

TRACTATENBLAD

VAN HET

KONINKRIJK DER NEDERLANDEN

JAARGANG 1969 Nr. 84

A. TITEL

Regeling van de Wereldgezondheidsorganisatie betreffende de nomenclatuur, 1967; Genève, 22 mei 1967

B. TEKST

De tekst is geplaatst in *Trb.* 1967, 186.

C. VERTALING

Zie *Trb.* 1967, 186.

G. INWERKINGTREDING

Zie *Trb.* 1967, 186.

De bepalingen van de Regeling zijn op 1 januari 1968 in werking getreden voor de volgende Staten:

Afghanistan
Albanië
Algerije
Argentinië
Australië
Barbados
België
Birma
Boeroendi
Boven-Volta
Bolivia
Brazilië
Bulgarije

de Centraalafrikaanse Republiek
Ceylon
Chili
China
Columbia
Costa Rica
Cuba
Cyprus
Dahomey
de Dominicaanse Republiek
Ecuador
El Salvador
Ethiopië

de Filippijnen
 Frankrijk
 Gabon
 Ghana
 Griekenland
 Guatemala
 Guinea
 Guyana
 Haïti
 Honduras
 Hongarije
 Ierland
 India
 Indonesië
 Irak
 Iran
 Israël
 Italië
 Ivoorkust
 Jamaica
 Japan
 Jemen
 Jordanië
 Kambodja
 Kameroen
 Kenia
 Koeweit
 Kongo (Brazzaville)
 de Democratische Republiek
 Kongo
 Korea
 Laos
 Lesotho
 Libanon
 Liberia
 Libië
 Luxemburg
 Madagascar
 Malawi
 Maleisië
 de Maladiven
 Mali

Malta
 Marokko
 Mauretanië
 Mexico
 Monaco
 Mongolië
 Nepal
 het Koninkrijk der Nederlanden
 Nieuw Zeeland
 Nicaragua
 Niger
 Nigeria
 Noorwegen
 Oeganda
 de Oekraïne
 Oostenrijk
 Panama
 Paraguay
 Perù
 Polen
 Roemenië
 Rwanda
 Saoedi Arabië
 Senegal
 Sierra Leone
 Somaliland
 de Sowjet-Unie
 Spanje
 Syrië
 Thailand
 Togo ¹⁾
 Trinidad en Tobago
 Tsjaad
 Tsjechoslowakije
 Tunesië
 Turkije
 de Verenigde Arabische
 Republiek
 het Verenigd Koninkrijk van
 Groot-Brittannië en Noord-
 Ierland

¹⁾ Onder de volgende verklaring: " It is not possible for the Government to immediately make a strict application of the provisions of paragraph 7 of the Recommendations, Definitions and Standards relating to Health Statistics as contained in Annex 1 to Resolution WHA 20.19 of the World Health Assembly."

de Verenigde Republiek
Tanzania
de Verenigde Staten van
Amerika
Uruguay
Venezuela

Viet Nam
West Samoa
Witrusland
Zambia
Zuid-Afrika
Zuidslavië

Zij zijn voor de volgende Staten op 1 januari 1969 in werking getreden :

Canada
Denemarken
Finland
Singapore
Zweden ¹⁾
Zwitserland

Zij zullen voor de volgende Staat op 1 januari 1971 in werking treden :

IJsland

¹⁾ Onder het volgende voorbehoud:

Article 2

"Sweden must make a reservation as regards the use in morbidity statistics of the E-series of the ICD in respect of external causes of injuries.

The series will be too difficult to apply, in particular as regards traffic accidents and injuries caused by fire. As far as poisoning is concerned, the series repeat what can be classified through the N-series, which deals with the nature of the injuries.

As regards the rest of the ICD, it is our aim to follow the international version, but a general reservation has to be made in case the co-operation established in this field with the other Nordic countries should lead to a wish for changes in exceptional cases."

J. GEGEVENS

Zie *Trb.* 1967, 186.

Bij brieven van 12 januari 1968 (*Bijl. Hand. II* — 9459, nr. 1) is de Regeling ter kennisneming aan de Eerste en de Tweede Kamer der Staten-Generaal aangeboden.

Op 22 mei 1967 zijn te Genève tijdens de Twintigste Wereldgezondheidsvergadering nog de volgende aanbevelingen met betrekking tot gezondheids-statistieken aangenomen:

Compendium of recommendations, definitions and standards relating to health statistics

(WHA 20.19, 22 May 1967)

The Twentieth World Health Assembly,

Recalling resolution WHA 19.45,

Appreciating the desirability of a compendium of recommendations, definitions and standards relating to health statistics;

Recognizing the need, pending the preparation of such a compendium, of guidance on matters which will shortly cease to be the subject of regulations;

and

Having regard to the authority provided by Article 23 of the Constitution of the World Health Organization,

1. Adopts recommendations ¹⁾ on the following subjects:

- (a) responsibility for medical certification of cause of death,
- (b) the form of medical certificate of cause of death,
- (c) preservation of the confidential nature of information given by the physician,
- (d) the rules for selection of the cause for mortality tabulation,
- (e) the coding of mortality and morbidity statistics,
- (f) classification by cause, age, and area in statistical tables,
- (g) cross-classification by cause, age, and area in tabulation of causes of death,
- (h) the definition of causes of death, and
- (i) the definition of the underlying cause of death,

together with the short lists for tabulation of causes of mortality and morbidity, Lists A, B, C, D, and P²⁾;

2. Decides that these recommendations shall become effective on 1 January 1968;

and,

3. Further recommends that where a Member contemplates making any reservations under Article 8 of the WHO Nomenclature Regulations, it consider the desirability of prior consultation with the Director-General of the Organization concerning the content and form of any such reservations which might be made.

Tenth plenary meeting, 22 May 1967

Recommendations concerning the compilation and publication of statistics of mortality and morbidity proposed for adoption by World Health Assembly under article 23 of the Constitution

1. Medical certification of cause of death should normally be the responsibility of the attending physician. In the case of deaths certified by coroners or other legal authorities, the medical evidence supplied to the

¹⁾ Annex 1.

²⁾ Annex 2.

certifier should be stated on the certificate in addition to any legal findings.

2. The form of medical certificate of cause of death should conform to the model appended ¹⁾ to these recommendations.

3. In the statistical use of the medical certificate of cause of death and other medical records, administrative procedures should provide such safeguards as are necessary to preserve the confidential nature of the information given by the physician.

4. For the purpose of single-cause mortality coding, the cause for tabulation should be selected from the particulars entered on the medical certificate of cause of death in accordance with such rules as may be from time to time approved by the Assembly.

5. Mortality and morbidity statistics should be coded according to the Detailed List of three-digit categories of the International Classification of Diseases, with or without the fourth-digit sub-categories, using for the purpose the tabular list of inclusions and the alphabetical index. Save in exceptional circumstances, fourth-digit sub-categories, when published, should be those of the International Classification of Diseases; any additions or variations should be indicated in published statistical tables.

6. *Statistical tables.* The degree of detail in cross-classification by cause, sex, age, and area of territory will depend partly on the purpose and range of the statistics and partly on the practical limits as regards the size of particular tables. The following patterns, designed to promote international comparability, consist of standard ways of expressing various characteristics. Where a different classification is used (e.g. in age-grouping) in published tables, it should be so arranged as to be reducible to one of the recommended groupings.

(a) *Analysis by the International Classification of Disease* should, as appropriate, be in accordance with:

- (i) the Detailed List of three-digit categories, with or without fourth-digit sub-categories;
- (ii) the List of 150 Causes for Tabulation of Morbidity and Mortality (List A);
- (iii) the List of 50 Causes for Tabulation of Mortality (List B);
- (iv) the List of 70 Causes for Tabulation of Morbidity (List C);
- (v) the List of 300 Causes for Tabulation of Hospital Morbidity (List D);
- (vi) the List of 100 Causes for Tabulation of Perinatal Morbidity and Mortality (List P).

¹⁾ Appendix.

- (b) *Age classification for general purposes*
- (i) Under 1 year, single years to 4 years, 5 years groups from 5 to 84 years, 85 years and over;
 - (ii) Under 1 year, 1-4 years, 5-14 years, 15-24 years, 25-34 years, 35-44 years, 45-54 years, 55-64 years, 65-74 years, 75 years and over;
 - (iii) Under 1 year, 1-14 years, 15-44 years, 45-64 years, 65 years and over.
- (c) *Age classification for special statistics of infant mortality*
- (i) By single days for the first week of life (under 24 hours, 1, 2, 3, 4, 5, 6 days), 7-13 days, 14-20 days, 21-27 days, 28 days up to, but not including, 2 months, by single months of life from 2 months to 1 year (2, 3, 4 . . . 11 months);
 - (ii) Under 24 hours, 1-6 days, 7-27 days, 28 days up to, but not including, 3 months, 3-5 months, 6 months but under 1 year;
 - (iii) Under 7 days, 7-27 days, 28 days but under 1 year.
- (d) *Classification by area should, as appropriate, be in accordance with:*
- (i) each major civil division;
 - (ii) each town or conurbation of 1 000 000 population and over, otherwise the largest town with a population of at least 100 000;
 - (iii) national aggregate of urban areas of 100 000 population and over;
 - (iv) national aggregate of urban areas of less than 100 000 population;
 - (v) national aggregate of rural areas.

