

Tina Kotek, Governor

ICD-10	DESCRIPTION
BREAST DIAGNOSIS CODES	
D24.1	Benign neoplasm of right breast
D24.2	Benign neoplasm of left breast
D24.9	Benign neoplasm of unspecified breast
D48.60	Neoplasm of uncertain behavior of unspecified breast
D48.61	Neoplasm of uncertain behavior of right breast
D48.62	Neoplasm of uncertain behavior of left breast
D49.3	Neoplasm of unspecified behavior of breast
N60.0	Solitary cyst of breast
N60.01	Solitary cyst of right breast
N60.02	Solitary cyst of left breast
N60.09	Solitary cyst of unspecified breast
N60.1	Diffuse cystic mastopathy
N60.11	Diffuse cystic mastopathy of right breast
N60.12	Diffuse cystic mastopathy of left breast
N60.19	Diffuse cystic mastopathy of unspecified breast
N60.2	Fibroadenosis of breast
N60.21	Fibroadenosis of right breast
N60.22	Fibroadenosis of left breast
N60.29	Fibroadenosis of unspecified breast
N60.3	Fibrosclerosis of breast
N60.31	Fibrosclerosis of right breast
N60.32	Fibrosclerosis of left breast
N60.39	Fibrosclerosis of unspecified breast
N60.4	Mammary duct ectasia
N60.41	Mammary duct ectasia of right breast
N60.42	Mammary duct ectasia of left breast
N60.49	Mammary duct ectasia of unspecified breast
N60.8	Other benign mammary dysplasias
N60.81	Other benign mammary dysplasias of right breast

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N60.82	Other benign mammary dysplasias of left breast
N60.89	Other benign mammary dysplasias of unspecified breast
N60.9	Unspecified benign mammary dysplasia
N60.91	Unspecified benign mammary dysplasia of right breast
N60.92	Unspecified benign mammary dysplasia of left breast
N60.99	Unspecified benign mammary dysplasia of unspecified breast
N61.0	Mastitis without abscess
N61.1	Abscess of the breast and nipple
N61.20	Granulomatous mastitis unspecified breast
N61.21	Granulomatous mastitis right breast
N61.22	Granulomatous mastitis left breast
N61.23	Granulomatous mastitis bilateral breast
N63	Unspecified lump in breast
N63.0	Unspecified lump in unspecified breast
N63.10	Unspecified lump in the right breast, unspecified quadrant
N63.11	Unspecified lump in the right breast, upper outer quadrant
N63.12	Unspecified lump in the right breast, upper inner quadrant
N63.13	Unspecified lump in the right breast, lower outer quadrant
N63.14	Unspecified lump in the right breast, lower inner quadrant
N63.15	Unspecified lump in the right breast, overlapping quadrants
N63.20	Unspecified lump in the left breast, unspecified quadrant
N63.21	Unspecified lump in the left breast, upper outer quadrant
N63.22	Unspecified lump in the left breast, upper inner quadrant
N63.23	Unspecified lump in the left breast, lower outer quadrant
N63.24	Unspecified lump in the left breast, lower inner quadrant
N63.25	Unspecified lump in the left breast, overlapping quadrants
N63.31	Unspecified lump in axillary tail of the right breast
N63.32	Unspecified lump in axillary tail of the left breast
N63.41	Unspecified lump in right breast, subareolar
N63.42	Unspecified lump in left breast, subareolar
N64.0	Fissure and fistula of nipple
N64.1	Fat necrosis of breast
N64.2	Atrophy of breast
N64.3	Galactorrhea not associated with childbirth
N64.4	Mastodynia
N64.51	Induration of breast

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N64.52	Nipple discharge
N64.53	Retraction of nipple
N64.59	Other signs and symptoms in breast
N64.89	Other specified disorders of breast
N64.9	Disorder of breast, unspecified
R92.0	Mammographic microcalcification found on dx imaging of brst
R92.1	Mammographic calcification found on diagnostic imaging of breast
R92.2	Inconclusive mammogram
R92.3	Mammographic density found on imaging of breast
R92.30	Dense breasts, unspecified
R92.31	Mammographic fatty tissue density of breast
R92.311	Mammographic fatty tissue density, right breast
R92.312	Mammographic fatty tissue density, left breast
R92.313	Mammographic fatty tissue density, bilateral breasts
R92.32	Mammographic fibroglandular density of breast
R92.321	Mammographic fibroglandular density, right breast
R92.322	Mammographic fibroglandular density, left breast
R92.323	Mammographic fibroglandular density, bilateral breasts
R92.33	Mammographic heterogeneous density of breast
R92.331	Mammographic heterogeneous density, right breast
R92.332	Mammographic heterogeneous density, left breast
R92.333	Mammographic heterogeneous density, bilateral breasts
R92.34	Mammographic extreme density of breast
R92.341	Mammographic extreme density, right breast
R92.342	Mammographic extreme density, left breast
R92.343	Mammographic extreme density, bilateral breasts
R92.8	Other abnormal and inconclusive findings on dx imaging of breast
Z12.3	Encounter for screening for malignant neoplasm of breast
Z12.31	Encounter screen mammogram for malignant neoplasm of breast
Z12.39	Encounter for other screening for malignant neoplasm of breast
Z15.01	Genetic susceptibility to malignant neoplasm of breast
Z80.3	Family history of malignant neoplasm of breast
Z85.3	Personal history of malignant neoplasm of breast
ICD-10	DESCRIPTION
CERVICAL DIAGNOSIS CODES	

