Maine Quality Counts Chronic Pain Collaborative
Suggested Metrics for Chronic Pain and Opioid Management

Maine Quality Counts is working with the Weitzman Institute to develop a set of measures for practices and health systems to use around chronic pain management and opioids in order to measure their quality improvement efforts. We have asked practices what they already are collecting in their electronic medical records, the PMP and reviewed what Weitzman collects on the pre- and post-project chart review. Practices would not be required to collect these measures, rather, this list would serve as a guide for organizations who are interested in building metrics into their EMRs or doing chart review on a monthly-quarterly basis. Below is a draft for comments. Please send comments to Amy Belisle (abelisle@mainequalitycounts.org).

Aim Statement: Over the next 12 months, practices will:

- Establish a process to identify patients that need chronic pain management (definition pts. on >100 meq morphine equivalents per day)
- Decrease # patients requiring >100 meq morphine equivalents per day by 10%
- Be in compliance w/ Chapter 21 regulations (includes establishing workflow for pill counts, use of prescription monitoring program, urine drug testing & patient agreements)
- Increase the presence of an Opioid Risk Tool assessment documented in the chart by 10%
- Increase the presence of pain documented in the chart by 10%
- Increase % patients w/ functional assessment documented by 20%
- Increase % patients with treatment reassessment documented by 20%

A. First identify patients from both PMP and EMR on opioids that are high risk (>100 meq) – Run list of patients on opioids

- Determine morphine equivalency - Opioid Dose Calculator
- Exclude patients with cancer or terminal illness/hospice

**Denominator:** Include # of patients with 3 orders for opioids within 90 days during the past year OR patients who have had chronic pain coded within 90 days (338.x) or patients with 2 Dx associated with chronic pain (see list on following pages) and/or on >100 meq morphine daily

**Numerators:**
1. # & % with a CSA (controlled substance agreement)
2. # & % urine tox screened in past year
3. # & % with PMP checked in past year
4. # & % with random pill count in past year
5. # & % with documented Opioid Risk Tool assessment in past year
6. # & % with functional assessments completed and score is documented

PEG Score  [http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2686775/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2686775/)

<table>
<thead>
<tr>
<th>Question</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>What number best describes your pain on average in the past week?</td>
<td>0 = No pain 10 = Worst pain</td>
</tr>
<tr>
<td>What number best describes how, during the past week, pain has interfered with your enjoyment of life?</td>
<td>0 = Does not interferes 10 = Completely interferes</td>
</tr>
<tr>
<td>What number best describes how, during the past week, pain has interfered with your general activity?</td>
<td>0 = Does not interferes 10 = Completely interferes</td>
</tr>
</tbody>
</table>
7. # with functional re-assessments completed and score documented **within 3 months (see PEG score above)**
8. # with referral to behavioral health provider either internal or external

**Denominator:** # of patients with 3 orders for opioids within 90 days during the past year OR patients who have had chronic pain coded within 90 days (338.x) or patients with 2 Dx associated with chronic pain (see list on following pages) and/or on >100 meq morphine daily

**B. PMP Measures:**

1. Practice checks PMP provider reports monthly and reviews PMP report for opioids and benzos

   **Consider Workflow:** Run provider profile monthly; look at report- were patients attributed correctly to provider? (i.e. are scripts attributed to correct provider: Physician names are similar; PA script to wrong provider, random mistakes; inappropriate prescribing)

2. Additional measures from PMP that will take more time sorting as CSV file (see directions below):

   **Numerators:**
   
   1. # of prescriptions written for opioids
   2. # prescriptions filled for opioids
   3. # prescriptions written for benzodiazepines
   4. # prescriptions filled for benzodiazepines
   5. # patients prescribed both benzodiazepines and opioids

   Below are additional metrics that may be challenging to get at the prescriber level at this time and are important for the future:
   
   6. # of prescriptions written for opioids >100 meq Morphine per day
   7. # of prescriptions written for opioids >300 meq Morphine per day
   8. # of prescriptions filled for opioids >100 meq Morphine per day
   9. # of prescriptions filled for opioids >300 meq Morphine per day
   10. # of patients prescribed >100 meq Morphine per day
   11. # of patients prescribed >300 meq Morphine per day
   12. # of patients prescribed >100 meq Morphine per day plus any benzodiazepine