Note 1. Statistics relating to (iii), (iv) and (v) should be accompanied by the definitions of urban and rural used in them.

Note 2. In countries where coverage of medical certification of cause of death is incomplete or limited to certain areas, separate figures should be published for medically certified and other deaths.

7. *Tabulation of causes of death*

Statistics of causes of death in respect of the territory as a whole should be in accordance with recommendation 6 (a) (i), or, if this is not possible, with recommendation 6 (a) (ii). They should preferably be classified by sex and the age-groups in recommendation 6 (b) (i).

Statistics of causes of death in respect of the areas in recommendation 6 (d) should be in accordance with recommendation 6 (a) (ii) or, if this is not possible, with recommendation 6 (a) (iii). They should preferably be classified by sex and the age-groups in recommendation 6 (b) (ii).

8. The causes of death to be entered on the medical certificate of cause of death are all those diseases, morbid conditions or injuries which either resulted in or contributed to death and the circumstances of the accident or violence which produced any such injuries.

9. The underlying cause of death is (a) the disease or injury which initiated the train of events leading directly to death, or (b) the circumstances of the accident or violence which produced the fatal injury.

International Form of Medical Certificate of Cause of Death

CAUSE OF DEATH		Approximate interval between onset and death
I		
<i>Disease or condition directly leading to death *</i>	(a) due to (or as a consequence of)
<i>Antecedent causes</i> Morbid conditions, if any, giving rise to the above cause, stating the underlying conditions last	{ (b) due to (or as a consequence of) (c)
II		
<i>Other significant conditions</i> contributing to the death, but not related to the disease or condition causing it	{
<p>* This does not mean the mode of dying, e.g., heart failure, asthenia, etc. It means the disease, injury, or complication which caused death.</p>		

Draft list of 150 causes for tabulation of morbidity and mortality

(LIST A)

	Detailed List Nos.
1. Cholera	000
2. Typhoid fever	001
3. Paratyphoid fever and other Salmonella infections	002, 003
4. Bacillary dysentery and amoebiasis	004, 006
5. Enteritis and other diarrhoeal diseases	006, 009
6. Tuberculosis of respiratory system	010-012
7. Tuberculosis of meninges and central nervous system	013
8. Tuberculosis of intestines, peritoneum and mesenteric glands	014
9. Tuberculosis of bones and joints	015
10. Other tuberculosis, including late effects	016-019
11. Plague	020
12. Anthrax	022
13. Brucellosis	023
14. Leprosy	030
15. Diphtheria	032
16. Whooping cough	033
17. Streptococcal sore throat and scarlet fever	034
18. Erysipelas	035
19. Meningococcal infection	036
20. Tetanus	037
21. Other bacterial diseases	005, 007, 021, 024-027, 031, 038, 039
22. Acute poliomyelitis	040-043
23. Late effects of acute poliomyelitis	044
24. Smallpox	050
25. Measles	055
26. Yellow fever	060
27. Viral encephalitis	062-065
28. Infectious hepatitis	070
29. Other viral diseases	045, 046, 051-054, 056, 057, 061, 066-068, 071-079
30. Typhus and other rickettsioses	080-083
31. Malaria	084
32. Trypanosomiasis	086, 087
33. Relapsing fever	088
34. Congenital syphilis	090
35. Early syphilis, symptomatic	091
36. Syphilis of central nervous system	094
37. Other syphilis	092, 093, 095-097
38. Gonococcal infections	098
39. Schistosomiasis	120
40. Hydatidosis	122
41. Filarial infection	125
42. Ancylostomiasis	126

Detailed List
Nos.

43. Other helminthiases	121, 123, 124, 127-129
44. All other infective and parasitic diseases	085, 089, 099, 100-104, 110-117, 130-136
45. Malignant neoplasm of buccal cavity and pharynx	140-149
46. Malignant neoplasm of oesophagus	150
47. Malignant neoplasm of stomach	151
48. Malignant neoplasm of intestine, except rectum	152, 153
49. Malignant neoplasm of rectum and recto-sigmoid junction	154
50. Malignant neoplasm of larynx	161
51. Malignant neoplasm of trachea, bronchus and lung	162
52. Malignant neoplasm of bone	170
53. Malignant neoplasm of skin	172, 173
54. Malignant neoplasm of breast	174
55. Malignant neoplasm of cervix uteri	180
56. Other malignant neoplasm of uterus	181, 182
57. Malignant neoplasm of prostate	185
58. Malignant neoplasm of other and unspecified sites	155-159, 160, 163, 171, 183, 184, 186-189, 190-199
59. Leukaemia	204-207
60. Other neoplasms of lymphatic and haemotopoietic tissue	200-203, 208, 209
61. Benign neoplasms and neoplasms of unspecified nature	210-239
62. Non-toxic goitre	240, 441
63. Thyrotoxicosis with or without goitre	242
64. Diabetes mellitus	250
65. Avitaminoses and other nutritional deficiency	260-269
66. Other endocrine and metabolic diseases	243-246, 251-258, 270-279
67. Anaemias	280-285
68. Other diseases of blood and blood forming organs	286-289
69. Psychoses	290-299
70. Neuroses, personality disorders and other non-psychotic mental disorders	300-309
71. Mental retardation	310-315
72. Meningitis	320
73. Multiple sclerosis	340
74. Epilepsy	345
75. Inflammatory diseases of eye	360-369
76. Cataract	374
77. Glaucoma	375
78. Otitis media and mastoiditis	381-383

Detailed List
Nos.

- | | |
|--|---|
| 79. Other diseases of nervous system and sense organs | 321-324, 330-333, 341-344, 346-349, 350-358, 370-373, 376-379, 380, 384-389 |
| 80. Active rheumatic fever | 390-392 |
| 81. Chronic rheumatic heart disease | 393-398 |
| 82. Hypertensive disease | 400-404 |
| 83. Ischaemic heart disease | 410-414 |
| 84. Other forms of heart disease | 420-429 |
| 85. Cerebrovascular disease | 430-438 |
| 86. Diseases of arteries, arterioles and capillaries | 440-447 |
| 87. Venous thrombosis and embolism | 450-453 |
| 88. Other diseases of circulatory system | 454-458 |
| 89. Acute respiratory infections | 460-466 |
| 90. Influenza | 470-474 |
| 91. Viral pneumonia | 480 |
| 92. Other pneumonia | 481-486 |
| 93. Bronchitis, emphysema and asthma | 490-493 |
| 94. Hypertrophy of tonsils and adenoids | 500 |
| 95. Empyema and abscess of lung | 510, 513 |
| 96. Other diseases of respiratory system | 501-508, 511, 512, 514-519 |
| 97. Diseases and conditions of teeth and supporting structures | 520-525 |
| 98. Peptic ulcer | 531-533 |
| 99. Gastritis and duodenitis | 535 |
| 100. Appendicitis | 540-543 |
| 101. Intestinal obstruction and hernia | 550-553, 560 |
| 102. Cirrhosis of liver | 571 |
| 103. Cholelithiasis and cholecystitis | 574, 575 |
| 104. Other diseases of digestive system | 526-529, 530, 534, 536, 537, 561-569, 570, 572, 573, 576, 577 |
| 105. Acute nephritis | 580 |
| 106. Other nephritis and nephrosis | 581-584 |
| 107. Infections of kidney | 590 |
| 108. Calculi of urinary system | 592, 594 |
| 109. Hyperplasia of prostate | 600 |
| 110. Diseases of breast | 610, 611 |
| 111. Other diseases of genito-urinary system | 591, 593, 595-599, 601-607, 612-616, 620-629 |
| 112. Toxaemias of pregnancy and the puerperium | 636-639 |
| 113. Haemorrhage of pregnancy and child-birth | 632, 651-653 |
| 114. Abortion induced for legal indications | 640, 641 |
| 115. Other and unspecified abortion | 642-645 |
| 116. Sepsis of child-birth and the puerperium | 670, 671, 673 |

Detailed List
Nos.

