

POLICY TITLE	ELECTROMYOGRAPHY and NERVE CONDUCTION STUDIES
POLICY NUMBER	MP 2.063

CLINICAL BENEFIT	<input type="checkbox"/> MINIMIZE SAFETY RISK OR CONCERN. <input checked="" type="checkbox"/> MINIMIZE HARMFUL OR INEFFECTIVE INTERVENTIONS. <input type="checkbox"/> ASSURE APPROPRIATE LEVEL OF CARE. <input type="checkbox"/> ASSURE APPROPRIATE DURATION OF SERVICE FOR INTERVENTIONS. <input type="checkbox"/> ASSURE THAT RECOMMENDED MEDICAL PREREQUISITES HAVE BEEN MET. <input type="checkbox"/> ASSURE APPROPRIATE SITE OF TREATMENT OR SERVICE.
Effective Date:	1/1/2025

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I. POLICY

Electrodiagnostic assessment, consisting of electromyography (EMG), nerve conduction study (NCS), and related measures, may be considered **medically necessary** as an adjunct to history, physical exam (PE), and imaging studies when the following criteria are met:

- Signs and symptoms of peripheral neuropathy and/or myopathy are present; and
- Definitive diagnosis cannot be made by PE and imaging studies alone; and
- Work-up for one or more of the following categories of disease is indicated (see Policy Guidelines section):
 - Compressive neuropathies
 - Nerve root compression
 - Traumatic nerve injuries
 - Generalized and focal neuropathies/myopathies
 - Plexopathies
 - Motor neuron diseases
 - Neuromuscular junction disorders.

A repeat electrodiagnostic assessment may be considered **medically necessary** when at least one of the following criteria have been met:

- Development of new symptoms or signs suggesting a second diagnosis in a patient who has received an initial diagnosis; or
- Interim progression of disease following an initial test that was inconclusive, such that a repeat test is likely to elicit additional findings; or
- Unexpected change(s) in the course of disease or response to treatment, suggesting that the initial diagnosis may be incorrect, and that reexamination is indicated.

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Electrodiagnostic assessment, consisting of EMG, NCS, and related measures, is **investigational** when the above criteria are not met, including but not limited to, the following situations:

- Screening of asymptomatic individuals
- Serial assessments to evaluate progression of disease in a patient with a previously diagnosed neuropathy or myopathy
- Evaluation of treatment response in a patient with previously diagnosed neuropathy or myopathy
- Evaluation of severity of disease in a patient with previously diagnosed neuropathy or myopathy

There is insufficient evidence to support a general conclusion concerning the health outcomes or benefits associated with testing for these indications.

Automated nerve conduction tests are considered **investigational** as there is insufficient evidence to support a general conclusion concerning the health outcomes or benefits associated with this procedure.

POLICY GUIDELINES

The following list gives specific diagnoses, according to categories of testing listed in the policy statement, for which EMG/NCS generally provides useful information in confirming or excluding the diagnosis, above that provided by clinical examination and imaging. This includes the most common diagnoses for testing, but it is not exhaustive. There may also be other less common disorders for which EMG/NCS provides useful diagnostic information.

- Compressive neuropathies
 - Carpal tunnel syndrome
 - Ulnar nerve entrapment
 - Thoracic outlet syndrome
 - Tarsal tunnel syndrome
 - Other peripheral nerve entrapments
- Nerve root compression (when PE and magnetic resonance imaging [MRI] are inconclusive)
 - Cervical nerve root compression
 - Thoracic nerve root compression
 - Lumbosacral nerve root compression
- Traumatic nerve injuries
- Generalized and focal polyneuropathies
 - Diabetic neuropathy
 - Uremic neuropathy
 - Alcohol-related neuropathy
 - Hereditary neuropathies
 - Charcot-Marie Tooth
 - Other hereditary neuropathies
 - Demyelinating polyneuropathies
 - Guillain-Barré syndrome (acute)

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- Chronic idiopathic demyelinating polyneuropathy
- Generalized myopathies
 - Polymyositis
 - Dermatomyositis
 - Muscular dystrophies
- Plexopathies
 - Cervical plexopathy
 - Brachial plexopathy
 - Lumbosacral plexopathy
- Motor neuron diseases
 - Amyotrophic lateral sclerosis
 - Progressive muscular atrophy
 - Progressive bulbar palsy
 - Pseudobulbar palsy
 - Primary lateral sclerosis
- Neuromuscular junction disorders
 - Myasthenia gravis
 - Myasthenic syndrome
 - Lambert-Eaton syndrome

The following recommendations on the number of repeat services are reproduced from the American Association of Neuromuscular & Electrodiagnostic Medicine (AANEM) position statement (1999). These estimates do not represent absolute maximums for all patients; they are defined by AANEM as being sufficient to make a diagnosis in at least 90% of patients with that particular diagnosis. Therefore, there may be a small percentage of cases that require a greater number of tests than specified in table PG1.

Table PG1. Recommended Maximum Number of Electrodiagnostic Studies for Specific

Indication	Needle EMG	NCSS		Other Studies	
		Motor NCS (± F Wave)	Sensory NCS	H-Reflex	RNS Testing
Carpal tunnel syndrome (unilateral)	1	3	4	0	0
Carpal tunnel syndrome (bilateral)	2	4	6	0	0
Radiculopathy	2	3	2	2	0
Mononeuropathy	1	3	3	2	0
Polyneuropathy or mononeuropathy multiplex	3	4	4	2	0
Myopathy	2	2	2	0	2

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Motor neuropathy (e.g., amyotrophic lateral sclerosis)	4	4	2	0	2
Plexopathy	2	4	6	2	0
Neuromuscular junction	2	2	2	0	3
Tarsal tunnel syndrome (unilateral)	1	4	4	0	0
Tarsal tunnel syndrome (bilateral)	2	5	6	0	0
Weakness, fatigue, cramps, or twitching (focal)	2	3	4	0	2
Weakness, fatigue, cramps, or twitching (general)	4	4	4	0	2
Pain, numbness, or tingling (unilateral)	1	3	4	2	0
Pain, numbness, or tingling (bilateral)	2	4	6	2	0

Adapted from American Association of Electrodiagnostic Medicine (2023).

EMG: electromyography; NCS: nerve conduction study; RNS: repetitive nerve stimulation.

The AANEM position statement (2023) also included minimum standards for a lab performing electrodiagnostic evaluation:

- Tests should be medically indicated.
- The tests should be performed using equipment that provides assessment of all parameters of the recorded signals. Equipment designed for screening purposes is not acceptable.
- The number of tests performed should be the minimum needed to establish an accurate diagnosis.
- The NCS should be performed by a physician or by a trained technician under the direct supervision of a physician.
- A trained physician must perform the needle EMG exam.
- One physician should perform and supervise all components of the electrodiagnostic testing.
- The NCS and needle EMG exam results should be integrated into a unifying report and diagnostic impression

Cross-reference:

MP 2.096 Electromyography (EMG) (Needle and Non-Needle) of the Anal or Urethral Sphincter

MP 2.097 Paraspinal Surface Electromyography to Evaluate and Monitor Back Pain

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II. PRODUCT VARIATIONS

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This policy is only applicable to certain programs and products administered by Capital Blue Cross and subject to benefit variations as discussed in Section VI. Please see additional information below.

FEP PPO - Refer to FEP Medical Policy Manual. The FEP Medical Policy manual can be found at: <https://www.fepblue.org/benefit-plans/medical-policies-and-utilization-management-guidelines/medical-policies>

III. DESCRIPTION/BACKGROUND

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Electrodiagnostic Assessment

Electromyography (EMG) and nerve conduction study (NCS) are used as adjuncts to clinical evaluation of myopathy and peripheral neuropathy. These tests intend to evaluate the integrity and electrical function of muscles and peripheral nerves. They are performed when there is clinical suspicion for a myopathic or neuropathic process and when clinical examination and standard laboratory testing cannot make a definitive diagnosis.