B97.7	Papillomavirrus as the cause of diseases classified elsewhere
D26.0	Other benign neoplasm of cervix uteri
N72	Inflammatory disease of cervix uteri
N73.9	Female pelvic inflammatory disease, unspecified
N84.1	Polyp of cervix uteri
N86	Erosion and ectropion of cervix uteri
N87.0	Mild cervical dysplasia
N87.1	Moderate cervical dysplasia
N87.9	Dysplasia of cervix uteri, unspecified
N88.0	Leukoplakia of cervix uteri
N88.1	Old laceration of cervic uteri
N88.2	Stricture and stenosis of cervic uteri
N88.3	Incompetence of cervic uteri
N88.4	Hypertrophic elongation of cervic uteri
N88.8	Other specified noninflammatory disorders of cervic uteri
N88.9	Noninflammatory disorder of cervic uteri, unspecified
N91.1	Secondary amenorrhea
N91.2	Amenorrhea, unspecified
N91.3	Primary oligomenorrhea
N91.4	Secondary oligomenorrhea
N91.5	Oligomenorrhea, unspecified
N92.6	Irregular menstruation, unspecified
N95.0	Postmenopausal bleeding
R87.6	Abn cytolog findings in specmn from female genital organs
R87.61	Abnormal cytological findings in specimens from cervix uter
R87.610	Atypical squamous cells of undetermined significance on cytologic smear of cervix (ASC-US)
R87.611	Atypical squamous cells cannot exclude high grade squamous intraepithelial lesion on cytologic smear of cervix (ASC-H)
R87.612	Low grade squamous intraepithelial lesion on cytologic smear of cervix (LGSIL)
R87.613	High grade squamous intraepithelial lesion on cytologic smear of cervix (HGSIL)
R87.614	Cytologic evidence of malignancy on smear of cervix
R87.615	Unsatisfactory cytologic smear of cervix
R87.616	Satisfactory cervical smear but lacking transformation zone
R87.618	Other abnormal cytologic findings on specimens from cervix uteri

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R87.619	Unspecified abnormal cytologic findings in specimens from cervix uteri
R87.624	Cytologic evidence of malignancy on smear of vagina
R87.628	Other abnormal cytologic findings on specimens from vagina
R87.810	Cervical high risk HPV DNA test positive
R87.811	Vaginal high risk HPV DNA test positive
R87.820	Cervical low risk HPV DNA test positive
R87.821	Vaginal low risk HPV DNA test positive
Z01.41	Encounter for routine gynecological examination
Z01.411	Encounter for gyn exam (general) (routine) with abnormal findings
Z01.419	Encounter for gyn exam (general) (routine) without abnormal findings
Z01.42	Encounter for cervical smear to confirm findings of recent normal smear following initial abnormal smear
Z11.51	Encounter for screening for human papillomavirus (HPV)
Z12.4	Encounter for screening for malignant neoplasm of cervix
Z80.4	Family history of malignant neoplasm of genital organs
Z80.49	Family history of malignant neoplasm of other genital organs
Z80.5	Family history of malignant neoplasm of urinary tract
Z85.4	Personal history of malignant neoplasm of genital organs
Z85.40	Personal history of malignant neoplasm of unspecified female genital organ
Z85.41	Personal history of malignant neoplasm of cervix uteri
Z85.42	Personal history of malignant neoplasm of other part uterus
Z85.44	Personal history of malignant neoplasm of female genital organs

***As of July 1, 2022, ScreenWise ended coverage of genetic counseling and BRCA 1&2 genetic testing services, and they have been removed from the ICD-10 List. If you need a copy of the ICD-10 List that includes genetic counseling and testing services, send a request to screenwise.info@odhsoha.oregon.gov or call 971-673-0581.**