117. Other complications of pregnancy, child-birth and the puerperium	630, 631, 633-635, 654-662 672, 674-678
118. Delivery without mention of complication	650
119. Infections of skin and subcutaneous tissue	680-686
120. Other diseases of skin and subcutaneous tissue	690-709
121. Arthritis and spondylitis	710-715
122. Non-articular rheumatism and rheumatism unspecified	716-718
123. Osteomyelitis and periostitis	720
124. Ankylosis and acquired musculo-skeletal deformities	727, 735-738
125. Other diseases of musculo-skeletal system and connective tissue.	721-726, 728, 729, 730-734
126. Spina bifida.	741
127. Congenital anomalies of heart.	746
128. Other congenital anomalies of circulatory system	747
129. Cleft palate and cleft lip	749
130. All other congenital anomalies	740, 742-745, 748, 750-759
131. Birth injury and difficult labour	764-768, 772
132. Conditions of placenta and cord.	770, 771
133. Haemolytic disease of newborn	774, 775
134. Anoxic and hypoxic conditions not elsewhere classified	776
135. Other causes of perinatal morbidity and mortality.	760-763, 769, 773, 777-779
136. Senility without mention of psychosis	794
137. Ill-defined and unknown causes of morbidity and mortality	780, 793, 795, 796

E

138. Motor vehicle accidents	810-823
139. Other transport accidents.	800-807, 825-845
140. Accidental poisoning.	850-877
141. Accidental falls	880-887
142. Accidents caused by fires	890-899
143. Accidental drowning and submersion	910
144. Accidents caused by firearms weapons	922
145. Accidents mainly of industrial type	916-921, 923-928
146. All other accidental causes	900-909, 911-915, 929, 930-936, 940-949
147. Suicide and self inflicted injury	950-959
148. Homicide and injury purposely inflicted by other persons; legal intervention	960-979

E

Detailed List
Nos.

149. Injury undetermined whether accidentally or purposely inflicted	980-989
150. Injury resulting from operations of war.	990-999
N	N
138. Fracture of skull	800-804
139. Fracture of spine and trunk.	805-809
140. Fracture of limbs	810-829
141. Dislocation without fracture	830-839
142. Sprains and strains of joints and adjacent muscle	840-848
143. Intracranial injury (excluding those with skull fracture).	850-854
144. Internal injury of chest, abdomen and pelvis	860-869
145. Laceration and open wound	870-908
146. Superficial injury, contusion and crushing with intact skin surface.	910-929
147. Foreign body entering through orifice	930-939
148. Burns	940-949
149. Adverse effects of chemical substances	960-989
150. All other and unspecified effects of external causes	950-959, 990-999

Draft list of 50 causes for tabulation of mortality

(LIST B)

	Detailed List Nos.
1. Cholera	000
2. Typhoid fever	001
3. Bacillary dysentery and amoebiasis	004, 006
4. Enteritis and other diarrhoeal diseases	008, 009
5. Tuberculosis of respiratory system	010-012
6. Tuberculosis, other forms, including late effects	013-019
7. Plague	020
8. Diphtheria	032
9. Whooping cough	033
10. Streptococcal sore throat and scarlet fever	034
11. Meningococcal infection	036
12. Acute poliomyelitis	040-043
13. Smallpox	050
14. Measles	055
15. Typhus and other rickettsioses	080-083
16. Malaria	084
17. Syphilis and its sequelae	090-097
18. All other infective and parasitic diseases	Rest of 000-136
19. Malignant neoplasms, including neoplasms of lymphatic and haemotopoietic tissues.	140-209
20. Benign neoplasms and neoplasms of unspecified nature	210-239
21. Diabetes mellitus	250
22. Avitaminoses and other nutritional deficiency	260-269
23. Anaemias	280-285
24. Meningitis	320
25. Active Rheumatic fever	390-392
26. Chronic rheumatic heart disease	393-398
27. Hypertensive disease	400-404
28. Ischaemic heart disease	410-414
29. Other forms of heart disease	420-429
30. Cerebrovascular disease	430-438
31. Influenza	470-474
32. Pneumonia	480-486
33. Bronchitis, emphysema and asthma	490-493
34. Peptic ulcer	531-533
35. Appendicitis	540-543
36. Intestinal obstruction and hernia	550-553, 560
37. Cirrhosis of liver	571
38. Nephritis and nephrosis	580-584
39. Hyperplasia of prostate	600
40. Abortion	640-645

	Detailed List Nos.
41. Other complications of pregnancy, child-birth and the puerperium. Delivery without mention of complication . . .	630-639, 650-678
42. Congenital anomalies	740-759
43. Birth injury, difficult labour and other anoxic and hypoxic conditions . . .	764-768, 772, 776
44. Other causes of perinatal mortality . . .	760-763, 769-771, 773-775, 777-779
45. Senility without mention of psychosis, ill-defined and unknown causes . . .	780-796
46. All other diseases	Rest of 000-779
E	E
47. Motor vehicle accidents	810-823
48. All other accidents.	800-807, 825-949
49. Suicide and self-inflicted injuries. . . .	950-959
50. All other external causes	960-999
N	N
47. Fractures, intracranial and internal injuries	800-829, 850-854, 860-869
48. Burns	940-949
49. Adverse effects of chemical substances .	960-989
50. All other injuries	Rest of 800-999

Draft list of 70 causes for tabulation of morbidity

(LIST C)

	Detailed List Nos.
1. Typhoid, paratyphoid fever, other salmonella infections	001-003
2. Bacillary dysentery and amoebiasis.	004, 006
3. Enteritis and other diarrhoeal diseases	008, 009
4. Tuberculosis of respiratory system	010-012
5. Tuberculosis, other forms, including late effects	013-019
6. Brucellosis	023
7. Diphtheria	032
8. Whooping cough	033
9. Streptococcal sore throat and scarlet fever.	034
10. Smallpox.	050
11. Measles	055
12. Viral encephalitis	062-065
13. Infectious hepatitis	070
14. Typhus and other rickettsioses	080-083
15. Malaria	084
16. Syphilis and its sequelae	090-097
17. Gonococcal infections	098
18. Helminthiasis	120-129
19. All other infective and parasitic diseases	000, 005, 007, 020-022, 024-027, 030, 031, 035-039, 040-046, 051-054, 056, 057, 060, 061, 066-068, 070-079, 085-089, 099, 100-104, 110-117, 130-136
20. Malignant neoplasms, including neoplasms of lymphatic and haematopoietic tissues.	140-209
21. Benign neoplasms and neoplasms of unspecified nature	210-239
22. Thyrotoxicosis with or without goitre	242
23. Diabetes mellitus	250
24. Avitaminosis and other nutritional deficiency	260-269
25. Other endocrine disorders; other metabolic diseases	240, 241, 243-246, 251-258, 270-279
26. Anaemias.	280-285
27. Psychoses and non-psychotic mental disorders	290-309
28. Inflammatory diseases of eye	360-369
29. Cataract	374
30. Otitis media and mastoiditis	381-383

	Detailed List Nos.
31. Other diseases of nervous system and sense organs	320-324, 330-333, 340-349, 350-358, 370-373, 375-379, 380, 384-389
32. Active rheumatic fever	390-392
33. Chronic rheumatic heart disease	393-398
34. Hypertensive disease	400-404
35. Ischaemic heart disease	410-414
36. Cerebrovascular disease	430-438
37. Venous thrombosis and embolism	450-453
38. Other diseases of circulatory system	420-429, 440-447, 454-458
39. Acute respiratory infections	460-466
40. Influenza	470-474
41. Pneumonia	480-486
42. Bronchitis, emphysema and asthma	490-493
43. Hypertrophy of tonsils and adenoids	500
44. Pneumoconioses and related diseases	515, 516
45. Other respiratory diseases	501-508, 510-514, 517-519
46. Diseases of teeth and supporting structures	520-525
47. Peptic ulcer	531-533
48. Appendicitis	540-543
49. Intestinal obstruction and hernia	550-553, 560
50. Cholelithiasis and cholecystitis	574, 575
51. Other diseases of digestive system	526-529, 530, 534-537, 561-569, 570-573, 576,577
52. Nephritis and nephrosis	580-584
53. Calculi of urinary system	592, 594
54. Hyperplasia of prostate	600
55. Other diseases of genito-urinary system	590, 591, 593, 595-599, 601-607, 610-616, 620-629
56. Abortion	640-645
57. Other complications of pregnancy, childbirth and the puerperium	630-639, 651-678
58. Delivery without mention of complication	650
59. Infections of skin and subcutaneous tissue	680-686
60. Other diseases of skin and subcutaneous tissue	690-709
61. Arthritis and spondylitis	710-715
62. Other diseases of musculo-skeletal system and connective tissue	716-718, 720-729, 730-738
63. Congenital anomalies	740-759
64. Certain causes of perinatal morbidity	760-779
65. Other specified and ill-defined diseases	286-289, 310-315, 780-796
E	E
66. Road transport accidents	810-819, 825-827

	Detailed List Nos.
E	E
67. Other accidents	800-807, 820-823, 830-949
68. Attempted suicide and self-inflicted in- juries	950-959
69. Attempted homicide and injury purposely inflicted by other persons; legal inter- vention.	960-979
70. All other external causes	980-999
N	N
66. Fractures.	800-829
67. Intracranial and internal injuries.	850-854, 860-869
68. Burns	940-949
69. Adverse effects of chemical substances	960-989
70. All other injuries	830-848, 870-939, 950-959, 990-999

Draft list of 300 causes for tabulation of hospital morbidity

(LIST D)

	Detailed List Nos.
1. Cholera	000
2. Typhoid fever	001
3. Paratyphoid fever and other Salmonella infections	002, 003
4. Bacillary dysentery	004
5. Amoebiasis	006
6. Enteritis and diarrhoeal diseases	008, 009
7. Other intestinal infectious diseases	005, 007
8. Silicotuberculosis	010
9. Pulmonary tuberculosis	011
10. Tuberculous pleurisy	012.1, 012.2
11. Tuberculous laryngitis	012.3
12. Other respiratory tuberculosis	012.0, 012.9
13. Tuberculosis of meninges and central nervous system	013
14. Tuberculosis of intestines, peritoneum and mesenteric glands	014
15. Tuberculosis of bones and joints	015
16. Tuberculosis of genito-urinary system	016
17. Other tuberculosis	017-019
18. Plague	020
19. Brucellosis	023
20. Leprosy	030
21. Diphtheria	032
22. Whooping cough	033
23. Streptococcal sore throat and scarlet fever	034
24. Erysipelas	035
25. Meningococcal infection	036
26. Tetanus	037
27. Septicaemia	038
28. Other bacterial diseases	021, 022, 024-027, 031, 039
29. Acute poliomyelitis	040-043
30. Late effects of acute poliomyelitis	044
31. Smallpox	050
32. Chickenpox	052
33. Measles	055
34. Rubella	056
35. Yellow fever	060
36. Viral encephalitis	062-065
37. Arthropod-borne haemorrhagic fever	067
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39. Rabies	071
40. Mumps	072
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Detailed List
Nos.