Test results do not generally provide a specific diagnosis. Rather, they provide additional information that assists physicians in characterizing a clinical syndrome. EMG/NCS may be useful when there is no clear etiology when symptoms are severe or rapidly progressing, or when symptoms are atypical (e.g., asymmetrical, acute onset, or appearing to be autonomic).

According to the American Association of Neuromuscular & Electrodiagnostic Medicine (1999, updated January 2023), electrodiagnostic assessment has the following goals:

1. Identify normal and abnormal nerve, muscle, motor or sensory neuron, and NMJ [neuromuscular junction] functioning.
2. Localize region(s) of pathology.
3. Characterize the pathology.
4. Determine the distribution of abnormalities.
5. Determine the severity of abnormalities.
6. Estimate the chronology of the disease.
7. Determine the progression of abnormalities or recovery from abnormal function.
8. Aid in diagnosis and prognosis of disease.
9. Aid in selecting treatment options.
10. Aid in following response to treatment by providing objective evidence of change in NM [neuromuscular] function.
11. Localize correct locations for injections of intramuscular agents....”

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Components of the electrodiagnostic exam may include needle EMG, NCS, repetitive nerve stimulation study, somatosensory evoked potentials, and blink reflexes.

Electromyography

Needle EMG

An EMG needle electrode is inserted into selected muscles, chosen by the examining physician depending on the differential diagnosis and other information available during the exam. The response of the muscle to electrical stimulation is recorded. Three components are evaluated: observation at rest, action potential with minimal voluntary contraction, and action potential with maximum contraction.

Single Fiber EMG

In single fiber EMG, a needle electrode records the response of a single muscle fiber. This test can evaluate “jitter,” which is defined as the variability in time between activation of the nerve and generation of the muscle action potential. Single fiber EMG can also measure fiber density, which is defined as the mean number of muscle fibers for 1 motor unit.

Nerve Conduction Study

In NCS, both motor and sensory nerve conduction are assessed. For motor conduction, electrical stimuli are delivered along various points on the nerve, and the electrical response is recorded from the appropriate muscle. For sensory conduction, electrical stimuli are delivered to 1 point on the nerve and the response recorded at a distal point on the nerve. Parameters recorded include velocity, amplitude, latency, and configuration.

Late Wave Responses

Late waves are a complement to the basic NCS and evaluate the functioning of the proximal segment of peripheral nerves, such as the nerve root and the anterior horn cells. There are 2 types of late responses: the H-reflex and the F wave.

The H-reflex is elicited by stimulating the posterior tibial nerve and measuring the response in the gastrocnemius muscle. It is analogous to the ankle reflex and can be prolonged by radiculopathy at S1 or by peripheral neuropathy.

The F wave is assessed by supramaximal stimulation of the distal nerve and can help estimate the conduction velocity in the proximal portion of the nerve. This will provide information on the presence of proximal nerve abnormalities, such as radiculopathy or plexopathy.

Repetitive Nerve Stimulation

Repetitive nerve stimulation studies evaluate the integrity and function of the neuromuscular junction. The test involves stimulating a nerve repetitively at variable rates and recording the response of the corresponding muscle(s). Disorders of the neuromuscular junction will show a diminished muscular response to repetitive stimulation.

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Somatosensory Evoked Potentials

Somatosensory evoked potentials evaluate nerve conduction in various sensory fibers of both the peripheral and central nervous system and test the integrity and function of these nerve pathways. They are typically used to assess nerve conduction in the spinal cord and other central pathways that cannot be assessed by standard NCS.

Blink Reflexes

The blink reflexes, which are analogs of the corneal reflex, are evaluated by stimulating the orbicularis oris muscle at the lower eyelid. They are used to localize lesions in the fifth or seventh cranial nerves.

Differential Diagnosis

The specific components of an individual test are not standardized. Rather, a differential diagnosis is developed by the treating physician, and/or the clinician performing the test, and the specific components of the exam are determined by the disorders being considered in the differential. Also, the differential diagnosis may be modified during the exam to reflect initial findings, and this may also influence the specific components included in the final analysis.

Automated Point-of-Care Nerve Conduction Tests

In 2016, the American Academy of Orthopaedic Surgeons released guidelines on the management of carpal tunnel syndrome. 21, The guidelines were endorsed by other specialty societies including the American College of Radiology and American College of Surgeons. The guidelines found "limited evidence" for a "hand-held nerve conduction study."

Regulatory Status

EMG/NCS measure nerve and muscle function and may be indicated when evaluating limb pain, weakness related to possible spinal nerve compression, or other neurologic injury or disorder. A number of electromyographic devices have received marketing clearance by the U.S. Food and Drug Administration (FDA). Several devices are listed in Table 1.

Table 1. Electromyographic Devices Approved by FDA

Device	Manufacturer	FDA Clearance	510(k) No.	FDA Product Code
NuVasive® NVM5 System	NuVasive	2011	K112718	ETN
CERSR® Electromyography System	SpineMatrix	2011	K110048	IKN
CareFusion Nicolet® EDX	CareFusion 209	2012	K120979	GWF
Physical Monitoring Registration Unit-S (PMRU-S)	Oktx	2013	K123902	IKN

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MyoVision 3G Wirefree™ System	Precision Biometrics	2013	K123399	IKN
Neuro Omega™ System	Alpha Omega Engineering	2013	K123796	GZL
EPAD™	SafeOp Surgical	2014	K132616	GWF
Sierra Summit, Sierra Ascent	Cadwell Industries	2017	K162383	IKN, GWF
EPAD 2™	SafeOp Surgical	2019	K182542	GWF, IKN

FDA: Food and Drug Administration

Multiple devices have been cleared for POC neural conduction testing. For example, in 1986, Neurometer® CPT/C (Neurotron®) was cleared for marketing by the U.S. Food and Drug Administration (FDA) through the 510(k) process (K853608). The device evaluates and documents sensory nerve impairments at cutaneous or mucosal sites. The evaluation detects and quantifies hyperesthesia in early stages of progressive neuropathy and hypoesthesia in more advanced conditions.

In 1998 NC-stat® (NeuroMetrix) was cleared by FDA through the 510(k) process (K982359). NC-stat® is intended “to measure neuromuscular signals that are useful in diagnosing and evaluating systemic and entrapment neuropathies.” This version is no longer commercially available. It is the predicate device for the NC-stat DPNCheck® (K041320), cleared in 2004, and the NeuroMetrix Advance (K070109), cleared in 2008. The NC-stat DPNCheck device measures the sural nerve conduction velocity and sensory nerve action potential amplitude. It is a handheld device with an infrared thermometer, noninvasive electrical stimulation probes, and a single-use biosensor for each test. NC-stat DPNCheck is designed specifically for NCS of the sural nerve in the assessment of diabetic peripheral neuropathy. The NeuroMetrix ADVANCE is a POC test that can be used to perform needle EMG in addition to surface electrodes for the performance of NCSs. If the needle EMG module is used, then the device is also intended to measure signals useful in evaluating disorders of muscles.

On January 23, 2017, Cadwell Sierra Summit and Cadwell Sierra Ascent (Cadwell Industries) was cleared for marketing by FDA through the 510K process (K162383). There are portable laptop versions and a desktop application with a handheld device. The system is used for acquisition, display, storage, transmission, analysis, and reporting of electrophysiologic and environmental data including EMG, NCS, evoked potentials, and autonomic responses (RR interval variability). The Cadwell Sierra Summit is used to detect the physiologic function of the nervous system, and to support the diagnosis of neuromuscular diseases or conditions.

FDA product code: JXE.

IV. RATIONALE

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Summary of Evidence

For individuals with suspected peripheral neuropathy or myopathy who receive electrodiagnostic assessment including EMG and NCS, the evidence includes small observational studies on a

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few diagnoses, such as CTS, radiculopathy, and myopathy. Relevant outcomes are test accuracy, symptoms, functional outcomes, and quality of life. Because electrodiagnostic assessment is considered the criterion standard for evaluating the electrical function of peripheral nerves and muscles, there is no true alternative reference standard against which the sensitivity and specificity of particular EMG/NCS abnormalities for particular clinical disorders can be calculated. Different studies have used different reference standards, such as EMG/NCS measures of healthy individuals or clinical examination results. In general, these tests are considered more specific than sensitive, and normal results do not rule out the disease. The limited evidence has shown a wide range of sensitivities, which are often less than 50%. The specificity is expected to be considerably higher, but the data are insufficient to provide precise estimates of either sensitivity or specificity. The evidence is insufficient to determine the effects of the technology on health outcomes.

