ICD-10 PCS – Amputations

- **LOWER BODY** (include laterality)
  
  Hindquarter
  Femoral Region
  Knee Region
  Upper/Lower Leg – Specify if – **High (proximal)**, - **Mid (mid portion)**, - **Low (distal)**
  Foot – Specify if – **Complete or partial ray(s)/metatarsal(s)**
  Toe – Specify if – **High (proximal phalanx)**, - **Mid (PIP joint or middle phalanx)**, - **Low (DIP joint or distal phalanx)**

- **UPPER BODY** (include laterality)
  
  Forequarter
  Shoulder Region
  Elbow Region
  Upper/Lower Arm – Specify if – **High (proximal)**, - **Mid (mid portion)**, - **Low (distal)**

- **HAND**
  
  Complete or partial ray(s)/metacarpal(s)

- **THUMB / FINGER**
  
  High (proximal phalanx)
  Mid (PIP joint or middle phalanx)
  Low (DIP joint or distal phalanx)

The above requirements are not consistently documented in operative reports. In particular, we will need to know the anatomical location and extent of the amputation specifically. Please begin documenting this information in your operative reports now in order to prevent the need for postoperative clarifications.