   **Denominator:** # of patients with 3 orders for opioids within 90 days during the past year or used continuous opioids for 45 days (provider level data)

PMP Instructions **For running a prescriber query** (on a prescriber’s prescriptions dispensed) Here is a sample of a DEA query result aka the prescriber history query. It is the prescriber’s raw data output. A prescriber could generate a CSV file that would allow them to do multiple sorts per the different categories.
C. **Diversion Alert Measure**: [http://www.diversionalert.org/](http://www.diversionalert.org/)

**Numerator**:

1. Practice checked diversion alert at least monthly.
   - **Consider workflow**: Practice staff checked diversion alert at least monthly; flag every patient who is arrested; if active patient- alert provider; if receiving controlled substance- provider alerted and action plan put in place; practice will need to decide which diversion alert to review either statewide or by county

2. Number of times in a month the practice checks Diversion Alert drug arrest database when concerned about potential patient misuse of prescription or illegal drugs

**Denominator**: # of patients in the practice being prescribed opioids that have had an arrest for a prescription or illegal drug related crime.
Painful conditions ICD9 List from the Weitzman Institute. *ICD-10 Codes have been mapped out using an online conversion tool and using the document included below as a reference. The ICD-10 codes included should be examined by your Biller/Coder for accuracy.

**New to ICD-10:** Z79.891 Long term opiate use  
G89.0  Central pain syndrome  
G89.21  Chronic pain due to trauma  
G89.29  Other chronic pain  
G89.4  Chronic pain syndrome

### ICD-9 and 10 Codes for Automatic Consideration of Chronic Pain

<table>
<thead>
<tr>
<th>ICD9</th>
<th>ICD10</th>
<th>Description</th>
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<tbody>
<tr>
<td>338.2</td>
<td>G89.2</td>
<td>Chronic pain</td>
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<tr>
<td>338.21</td>
<td>G89.21</td>
<td>Chronic pain due to trauma</td>
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<tr>
<td>338.22</td>
<td>G89.22</td>
<td>Chronic post-thoracotomy pain</td>
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<tr>
<td>338.28</td>
<td>G89.28</td>
<td>Other chronic postoperative pain</td>
</tr>
<tr>
<td>338.29</td>
<td>G89.29</td>
<td>Other chronic pain</td>
</tr>
<tr>
<td>338.4</td>
<td>G89.4</td>
<td>Chronic pain syndrome</td>
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</table>

