnosis	ICD-9-CM
753.22	Congenital obstruction of ureterovesical junction	Diagnosis	ICD-9-CM
753.13	Congenital polycystic kidney, autosomal dominant	Diagnosis	ICD-9-CM
753.14	Congenital polycystic kidney, autosomal recessive	Diagnosis	ICD-9-CM
753.12	Congenital polycystic kidney, unspecified type	Diagnosis	ICD-9-CM
753.15	Congenital renal dysplasia	Diagnosis	ICD-9-CM
753.23	Congenital ureterocele	Diagnosis	ICD-9-CM
250.43	Diabetes with renal manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.41	Diabetes with renal manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.40	Diabetes with renal manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.42	Diabetes with renal manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
585.6	End stage renal disease	Diagnosis	ICD-9-CM
274.10	Gouty nephropathy, unspecified	Diagnosis	ICD-9-CM
283.11	Hemolytic-uremic syndrome	Diagnosis	ICD-9-CM
572.4	Hepatorenal syndrome	Diagnosis	ICD-9-CM
403.01	Hypertensive chronic kidney disease, malignant, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
403.11	Hypertensive chronic kidney disease, benign, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
403.91	Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.13	Hypertensive heart and chronic kidney disease, benign, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.02	Hypertensive heart and chronic kidney disease, malignant, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.93	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.12	Hypertensive heart and chronic kidney disease, benign, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.03	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.92	Hypertensive heart and chronic kidney disease, unspecified, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
591	Hydronephrosis	Diagnosis	ICD-9-CM
189.0	Malignant neoplasm of kidney, except pelvis	Diagnosis	ICD-9-CM
189.9	Malignant neoplasm of urinary organ, site unspecified	Diagnosis	ICD-9-CM
236.91	Neoplasm of uncertain behavior of kidney and ureter	Diagnosis	ICD-9-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
583.6	Nephritis and nephropathy, not specified as acute or chronic, with lesion of renal cortical necrosis	Diagnosis	ICD-9-CM
583.81	Nephritis and nephropathy, not specified as acute or chronic, with other specified pathological lesion in kidney, in diseases classified elsewhere	Diagnosis	ICD-9-CM
583.7	Nephritis and nephropathy, not specified as acute or chronic, with lesion of renal medullary necrosis	Diagnosis	ICD-9-CM
583.2	Nephritis and nephropathy, not specified as acute or chronic, with lesion of membranoproliferative glomerulonephritis	Diagnosis	ICD-9-CM
583.4	Nephritis and nephropathy, not specified as acute or chronic, with lesion of rapidly progressive glomerulonephritis	Diagnosis	ICD-9-CM
583.89	Other nephritis and nephropathy, not specified as acute or chronic, with specified pathological lesion in kidney	Diagnosis	ICD-9-CM
583.0	Nephritis and nephropathy, not specified as acute or chronic, with lesion of proliferative glomerulonephritis	Diagnosis	ICD-9-CM
583.9	Nephritis and nephropathy, not specified as acute or chronic, with unspecified pathological lesion in kidney	Diagnosis	ICD-9-CM
583.1	Nephritis and nephropathy, not specified as acute or chronic, with lesion of membranous glomerulonephritis	Diagnosis	ICD-9-CM
588.1	Nephrogenic diabetes insipidus	Diagnosis	ICD-9-CM
581.3	Nephrotic syndrome with lesion of minimal change glomerulonephritis	Diagnosis	ICD-9-CM
581.2	Nephrotic syndrome with lesion of membranoproliferative glomerulonephritis	Diagnosis	ICD-9-CM
581.81	Nephrotic syndrome with other specified pathological lesion in kidney in diseases classified elsewhere	Diagnosis	ICD-9-CM
581.1	Nephrotic syndrome with lesion of membranous glomerulonephritis	Diagnosis	ICD-9-CM
581.0	Nephrotic syndrome with lesion of proliferative glomerulonephritis	Diagnosis	ICD-9-CM
581.9	Nephrotic syndrome with unspecified pathological lesion in kidney	Diagnosis	ICD-9-CM
794.4	Nonspecific abnormal results of kidney function study	Diagnosis	ICD-9-CM
580.89	Other acute glomerulonephritis with other specified pathological lesion in kidney	Diagnosis	ICD-9-CM