For individuals who have entrapment carpal tunnel syndrome who received automated POC NCSs, the evidence includes studies on the diagnostic accuracy and clinical outcomes from industry-sponsored trials, nonrandomized trials, and registry data. Relevant outcomes are test accuracy and validity, symptoms, and functional outcomes. Four RCTs have reported on the diagnostic accuracy of automated POC nerve conduction testing to diagnose carpal tunnel syndrome. Sensitivity testing has suggested there could be diagnostic value in detecting carpal tunnel syndrome; specificity testing was inconsistent across trials. No reference ranges were validated, and normative values were not defined in these studies. No validation testing by trained medical assistants vs trained specialist was reported in the studies. The evidence on clinical outcomes is limited to a single nonrandomized clinical trial and NeuroMetrix registry data. Neither reported health outcomes assessing patient symptoms or changes in functional status. The evidence is insufficient to determine the effects of the technology on health outcomes.

For individuals with lumbosacral radiculopathy who received automated POC NCSs, the evidence includes industry-sponsored trials and a nonrandomized study of diagnostic accuracy. Relevant outcomes are test accuracy and validity, symptoms, and functional outcomes. The evidence on the diagnostic accuracy of POC NCS in this population has shown variable test results across reported trials. No normative values were defined. Weaknesses of the studies included lack of applicable or valid reference ranges for testing, and variable test results validating or confirming pathology. The results of the 2 studies on diagnostic performance were inconclusive, with high false-positive results in a single trial. No trials on health outcomes assessing patient symptoms or changes in functional status were identified. The evidence is insufficient to determine the effects of the technology on health outcomes.

For individuals with diabetic peripheral neuropathy who received automated POC NCSs, the evidence includes industry-sponsored observational trials and nonrandomized studies on the diagnostic accuracy. Relevant outcomes are test accuracy and validity, symptoms, and functional outcomes. Of 3 studies reporting evidence on diagnostic accuracy, two used NC-stat DPNCheck. Sensitivity testing has suggested there could be diagnostic value in detecting diabetic peripheral neuropathy in symptomatic patients; the evidence to detect patients who are suspected of disease but who have mild symptoms was inconsistent. No reference ranges were validated, and normative values were not defined in 2 of the 3 studies. No validation testing by trained medical assistants vs trained specialist was reported in the studies. No trials on health

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outcomes assessing patient symptoms or changes in functional status were identified. The evidence is insufficient to determine the effects of the technology on health outcomes.

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510 (k) is a premarketing submission made to FDA to demonstrate that the device to be marketed is as safe and effective, that is, substantially equivalent (SE), to a legally marketed device that is not subject to premarket approval (PMA). Applicants must compare their 510(k) device to one or more similar devices currently on the U.S. market and make and support their substantial equivalency claims.

NEUROPATHY refers to any disease of the nerves.

PERIPHERAL refers to something that occurs away from the center.

TRANSCUTANEOUS refers to a procedure that is performed through the skin.

VI. BENEFIT VARIATIONS

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The existence of this medical policy does not mean that this service is a covered benefit under the member's health benefit plan. Benefit determinations should be based in all cases on the applicable health benefit plan language. Medical policies do not constitute a description of benefits. A member's health benefit plan governs which services are covered, which are excluded, which are subject to benefit limits, and which require preauthorization. There are different benefit plan designs in each product administered by Capital Blue Cross. Members and providers should consult the member's health benefit plan for information or contact Capital Blue Cross for benefit information.

VII. DISCLAIMER

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Capital Blue Cross' medical policies are developed to assist in administering a member's benefits, do not constitute medical advice and are subject to change. Treating providers are solely responsible for medical advice and treatment of members. Members should discuss any medical policy related to their coverage or condition with their provider and consult their benefit information to determine if the service is covered. If there is a discrepancy between this medical policy and a member's benefit information, the benefit information will govern. If a provider or a member has a question concerning the application of this medical policy to a specific member's plan of benefits, please contact Capital Blue Cross' Provider Services or Member Services. Capital Blue Cross considers the information contained in this medical policy to be proprietary and it may only be disseminated as permitted by law.

VIII. CODING INFORMATION

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Note: This list of codes may not be all-inclusive, and codes are subject to change at any time. The identification of a code in this section does not denote coverage as coverage is determined by the terms of member benefit information. In addition, not all covered services are eligible for separate reimbursement.

Investigational; therefore, not covered:

Procedure codes								
95905	95999	G0255						

Covered when medically necessary:

Procedure Codes								
92265	95860	95861	95863	95864	95865	95866	95867	95868
95869	95870	95872	95874	95885	95886	95887	95907	95908
95909	95910	95911	95912	95913	95937			

ICD-10-CM Diagnosis Codes	Description
A14.139A	Anterior cord syndrome at unspecified level of cervical spinal cord, initial encounter
A52.15	Late syphilitic neuropathy
E08.41	Diabetes mellitus due to underlying condition with diabetic mononeuropathy
E08.42	Diabetes mellitus due to underlying condition with diabetic polyneuropathy
E08.43	Diabetes mellitus due to underlying condition with diabetic autonomic (poly)neuropathy
E08.44	Diabetes mellitus due to underlying condition with diabetic amyotrophy
E08.49	Diabetes mellitus due to underlying condition with other diabetic neurological complication
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy
E09.41	Drug or chemical induced diabetes mellitus with neurological complications with diabetic mononeuropathy
E09.42	Drug or chemical induced diabetes mellitus with neurological complications with diabetic polyneuropathy
E09.43	Drug or chemical induced diabetes mellitus with neurological complications with diabetic autonomic (poly)neuropathy
E09.44	Drug or chemical induced diabetes mellitus with neurological complications with diabetic amyotrophy

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ICD-10-CM Diagnosis Codes	Description
E09.49	Drug or chemical induced diabetes mellitus with neurological complications with other diabetic neurological complication
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy
E13.44	Other specified diabetes mellitus with diabetic amyotrophy
E13.49	Other specified diabetes mellitus with other diabetic neurological complication
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy
G12.20	Motor neuron disease, unspecified
G12.21	Amyotrophic lateral sclerosis
G12.22	Progressive bulbar palsy
G12.23	Primary lateral sclerosis
G12.24	Familial motor neuron disease
G12.25	Progressive spinal muscle atrophy
G12.29	Other motor neuron disease
G12.8	Other spinal muscular atrophies and related syndromes

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ICD-10-CM Diagnosis Codes	Description
G12.9	Spinal muscular atrophy, unspecified
G13.0	Paraneoplastic neuromyopathy and neuropathy
G13.1	Other systemic atrophy primarily affecting central nervous system in neoplastic disease
G54.0	Brachial plexus disorders
G54.1	Lumbosacral plexus disorders
G54.2	Cervical root disorders, not elsewhere classified
G54.3	Thoracic root disorders, not elsewhere classified
G54.4	Lumbosacral root disorders, not elsewhere classified
G54.5	Neuralgic amyotrophy
G54.6	Phantom limb syndrome with pain
G54.7	Phantom limb syndrome without pain
G54.8	Other nerve root and plexus disorders
G54.9	Nerve root and plexus disorder, unspecified
G55	Nerve root and plexus compressions in diseases classified elsewhere
G56.00	Carpal tunnel syndrome, unspecified upper limb
G56.01	Carpal tunnel syndrome, right upper limb
G56.02	Carpal tunnel syndrome, left upper limb
G56.03	Carpal tunnel syndrome, bilateral upper limbs
G56.10	Other lesions of median nerve, unspecified upper limb
G56.11	Other lesions of median nerve, right upper limb
G56.12	Other lesions of median nerve, left upper limb
G56.13	Other lesions of median nerve, bilateral upper limbs
G56.20	Lesion of ulnar nerve, unspecified upper limb
G56.21	Lesion of ulnar nerve, right upper limb
G56.22	Lesion of ulnar nerve, left upper limb
G56.23	Lesion of ulnar nerve, bilateral upper limbs
G56.31	Lesion of radial nerve, right upper limb
G56.32	Lesion of radial nerve, left upper limb
G56.33	Lesion of radial nerve, bilateral upper limbs
G56.41	Causalgia of right upper limb
G56.42	Causalgia of left upper limb
G56.43	Causalgia of bilateral upper limbs