### ICD-9 & ICD-10* Codes for Potential Consideration of Chronic Pain (2 or more Dx)

<table>
<thead>
<tr>
<th>ICD9</th>
<th>ICD10*</th>
<th>Description</th>
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<tbody>
<tr>
<td>307.8</td>
<td>F45.41</td>
<td>PSYCHOGENIC PAIN NOS</td>
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<td>307.89</td>
<td>F45.42</td>
<td>PSYCHOGENIC PAIN NEC</td>
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<tr>
<td>338</td>
<td>G89.0</td>
<td>Central pain syndrome</td>
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<tr>
<td>719.41</td>
<td>M25.519</td>
<td>Joint pain, shoulder</td>
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<tr>
<td>719.45</td>
<td>M25.559</td>
<td>Joint pain, hip or thigh</td>
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<td>719.46</td>
<td>M25.569</td>
<td>Pain joint - lower leg, knee</td>
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<td>719.47</td>
<td>M25.579</td>
<td>Joint pain - ankle</td>
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<td>719.49</td>
<td>M25.50</td>
<td>Joint pain multiple sites</td>
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<td>720</td>
<td>M45.9</td>
<td>Anklosing spondylitis</td>
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<td>720.2</td>
<td>M46.1</td>
<td>Inflammation of sacroiliac joint NOS</td>
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<td>720.9</td>
<td>M46.9</td>
<td>INFLAM SPONDPYLOPATHY NOS</td>
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<tr>
<td>721</td>
<td>M46.92</td>
<td>Cervical arthritis</td>
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<thead>
<tr>
<th>ICD9</th>
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<tr>
<td>722.8</td>
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<td>POSTLAMINECTOMY SYND NOS</td>
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<td>Calcification of intervertebral cartilage or disc of cervical region</td>
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<td>M50.93</td>
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<tr>
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<td>721.1</td>
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<td>M47.814</td>
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<td>721.41</td>
<td>M47.14 M47.15</td>
<td>SPOND COMPR THOR SP CORD</td>
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<td>Lumbar spondylosis with myelopathy</td>
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<td>Degenerative spinal arthritis</td>
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<td>M47.899 M47.819 M47.9 M47.20</td>
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<td>M47.10</td>
<td>Spondylogenic compression of spinal cord NOS</td>
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<td>722</td>
<td>M50.20</td>
<td>CERVICAL DISC DISPLACMNT</td>
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<td>722.11</td>
<td>M51.24 M51.25</td>
<td>Displacement of thoracic</td>
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<td>DISC DISPLACEMENT NOS</td>
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<td>M51.46 M54.47</td>
<td>Schmorl's nodes of lumbar</td>
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<td>722.39</td>
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<td>722.4</td>
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<td>722.51</td>
<td>M51.34 M51.35</td>
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<td>722.52</td>
<td>M51.36 M51.37</td>
<td>intervertebral disc</td>
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<td>Degeneration of intervertebral disc</td>
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<td>722.7</td>
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<td>722.71</td>
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<td>CERV DISC DIS W MYELOPAT</td>
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<td>722.73</td>
<td>M51.06</td>
<td>Intervertebral disc disorder of lumbar region with myelopathy</td>
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Opioid Pain medication list from the Weitzman Institute with edits from Maine CPC Leadership Group November 2015 (Revised 11/17/2015)

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<thead>
<tr>
<th>Medication</th>
<th>Medication</th>
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<tbody>
<tr>
<td>Actiq®</td>
<td>Nucynta®</td>
</tr>
<tr>
<td>Avinza® (Acute settings only)</td>
<td>Onsolis®</td>
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<tr>
<td>Buprenorphine</td>
<td>Opana®</td>
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<tr>
<td>Butorphanol</td>
<td>Oramorph®</td>
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<tr>
<td>Codeine</td>
<td>Oxycodone</td>
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<td>Demerol®</td>
<td>Oxycontin®</td>
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<td>Dilaudid®</td>
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<td>Dolophine®</td>
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<td>Tramadol</td>
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<tr>
<td>Methadose®</td>
<td>Tylox®</td>
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<td>Morphine</td>
<td>Ultrace®</td>
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<td>MS Contin®</td>
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<td>Nalbuphine</td>
<td>Vicoprofen</td>
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<td>Norco®</td>
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</tbody>
</table>
CODING GUIDELINES RELATED TO CHRONIC PAIN

1. General Coding Guidelines:

   • Codes in category G89, Pain, not elsewhere classified, may be used in conjunction with
codes from other categories and chapters to provide more detail about acute or
chronic pain and neoplasm-related pain, unless otherwise indicated below. For
example, if the code describes the site of the pain, but does not fully describe whether
the pain is acute or chronic, then both codes should be assigned.

   For example, if the patient has chronic knee pain, then once code should be selected for
the knee pain, and another code should be selected to identify the pain as chronic (in this
case G89.29, other chronic pain).

   • The sequencing of category G89 codes with sites specific pain codes is dependent on
the circumstances of the encounter/admission as follows:

     o If the encounter is for pain control or pain management, assign the code from
category G89 followed by the code identifying the specific site of pain (e.g.,
encounter for pain management for acute neck pain from trauma is assigned
code G89.11, Acute pain due to trauma, followed by code M54.2, Cervicalgia, to
identify the site of pain).

     For example, patient presents for control of chronic neck pain due to trauma:
primary code should be G89.21, Chronic pain due to trauma, and secondary code
should be M54.2, Cervicalgia.

     o If the encounter is for any other reason except pain control or pain management,
and a related definitive diagnosis has not been established (confirmed) by the
provider, assign the code for the specific site of pain first, followed by the
appropriate code from category G89.

     For example, patient presents for evaluation of chronic neck pain due to trauma,
but not perform any kind of pain management: primary code should be M54.2,
Cervicalgia, and secondary code should be G89.21, Chronic pain due to trauma.