42. Typhus and other rickettsioses	080-083
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45. Trypanosomiasis	086, 087
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49. Syphilis of central nervous system	094
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52. Schistosomiasis	120
53. Hydatidosis	122
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55. Other helminthiasis	121, 123-125, 127-129
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64. Malignant neoplasm of other and un- specified respiratory organs	160, 163
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67. Malignant neoplasm of breast	174
68. Malignant neoplasm of cervix uteri	180
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75. Malignant neoplasm of bladder	188
76. Malignant neoplasm of other genito- urinary organs	187, 189
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78. Malignant neoplasm of other specified sites	171, 190, 192-195
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Nos.

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82. Leukaemia	204-207
83. Other neoplasms of lymphatic and haematopoietic tissue	200, 202, 203, 208, 209
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85. Uterine fibromyoma	218
86. Other benign neoplasm of uterus	219
87. Benign neoplasm of ovary	220
88. Benign neoplasm of kidney and other urinary organs	223
89. Benign neoplasm of brain and other parts of nervous system	225
90. Other benign neoplasm.	210-215, 217, 221, 222, 224, 226-228
91. Carcinoma <i>in situ</i> of cervix uteri.	234.0
92. Other neoplasm of unspecified nature	230-233, 234.1, 234.9, 235-239
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94. Thyrotoxicosis with or without goitre	242
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97. Avitaminoses and other nutritional deficiency	260-269
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100. Vitamin B 12 deficiency anaemia	281.0, 281.1
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103. Alcoholic psychosis	291
104. Schizophrenia.	295
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207. Infective diseases of cervix uteri	620
208. Infective disease of uterus (except cervix), vagina and vulva	622
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213. Other diseases of female genital organs	621, 625, 627, 629
214. Infections of genito-urinary tract during pregnancy and the puerperium	630, 635
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Nos.

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E

	Detailed List Nos.
E	E
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297. Suicide and self-inflicted injury by other and unspecified means, including late effects	952-954, 955-959
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300. Injury resulting from operations of war.	990-999
N	N
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275. Fracture of humerus, radius and ulna .	812, 813
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281. Dislocation without fracture; sprains and strains of joints and adjacent muscles.	830-848
282. Intracranial injury (excluding skull fracture).	850-854
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284. Laceration, open wound, superficial injury, contusion and crushing, affecting eye	870, 871, 921
285. Laceration, open wound, superficial injury, contusion and crushing, affecting hand and fingers	882, 883, 885-887, 903, 914, 915, 925, 926
286. Laceration, open wound, superficial injury, contusion and crushing, affecting other and unspecified site.	872-879, 880, 881, 884, 890-897, 900-902, 904-908, 910-913, 916-918, 920, 922-924, 927-929

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291. Adverse effects of salicylates and con- geners	965.1
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293. Adverse effects of other medicinal agents	960-964, 965.0, 965.2-965.9, 966, 967.1-967.9, 968-979
294. Toxic effect of carbon monoxide.	986
295. Toxic effect of other substances chiefly non-medicinal as to source	980-985, 987-989
296. Drowning and non-fatal submersion	994.1
297. Asphyxiation and strangulation	995.5
298. Injury, other and unspecified	997
299. Complications of surgical procedures and other medical care	998, 999
300. Other effects of external causes	950-959, 990-993, 994.0, 994.2-994.9, 995.0-995.4, 995.6-995.9, 996

Draft list of 100 causes for tabulation of perinatal morbidity and mortality

(LIST P)

	Detailed List Nos.
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3. Other chronic disease of circulatory system	760.1, 760.3
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<i>Other maternal conditions unrelated to pregnancy (5-11)</i>	
5. Syphilis	761.0
6. Diabetes mellitus	761.1
7. Rubella	761.3
8. Injury to mother	761.5
9. Operation of mother	761.6
10. Chemical substances transmitted through placenta	761.7
11. Other maternal conditions	761.2, 761.4, 761.9
<i>Toxaemias of pregnancy (12-17)</i>	
12. Renal disease arising during pregnancy	762.0
13. Pre-eclampsia of pregnancy	762.1
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15. Toxaemia unspecified	762.3
16. Hyperemesis gravidarum	762.4
17. Other toxaemia of pregnancy	762.5, 762.9
<i>Maternal ante- and intra-partum infection (18-20)</i>	
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<i>Difficult labour with abnormality of bones, organs or tissues of pelvis (21-23)</i>	
21. With birth injury to brain or spinal cord	764.0, 764.1
22. With other or unspecified birth injury	764.2, 764.3
23. Without mention of birth injury	764.4, 764.9
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24. With birth injury to brain or spinal cord	765.0, 765.1
25. With other or unspecified birth injury	765.2, 765.3
26. Without mention of birth injury	765.4, 765.9

Detailed List
Nos.*Difficult labour with malposition of foetus
(27-29)*

- | | |
|--|--------------|
| 27. With birth injury to brain or spinal cord | 766.0, 766.1 |
| 28. With other or unspecified birth injury | 766.2, 766.3 |
| 29. Without mention or birth injury. | 766.4, 766.9 |

*Difficult labour with abnormality of forces
of labour (30-32)*

- | | |
|--|--------------|
| 30. With birth injury to brain or spinal cord | 767.0, 767.1 |
| 31. With other or unspecified birth injury | 767.2, 767.3 |
| 32. Without mention of birth injury. | 767.4, 767.9 |

*Difficult labour with other and unspecified
complications (33-35)*

- | | |
|--|--------------|
| 33. With birth injury to brain or spinal cord | 768.0, 768.1 |
| 34. With other or unspecified birth injury | 768.2, 768.3 |
| 35. Without mention of birth injury. | 768.4, 768.9 |

*Other complications of pregnancy and
child-birth (36-41)*

- | | |
|--|--------------|
| 36. Incompetent cervix | 769.0 |
| 37. Premature rupture of membranes | 769.1 |
| 38. Hydramnios | 769.2 |
| 39. Ectopic pregnancy. | 769.3 |
| 40. Multiple pregnancy | 769.4 |
| 41. Other complications of pregnancy or
child-birth | 769.5, 769.9 |

Conditions of placenta (42-46)

- | | |
|--|-------|
| 42. Placenta praevia. | 770.0 |
| 43. Premature separation of placenta | 770.1 |
| 44. Placental infarction | 770.2 |
| 45. Other conditions of placenta | 770.8 |
| 46. Placental insufficiency, unspecified | 770.9 |

Conditions of umbilical cord (47-49)

- | | |
|--|-------|
| 47. Compression of cord. | 771.0 |
| 48. Prolapse of cord without mention of com-
pression | 771.1 |
| 49. Other | 771.9 |

*Birth injury without mention of cause
(50-52)*

- | | |
|--|--------------|
| 50. To brain or spinal cord | 772.0, 772.1 |
| 51. Other or unspecified birth injury. | 772.2, 772.9 |
| 52. Termination of pregnancy without men-
tion of cause | 773 |

Detailed List
Nos.*Haemolytic disease of newborn (53-56)*

- | | |
|---|--------------|
| 53. With Rh incompatibility | 774.0, 775.0 |
| 54. With ABO incompatibility | 774.1, 775.1 |
| 55. With other or unspecified blood incompatibility | 774.2, 775.2 |
| 56. Without mention of cause | 774.9, 775.9 |

Anoxic and hypoxic conditions not elsewhere classified (57-60)

- | | |
|--|--------------|
| 57. Hyaline membrane disease and respiratory distress syndrome | 776.1, 776.2 |
| 58. Intra uterine anoxia | 776.4 |
| 59. Asphyxia of newborn, unspecified | 776.9 |
| 60. Other anoxic and hypoxic conditions not elsewhere classified | 776.0, 776.3 |

Other conditions of foetus and newborn (61-68)