581.89	Other nephrotic syndrome with specified pathological lesion in kidney	Diagnosis	ICD-9-CM
588.89	Other specified disorders resulting from impaired renal function	Diagnosis	ICD-9-CM
753.29	Other obstructive defect of renal pelvis and ureter	Diagnosis	ICD-9-CM
753.19	Other specified congenital cystic kidney disease	Diagnosis	ICD-9-CM
271.4	Renal glycosuria	Diagnosis	ICD-9-CM
588.0	Renal osteodystrophy	Diagnosis	ICD-9-CM
249.40	Secondary diabetes mellitus with renal manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.41	Secondary diabetes mellitus with renal manifestations, uncontrolled	Diagnosis	ICD-9-CM
588.81	Secondary hyperparathyroidism (of renal origin)	Diagnosis	ICD-9-CM
095.4	Syphilis of kidney	Diagnosis	ICD-9-CM
016.02	Tuberculosis of kidney, bacteriological or histological examination unknown (at present)	Diagnosis	ICD-9-CM
016.01	Tuberculosis of kidney, bacteriological or histological examination not done	Diagnosis	ICD-9-CM
016.04	Tuberculosis of kidney, tubercle bacilli not found (in sputum) by microscopy, but found by bacterial culture	Diagnosis	ICD-9-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
016.05	Tuberculosis of kidney, tubercle bacilli not found by bacteriological examination, but tuberculosis confirmed histologically	Diagnosis	ICD-9-CM
016.06	Tuberculosis of kidney, tubercle bacilli not found by bacteriological or histological examination, but tuberculosis confirmed by other methods [inoculation of animals]	Diagnosis	ICD-9-CM
016.03	Tuberculosis of kidney, tubercle bacilli found (in sputum) by microscopy	Diagnosis	ICD-9-CM
016.00	Tuberculosis of kidney, confirmation unspecified	Diagnosis	ICD-9-CM
588.9	Unspecified disorder resulting from impaired renal function	Diagnosis	ICD-9-CM
753.20	Unspecified obstructive defect of renal pelvis and ureter	Diagnosis	ICD-9-CM
586	Unspecified renal failure	Diagnosis	ICD-9-CM
587	Unspecified renal sclerosis	Diagnosis	ICD-9-CM
<b>Chronic Obstructive Pulmonary Disease (COPD) and Bronchiectasis</b>			
J40	Bronchitis, not specified as acute or chronic	Diagnosis	ICD-10-CM
J41.0	Simple chronic bronchitis	Diagnosis	ICD-10-CM
J41.1	Mucopurulent chronic bronchitis	Diagnosis	ICD-10-CM
J41.8	Mixed simple and mucopurulent chronic bronchitis	Diagnosis	ICD-10-CM
J42	Unspecified chronic bronchitis	Diagnosis	ICD-10-CM
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]	Diagnosis	ICD-10-CM
J43.1	Panlobular emphysema	Diagnosis	ICD-10-CM
J43.2	Centrilobular emphysema	Diagnosis	ICD-10-CM
J43.8	Other emphysema	Diagnosis	ICD-10-CM
J43.9	Emphysema, unspecified	Diagnosis	ICD-10-CM
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection	Diagnosis	ICD-10-CM
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation	Diagnosis	ICD-10-CM
J44.9	Chronic obstructive pulmonary disease, unspecified	Diagnosis	ICD-10-CM
J47.0	Bronchiectasis with acute lower respiratory infection	Diagnosis	ICD-10-CM
J47.1	Bronchiectasis with (acute) exacerbation	Diagnosis	ICD-10-CM
J47.9	Bronchiectasis, uncomplicated	Diagnosis	ICD-10-CM
494.1	Bronchiectasis with acute exacerbation	Diagnosis	ICD-9-CM
494.0	Bronchiectasis without acute exacerbation	Diagnosis	ICD-9-CM
490	Bronchitis, not specified as acute or chronic	Diagnosis	ICD-9-CM
496	Chronic airway obstruction, not elsewhere classified	Diagnosis	ICD-9-CM
492.0	Emphysematous bleb	Diagnosis	ICD-9-CM
491.1	Mucopurulent chronic bronchitis	Diagnosis	ICD-9-CM
491.22	Obstructive chronic bronchitis with acute bronchitis	Diagnosis	ICD-9-CM
491.21	Obstructive chronic bronchitis, with (acute) exacerbation	Diagnosis	ICD-9-CM
491.20	Obstructive chronic bronchitis, without exacerbation	Diagnosis	ICD-9-CM
491.8	Other chronic bronchitis	Diagnosis	ICD-9-CM
492.8	Other emphysema	Diagnosis	ICD-9-CM
491.0	Simple chronic bronchitis	Diagnosis	ICD-9-CM
491.9	Unspecified chronic bronchitis	Diagnosis	ICD-9-CM
<b>Osteoporosis</b>			
M81.0	Age-related osteoporosis without current pathological fracture	Diagnosis	ICD-10-CM
M81.6	Localized osteoporosis [Lequesne]	Diagnosis	ICD-10-CM
M81.8	Other osteoporosis without current pathological fracture	Diagnosis	ICD-10-CM

