

Appendix

Coding Algorithm Used to Identify Inclusion Criteria, Exclusion Criteria, Diagnosis, and Complications

Inclusion Code, Procedure (International Classification of Diseases, Ninth Revision, Clinical Modification [ICD-9-CM] Procedure Code)

81.11: Ankle fusion

81.56: Total ankle replacement

Inclusion Code, Diagnosis (ICD-9-CM Diagnosis Code)

715, 715.0, 715.00, 715.07, 715.09, 715.1, 715.10, 715.17, 715.2, 715.20, 715.27, 715.3, 715.30, 715.37, 715.8, 715.80, 715.87, 715.89, 715.9, 715.90, 715.97: Degenerative disease

714, 714.0: Rheumatoid arthritis

733.4, 733.40, 733.44: Aseptic necrosis

Exclusion Code, Procedure (ICD-9-CM Procedure Code)

81.59: Revision of joint replacement of lower extremity

80.07: Arthrotomy for removal of prosthesis, ankle

Exclusion Code, Diagnosis (ICD-9-CM Diagnosis Code)

170.7, 213.8: Neoplasm of short bones of lower limb

170.8, 213.7: Neoplasm of long bones of lower limb

171.3, 215.3: Neoplasm of connective tissue, lower limb

173.7: Neoplasm of skin of lower limb

711.0, 711.06, 711.07: Arthropathy associated with infections

730.0, 730.06, 730.07: Acute or subacute osteomyelitis

730.1, 730.16, 730.17: Chronic osteomyelitis

996.4: Mechanical complication of internal orthopedic device

996.60: Infection or inflammation due to unspecified device, implant, or graft

996.66: Infection or inflammation due to internal joint device or prosthesis

996.67: Infection or inflammation due to presence of unspecified orthopaedic device or implant

996.7: Complication of internal prosthetic device, implant, and graft

996.70: Complication due to unspecified device, implant, or graft

996.77: Complication due to joint prosthesis

996.78: Complication of unspecified orthopaedic internal device, implant, or graft

Complications (ICD-9-CM Diagnosis Code)

410, 410.0, 410.00, 410.01, 410.1, 410.10, 410.11, 410.2, 410.20, 410.21, 410.3, 410.30, 410.31, 410.4, 410.40, 410.41, 410.5, 410.50, 410.51, 510.6, 410.60, 410.61, 410.7,

410.70, 410.71, 410.8, 410.80, 410.81, 410.9, 410.90, 410.91: Acute myocardial
infarction
480, 480.0, 480.1, 480.2, 480.3, 480.8, 480.9, 481, 482, 482.0, 482.1, 482.2, 482.3,
482.30, 482.31, 482.32, 482.39, 482.4, 482.40, 482.41, 482.42, 482.49, 482.81, 482.82,
482.83, 482.84, 482.89, 482.9, 483, 483.0, 483.1, 483.8, 485, 486, 487.0, 488.01, 488.11,
507.0: Pneumonia
038, 038.0, 038.1, 038.10, 038.11, 038.12, 038.19, 038.2, 038.3, 038.4, 038.40, 038.41,
038.42, 038.43, 038.44, 038.49, 038.8, 038.9, 785.52, 785.59, 790.7, 995.91, 995.92,
998.0: Sepsis/septicemia/shock
415.1, 415.11, 415.19: Pulmonary embolism
996.4, 996.40, 996.41, 996.42, 996.44, 996.47, 996.49: Mechanical complications
998.1, 998.11, 998.12, 998.13, 719.10, 719.16, 719.17: Surgical site bleeding
998.6, 998.83, 998.3, 998.30, 998.31, 998.32, 998.33, 998.5, 998.51, 998.59, 996.67,
996.66: Periprosthetic joint infection/wound infection

Reoperation (ICD-9-CM Procedure Code)

80.07: Arthrotomy for removal of prosthesis, ankle
81.11: Ankle fusion
81.12: Triple arthrodesis
81.13: Subtalar fusion
81.14: Midtarsal fusion
81.15: Tarsometatarsal fusion
81.16: Metatarsophalangeal fusion
81.17: Other fusion of foot
81.54: Total knee replacement
81.56: Total ankle replacement
81.59: Revision of joint replacement of lower extremity, not elsewhere classified
84.10: Amputation NOS (not otherwise specified)
84.11: Amputation of toe
84.12: Amputation through foot
84.13: Disarticulation of ankle
84.14: Amputation of ankle through malleoli of tibia and fibula
84.15: Other amputation below knee
84.16: Disarticulation of knee
84.17: Amputation above knee