- | | |
|--|--------------|
| 61. Immaturity unspecified | 777 |
| 62. Foetal blood loss before birth | 778.0 |
| 63. Chorio-amnionitis | 778.1 |
| 64. Post maturity | 778.2 |
| 65. Haemorrhagic disease of newborn | 778.3 |
| 66. Other conditions of foetus | 778.4, 778.9 |
| 67. Maceration foetal death or unknown cause | 779.0 |
| 68. Other | 779.9 |

Congenital anomalies (69-80)

- | | |
|--|--------------------------|
| 69. Anencephalus | 740 |
| 70. Spina bifida | 741 |
| 71. Congenital hydrocephalus | 742 |
| 72. Other congenital anomalies of central nervous system and eye | 743, 744 |
| 73. Congenital anomalies of circulatory system | 746, 747 |
| 74. Congenital anomalies of respiratory system | 748 |
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82. Listeriosis	027.0
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84. Septicaemia.	038
85. Viral diseases	040-079
86. Congenital syphilis	090
87. Toxoplasmosis	130
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*Other diseases of foetus and newborn
(89-94)*

89. Diseases of thyroid gland.	240-246
90. Cystic fibrosis (mucoviscidosis)	273.0
91. Diseases of blood and blood-forming organs	280-289
92. Pneumonia	480-486
93. Other specified conditions	Rest of 140-738
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*Accidents and violence to newborn
(95-100)*

95. Excessive heat.	E 900
96. Excessive cold.	E 901
97. Hunger, thirst, exposure and neglect . . .	E 904
98. Inhalation and ingestion of food causing obstruction or suffocation	E 911
99. Accidental mechanical suffocation	E 913
100. Other violence	Rest of E 800-E 999

Tijdens de Eenentwintigste Wereldgezondheidsvergadering (1968) zijn te Genève de volgende aanbevelingen aangenomen:

**Recommendations, definitions and standards relating to health statistics:
Rules for selection of cause of death for primary mortality tabulation
(WHA 21.44)**

The Twenty-first World Health Assembly,
Recalling its recommendation contained in operative paragraph 1d of resolution WHA 20.19.,

Confirms the annexed rules for selection of the cause of death for primary mortality tabulation.

ANNEX

Rules for classification

(Reprint from the International Classification of Diseases, 1965 Revision, Volume 1, World Health Organization.)

Rules for selection of cause of death for primary mortality tabulation

When only one cause of death is recorded, this cause is selected for tabulation.

When more than one cause of death is recorded, selection should be made in accordance with the rules which follow. The rules are based on the concept of the underlying cause, i.e. the disease or injury which initiated the sequence of events which led to death. Where the selected cause is an injury, either the circumstances which gave rise to the injury, or the nature of the injury, or preferably both should be coded.

Selection of the cause to be coded comprises two stages; selection of the underlying cause, and subsequent modification of the underlying cause. These two stages are described below.

Selection of the underlying cause

The rules for selecting the underlying cause are as follows. Either the General rule or Rule 1 or Rule 2 will apply to all certificates. Rule 3 may apply in addition to one of these.

General rule

Select the condition entered alone on the lowest used line of Part I unless it is highly improbable that this condition could have given rise to all the conditions entered above it.

Rule 1

If there is a reported sequence terminating in the condition first entered on the certificate, select the underlying cause of this sequence. If there is more than one such sequence, select the underlying cause of the first-mentioned sequence.

Rule 2

If there is no reported sequence terminating in the condition first entered on the certificate, select this first mentioned condition.

Rule 3

If the condition selected by the General rule or Rules 1 or 2 can be considered a direct sequel of another reported condition, whether in Part I or Part II, select this primary condition. If there are two or more such primary conditions, select the first mentioned of these.

In a properly completed certificate, the underlying cause will have been entered alone on the lowest used line of Part I and the conditions, if any, which arose as a consequence of this underlying cause will have been entered above it, one condition to a line, in ascending causal order of sequence.

- Example 1: I(a) Uraemia
 (b) Retention of urine
 (c) Hypertrophy of prostate
- Example 2: I(a) Bronchopneumonia
 (b) Chronic bronchitis
 II Chronic myocarditis

In a properly completed certificate, therefore, the General rule will apply. However, the fact that the certificate as a whole has not been completed in an entirely satisfactory manner does not preclude the application of the General rule.

Provided that it is not highly improbable that the condition entered alone on the lowest used line of Part I could have given rise to all the conditions above it, the General rule should be applied, even though the conditions entered above it have not been entered in a correct causal order of sequence.

- Example 3: I(a) Gangrene of intestine and
 (b) peritonitis
 (c) Volvulus of caecum
- Example 4: I(a) Coronary thrombosis
 (b) Cerebral haemorrhage
 (c) Arteriosclerosis

The General rule should be discarded only when the certifier has entered more than one condition on the lowest used line of Part I or has entered there a single condition and it is highly improbable that this condition could have given rise to all the conditions entered above it. Guidance on the interpretation of "highly improbable" is given at the end of the rules, but it should be borne in mind that the medical certifier's statement indicates his opinion about the conditions leading to death and about their relationship one to another, and this opinion should not be lightly disregarded.

Tijdens de Eenentwintigste Wereldgezondheidsvergadering (1968) zijn te Genève de volgende aanbevelingen aangenomen:

**Recommendations, definitions and standards relating to health statistics:
Rules for selection of cause of death for primary mortality tabulation
(WHA 21.44)**

The Twenty-first World Health Assembly,
Recalling its recommendation contained in operative paragraph 1d of resolution WHA 20.19.,

Confirms the annexed rules for selection of the cause of death for primary mortality tabulation.

ANNEX

Rules for classification

(Reprint from the International Classification of Diseases, 1965 Revision, Volume 1, World Health Organization.)

Rules for selection of cause of death for primary mortality tabulation

When only one cause of death is recorded, this cause is selected for tabulation.

When more than one cause of death is recorded, selection should be made in accordance with the rules which follow. The rules are based on the concept of the underlying cause, i.e. the disease or injury which initiated the sequence of events which led to death. Where the selected cause is an injury, either the circumstances which gave rise to the injury, or the nature of the injury, or preferably both should be coded.

Selection of the cause to be coded comprises two stages; selection of the underlying cause, and subsequent modification of the underlying cause. These two stages are described below.

Selection of the underlying cause

The rules for selecting the underlying cause are as follows. Either the General rule or Rule 1 or Rule 2 will apply to all certificates. Rule 3 may apply in addition to one of these.

General rule

Select the condition entered alone on the lowest used line of Part I unless it is highly improbable that this condition could have given rise to all the conditions entered above it.

Rule 1

If there is a reported sequence terminating in the condition first entered on the certificate, select the underlying cause of this sequence. If there is more than one such sequence, select the underlying cause of the first-mentioned sequence.

Rule 2

If there is no reported sequence terminating in the condition first entered on the certificate, select this first mentioned condition.

Rule 3

If the condition selected by the General rule or Rules 1 or 2 can be considered a direct sequel of another reported condition, whether in Part I or Part II, select this primary condition. If there are two or more such primary conditions, select the first mentioned of these.

In a properly completed certificate, the underlying cause will have been entered alone on the lowest used line of Part I and the conditions, if any, which arose as a consequence of this underlying cause will have been entered above it, one condition to a line, in ascending causal order of sequence.

Example 1: I(a) Uraemia
 (b) Retention of urine
 (c) Hypertrophy of prostate

Example 2: I(a) Bronchopneumonia
 (b) Chronic bronchitis
 II Chronic myocarditis

In a properly completed certificate, therefore, the General rule will apply. However, the fact that the certificate as a whole has not been completed in an entirely satisfactory manner does not preclude the application of the General rule.

Provided that it is not highly improbable that the condition entered alone on the lowest used line of Part I could have given rise to all the conditions above it, the General rule should be applied, even though the conditions entered above it have not been entered in a correct causal order of sequence.

Example 3: I(a) Gangrene of intestine and
 (b) peritonitis
 (c) Volvulus of caecum

Example 4: I(a) Coronary thrombosis
 (b) Cerebral haemorrhage
 (c) Arteriosclerosis

The General rule should be discarded only when the certifier has entered more than one condition on the lowest used line of Part I or has entered there a single condition and it is highly improbable that this condition could have given rise to all the conditions entered above it. Guidance on the interpretation of "highly improbable" is given at the end of the rules, but it should be borne in mind that the medical certifier's statement indicates his opinion about the conditions leading to death and about their relationship one to another, and this opinion should not be lightly disregarded.

Where the General rule cannot be applied, clarification of the certificate should be sought from the certifier whenever this is possible, since the remaining selection rules are somewhat arbitrary and may not always lead to a satisfactory selection of the underlying cause. Where further clarification cannot be obtained, however, Rule 1 or Rule 2 must be applied.

In these rules, the term "reported sequence" means two or more conditions entered on successive lines of Part I, each condition being an acceptable cause of the one entered on the line above it. Rule 1 is applicable only if such a reported sequence, terminating in the condition first entered on the certificate, is found.

If such a sequence is not found, Rule 2 applies and the first entered condition is selected.