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ICD-10-CM Diagnosis Codes	Description
G56.81	Other specified mononeuropathies of right upper limb
G56.82	Other specified mononeuropathies of left upper limb
G56.83	Other specified mononeuropathies of bilateral upper limbs
G56.91	Unspecified mononeuropathy of right upper limb
G56.92	Unspecified mononeuropathy of left upper limb
G56.93	Unspecified mononeuropathy of bilateral upper limbs
G57.01	Lesion of sciatic nerve, right lower limb
G57.02	Lesion of sciatic nerve, left lower limb
G57.03	Lesion of sciatic nerve, bilateral lower limbs
G57.10	Meralgia paresthetica, unspecified lower limb
G57.11	Meralgia paresthetica, right lower limb
G57.12	Meralgia paresthetica, left lower limb
G57.13	Meralgia paresthetica, bilateral lower limbs
G57.20	Lesion of femoral nerve, unspecified lower limb
G57.21	Lesion of femoral nerve, right lower limb
G57.22	Lesion of femoral nerve, left lower limb
G57.23	Lesion of femoral nerve, bilateral lower limbs
G57.30	Lesion of lateral popliteal nerve, unspecified lower limb
G57.31	Lesion of lateral popliteal nerve, right lower limb
G57.32	Lesion of lateral popliteal nerve, left lower limb
G57.33	Lesion of lateral popliteal nerve, bilateral lower limbs
G57.40	Lesion of medial popliteal nerve, unspecified lower limb
G57.41	Lesion of medial popliteal nerve, right lower limb
G57.42	Lesion of medial popliteal nerve, left lower limb
G57.43	Lesion of medial popliteal nerve, bilateral lower limbs
G57.50	Tarsal tunnel syndrome, unspecified lower limb
G57.51	Tarsal tunnel syndrome, right lower limb
G57.52	Tarsal tunnel syndrome, left lower limb
G57.53	Tarsal tunnel syndrome, bilateral lower limbs
G57.60	Lesion of plantar nerve, unspecified lower limb
G57.61	Lesion of plantar nerve, right lower limb
G57.62	Lesion of plantar nerve, left lower limb

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ICD-10-CM Diagnosis Codes	Description
G57.63	Lesion of plantar nerve, bilateral lower limbs
G57.70	Causalgia of unspecified lower limb
G57.71	Causalgia of right lower limb
G57.72	Causalgia of left lower limb
G57.73	Causalgia of bilateral lower limbs
G57.80	Other specified mononeuropathies of unspecified lower limb
G57.81	Other specified mononeuropathies of right lower limb
G57.82	Other specified mononeuropathies of left lower limb
G57.83	Other specified mononeuropathies of bilateral lower limbs
G57.90	Unspecified mononeuropathy of unspecified lower limb
G57.91	Unspecified mononeuropathy of right lower limb
G57.92	Unspecified mononeuropathy of left lower limb
G57.93	Unspecified mononeuropathy of bilateral lower limbs
G58.0	Intercostal neuropathy
G58.7	Mononeuritis multiplex
G58.9	Mononeuropathy, unspecified
G59	Mononeuropathy in diseases classified elsewhere
G60.0	Hereditary motor and sensory neuropathy
G60.1	Refsum's disease
G60.2	Neuropathy in association with hereditary ataxia
G60.3	Idiopathic progressive neuropathy
G60.8	Other hereditary and idiopathic neuropathies
G60.9	Hereditary and idiopathic neuropathy, unspecified
G61.0	Guillain-Barre syndrome
G61.1	Serum neuropathy
G61.81	Chronic inflammatory demyelinating polyneuritis
G61.82	Multifocal motor neuropathy
G61.89	Other inflammatory polyneuropathies
G61.9	Inflammatory polyneuropathy, unspecified
G62.0	Drug-induced polyneuropathy
G62.1	Alcoholic polyneuropathy
G62.2	Polyneuropathy due to other toxic agents

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ICD-10-CM Diagnosis Codes	Description
G62.81	Critical illness polyneuropathy
G62.82	Radiation-induced polyneuropathy
G62.89	Other specified polyneuropathies
G62.9	Polyneuropathy, unspecified
G63	Polyneuropathy in diseases classified elsewhere
G64	Other disorders of peripheral nervous system
G70.00	Myasthenia gravis without (acute) exacerbation
G70.01	Myasthenia gravis with (acute) exacerbation
G70.1	Toxic myoneural disorders
G70.2	Congenital and developmental myasthenia
G70.80	Lambert-Eaton syndrome, unspecified
G70.81	Lambert-Eaton syndrome in disease classified elsewhere
G70.89	Other specified myoneural disorders
G70.9	Myoneural disorder, unspecified
G71.00	Muscular dystrophy, unspecified
G71.01	Duchenne or Becker muscular dystrophy
G71.02	Facioscapulohumeral muscular dystrophy
G71.09	Other specified muscular dystrophies
G71.11	Myotonic muscular dystrophy
G71.12	Myotonia congenita
G71.13	Myotonic chondrodystrophy
G71.14	Drug induced myotonia
G71.19	Other specified myotonic disorders
G71.2	Congenital myopathies
G71.20	Congenital myopathies, unspecified
G71.21	Nemaline Myopathy
G71.22	Centronuclear myopathy
G71.220	X-Linked myotubular myopathy
G71.228	Other centronuclear myopathy
G71.29	Other congenital myopathy
G71.3	Mitochondrial myopathy, not elsewhere classified
G71.8	Other primary disorders of muscles

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ICD-10-CM Diagnosis Codes	Description
G71.9	Primary disorder of muscle, unspecified
G72.0	Drug-induced myopathy
G72.1	Alcoholic myopathy
G72.2	Myopathy due to other toxic agents
G72.3	Periodic paralysis
G72.41	Inclusion body myositis [IBM]
G72.49	Other inflammatory and immune myopathies, not elsewhere classified
G72.81	Critical illness myopathy
G72.89	Other specified myopathies
G72.9	Myopathy, unspecified
G73.1	Lambert-Eaton syndrome in neoplastic disease
G73.3	Myasthenic syndromes in other diseases classified elsewhere
G73.7	Myopathy in diseases classified elsewhere
G90.01	Carotid sinus syncope
G90.09	Other idiopathic peripheral autonomic neuropathy
G90.2	Horner's syndrome
G90.4	Autonomic dysreflexia
G90.511	Complex regional pain syndrome I of right upper limb
G90.512	Complex regional pain syndrome I of left upper limb
G90.513	Complex regional pain syndrome I of upper limb, bilateral
G90.521	Complex regional pain syndrome I of right lower limb
G90.522	Complex regional pain syndrome I of left lower limb
G90.523	Complex regional pain syndrome I of lower limb, bilateral
G90.59	Complex regional pain syndrome I of other specified site
G90.8	Other disorders of autonomic nervous system
G90.9	Disorder of the autonomic nervous system, unspecified
G99.0	Autonomic neuropathy in diseases classified elsewhere
M05.411	Rheumatoid myopathy with rheumatoid arthritis of right shoulder
M05.412	Rheumatoid myopathy with rheumatoid arthritis of left shoulder
M05.421	Rheumatoid myopathy with rheumatoid arthritis of right elbow
M05.422	Rheumatoid myopathy with rheumatoid arthritis of left elbow
M05.431	Rheumatoid myopathy with rheumatoid arthritis of right wrist