**Appendix E. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes Used to Define Baseline Characteristics in this Request**

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<b>Code</b>	<b>Description</b>	<b>Code Type</b>	<b>Code Category</b>
733.03	Disuse osteoporosis	Diagnosis	ICD-9-CM
733.02	Idiopathic osteoporosis	Diagnosis	ICD-9-CM
733.09	Other osteoporosis	Diagnosis	ICD-9-CM
733.01	Senile osteoporosis	Diagnosis	ICD-9-CM
733.00	Unspecified osteoporosis	Diagnosis	ICD-9-CM

**Appendix F. Specifications Defining Parameters Used in this Request**

This request executed the Cohort Identification and Descriptive Analysis (CIDA) tool 11.1.0 to investigate the use of loop diuretics in the Sentinel Distributed Database (SDD).

**Query period:** January 1, 2000 to most recent available data (March 31, 2021)  
**Coverage requirement:** Medical & Drug Coverage  
**Pre-index enrollment requirement:** see below  
**Post-index enrollment requirement:** 0 days  
**Enrollment gap:** 45 days  
**Age groups:** 18-44, 45-64, 65-74, 75-84, 85+ years  
**Stratifications:** Age group, Sex, Calendar year, Race, Ethnicity, Geographic region, and cross-stratifications  
**Cumulative Exposed Days categorization:** 0-<1 year, 1-<2 years, 2-<3 years, 3-<4 years, 4-<5 years, 5-<6 years, 6-<7 years, 7+ years  
**Envelope macro:** Reclassify encounters during inpatient stay as inpatient  
**Freeze data:** No

**Exposure**

Scenario	Index Exposure	Cohort definition	Incident						Create Baseline Table?	Baseline Characteristics	Censor treatment episode at evidence of:	Cumulative Dose Category
			Incident exposure washout period	Pre-index enrollment requirement	with respect to:	Treatment episode gap	Treatment episode extension					
1	Bumetanide	Include all valid exposure episodes during query period*	0	0	N/A	0	0	Y	N	Death; DP end date; Query end date;	See footnote <sup>2</sup>	
2	Furosemide	Include all valid exposure episodes during query period*	0	0	N/A	0	0	Y	N	Death; DP end date; Query end date;	See footnote <sup>2</sup>	
3	Torsemide	Include all valid exposure episodes during query period*	0	0	N/A	0	0	Y	N	Death; DP end date; Query end date;	See footnote <sup>2</sup>	
4	Ethacrynic Acid	Include all valid exposure episodes during query period*	0	0	N/A	0	0	Y	N	Death; DP end date; Query end date;	See footnote <sup>2</sup>	



Appendix F. Specifications Defining Parameters Used in this Request

Scenario	Index Exposure	Cohort definition	Exposure						Create Baseline Table?	Baseline Characteristics	Sensor treatment episode at evidence of:	Cumulative Dose Category
			Incident exposure washout period	Pre-index enrollment requirement	Incident with respect to:	Treatment episode gap	Treatment episode extension					
5	Bumetanide - Switch to Other Loop Diuretic	Include all valid exposure episodes during query period*	0	0	N/A	0	0	N	N	Death; DP end date; Query end date; Initiation of any other Loop Diuretic (Bumetanide, Furosemide, Torsemide)	See footnote <sup>2</sup>	
6	Furosemide - Switch to Other Loop Diuretic	Include all valid exposure episodes during query period*	0	0	N/A	0	0	N	N	Death; DP end date; Query end date; Initiation of any other Loop Diuretic (Bumetanide, Furosemide, Torsemide)	See footnote <sup>2</sup>	
7	Torsemide - Switch to Other Loop Diuretic	Include all valid exposure episodes during query period*	0	0	N/A	0	0	N	N	Death; DP end date; Query end date; Initiation of any other Loop Diuretic (Bumetanide, Furosemide, Torsemide)	See footnote <sup>2</sup>	
8	Ethacrynic Acid - Switch to Other Loop Diuretic	Include all valid exposure episodes during query period*	0	0	N/A	0	0	N	N	Death; DP end date; Query end date; Initiation of any other Loop Diuretic (Bumetanide, Furosemide, Torsemide)	See footnote <sup>2</sup>	