The condition selected by the above rules may, however, be an obvious sequel of another condition which was not reported in a correct causal relationship with it, e.g. in Part II or on the same line in Part I.

If so, then Rule 3 also applies and the primary condition is selected. It applies, however, only when there is no doubt about the causal relationship between the two conditions; it is not sufficient that a causal relationship between them would have been accepted if the certifier had reported it.

Modification of the underlying cause

The underlying cause, as selected by the above rules, will not necessarily be the most useful and informative condition for tabulations of mortality data.

For example, if senility or some generalized disease such as hypertension or arteriosclerosis has been selected, more useful information will be conveyed if the condition to be tabulated is some reported manifestation of the ageing or disease process. In other cases it may be necessary to modify the assignment to conform with provisions of the International Classification of Diseases for a single code for two or more causes jointly reported or for preference for a particular cause when reported with certain other conditions.

The modification rules (Rules 4-10), therefore, are intended to improve the usefulness and precision of mortality tabulations and should be applied after selection of the underlying cause by means of the selection rules. The processes of selection and modification have been separated for the sake of clarity, though they are closely interwoven; it will be seen, for example, that some of the modification rules require a renewed application of the selection rules. This should present no difficulty to experienced coders but for beginning coders the importance of going through the mental processes of selection, modification and, if necessary, re-selection, should be emphasized.

Examples of the selection rules

General rule

Select the condition on the lowest used line of Part I unless it is highly improbable that this condition could have given rise to all the conditions entered above it

- Example 5: I(a) Abscess of lung
(b) Lobar pneumonia

Select lobar pneumonia.

- Example 6: I(a) Hepatic failure
(b) Bile duct obstruction
(c) Carcinoma of pancreas

Select carcinoma of pancreas.

- Example 7: I(a) Secondaries in lung with lung abscess
(b) Cancer of brain

Select cancer of brain.

- Example 8: I(a) Pulmonary oedema
II Secondary anaemie and chronic lymphatic leukaemia

Select pulmonary oedema. But rule 3 also applies; see example 21.

Rule 1. If there is a reported sequence terminating in the condition first entered on the certificate, select the underlying cause of this sequence. If there is more than one such sequence, select the underlying cause of the first mentioned sequence.

- Example 9: I(a) Coronary embolism
(b) Arteriosclerotic heart disease
(c) Influenza

Select arteriosclerotic heart disease. The reported sequence terminating in the condition first entered on the certificate is coronary embolism due to arteriosclerotic heart disease. But Rule 7 also applies; see example 41.

- Example 10: I(a) Bronchopneumonia
(b) Cerebral thrombosis and hypertensive heart disease

Select cerebral thrombosis. There are two reported sequences terminating in the condition first entered on the certificate; bronchopneumonia due to cerebral thrombosis, and bronchopneumonia due to hypertensive heart disease. The underlying cause of the first mentioned sequence is selected.

Where the General rule cannot be applied, clarification of the certificate should be sought from the certifier whenever this is possible, since the remaining selection rules are somewhat arbitrary and may not always lead to a satisfactory selection of the underlying cause. Where further clarification cannot be obtained, however, Rule 1 or Rule 2 must be applied.

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If such a sequence is not found, Rule 2 applies and the first entered condition is selected.

The condition selected by the above rules may, however, be an obvious sequel of another condition which was not reported in a correct causal relationship with it, e.g. in Part II or on the same line in Part I.

If so, then Rule 3 also applies and the primary condition is selected. It applies, however, only when there is no doubt about the causal relationship between the two conditions; it is not sufficient that a causal relationship between them would have been accepted if the certifier had reported it.

Modification of the underlying cause

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For example, if senility or some generalized disease such as hypertension or arteriosclerosis has been selected, more useful information will be conveyed if the condition to be tabulated is some reported manifestation of the ageing or disease process. In other cases it may be necessary to modify the assignment to conform with provisions of the International Classification of Diseases for a single code for two or more causes jointly reported or for preference for a particular cause when reported with certain other conditions.

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(b) Bile duct obstruction
(c) Carcinoma of pancreas

Select carcinoma of pancreas.

Example 7: I(a) Secondaries in lung with lung abscess
(b) Cancer of brain

Select cancer of brain.

Example 8: I(a) Pulmonary oedema
II Secondary anaemie and chronic lymphatic leukaemia

Select pulmonary oedema. But rule 3 also applies; see example 21.

Rule 1. If there is a reported sequence terminating in the condition first entered on the certificate, select the underlying cause of this sequence. If there is more than one such sequence, select the underlying cause of the first mentioned sequence.

Example 9: I(a) Coronary embolism
(b) Arteriosclerotic heart disease
(c) Influenza

Select arteriosclerotic heart disease. The reported sequence terminating in the condition first entered on the certificate is coronary embolism due to arteriosclerotic heart disease. But Rule 7 also applies; see example 41.

Example 10: I(a) Bronchopneumonia
(b) Cerebral thrombosis and hypertensive heart disease

Select cerebral thrombosis. There are two reported sequences terminating in the condition first entered on the certificate; bronchopneumonia due to cerebral thrombosis, and bronchopneumonia due to hypertensive heart disease. The underlying cause of the first mentioned sequence is selected.

- Example 11: I(a) Oesophageal varices and congestive heart failure
 (b) Cirrhosis of liver and chronic rheumatic heart disease

Select cirrhosis of liver. The reported sequence terminating in the condition first entered on the certificate is oesophageal varices due to cirrhosis of liver.

- Example 12: I(a) Pericarditis
 (b) Uraemia and pneumonia

Select uraemia. There are two reported sequences terminating in the condition first entered on the certificate; pericarditis due to uraemia, and pericarditis due to pneumonia. The underlying cause of the first mentioned sequence is selected. But rule 5 also applies, example 30.

- Example 13: I(a) Cerebral haemorrhage and hypostatic pneumonia
 (b) Hypertension and diabetes
 (c) Arteriosclerosis

Select arteriosclerosis. There are two reported sequences terminating in the condition first entered on the certificate; cerebral haemorrhage due to hypertension due to arteriosclerosis, and cerebral haemorrhage due to diabetes. The underlying cause of the first mentioned sequence is selected. But rule 7 also applies; see example 42.

- Example 14: I(a) Cerebral haemorrhage
 (b) Hypertension
 (c) Chronic pyelonephritis and prostatic obstruction

Select chronic pyelonephritis. This is the condition which is the underlying cause of the reported sequence terminating in the condition first entered on the certificate; the other condition on line (c) is not reported in sequence. But rule 3 also applies; see example 22.

Rule 2. If there is no reported sequence terminating in the condition first entered on the certificate, select this first mentioned condition.

- Example 15: I(a) Pernicious anaemia and gangrene of
 (b) foot
 (c) Arteriosclerosis

Select pernicious anaemia. There is a reported sequence, gangrene of foot due to arteriosclerosis, but it does not terminate in the condition first entered on the certificate.

Example 16: I(a) Rheumatic and arteriosclerotic heart
(b) disease

Select rheumatic heart disease. There is no reported sequence.

Example 17: I(a) Senility and hypostatic pneumonia
(b) Rheumatoid arthritis

Select senility. There is a reported sequence, hypostatic pneumonia due to rheumatoid arthritis, but it does not determinate in the condition first entered on the certificate. But rule 4 also applies; see example 26.

Example 18: I(a) Fibrocystic disease of the pancreas
(b) Bronchitis and bronchiectasis

Select fibrocystic disease of the pancreas. There is no reported sequence.

Example 19: I(a) Bursitis and ulcerative colitis

Select bursitis. There is no reported sequence. But rule 6 also applies; see example 33.

Example 20: I(a) Acute nephritis, scarlet fever.

Select acute nephritis. There is no reported sequence. But rule 3 also applies; see example 23.

Rule 3. If the condition selected by the General rule or Rules 1 or 2 can be considered a direct sequel of another reported condition, whether in Part I or Part II, select this primary condition. If there are two or more such primary conditions, select the first mentioned of these.

Example 21: I(a) Pulmonary oedema
II Secondary anaemia and chronic lymphatic leukaemia

Select chronic lymphatic leukaemia. Pulmonary oedema, selected by the General rule (see example 8), can be considered a direct sequel of either of the condition in Part II, but secondary anaemia is itself a direct sequel of lymphatic leukaemia.

Example 22: I(a) Cerebral haemorrhage
(b) Hypertension
(c) Chronic pyelonephritis and prostatic obstruction

Select prostatic obstruction. Chronic pyelonephritis, selected by Rule 1 (see example 14), can be considered a direct sequel of prostatic obstruction.

- Example 11: I(a) Oesophageal varices and congestive heart failure
 (b) Cirrhosis of liver and chronic rheumatic heart disease

Select cirrhosis of liver. The reported sequence terminating in the condition first entered on the certificate is oesophageal varices due to cirrhosis of liver.

- Example 12: I(a) Pericarditis
 (b) Uraemia and pneumonia

Select uraemia. There are two reported sequences terminating in the condition first entered on the certificate; pericarditis due to uraemia, and pericarditis due to pneumonia. The underlying cause of the first mentioned sequence is selected. But rule 5 also applies, example 30.