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ICD-10-CM Diagnosis Codes	Description
M05.432	Rheumatoid myopathy with rheumatoid arthritis of left wrist
M05.441	Rheumatoid myopathy with rheumatoid arthritis of right hand
M05.442	Rheumatoid myopathy with rheumatoid arthritis of left hand
M05.451	Rheumatoid myopathy with rheumatoid arthritis of right hip
M05.452	Rheumatoid myopathy with rheumatoid arthritis of left hip
M05.461	Rheumatoid myopathy with rheumatoid arthritis of right knee
M05.462	Rheumatoid myopathy with rheumatoid arthritis of left knee
M05.471	Rheumatoid myopathy with rheumatoid arthritis of right ankle and foot
M05.472	Rheumatoid myopathy with rheumatoid arthritis of left ankle and foot
M05.49	Rheumatoid myopathy with rheumatoid arthritis of multiple sites
M05.511	Rheumatoid polyneuropathy with rheumatoid arthritis of right shoulder
M05.512	Rheumatoid polyneuropathy with rheumatoid arthritis of left shoulder
M05.521	Rheumatoid polyneuropathy with rheumatoid arthritis of right elbow
M05.522	Rheumatoid polyneuropathy with rheumatoid arthritis of left elbow
M05.531	Rheumatoid polyneuropathy with rheumatoid arthritis of right wrist
M05.532	Rheumatoid polyneuropathy with rheumatoid arthritis of left wrist
M05.541	Rheumatoid polyneuropathy with rheumatoid arthritis of right hand
M05.542	Rheumatoid polyneuropathy with rheumatoid arthritis of left hand
M05.551	Rheumatoid polyneuropathy with rheumatoid arthritis of right hip
M05.552	Rheumatoid polyneuropathy with rheumatoid arthritis of left hip
M05.561	Rheumatoid polyneuropathy with rheumatoid arthritis of right knee
M05.562	Rheumatoid polyneuropathy with rheumatoid arthritis of left knee
M05.571	Rheumatoid polyneuropathy with rheumatoid arthritis of right ankle and foot
M05.572	Rheumatoid polyneuropathy with rheumatoid arthritis of left ankle and foot
M05.59	Rheumatoid polyneuropathy with rheumatoid arthritis of multiple sites
M33.00	Juvenile dermatomyositis, organ involvement unspecified
M33.01	Juvenile dermatomyositis with respiratory involvement
M33.02	Juvenile dermatomyositis with myopathy
M33.03	Juvenile dermatomyositis without myopathy
M33.09	Juvenile dermatomyositis with other organ involvement
M33.10	Other dermatomyositis, organ involvement unspecified
M33.11	Other dermatomyositis with respiratory involvement

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ICD-10-CM Diagnosis Codes	Description
M33.12	Other dermatomyositis with myopathy
M33.13	Other dermatomyositis without myopathy
M33.19	Other dermatomyositis with other organ involvement
M33.20	Polymyositis, organ involvement unspecified
M33.21	Polymyositis with respiratory involvement
M33.22	Polymyositis with myopathy
M33.29	Polymyositis with other organ involvement
M33.90	Dermatopolymyositis, unspecified, organ involvement unspecified
M33.91	Dermatopolymyositis, unspecified with respiratory involvement
M33.92	Dermatopolymyositis, unspecified with myopathy
M33.93	Dermatopolymyositis, unspecified without myopathy
M33.99	Dermatopolymyositis, unspecified with other organ involvement
M34.82	Systemic sclerosis with myopathy
M34.83	Systemic sclerosis with polyneuropathy
M35.03	Sicca syndrome with myopathy
M36.0	Dermato(poly)myositis in neoplastic disease
M51.14	Intervertebral disc disorders with radiculopathy, thoracic region
M51.15	Intervertebral disc disorders with radiculopathy, thoracolumbar region
M51.16	Intervertebral disc disorders with radiculopathy, lumbar region
M51.17	Intervertebral disc disorders with radiculopathy, lumbosacral region
M54.10	Radiculopathy, site unspecified
M54.11	Radiculopathy, occipito-atlanto-axial region
M54.12	Radiculopathy, cervical region
M54.13	Radiculopathy, cervicothoracic region
M54.14	Radiculopathy, thoracic region
M54.15	Radiculopathy, thoracolumbar region
M54.16	Radiculopathy, lumbar region
M54.17	Radiculopathy, lumbosacral region
M54.18	Radiculopathy, sacral and sacrococcygeal region
S04.10XA	Injury of oculomotor nerve, unspecified side, initial encounter
S04.11XA	Injury of oculomotor nerve, right side, initial encounter
S04.12XA	Injury of oculomotor nerve, left side, initial encounter

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ICD-10-CM Diagnosis Codes	Description
S04.21XA	Injury of trochlear nerve, right side, initial encounter
S04.22XA	Injury of trochlear nerve, left side, initial encounter
S04.31XA	Injury of trigeminal nerve, right side, initial encounter
S04.32XA	Injury of trigeminal nerve, left side, initial encounter
S04.41XA	Injury of abducent nerve, right side, initial encounter
S04.42XA	Injury of abducent nerve, left side, initial encounter
S04.51XA	Injury of facial nerve, right side, initial encounter
S04.52XA	Injury of facial nerve, left side, initial encounter
S04.61XA	Injury of acoustic nerve, right side, initial encounter
S04.62XA	Injury of acoustic nerve, left side, initial encounter
S04.71XA	Injury of accessory nerve, right side, initial encounter
S04.72XA	Injury of accessory nerve, left side, initial encounter
S04.811A	Injury of olfactory [1st] nerve, right side, initial encounter
S04.812A	Injury of olfactory [1st] nerve, left side, initial encounter
S04.891A	Injury of other cranial nerves, right side, initial encounter
S04.892A	Injury of other cranial nerves, left side, initial encounter
S04.9XXA	Injury of unspecified cranial nerve, initial encounter
S12.000A	Unspecified displaced fracture of first cervical vertebra, initial encounter for closed fracture
S12.000B	Unspecified displaced fracture of first cervical vertebra, initial encounter for open fracture
S12.001A	Unspecified nondisplaced fracture of first cervical vertebra, initial encounter for closed fracture
S12.001B	Unspecified nondisplaced fracture of first cervical vertebra, initial encounter for open fracture
S12.100A	Unspecified displaced fracture of second cervical vertebra, initial encounter for closed fracture
S12.100B	Unspecified displaced fracture of second cervical vertebra, initial encounter for open fracture
S12.101A	Unspecified nondisplaced fracture of second cervical vertebra, initial encounter for closed fracture
S12.101B	Unspecified nondisplaced fracture of second cervical vertebra, initial encounter for open fracture
S12.200A	Unspecified displaced fracture of third cervical vertebra, initial encounter for closed fracture

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ICD-10-CM Diagnosis Codes	Description
S12.200B	Unspecified displaced fracture of third cervical vertebra, initial encounter for open fracture
S12.201A	Unspecified nondisplaced fracture of third cervical vertebra, initial encounter for closed fracture
S12.201B	Unspecified nondisplaced fracture of third cervical vertebra, initial encounter for open fracture
S12.300A	Unspecified displaced fracture of fourth cervical vertebra, initial encounter for closed fracture
S12.300B	Unspecified displaced fracture of fourth cervical vertebra, initial encounter for open fracture
S12.301A	Unspecified nondisplaced fracture of fourth cervical vertebra, initial encounter for closed fracture
S12.301B	Unspecified nondisplaced fracture of fourth cervical vertebra, initial encounter for open fracture
S12.400A	Unspecified displaced fracture of fifth cervical vertebra, initial encounter for closed fracture
S12.400B	Unspecified displaced fracture of fifth cervical vertebra, initial encounter for open fracture
S12.401A	Unspecified nondisplaced fracture of fifth cervical vertebra, initial encounter for closed fracture
S12.401B	Unspecified nondisplaced fracture of fifth cervical vertebra, initial encounter for open fracture
S12.500A	Unspecified displaced fracture of sixth cervical vertebra, initial encounter for closed fracture
S12.500B	Unspecified displaced fracture of sixth cervical vertebra, initial encounter for open fracture
S12.501A	Unspecified nondisplaced fracture of sixth cervical vertebra, initial encounter for closed fracture
S12.501B	Unspecified nondisplaced fracture of sixth cervical vertebra, initial encounter for open fracture
S12.600A	Unspecified displaced fracture of seventh cervical vertebra, initial encounter for closed fracture
S12.600B	Unspecified displaced fracture of seventh cervical vertebra, initial encounter for open fracture
S12.601A	Unspecified nondisplaced fracture of seventh cervical vertebra, initial encounter for closed fracture
S12.601B	Unspecified nondisplaced fracture of seventh cervical vertebra, initial encounter for open fracture
S12.9XXA	Fracture of neck, unspecified, initial encounter