Appendix F. Specifications Defining Parameters Used in this Request

Scenario	Index Exposure	Cohort definition	Exposure						Create Baseline Table?	Baseline Characteristics	Sensor treatment episode at evidence of:	Cumulative Dose Category
			Incident exposure washout period	Pre-index enrollment requirement	Incident with respect to:	Treatment episode gap	Treatment episode extension					
9	Bumetanide - Switch to Other Loop Diuretic and Exclude Cancer and Washout Loop Diuretics	Include all valid exposure episodes during query period*	365	365	All Loop Diuretics	0	0	Y	Y - CCW see Baseline_Characteristics	Death; DP end date; Query end date; Initiation of any other Loop Diuretic (Bumetanide, Furosemide, Torsemide)	See footnote <sup>2</sup>	
10	Furosemide - Switch to Other Loop Diuretic and Exclude Cancer and Washout Loop Diuretics	Include all valid exposure episodes during query period*	365	365	All Loop Diuretics	0	0	Y	Y - CCW see Baseline_Characteristics	Death; DP end date; Query end date; Initiation of any other Loop Diuretic (Bumetanide, Furosemide, Torsemide)	See footnote <sup>2</sup>	
11	Torsemide - Switch to Other Loop Diuretic and Exclude Cancer and Washout Loop Diuretics	Include all valid exposure episodes during query period*	365	365	All Loop Diuretics	0	0	Y	Y - CCW see Baseline_Characteristics	Death; DP end date; Query end date; Initiation of any other Loop Diuretic (Bumetanide, Furosemide, Torsemide)	See footnote <sup>2</sup>	
12	Ethacrynic Acid - Switch to Other Loop Diuretic and Exclude Cancer and Washout Loop Diuretics	Include all valid exposure episodes during query period*	365	365	All Loop Diuretics	0	0	Y	Y - CCW see Baseline_Characteristics	Death; DP end date; Query end date; Initiation of any other Loop Diuretic (Bumetanide, Furosemide, Torsemide)	See footnote <sup>2</sup>	

Appendix F. Specifications Defining Parameters Used in this Request

Scenario	Index Exposure	Cohort definition	Exposure						Create Baseline Table?	Baseline Characteristics	Sensor treatment episode at evidence of:	Cumulative Dose Category
			Incident exposure washout period	Pre-index enrollment requirement	Incident with respect to:	Treatment episode gap	Treatment episode extension					
13	Bumetanide - Exclude Cancer and Washout Loop Diuretics	Include all valid exposure episodes during query period*	365	365	All Loop Diuretics	0	0	N	N	Death; DP end date; Query end date;	See footnote <sup>2</sup>	
14	Furosemide - Exclude Cancer and Washout Loop Diuretics	Include all valid exposure episodes during query period*	365	365	All Loop Diuretics	0	0	N	N	Death; DP end date; Query end date;	See footnote <sup>2</sup>	
15	Torsemide - Exclude Cancer and Washout Loop Diuretics	Include all valid exposure episodes during query period*	365	365	All Loop Diuretics	0	0	N	N	Death; DP end date; Query end date;	See footnote <sup>2</sup>	
16	Ethacrynic Acid - Exclude Cancer and Washout Loop Diuretics	Include all valid exposure episodes during query period*	365	365	All Loop Diuretics	0	0	N	N	Death; DP end date; Query end date;	See footnote <sup>2</sup>	
17	Bumetanide - Switch to Other Loop Diuretic and Exclude Cancer	Include all valid exposure episodes during query period*	0	365	N/A	0	0	Y	Y - CCW see Baseline_Characteristics	Death; DP end date; Query end date; Initiation of any other Loop Diuretic (Bumetanide, Furosemide, Torsemide)	See footnote <sup>2</sup>	

Appendix F. Specifications Defining Parameters Used in this Request

Scenario	Index Exposure	Cohort definition	Exposure						Create Baseline Table?	Baseline Characteristics	Sensor treatment episode at evidence of:	Cumulative Dose Category
			Incident exposure washout period	Pre-index enrollment requirement	Incident with respect to:	Treatment episode gap	Treatment episode extension					
18	Furosemide - Switch to Other Loop Diuretic and Exclude Cancer	Include all valid exposure episodes during query period*	0	365	N/A	0	0	Y	Y - CCW see Baseline_Characteristics	Death; DP end date; Query end date; Initiation of any other Loop Diuretic (Bumetanide, Furosemide, Torsemide)	See footnote <sup>2</sup>	
19	Torsemide - Switch to Other Loop Diuretic and Exclude Cancer	Include all valid exposure episodes during query period*	0	365	N/A	0	0	Y	Y - CCW see Baseline_Characteristics	Death; DP end date; Query end date; Initiation of any other Loop Diuretic (Bumetanide, Furosemide, Torsemide)	See footnote <sup>2</sup>	
20	Ethacrynic Acid - Switch to Other Loop Diuretic and Exclude Cancer	Include all valid exposure episodes during query period*	0	365	N/A	0	0	Y	Y - CCW see Baseline_Characteristics	Death; DP end date; Query end date; Initiation of any other Loop Diuretic (Bumetanide, Furosemide, Torsemide)	See footnote <sup>2</sup>	
21	Bumetanide - Exclude Cancer	Include all valid exposure episodes during query period*	0	365	N/A	0	0	N	N	Death; DP end date; Query end date;	See footnote <sup>2</sup>	
22	Furosemide - Exclude Cancer	Include all valid exposure episodes during query period*	0	365	N/A	0	0	N	N	Death; DP end date; Query end date;	See footnote <sup>2</sup>	