   • A code from category G89 should not be assigned if the underlying (definitive) diagnosis
is known, unless the reason for the encounter is pain control/management and not
management of the underlying condition.

   For example, if the patient has chronic pain due to traumatic injury, and the patient is
coming in today for treatment of the pain, then a code for chronic pain due to trauma
(G89.21) should be sequenced first, and then a code for the underlying condition
(traumatic injury).
- When an admission or encounter is for a **procedure aimed at treating the underlying condition** (e.g., spinal fusion, kyphoplasty), a code for the underlying condition (e.g., vertebral fracture, spinal stenosis) should be assigned as the principal diagnosis. No code from category G89 should be assigned.

  *For example, if the patient is being treated for the underlying condition (traumatic injury), and no procedures were performed in order to control the pain (such as implantation of a neurostimulator), then no code should be assigned for the chronic pain.*

- When a patient is **admitted for the insertion of a neurostimulator for pain control**, assign the appropriate pain code as the principal or first-listed diagnosis.

- When an admission or encounter is for a **procedure aimed at treating the underlying condition and a neurostimulator is inserted for pain control during the same admission/encounter**, a code for the underlying condition should be assigned as the principal diagnosis and the appropriate pain code should be assigned as a secondary diagnosis.

  *For example, if the patient is admitted for insertion of a neurostimulator for pain control, then the code pain is sequenced first. On the other hand, if the patient receives treatment for the underlying condition AS WELL AS implantation of a neurostimulator for pain control, then the primary code should identify the underlying condition, with the chronic pain being code second.*

2. **Timeframe for determining chronic pain:**
   - There is **no time frame** defining when pain becomes chronic pain. The provider’s documentation should be used to guide use of these codes.

3. **Chronic pain syndrome**

   - **Central pain syndrome (G89.0) and chronic pain syndrome (G89.4)** are different than the term **“chronic pain,”** and therefore codes should only be used when the provider has specifically documented this condition.

   - **Pain disorders related to psychological factors**
     - Assign code F45.41, **pain disorders exclusively related to psychological factors**, for pain that is exclusively related to psychological disorders. Do NOT include an additional code for chronic pain.
     - Assign code F45.42, **Pain disorders with related psychological factors**, along with a code from category G89, Pain, not elsewhere classified, if there is **documentation of a psychological component for a patient with acute or chronic pain.**
CODES FOR CHRONIC PAIN:

G89.0 Central pain syndrome
G89.21 Chronic pain due to trauma
G89.29 Other chronic pain
G89.4 Chronic pain syndrome

CODES FOR SITE-SPECIFIC PAIN AND PAIN-RELATED CONDITIONS:

Please note that if these conditions present as chronic pain, then an additional code for chronic pain (above), should be assigned according to the guidelines above

**Only codes that are BOLD are valid for reporting purposes**

M54.0 Panniculitis affecting regions of neck and back
   M54.00 Panniculitis affecting regions of neck and back, site unspecified
   M54.01 Panniculitis affecting regions of neck and back, occipito-atlanto-axial region
   M54.02 Panniculitis affecting regions of neck and back, cervical region
   M54.03 Panniculitis affecting regions of neck and back, cervicothoracic region
   M54.04 Panniculitis affecting regions of neck and back, thoracic region
   M54.05 Panniculitis affecting regions of neck and back, thoracolumbar region
   M54.06 Panniculitis affecting regions of neck and back, lumbar region
   M54.07 Panniculitis affecting regions of neck and back, lumbosacral region
   M54.08 Panniculitis affecting regions of neck and back, sacral and sacrococcygeal region
   M54.09 Panniculitis affecting regions, neck and back, multiple sites in spine

M54.1 Radiculopathy
   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

M54.2 Cervicalgia

M54.3 Sciatica
   M54.30 Sciatica, unspecified side
   M54.31 Sciatica, right side
   M54.32 Sciatica, left side

M54.4 Lumbago with sciatica
   M54.40 Lumbago with sciatica, unspecified side
   M54.41 Lumbago with sciatica, right side
   M54.42 Lumbago with sciatica, left side