- Example 13: I(a) Cerebral haemorrhage and hypostatic pneumonia
 (b) Hypertension and diabetes
 (c) Arteriosclerosis

Select arteriosclerosis. There are two reported sequences terminating in the condition first entered on the certificate; cerebral haemorrhage due to hypertension due to arteriosclerosis, and cerebral haemorrhage due to diabetes. The underlying cause of the first mentioned sequence is selected. But rule 7 also applies; see example 42.

- Example 14: I(a) Cerebral haemorrhage
 (b) Hypertension
 (c) Chronic pyelonephritis and prostatic obstruction

Select chronic pyelonephritis. This is the condition which is the underlying cause of the reported sequence terminating in the condition first entered on the certificate; the other condition on line (c) is not reported in sequence. But rule 3 also applies; see example 22.

Rule 2. If there is no reported sequence terminating in the condition first entered on the certificate, select this first mentioned condition.

- Example 15: I(a) Pernicious anaemia and gangrene of
 (b) foot
 (c) Arteriosclerosis

Select pernicious anaemia. There is a reported sequence, gangrene of foot due to arteriosclerosis, but it does not terminate in the condition first entered on the certificate.

Example 16: I(a) Rheumatic and arteriosclerotic heart ;
(b) disease

Select rheumatic heart disease. There is no reported sequence.

Example 17: I(a) Senility and hypostatic pneumonia
(b) Rheumatoid arthritis

Select senility. There is a reported sequence, hypostatic pneumonia due to rheumatoid arthritis, but it does not determinate in the condition first entered on the certificate. But rule 4 also applies; see example 26.

Example 18: I(a) Fibrocystic disease of the pancreas
(b) Bronchitis and bronchiectasis

Select fibrocystic disease of the pancreas. There is no reported sequence.

Example 19: I(a) Bursitis and ulcerative colitis

Select bursitis. There is no reported sequence. But rule 6 also applies; see example 33.

Example 20: I(a) Acute nephritis, scarlet fever.

Select acute nephritis. There is no reported sequence. But rule 3 also applies; see example 23.

Rule 3. If the condition selected by the General rule or Rules 1 or 2 can be considered a direct sequel of another reported condition, whether in Part I or Part II, select this primary condition. If there are two or more such primary conditions, select the first mentioned of these.

Example 21: I(a) Pulmonary oedema
II Secondary anaemia and chronic lymphatic leukaemia

Select chronic lymphatic leukaemia. Pulmonary oedema, selected by the General rule (see example 8), can be considered a direct sequel of either of the condition in Part II, but secondary anaemia is itself a direct sequel of lymphatic leukaemia.

Example 22: I(a) Cerebral haemorrhage
(b) Hypertension
(c) Chronic pyelonephritis and prostatic obstruction

Select prostatic obstruction. Chronic pyelonephritis, selected by Rule 1 (see example 14), can be considered a direct sequel of prostatic obstruction.

Example 23: I(a) Acute nephritis, scarlet fever

Select scarlet fever. Acute nephritis, selected by Rule 2 (see example 20), can be considered a direct sequel of scarlet fever.

Example 24: I(a) Nephrectomy
II Embryoma of kidney

Select cerebral haemorrhage. Hypostatic pneumonia, selected by Rule 2 was performed for the embryoma of kidney.

Example 25: I(a) Hypostatic pneumonia, cerebral
(b) haemorrhage and cancer of
(c) breast

Select cerebral haemorrhage. Hypostatic pneumonia, selected by Rule 2, can be considered a direct sequel of either of the other conditions reported; the one first mentioned is selected.

Examples of the modification rules
Senility

Rule 4. Where the selected underlying cause is classifiable to 794 (Senility) and a condition classifiable elsewhere than to 780-796 is reported on the certificate, re-select the underlying cause as if the senility had not been reported, except to take account of the senility if it modifies the coding.

Example 26: I(a) Senility and hypostatic pneumonia
(b) Rheumatoid arthritis

Code to rheumatoid arthritis. The senility, selected by Rule 2 (see example 17), is ignored and the General rule applied.

Example 27: I(a) Cerebral arteriosclerosis
(b) Senility
II Gastro-enteritis

Code to cerebral arteriosclerosis. The senility is ignored and the General Rule applied.

Example 28: (a) Myocardial degeneration and
(b) emphysema
(c) Senility

Code to myocardial degeneration. The senility is ignored and Rule 2 applied.

Example 29: I(a) Psychosis
(b) Senility

Code to senile psychosis. The senility modifies the coding.

Ill-defined conditions

Rule 5. Where the selected underlying cause is classifiable to 780-793, 795 or 796 (the ill-defined conditions) and a condition classifiable elsewhere than to 780-796 is reported on the certificate, re-select the underlying cause as if the ill-defined condition had not been reported, except to take account of the ill-defined condition if it modifies the coding.

Example 30: I(a) Pericarditis
(b) Uraemia and pneumonia

Code to pneumonia. Uraemia, selected by Rule 1 (see example 12), is ignored and the General rule applied.

Example 31: (a) Dehydration
(b) Haematemesis and
(c) arteriosclerosis

Code to arteriosclerosis. Haematemesis and dehydration, both ill-defined conditions, are successively ignored, and the only defined condition reported is selected.

Example 32: I(a) Anaemia
(b) Splenomegaly

Code to splenomegalic anaemia. Splenomegaly modifies the coding.

Trivial conditions

Rule 6. Where the selected underlying cause is a trivial condition unlikely itself to cause death and not reported as the cause of a more serious complication, and a more serious unrelated condition is reported on the certificate, re-select the underlying cause as if the trivial condition had not been reported.

Example 33: I(a) Bursitis and ulcerative colitis

Code to ulcerative colitis. Bursitis, selected by Rule 2 (see example 19), is ignored.

Example 34: I(a) Dental caries
II Tetanus

Code to tetanus.

Example 35: I(a) Dermatitis, perforating duodenal
(b) ulcer and hypertensive heart
(c) disease

Code to perforating duodenal ulcer. Dermatitis is ignored and Rule 2 applied to the remaining conditions.

Example 23: I(a) Acute nephritis, scarlet fever

Select scarlet fever. Acute nephritis, selected by Rule 2 (see example 20), can be considered a direct sequel of scarlet fever.

Example 24: I(a) Nephrectomy
II Embryoma of kidney

Select cerebral haemorrhage. Hypostatic pneumonia, selected by Rule was performed for the embryoma of kidney.

Example 25: I(a) Hypostatic pneumonia, cerebral
(b) haemorrhage and cancer of
(c) breast

Select cerebral haemorrhage. Hypostatic pneumonia, selected by Rule 2, can be considered a direct sequel of either of the other conditions reported; the one first mentioned is selected.

Examples of the modification rules

Senility

Rule 4. Where the selected underlying cause is classifiable to 794 (Senility) and a condition classifiable elsewhere than to 780-796 is reported on the certificate, re-select the underlying cause as if the senility had not been reported, except to take account of the senility if it modifies the coding.

Example 26: I(a) Senility and hypostatic pneumonia
(b) Rheumatoid arthritis

Code to rheumatoid arthritis. The senility, selected by Rule 2 (see example 17), is ignored and the General rule applied.

Example 27: I(a) Cerebral arteriosclerosis
(b) Senility
II Gastro-enteritis

Code to cerebral arteriosclerosis. The senility is ignored and the General Rule applied.

Example 28: (a) Myocardial degeneration and
(b) emphysema
(c) Senility

Code to myocardial degeneration. The senility is ignored and Rule 2 applied.

Example 29: I(a) Psychosis
(b) Senility

Code to senile psychosis. The senility modifies the coding.

Ill-defined conditions

Rule 5. Where the selected underlying cause is classifiable to 780-793, 795 or 796 (the ill-defined conditions) and a condition classifiable elsewhere than to 780-796 is reported on the certificate, re-select the underlying cause as if the ill-defined condition had not been reported, except to take account of the ill-defined condition if it modifies the coding.

Example 30: I(a) Pericarditis
(b) Uraemia and pneumonia

Code to pneumonia. Uraemia, selected by Rule 1 (see example 12), is ignored and the General rule applied.

Example 31: (a) Dehydration
(b) Haematemesis and
(c) arteriosclerosis

Code to arteriosclerosis. Haematemesis and dehydration, both ill-defined conditions, are successively ignored, and the only defined condition reported is selected.

Example 32: I(a) Anaemia
(b) Splenomegaly

Code to splenomegalic anaemia. Splenomegaly modifies the coding.

Trivial conditions

Rule 6. Where the selected underlying cause is a trivial condition unlikely itself to cause death and not reported as the cause of a more serious complication, and a more serious unrelated condition is reported on the certificate, re-select the underlying cause as if the trivial condition had not been reported.

Example 33: I(a) Bursitis and ulcerative colitis

Code to ulcerative colitis. Bursitis, selected by Rule 2 (see example 19), is ignored.

Example 34: I(a) Dental caries
II Tetanus

Code to tetanus.