**Appendix F. Specifications Defining Parameters Used in this Request**

Scenario	Index Exposure	Cohort definition	Exposure						Create Baseline Table?	Baseline Characteristics	Censor treatment episode at evidence of:	Cumulative Dose Category
			Incident exposure washout period	Pre-index enrollment requirement	Incident with respect to:	Treatment episode gap	Treatment episode extension					
23	Torsemide - Exclude Cancer	Include all valid exposure episodes during query period*	0	365	N/A	0	0	N	N	Death; DP end date; Query end date;	See footnote <sup>2</sup>	
24	Ethacrynic Acid - Exclude Cancer	Include all valid exposure episodes during query period*	0	365	N/A	0	0	N	N	Death; DP end date; Query end date;	See footnote <sup>2</sup>	

International Classification of Diseases, Ninth Revision (ICD-9), International Classification of Disease, Tenth Revision (ICD-10), International Classification of Diseases, Tenth Revision, Current Procedural Terminology, Fourth Edition (CPT-4), and Healthcare Common Procedure Coding System, Level II (HCPCS) codes are provided by Optum360.

National Drug Codes (NDCs) are checked against First Data Bank's FDB MedKnowledge®.

<sup>1</sup>Only the first valid exposure episode's incidence is assessed using washout criteria.

<sup>2</sup>Calculated as 1mg furosemide= 80mg bumetanide= 4mg torsemide= 0.8mg ethacrynic acid for oral diuretics. Categories:

- 0-30,000mg
- 30,000 - 60,000mg
- 60,000 - 90,000 mg
- 90,000 - 120,000mg
- 120,000 - 150,000mg
- 150,000 - 180,000mg
- 180,000 - 210,000mg
- 210,000 mg+

Appendix F. Specifications Defining Parameters Used in this Request (Continued)

Inclusion/Exclusion Criteria									
Scenario	Index Exposure	Inclusion/ Exclusion group	Criteria	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if inclusion/exclusion evaluation period includes dispensings	Number of instances the criteria should be found in the evaluation period
1	Bumetanide	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
2	Furosemide	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
3	Torsemide	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
4	Ethacrynic Acid	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
5	Bumetanide - Switch to Other Loop Diuretic	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
6	Furosemide - Switch to Other Loop Diuretic	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
7	Torsemide - Switch to Other Loop Diuretic	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
8	Ethacrynic Acid - Switch to Other Loop Diuretic	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
9	Bumetanide - Switch to Other Loop Diuretic and Exclude Cancer and Washout Loop Diuretics	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1
10	Furosemide - Switch to Other Loop Diuretic and Exclude Cancer and Washout Loop Diuretics	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1

**Appendix F. Specifications Defining Parameters Used in this Request (Continued)**

Scenario	Index Exposure	Inclusion/ Exclusion group	Criteria	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Inclusion/Exclusion Criteria	
								Exclude evidence of days supply if inclusion/exclusion evaluation period includes dispensings	Number of instances the criteria should be found in the evaluation period
11	Torsemide - Switch to Other Loop Diuretic and Exclude Cancer and Washout Loop Diuretics	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1
12	Ethacrynic Acid - Switch to Other Loop Diuretic and Exclude Cancer and Washout Loop Diuretics	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1
13	Bumetanide - Exclude Cancer and Washout Loop Diuretics	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1
14	Furosemide - Exclude Cancer and Washout Loop Diuretics	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1
15	Torsemide - Exclude Cancer and Washout Loop Diuretics	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1
16	Ethacrynic Acid - Exclude Cancer and Washout Loop Diuretics	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1



**Appendix F. Specifications Defining Parameters Used in this Request (Continued)**

Scenario	Index Exposure	Inclusion/ Exclusion group	Criteria	Inclusion/Exclusion Criteria						Number of instances the criteria should be found in the evaluation period
				Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if inclusion/exclusion evaluation period includes dispensings		
17	Bumetanide - Switch to Other Loop Diuretic and Exclude Cancer	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1	
18	Furosemide - Switch to Other Loop Diuretic and Exclude Cancer	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1	
19	Torsemide - Switch to Other Loop Diuretic and Exclude Cancer	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1	
20	Ethacrynic Acid - Switch to Other Loop Diuretic and Exclude Cancer	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1	
21	Bumetanide - Exclude Cancer	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1	
22	Furosemide - Exclude Cancer	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1	

**Appendix F. Specifications Defining Parameters Used in this Request (Continued)**

Scenario	Index Exposure	Inclusion/ Exclusion group	Criteria	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Inclusion/Exclusion Criteria	
								Exclude evidence of days supply if inclusion/exclusion evaluation period includes dispensings	Number of instances the criteria should be found in the evaluation period
23	Torsemide - Exclude Cancer	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1
24	Ethacrynic Acid - Exclude Cancer	Cancer (Excl_Cancer), Chemotherapy (Excl_Chemo_DXPX, Excl_Chemo_NDC), or Radiation (Excl_Cancer)	Exclusion	Any	N/A	-365	-1	Evaluation period should search for evidence of days supply	1

International Classification of Diseases, Ninth Revision (ICD-9), International Classification of Disease, Tenth Revision (ICD-10), International Classification of Diseases, Tenth Revision, Current Procedural Terminology, Fourth Edition (CPT-4), and Healthcare Common Procedure Coding System, Level II (HCPCS) codes are provided by Optum360.