M54.5 Low back pain

M54.6 Pain in thoracic spine
M54.8 Other dorsalgia
   M54.81 Other dorsalgia, Occipital neuralgia
   M54.89 Other dorsalgia, Other dorsalgia
M54.9 Dorsalgia, unspecified

M60.00 Infective myositis, unspecified site
   M60.000 Infective myositis, unspecified right arm
   M60.001 Infective myositis, unspecified left arm
   M60.002 Infective myositis, unspecified arm
   M60.003 Infective myositis, unspecified right leg
   M60.004 Infective myositis, unspecified left leg
   M60.005 Infective myositis, unspecified leg
   M60.009 Infective myositis, unspecified site
M60.01 Infective myositis, shoulder
   M60.011 Infective myositis, right shoulder
   M60.012 Infective myositis, left shoulder
   M60.019 Infective myositis, unspecified shoulder
M60.02 Infective myositis, upper arm
   M60.021 Infective myositis, right upper arm
   M60.022 Infective myositis, left upper arm
   M60.029 Infective myositis, unspecified upper arm
M60.03 Infective myositis, forearm
   M60.031 Infective myositis, right forearm
   M60.032 Infective myositis, left forearm
   M60.039 Infective myositis, unspecified forearm
M60.04 Infective myositis, hand and fingers
   M60.041 Infective myositis, right hand
   M60.042 Infective myositis, left hand
   M60.043 Infective myositis, unspecified hand
   M60.044 Infective myositis, right finger(s)
   M60.045 Infective myositis, left finger(s)
   M60.046 Infective myositis, unspecified finger(s)
M60.05 Infective myositis, thigh
   M60.051 Infective myositis, right thigh
   M60.052 Infective myositis, left thigh
   M60.059 Infective myositis, unspecified thigh
M60.06 Infective myositis, lower leg
   M60.061 Infective myositis, right lower leg
   M60.062 Infective myositis, left lower leg
   M60.069 Infective myositis, unspecified lower leg
M60.07 Infective myositis, ankle, foot and toes
   M60.070 Infective myositis, right ankle
   M60.071 Infective myositis, left ankle
   M60.072 Infective myositis, unspecified ankle
   M60.073 Infective myositis, right foot
   M60.074 Infective myositis, left foot
   M60.075 Infective myositis, unspecified foot
M60.076 Infective myositis, right toe(s)
M60.077 Infective myositis, left toe(s)
M60.078 Infective myositis, unspecified toe(s)
M60.08 Infective myositis, unspecified toe(s), other site
M60.09 Infective myositis, unspecified toe(s), multiple sites
M60.10 Interstitial myositis of unspecified site
M60.11 Interstitial myositis, shoulder
    M60.111 Interstitial myositis, right shoulder
    M60.112 Interstitial myositis, left shoulder
    M60.119 Interstitial myositis, unspecified shoulder
M60.12 Interstitial myositis, upper arm
    M60.121 Interstitial myositis, right upper arm
    M60.122 Interstitial myositis, left upper arm
    M60.129 Interstitial myositis, unspecified upper arm
M60.13 Interstitial myositis, forearm
    M60.131 Interstitial myositis, right forearm
    M60.132 Interstitial myositis, left forearm
    M60.139 Interstitial myositis, unspecified forearm
M60.14 Interstitial myositis, hand
    M60.141 Interstitial myositis, right hand
    M60.142 Interstitial myositis, left hand
    M60.149 Interstitial myositis, unspecified hand
M60.15 Interstitial myositis, thigh
    M60.151 Interstitial myositis, right thigh
    M60.152 Interstitial myositis, left thigh
    M60.159 Interstitial myositis, unspecified thigh
M60.16 Interstitial myositis, lower leg
    M60.161 Interstitial myositis, right lower leg
    M60.162 Interstitial myositis, left lower leg
    M60.169 Interstitial myositis, unspecified lower leg
M60.17 Interstitial myositis, ankle and foot
    M60.171 Interstitial myositis, right ankle and foot
    M60.172 Interstitial myositis, left ankle and foot
    M60.179 Interstitial myositis, unspecified ankle and foot
M60.18 Interstitial myositis, other site
M60.19 Interstitial myositis, multiple sites
M60.80 Other myositis, unspecified site
M60.81 Other myositis shoulder
    M60.811 Other myositis, right shoulder
    M60.812 Other myositis, left shoulder
    M60.819 Other myositis, unspecified shoulder
M60.82 Other myositis, upper arm
    M60.821 Other myositis, right upper arm
    M60.822 Other myositis, left upper arm
    M60.829 Other myositis, unspecified upper arm
M60.83 Other myositis, forearm
    M60.831 Other myositis, right forearm
M60.832 Other myositis, left forearm
M60.839 Other myositis, unspecified forearm
M60.84 Other myositis, hand
  M60.841 Other myositis, right hand
  M60.842 Other myositis, left hand
  M60.849 Other myositis, unspecified hand
M60.85 Other myositis, thigh
  M60.851 Other myositis, right thigh
  M60.852 Other myositis, left thigh
  M60.859 Other myositis, unspecified thigh
M60.86 Other myositis, lower leg
  M60.861 Other myositis, right lower leg
  M60.862 Other myositis, left lower leg
  M60.869 Other myositis, unspecified lower leg
M60.87 Other myositis, ankle and foot
  M60.871 Other myositis, right ankle and foot
  M60.872 Other myositis, left ankle and foot
  M60.879 Other myositis, unspecified ankle and foot
M60.88 Other myositis, other site
M60.89 Other myositis, multiple sites
M60.9 Myositis, unspecified