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ICD-10-CM Diagnosis Codes	Description
S14.0XXA	Concussion and edema of cervical spinal cord, initial encounter
S14.101A	Unspecified injury at C1 level of cervical spinal cord, initial encounter
S14.102A	Unspecified injury at C2 level of cervical spinal cord, initial encounter
S14.103A	Unspecified injury at C3 level of cervical spinal cord, initial encounter
S14.104A	Unspecified injury at C4 level of cervical spinal cord, initial encounter
S14.105A	Unspecified injury at C5 level of cervical spinal cord, initial encounter
S14.106A	Unspecified injury at C6 level of cervical spinal cord, initial encounter
S14.107A	Unspecified injury at C7 level of cervical spinal cord, initial encounter
S14.108A	Unspecified injury at C8 level of cervical spinal cord, initial encounter
S14.111A	Complete lesion at C1 level of cervical spinal cord, initial encounter
S14.112A	Complete lesion at C2 level of cervical spinal cord, initial encounter
S14.113A	Complete lesion at C3 level of cervical spinal cord, initial encounter
S14.114A	Complete lesion at C4 level of cervical spinal cord, initial encounter
S14.115A	Complete lesion at C5 level of cervical spinal cord, initial encounter
S14.116A	Complete lesion at C6 level of cervical spinal cord, initial encounter
S14.117A	Complete lesion at C7 level of cervical spinal cord, initial encounter
S14.118A	Complete lesion at C8 level of cervical spinal cord, initial encounter
S14.121A	Central cord syndrome at C1 level of cervical spinal cord, initial encounter
S14.122A	Central cord syndrome at C2 level of cervical spinal cord, initial encounter
S14.123A	Central cord syndrome at C3 level of cervical spinal cord, initial encounter
S14.124A	Central cord syndrome at C4 level of cervical spinal cord, initial encounter
S14.125A	Central cord syndrome at C5 level of cervical spinal cord, initial encounter
S14.126A	Central cord syndrome at C6 level of cervical spinal cord, initial encounter
S14.127A	Central cord syndrome at C7 level of cervical spinal cord, initial encounter
S14.128A	Central cord syndrome at C8 level of cervical spinal cord, initial encounter
S14.129A	Central cord syndrome at unspecified level of cervical spinal cord, initial encounter
S14.131A	Anterior cord syndrome at C1 level of cervical spinal cord, initial encounter
S14.132A	Anterior cord syndrome at C2 level of cervical spinal cord, initial encounter
S14.133A	Anterior cord syndrome at C3 level of cervical spinal cord, initial encounter
S14.134A	Anterior cord syndrome at C4 level of cervical spinal cord, initial encounter
S14.135A	Anterior cord syndrome at C5 level of cervical spinal cord, initial encounter
S14.136A	Anterior cord syndrome at C6 level of cervical spinal cord, initial encounter

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ICD-10-CM Diagnosis Codes	Description
S14.137A	Anterior cord syndrome at C7 level of cervical spinal cord, initial encounter
S14.138A	Anterior cord syndrome at C8 level of cervical spinal cord, initial encounter
S14.141A	Brown-Sequard syndrome at C1 level of cervical spinal cord, initial encounter
S14.142A	Brown-Sequard syndrome at C2 level of cervical spinal cord, initial encounter
S14.143A	Brown-Sequard syndrome at C3 level of cervical spinal cord, initial encounter
S14.144A	Brown-Sequard syndrome at C4 level of cervical spinal cord, initial encounter
S14.145A	Brown-Sequard syndrome at C5 level of cervical spinal cord, initial encounter
S14.146A	Brown-Sequard syndrome at C6 level of cervical spinal cord, initial encounter
S14.147A	Brown-Sequard syndrome at C7 level of cervical spinal cord, initial encounter
S14.148A	Brown-Sequard syndrome at C8 level of cervical spinal cord, initial encounter
S14.149A	Brown-Sequard syndrome at unspecified level of cervical spinal cord, initial encounter
S14.151A	Other incomplete lesion at C1 level of cervical spinal cord, initial encounter
S14.152A	Other incomplete lesion at C2 level of cervical spinal cord, initial encounter
S14.153A	Other incomplete lesion at C3 level of cervical spinal cord, initial encounter
S14.154A	Other incomplete lesion at C4 level of cervical spinal cord, initial encounter
S14.155A	Other incomplete lesion at C5 level of cervical spinal cord, initial encounter
S14.156A	Other incomplete lesion at C6 level of cervical spinal cord, initial encounter
S14.157A	Other incomplete lesion at C7 level of cervical spinal cord, initial encounter
S14.158A	Other incomplete lesion at C8 level of cervical spinal cord, initial encounter
S14.159A	Other incomplete lesion at unspecified level of cervical spinal cord, initial encounter
S14.2XXA	Injury of nerve root of cervical spine, initial encounter
S14.4XXA	Injury of peripheral nerves of neck, initial encounter
S14.5XXA	Injury of cervical sympathetic nerves, initial encounter
S14.8XXA	Injury of other specified nerves of neck, initial encounter
S14.9XXA	Injury of unspecified nerves of neck, initial encounter
S142.3XXA	Injury of brachial plexus, initial encounter

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ICD-10-CM Diagnosis Codes	Description
S22.019A	Unspecified fracture of first thoracic vertebra, initial encounter for closed fracture
S22.019B	Unspecified fracture of first thoracic vertebra, initial encounter for open fracture
S22.029A	Unspecified fracture of second thoracic vertebra, initial encounter for closed fracture
S22.029B	Unspecified fracture of second thoracic vertebra, initial encounter for open fracture
S22.039A	Unspecified fracture of third thoracic vertebra, initial encounter for closed fracture
S22.039B	Unspecified fracture of third thoracic vertebra, initial encounter for open fracture
S22.049A	Unspecified fracture of fourth thoracic vertebra, initial encounter for closed fracture
S22.049B	Unspecified fracture of fourth thoracic vertebra, initial encounter for open fracture
S22.059A	Unspecified fracture of T5-T6 vertebra, initial encounter for closed fracture
S22.059B	Unspecified fracture of T5-T6 vertebra, initial encounter for open fracture
S22.069A	Unspecified fracture of T7-T8 vertebra, initial encounter for closed fracture
S22.069B	Unspecified fracture of T7-T8 vertebra, initial encounter for open fracture
S22.079A	Unspecified fracture of T9-T10 vertebra, initial encounter for closed fracture
S22.079B	Unspecified fracture of T9-T10 vertebra, initial encounter for open fracture
S22.089A	Unspecified fracture of T11-T12 vertebra, initial encounter for closed fracture
S22.089B	Unspecified fracture of T11-T12 vertebra, initial encounter for open fracture
S24.0XXA	Concussion and edema of thoracic spinal cord, initial encounter
S24.101A	Unspecified injury at T1 level of thoracic spinal cord, initial encounter
S24.102A	Unspecified injury at T2-T6 level of thoracic spinal cord, initial encounter
S24.103A	Unspecified injury at T7-T10 level of thoracic spinal cord, initial encounter
S24.104A	Unspecified injury at T11-T12 level of thoracic spinal cord, initial encounter
S24.109A	Unspecified injury at unspecified level of thoracic spinal cord, initial encounter
S24.111A	Complete lesion at T1 level of thoracic spinal cord, initial encounter
S24.112A	Complete lesion at T2-T6 level of thoracic spinal cord, initial encounter
S24.113A	Complete lesion at T7-T10 level of thoracic spinal cord, initial encounter
S24.114A	Complete lesion at T11-T12 level of thoracic spinal cord, initial encounter