National Drug Codes (NDCs) are checked against First Data Bank's FDB MedKnowledge®.

<sup>1</sup>Only the first valid exposure episode's incidence is assessed using washout criteria.

<sup>2</sup>Calculated as 1mg furosemide= 80mg bumetanide= 4mg torsemide= 0.8mg ethacrynic acid for oral diuretics. Categories:

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- 30,000 - 60,000mg
- 60,000 - 90,000 mg
- 90,000 - 120,000mg
- 120,000 - 150,000mg
- 150,000 - 180,000mg
- 180,000 - 210,000mg
- 210,000 mg+

**Appendix G. Specifications Defining Parameters for Baseline Characteristics in this Request**

Characteristic	Code List	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	days supply if characteristic includes dispensings	Number of instances the characteristic should be found in evaluation period
Acute Myocardial Infarction	AMI	Inpatient	Principal,Secondary	-365	-1	N/A	1
Alzheimer's Disease and related conditions	ADRD	Any	Any	-365	-1	N/A	1
		Inpatient	Principal,Secondary	-365	-1	N/A	1
Atrial Fibrillation	Afib	Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
Diabetes	Diabetes	Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1
		Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
Heart Failure	HF	Inpatient hospital stay, Emergency department encounter, Ambulatory Visit	Any	-365	-1	N/A	1
Hyperlipidemia	Hyperlipid	Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1
		Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
		Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1

**Appendix G. Specifications Defining Parameters for Baseline Characteristics in this Request**

Characteristic	Code List	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	days supply if characteristic includes dispensings	Number of instances the characteristic should be found in evaluation period
Hypertension	HTN	Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
Depression	Dep	Any	Any	-365	-1	N/A	1
Ischemic Heart Disease	IHD	Any	Any	-365	-1	N/A	1
Rheumatoid Arthritis/Osteoarthritis	RAOA	Any	Any	-365	-1	N/A	1
		Inpatient	Any	-365	-1	N/A	1
Stroke/TIA	Stroke	Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
		Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1
Breast Cancer	Breast	Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
		Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1
Colorectal Cancer	Colorectal	Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
		Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1

**Appendix G. Specifications Defining Parameters for Baseline Characteristics in this Request**

Characteristic	Code List	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	days supply if characteristic includes dispensings	Number of instances the characteristic should be found in evaluation period
Prostate Cancer	Prostate	Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
		Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1
Lung Cancer	Lung	Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
		Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1
Endometrial Cancer	Endometrial	Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
		Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1
Acquired Hypothyroidism	AcqHypo	Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
		Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1
Anemia	Anemia	Any	Any	-365	-1	N/A	1
Asthma	Asthma	Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
		Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1

**Appendix G. Specifications Defining Parameters for Baseline Characteristics in this Request**

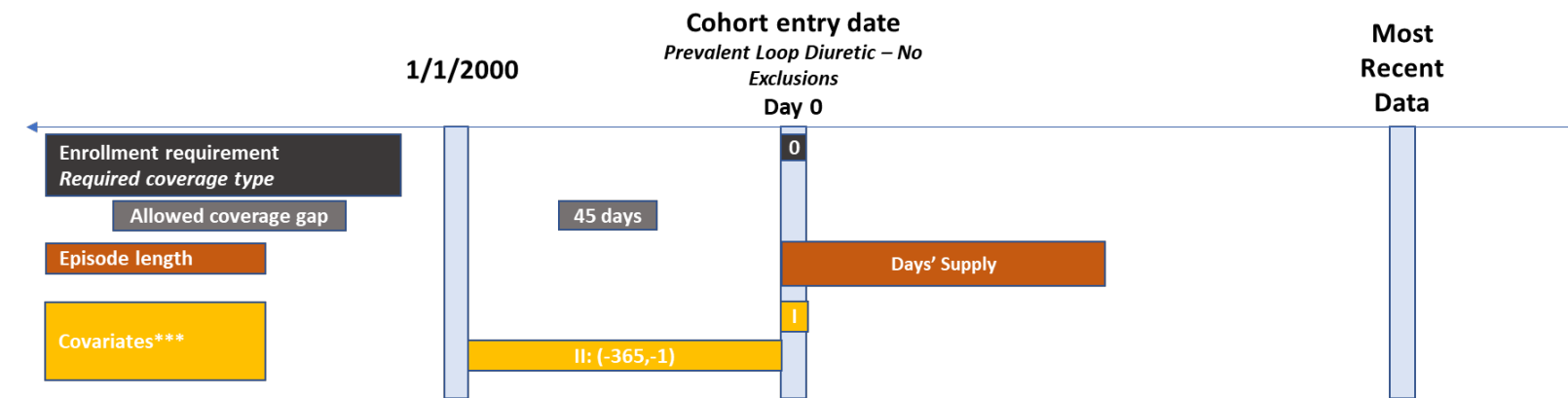
Characteristic	Code List	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	days supply if characteristic includes dispensings	Number of instances the characteristic should be found in evaluation period
Benign Prostatic Hyperplasia	BPH	Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
		Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1
Chronic Kidney Disease	CKD	Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2