M79.0 Rheumatism, unspecified
M79.1 Myalgia
M79.2 Neuralgia and neuritis, unspecified
M79.3 Panniculitis, unspecified
M79.4 Hypertrophy of (infrapatellar) fat pad
M79.5 Residual foreign body in soft tissue
M79.60 Pain in limb, unspecified
  M79.601 Pain in right arm
  M79.602 Pain in left arm
  M79.603 Pain in arm, unspecified
  M79.604 Pain in right leg
  M79.605 Pain in left leg
  M79.606 Pain in leg, unspecified
  M79.609 Pain in unspecified limb
M79.62 Pain in upper arm
  M79.621 Pain in right upper arm
  M79.622 Pain in left upper arm
  M79.629 Pain in unspecified upper arm
M79.63 Pain in forearm
  M79.631 Pain in right forearm
  M79.632 Pain in left forearm
  M79.639 Pain in unspecified forearm
M79.64 Pain in hand and fingers
  M79.641 Pain in right hand
  M79.642 Pain in left hand
M79.643 Pain in unspecified hand
M79.644 Pain in right finger(s)
M79.645 Pain in left finger(s)
M79.646 Pain in unspecified finger(s)

M79.65 Pain in thigh
  M79.651 Pain in right thigh
  M79.652 Pain in left thigh
  M79.659 Pain in unspecified thigh

M79.66 Pain in lower leg
  M79.661 Pain in right lower leg
  M79.662 Pain in left lower leg
  M79.669 Pain in unspecified lower leg

M79.67 Pain in foot and toes
  M79.671 Pain in right foot
  M79.672 Pain in left foot
  M79.673 Pain in unspecified foot
  M79.674 Pain in right toe(s)
  M79.675 Pain in left toe(s)
  M79.676 Pain in unspecified toe(s)

M79.7 Fibromyalgia

M79.A1 Nontraumatic compartment syndrome of upper extremity
  M79.A11 Nontraumatic compartment syndrome of right upper extremity
  M79.A12 Nontraumatic compartment syndrome of left upper extremity
  M79.A19 Nontraumatic compartment syndrome of unspecified upper extremity

M79.A2 Nontraumatic compartment syndrome of lower extremity
  M79.A21 Nontraumatic compartment syndrome of right lower extremity
  M79.A22 Nontraumatic compartment syndrome of left lower extremity
  M79.A29 Nontraumatic compartment syndrome of unspecified lower extremity

M79.A3 Nontraumatic compartment syndrome of abdomen

M79.A9 Nontraumatic compartment syndrome of other sites

M79.8 Other specified soft tissue disorders
  M79.81 Nontraumatic hematoma of soft tissue
  M79.89 Other specified soft tissue disorders

M79.9 Soft tissue disorder, unspecified