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ICD-10-CM Diagnosis Codes	Description
S24.119A	Complete lesion at unspecified level of thoracic spinal cord, initial encounter
S24.131A	Anterior cord syndrome at T1 level of thoracic spinal cord, initial encounter
S24.132A	Anterior cord syndrome at T2-T6 level of thoracic spinal cord, initial encounter
S24.133A	Anterior cord syndrome at T7-T10 level of thoracic spinal cord, initial encounter
S24.134A	Anterior cord syndrome at T11-T12 level of thoracic spinal cord, initial encounter
S24.139A	Anterior cord syndrome at unspecified level of thoracic spinal cord, initial encounter
S24.141A	Brown-Sequard syndrome at T1 level of thoracic spinal cord, initial encounter
S24.142A	Brown-Sequard syndrome at T2-T6 level of thoracic spinal cord, initial encounter
S24.143A	Brown-Sequard syndrome at T7-T10 level of thoracic spinal cord, initial encounter
S24.144A	Brown-Sequard syndrome at T11-T12 level of thoracic spinal cord, initial encounter
S24.149A	Brown-Sequard syndrome at unspecified level of thoracic spinal cord, initial encounter
S24.151A	Other incomplete lesion at T1 level of thoracic spinal cord, initial encounter
S24.152A	Other incomplete lesion at T2-T6 level of thoracic spinal cord, initial encounter
S24.153A	Other incomplete lesion at T7-T10 level of thoracic spinal cord, initial encounter
S24.154A	Other incomplete lesion at T11-T12 level of thoracic spinal cord, initial encounter
S24.159A	Other incomplete lesion at unspecified level of thoracic spinal cord, initial encounter
S24.2XXA	Injury of nerve root of thoracic spine, initial encounter
S24.3XXA	Injury of peripheral nerves of thorax, initial encounter
S24.4XXA	Injury of thoracic sympathetic nervous system, initial encounter
S24.8XXA	Injury of other specified nerves of thorax, initial encounter
S24.9XXA	Injury of unspecified nerve of thorax, initial encounter
S32.019A	Unspecified fracture of first lumbar vertebra, initial encounter for closed fracture
S32.019B	Unspecified fracture of first lumbar vertebra, initial encounter for open fracture

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ICD-10-CM Diagnosis Codes	Description
S32.029A	Unspecified fracture of second lumbar vertebra, initial encounter for closed fracture
S32.029B	Unspecified fracture of second lumbar vertebra, initial encounter for open fracture
S32.039A	Unspecified fracture of third lumbar vertebra, initial encounter for closed fracture
S32.039B	Unspecified fracture of third lumbar vertebra, initial encounter for open fracture
S32.049A	Unspecified fracture of fourth lumbar vertebra, initial encounter for closed fracture
S32.049B	Unspecified fracture of fourth lumbar vertebra, initial encounter for open fracture
S32.059A	Unspecified fracture of fifth lumbar vertebra, initial encounter for closed fracture
S32.059B	Unspecified fracture of fifth lumbar vertebra, initial encounter for open fracture
S32.2XXA	Fracture of coccyx, initial encounter for closed fracture
S32.2XXB	Fracture of coccyx, initial encounter for open fracture
S34.01XA	Concussion and edema of lumbar spinal cord, initial encounter
S34.02XA	Concussion and edema of sacral spinal cord, initial encounter
S34.101A	Unspecified injury to L1 level of lumbar spinal cord, initial encounter
S34.102A	Unspecified injury to L2 level of lumbar spinal cord, initial encounter
S34.103A	Unspecified injury to L3 level of lumbar spinal cord, initial encounter
S34.104A	Unspecified injury to L4 level of lumbar spinal cord, initial encounter
S34.105A	Unspecified injury to L5 level of lumbar spinal cord, initial encounter
S34.111A	Complete lesion of L1 level of lumbar spinal cord, initial encounter
S34.112A	Complete lesion of L2 level of lumbar spinal cord, initial encounter
S34.113A	Complete lesion of L3 level of lumbar spinal cord, initial encounter
S34.114A	Complete lesion of L4 level of lumbar spinal cord, initial encounter
S34.115A	Complete lesion of L5 level of lumbar spinal cord, initial encounter
S34.121A	Incomplete lesion of L1 level of lumbar spinal cord, initial encounter
S34.122A	Incomplete lesion of L2 level of lumbar spinal cord, initial encounter
S34.123A	Incomplete lesion of L3 level of lumbar spinal cord, initial encounter
S34.124A	Incomplete lesion of L4 level of lumbar spinal cord, initial encounter
S34.125A	Incomplete lesion of L5 level of lumbar spinal cord, initial encounter
S34.131A	Complete lesion of sacral spinal cord, initial encounter

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ICD-10-CM Diagnosis Codes	Description
S34.132A	Incomplete lesion of sacral spinal cord, initial encounter
S34.139A	Unspecified injury to sacral spinal cord, initial encounter
S34.21XA	Injury of nerve root of lumbar spine, initial encounter
S34.22XA	Injury of nerve root of sacral spine, initial encounter
S34.3XXA	Injury of cauda equina, initial encounter
S34.4XXA	Injury of lumbosacral plexus, initial encounter
S34.5XXA	Injury of lumbar, sacral and pelvic sympathetic nerves, initial encounter
S34.6XXA	Injury of peripheral nerve(s) at abdomen, lower back and pelvis level, initial encounter
S34.8XXA	Injury of other nerves at abdomen, lower back and pelvis level, initial encounter
S34.9XXA	Injury of unspecified nerves at abdomen, lower back and pelvis level, initial encounter
S44.00XA	Injury of ulnar nerve at upper arm level, unspecified arm, initial encounter
S44.01XA	Injury of ulnar nerve at upper arm level, right arm, initial encounter
S44.02XA	Injury of ulnar nerve at upper arm level, left arm, initial encounter
S44.10XA	Injury of median nerve at upper arm level, unspecified arm, initial encounter
S44.11XA	Injury of median nerve at upper arm level, right arm, initial encounter
S44.12XA	Injury of median nerve at upper arm level, left arm, initial encounter
S44.20XA	Injury of radial nerve at upper arm level, unspecified arm, initial encounter
S44.21XA	Injury of radial nerve at upper arm level, right arm, initial encounter
S44.22XA	Injury of radial nerve at upper arm level, left arm, initial encounter
S44.30XA	Injury of axillary nerve, unspecified arm, initial encounter
S44.31XA	Injury of axillary nerve, right arm, initial encounter
S44.32XA	Injury of axillary nerve, left arm, initial encounter
S44.40XA	Injury of musculocutaneous nerve, unspecified arm, initial encounter
S44.41XA	Injury of musculocutaneous nerve, right arm, initial encounter
S44.42XA	Injury of musculocutaneous nerve, left arm, initial encounter
S44.50XA	Injury of cutaneous sensory nerve at shoulder and upper arm level, unspecified arm, initial encounter
S44.51XA	Injury of cutaneous sensory nerve at shoulder and upper arm level, right arm, initial encounter
S44.52XA	Injury of cutaneous sensory nerve at shoulder and upper arm level, left arm, initial encounter