**Appendix G. Specifications Defining Parameters for Baseline Characteristics in this Request**

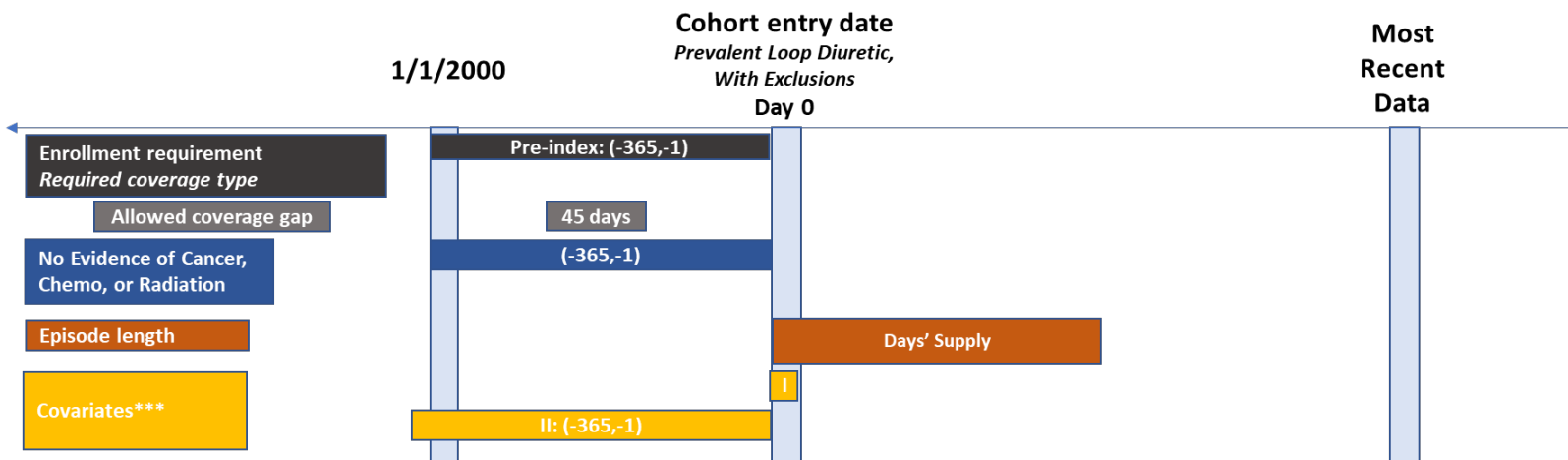
Characteristic	Code List	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	days supply if characteristic includes dispensings	Number of instances the characteristic should be found in evaluation period
COPD and Bronchiectasis	COPD	Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1
		Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2
Osteoporosis	Osteo	Inpatient, Non-acute Institutional Stay	Any	-365	-1	N/A	1
		Ambulatory Visit, Emergency Department Encounter, or Other Ambulatory Visit	Any	-365	-1	N/A	2



Appendix H. Design Diagrams of Cohort Entry Requirements and Index Exposure

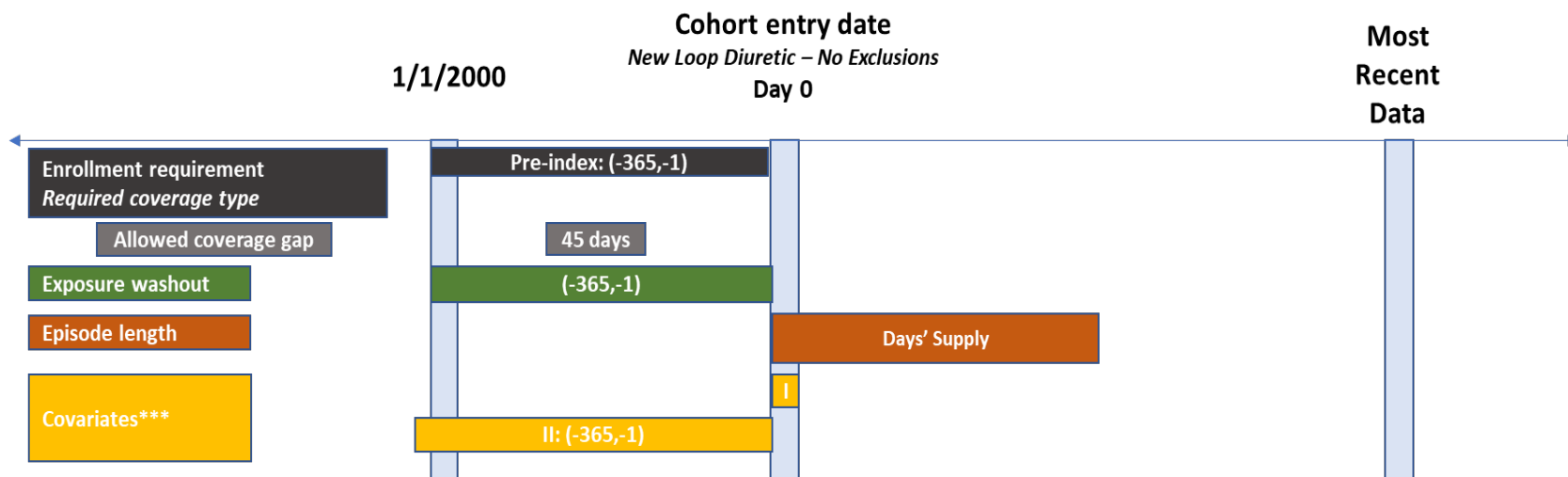


\*\*\*Covariates:  
Window I: Age, year, race, sex  
Window II: CCW Conditions



\*\*\*Covariates:  
Window I: Age, year, race, sex  
Window II: CCW Conditions

Appendix H. Design Diagrams of Cohort Entry Requirements and Index Exposure

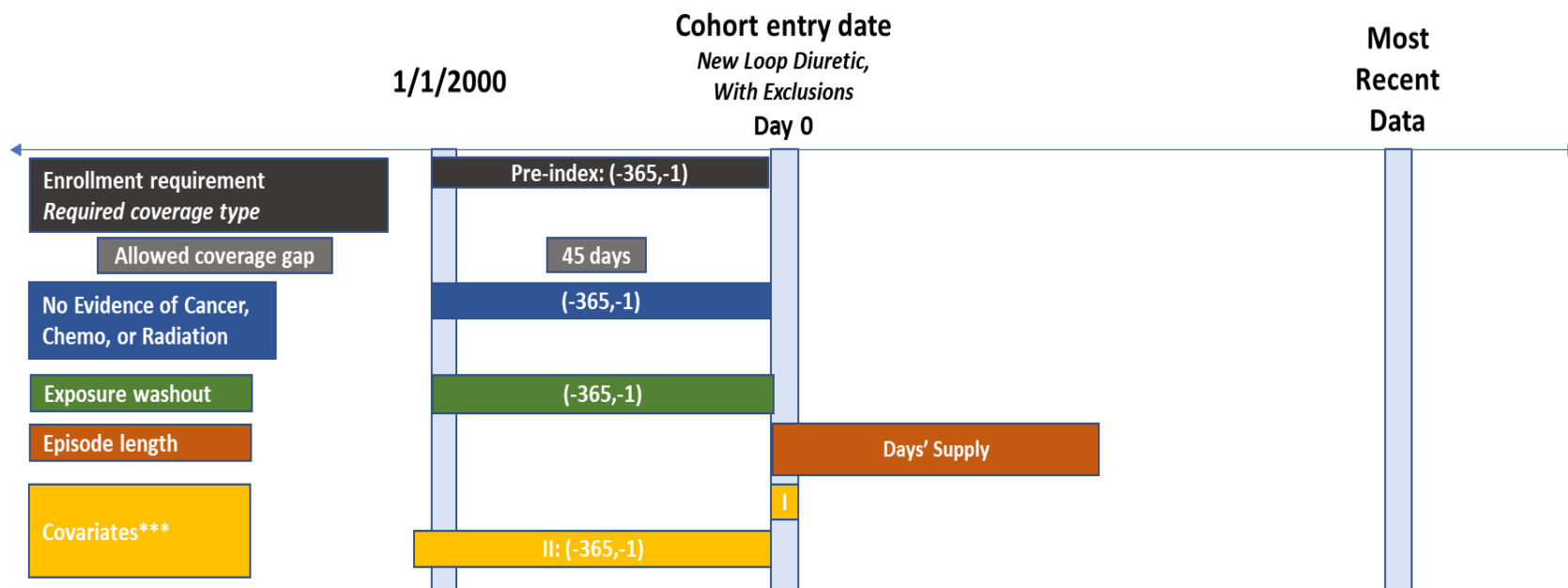


\*\*\*Covariates:

Window I: Age, year, race, sex

Window II: CCW Conditions

Appendix H. Design Diagrams of Cohort Entry Requirements and Index Exposure



\*\*\*Covariates:

Window I: Age, year, race, sex

Window II: CCW Conditions