POLICY TITLE	ELECTROMYOGRAPHY and NERVE CONDUCTION STUDIES
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ICD-10-CM Diagnosis Codes	Description
S44.8X1A	Injury of other nerves at shoulder and upper arm level, right arm, initial encounter
S44.8X2A	Injury of other nerves at shoulder and upper arm level, left arm, initial encounter
S44.8X9A	Injury of other nerves at shoulder and upper arm level, unspecified arm, initial encounter
S54.00XA	Injury of ulnar nerve at forearm level, unspecified arm, initial encounter
S54.01XA	Injury of ulnar nerve at forearm level, right arm, initial encounter
S54.02XA	Injury of ulnar nerve at forearm level, left arm, initial encounter
S54.10XA	Injury of median nerve at forearm level, unspecified arm, initial encounter
S54.11XA	Injury of median nerve at forearm level, right arm, initial encounter
S54.12XA	Injury of median nerve at forearm level, left arm, initial encounter
S54.20XA	Injury of radial nerve at forearm level, unspecified arm, initial encounter
S54.21XA	Injury of radial nerve at forearm level, right arm, initial encounter
S54.22XA	Injury of radial nerve at forearm level, left arm, initial encounter
S54.31XA	Injury of cutaneous sensory nerve at forearm level, right arm, initial encounter
S54.32XA	Injury of cutaneous sensory nerve at forearm level, left arm, initial encounter
S54.8X1A	Injury of other nerves at forearm level, right arm, initial encounter
S54.8X2A	Injury of other nerves at forearm level, left arm, initial encounter
S54.8X9A	Injury of other nerves at forearm level, unspecified arm, initial encounter
S54.90XA	Injury of unspecified nerve at forearm level, unspecified arm, initial encounter
S54.91XA	Injury of unspecified nerve at forearm level, right arm, initial encounter
S54.92XA	Injury of unspecified nerve at forearm level, left arm, initial encounter
S64.00XA	Injury of ulnar nerve at wrist and hand level of unspecified arm, initial encounter
S64.01XA	Injury of ulnar nerve at wrist and hand level of right arm, initial encounter
S64.02XA	Injury of ulnar nerve at wrist and hand level of left arm, initial encounter
S64.10XA	Injury of median nerve at wrist and hand level of unspecified arm, initial encounter
S64.11XA	Injury of median nerve at wrist and hand level of right arm, initial encounter
S64.12XA	Injury of median nerve at wrist and hand level of left arm, initial encounter
S64.20XA	Injury of radial nerve at wrist and hand level of unspecified arm, initial encounter
S64.21XA	Injury of radial nerve at wrist and hand level of right arm, initial encounter

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ICD-10-CM Diagnosis Codes	Description
S64.22XA	Injury of radial nerve at wrist and hand level of left arm, initial encounter
S64.30XA	Injury of digital nerve of unspecified thumb, initial encounter
S64.31XA	Injury of digital nerve of right thumb, initial encounter
S64.32XA	Injury of digital nerve of left thumb, initial encounter
S64.40XA	Injury of digital nerve of unspecified finger, initial encounter
S64.490A	Injury of digital nerve of right index finger, initial encounter
S64.491A	Injury of digital nerve of left index finger, initial encounter
S64.492A	Injury of digital nerve of right middle finger, initial encounter
S64.493A	Injury of digital nerve of left middle finger, initial encounter
S64.494A	Injury of digital nerve of right ring finger, initial encounter
S64.495A	Injury of digital nerve of left ring finger, initial encounter
S64.496A	Injury of digital nerve of right little finger, initial encounter
S64.497A	Injury of digital nerve of left little finger, initial encounter
S64.498A	Injury of digital nerve of other finger, initial encounter
S64.8X1A	Injury of other nerves at wrist and hand level of right arm, initial encounter
S64.8X2A	Injury of other nerves at wrist and hand level of left arm, initial encounter
S64.91XA	Injury of unspecified nerve at wrist and hand level of right arm, initial encounter
S64.92XA	Injury of unspecified nerve at wrist and hand level of left arm, initial encounter
S74.00XA	Injury of sciatic nerve at hip and thigh level, unspecified leg, initial encounter
S74.01XA	Injury of sciatic nerve at hip and thigh level, right leg, initial encounter
S74.02XA	Injury of sciatic nerve at hip and thigh level, left leg, initial encounter
S74.10XA	Injury of femoral nerve at hip and thigh level, unspecified leg, initial encounter
S74.11XA	Injury of femoral nerve at hip and thigh level, right leg, initial encounter
S74.12XA	Injury of femoral nerve at hip and thigh level, left leg, initial encounter
S74.20XA	Injury of cutaneous sensory nerve at hip and thigh level, unspecified leg, initial encounter
S74.21XA	Injury of cutaneous sensory nerve at hip and thigh level, right leg, initial encounter
S74.22XA	Injury of cutaneous sensory nerve at hip and thigh level, left leg, initial encounter
S74.8X1A	Injury of other nerves at hip and thigh level, right leg, initial encounter
S74.8X2A	Injury of other nerves at hip and thigh level, left leg, initial encounter

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ICD-10-CM Diagnosis Codes	Description
S74.8X9A	Injury of other nerves at hip and thigh level, unspecified leg, initial encounter
S74.91XA	Injury of unspecified nerve at hip and thigh level, right leg, initial encounter
S74.92XA	Injury of unspecified nerve at hip and thigh level, left leg, initial encounter
S84.00XA	Injury of tibial nerve at lower leg level, unspecified leg, initial encounter
S84.01XA	Injury of tibial nerve at lower leg level, right leg, initial encounter
S84.10XA	Injury of peroneal nerve at lower leg level, unspecified leg, initial encounter
S84.11XA	Injury of peroneal nerve at lower leg level, right leg, initial encounter
S84.12XA	Injury of peroneal nerve at lower leg level, left leg, initial encounter
S84.20XA	Injury of cutaneous sensory nerve at lower leg level, unspecified leg, initial encounter
S84.21XA	Injury of cutaneous sensory nerve at lower leg level, right leg, initial encounter
S84.22XA	Injury of cutaneous sensory nerve at lower leg level, left leg, initial encounter
S84.801A	Injury of other nerves at lower leg level, right leg, initial encounter
S84.802A	Injury of other nerves at lower leg level, left leg, initial encounter
S84.809A	Injury of other nerves at lower leg level, unspecified leg, initial encounter
S84.90XA	Injury of unspecified nerve at lower leg level, unspecified leg, initial encounter
S84.91XA	Injury of unspecified nerve at lower leg level, right leg, initial encounter
S84.92XA	Injury of unspecified nerve at lower leg level, left leg, initial encounter
S94.00XA	Injury of lateral plantar nerve, unspecified leg, initial encounter
S94.01XA	Injury of lateral plantar nerve, right leg, initial encounter
S94.02XA	Injury of lateral plantar nerve, left leg, initial encounter
S94.10XA	Injury of medial plantar nerve, unspecified leg, initial encounter
S94.11XA	Injury of medial plantar nerve, right leg, initial encounter
S94.12XA	Injury of medial plantar nerve, left leg, initial encounter
S94.20XA	Injury of deep peroneal nerve at ankle and foot level, unspecified leg, initial encounter
S94.21XA	Injury of deep peroneal nerve at ankle and foot level, right leg, initial encounter
S94.22XA	Injury of deep peroneal nerve at ankle and foot level, left leg, initial encounter
S94.30XA	Injury of cutaneous sensory nerve at ankle and foot level, unspecified leg, initial encounter

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ICD-10-CM Diagnosis Codes	Description
S94.31XA	Injury of cutaneous sensory nerve at ankle and foot level, right leg, initial encounter
S94.32XA	Injury of cutaneous sensory nerve at ankle and foot level, left leg, initial encounter
S94.8X1A	Injury of other nerves at ankle and foot level, right leg, initial encounter
S94.8X2A	Injury of other nerves at ankle and foot level, left leg, initial encounter
S94.90XA	Injury of unspecified nerve at ankle and foot level, unspecified leg, initial encounter
S94.91XA	Injury of unspecified nerve at ankle and foot level, right leg, initial encounter
S94.92XA	Injury of unspecified nerve at ankle and foot level, left leg, initial encounter
SS84.02XA	Injury of tibial nerve at lower leg level, left leg, initial encounter

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MP 2.063	02/20/2020 Consensus Review. Policy statement unchanged. References updated.
	09/02/2020 Administrative Update. ICD codes added, G71.20, G71.21, G71.22, G71.220, G71.228, G71.29
	01/14/2021 Consensus Review. Background updated. Coding reviewed and references updated.

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	07/19/2022 Consensus Review. No change to policy statement. References reviewed and updated. FEP language updated.
	12/08/2023 Consensus Review. No change to policy statement. Policy guidelines, background, and cross-references updated. Coding reviewed, no changes.
	08/27/2024 Minor Review. Added automated nerve conduction tests as INV with codes 95905, 95999, and G0255. Updated background, rationale, references.

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