Example 35: I(a) Dermatitis, perforating duodenal
(b) ulcer and hypertensive heart
(c) disease

Code to perforating duodenal ulcer. Dermatitis is ignored and Rule 2 applied to the remaining conditions.

Linkage

Rule 7. Where the selected underlying cause is linked by a provision in the Classification or in the list on pages 427-432 with one or more of the other conditions on the certificate, code to the combination.

Where the linkage provision is only for combinations of one condition specified as due to another, code to the combination only when the correct causal relationship is stated or can be inferred from application of the selection rules.

Where a conflict in linkages occurs, link with the condition to which the death would have been assigned if the underlying cause had not been reported.

Example 36: I(a) Myocardial degeneration
(b) Hypertension

Code to hypertensive heart disease.

Example 37: I(a) Acute otitis media
II Mastoiditis

Code to acute otitis media with mastoiditis.

Example 38: I(a) Cardiac dilatation and renal sclerosis
(b) Hypertension

Code to hypertensive heart and renal disease. All three conditions combine.

Example 39: I(a) Parkinsonism
(b) Arteriosclerosis

Code to paralysis agitans. The conditions are stated in the correct causal relationship for the "due to" linkage.

Example 40: I(a) Aortic aneurysm and generalized
(b) arteriosclerosis

Code to aortic aneurysm (non-syphilitic). The correct causal relationship for the "due to" linkage can be inferred from the use of rule 3 to select arteriosclerosis as the underlying cause.

Example 41: I(a) Coronary embolism
(b) Arteriosclerotic heart disease
(c) Influenza

Code to coronary embolism. Arteriosclerotic heart disease, selected by rule 1 (see example 9), links with coronary embolism.

- Example 42: I(a) Cerebral haemorrhage and hypostatic pneumonia
 (b) Hypertension and diabetes
 (c) Arteriosclerosis

Code to cerebral haemorrhage with hypertension. Arteriosclerosis, selected by rule 1 (see example 13), links with hypertension, which itself links with cerebral haemorrhage.

- Example 43: I(a) Myocardial degeneration
 (b) Arteriosclerosis
 II Cerebral haemorrhage

Code to myocardial degeneration. Link with myocardial degeneration since the death would have been assigned to this condition by the General rule if arteriosclerosis had not been reported.

- Example 44: I(a) Cerebral haemorrhage
 (b) Arteriosclerosis and hypertensive heart disease
 (c) disease

Code to hypertensive heart disease. Link with hypertensive heart disease since the death would have been assigned to this condition by the General rule if arteriosclerosis had not been reported.

- Example 45: I(a) Cerebral haemorrhage and hypertensive heart disease
 (b) heart disease
 (c) Arteriosclerosis

Code to cerebral haemorrhage. Link with cerebral haemorrhage since the death would have been assigned to this condition by Rule 2 if arteriosclerosis had not been reported.

- Example 46: I(a) Coronary embolism
 (b) Myocarditis and nephritis
 (c) Hypertension

Code to coronary embolism with hypertension. Link with myocarditis since the death would have been assigned to this condition by rule 1 if hypertension had not been reported, and myocarditis itself links with coronary embolism.

Specificity

Rule 8. Where the selected underlying cause describes a condition in general terms and a term which provides more precise information about the site or nature of this condition is reported on the certificate, prefer the more informative term. This rule will often apply when the general term can be regarded as an adjective qualifying the more precise term.

Example 47: I(a) Cerebral thrombosis
(b) Cerebrovascular accident

Code to cerebral thrombosis.

Example 48: I(a) Rheumatic heart disease, mitral stenosis

Code to rheumatic mitral stenosis.

Example 49. I(a) Meningitis
(b) Tuberculosis

Code to tuberculosis of meninges. The meningitis must be tuberculous meningitis, since the sequence is acceptable.

Example 50: I(a) Toxaemia of pregnancy
II Eclamptic convulsions

Code to eclampsia of pregnancy

Example 51: I(a) Aneurysm of aorta
(b) Syphilis

Code to syphilitic aneurysm of aorta. The aneurysm must be syphilitic, since the sequence is acceptable.

Example 52: I(a) Internal injuries from automobile accident
II Ruptured spleen

Code to rupture of spleen and automobile accident.

Early and late stages of disease

Rule 9. Where the selected underlying cause is an early stage of a disease and a more advanced stage of the same disease is reported on the certificate, code to the more advanced stage. This rule does not apply to a "chronic" form reported as due to an "acute" form unless the Classification gives special instructions to that effect.

Example 53: I(a) Tertiary syphilis
(b) Primary syphilis

Code to tertiary syphilis.

Example 54: I(a) Eclampsia during pregnancy
(b) Pre-eclamptic toxaemia

Code to eclampsia of pregnancy

Example 55: I(a) Chronic myocarditis
(b) Acute myocarditis

Code to acute myocarditis

- Example 56: I(a) Chronic nephritis
(b) Acute nephritis

Code to chronic nephritis.

Late effects

Rule 10. Where the selected underlying cause is an early form of a condition for which the Classification provides a separate late effects category and there is evidence that death occurred from residual effects of this condition rather than in its active phase, code to the appropriate late effects category.

- Example 57: I(a) Pulmonary fibrosis
(b) Old pulmonary tuberculosis

Code to late effects of respiratory tuberculosis.

- Example 58: I(a) Heart failure
(b) Curvature of spine
(c) Rickets in childhood

Code to late effects of rickets.

- Example 59: I(a) Hydrocephalus
(b) Cerebral abscess

Code to late effects of intracranial abscess.

- Example 60: I(a) Cerebral palsy 2 years
(b) Birth injury

Code to cerebral spastic infantile paralysis. This category includes residuals of birth injury to brain.

- Example 61: I(a) Paralysis
(b) Fractured spine
(c) Automobile accident, 18 months ago

Code to late effects of automobile accident and late effects of fracture of vertebral column with spinal cord lesion.

Old infective and maternal conditions

Rule 11. Where the selected underlying cause is an infective disease classifiable to 000-003, 020, 021, 032-035, 036.0, 036.8, 037, 050, 052, 055, 056, 060, 071, 072, 080-083, 470-474, 480-486 or a maternal cause classifiable to 630-678, and there is evidence that the date of onset was

1 year or more prior to death or a resultant chronic condition is reported, proceed as follows:

(a) if a late effect of the underlying cause is reported on the certificate, code to the late effect;

(b) if no late effect is reported but there is another condition entered on the certificate, code to the other condition;

(c) if there is no other condition reported on the certificate, code to "Other unknown and unspecified causes" (796.9).

Example 62: I(a) Cerebral haemorrhage
 (b) Hypertension
 (c) Childbirth, 5 years ago

Code to cerebral haemorrhage with hypertension.

Example 63: I(a) Chronic nephritis
 (b) Scarlet fever

Code to chronic nephritis.

Example 64: I(a) Meningococcal meningitis, 4 years ago
 II Regional enteritis

Code to regional enteritis.

Example 65: I(a) Pneumonia 1 year

Code to unknown cause.

Notes for use in primary mortality coding

When a condition in one of the categories shown in the following list is reported as a cause of death, the provisions of the relevant note should be applied.

Notes dealing with the linkage of conditions appear at the categories from which the combination is excluded.

011 Pulmonary tuberculosis

Excludes with conditions in 515 (Pneumoconiosis due to silica and silicates (010)

012.3 Tuberculous laryngitis

012.9 Other respiratory tuberculosis

013-017 Tuberculosis of other organs

Excludes with conditions in 011 (Pulmonary tuberculosis (011) unless reported as the underlying cause of and with a specified duration exceeding that of the condition in 011.

018 Disseminated tuberculosis

Excludes with conditions in:

- 011 (Pulmonary tuberculosis) (011)
- 013 (Tuberculosis of meninges and central nervous system) (013)
- 035 Erysipelas
- 037 Tetanus
- 038 Septicaemia

Code to these diseases when they follow vaccination or a slight injury (any condition in N910–N918, prick, splinter, minor cut, puncture (except of trunk), bruise or contusion of superficial tissues or external parts, burn of first degree); when they follow a more serious injury, code to the injury.

196 Secondary and unspecified malignant neoplasm of lymph nodes
197 Secondary malignant neoplasm of respiratory and digestive systems

198 Other secondary malignant neoplasm

Not to be used if the site of the primary neoplasm is known.

292–294 Psychosis associated with physical conditions

309 Mental disorders not specified as psychotic associated with physical conditions

310–315 Mental retardation

Not to be used if the underlying physical condition is known.

303 Alcoholism

Excludes with conditions in 571.9 (Other cirrhosis of liver) (571.0)

323 Encephalitis, myelitis, and encephalomyelitis

Not to be used if the antecedent condition is known:

postchickenpox encephalitis (052)

postmeasles encephalitis (055)

otitic encephalitis (381.9)

influenzal encephalitis (474)

345 Epilepsy

Includes accidents resulting from epilepsy.

Excludes epilepsy due to trauma (code to appropriate N and E categories; if the nature of injury is not known, code to N854).

379 Blindness

388 Deaf mutism

389 Other deafness

Not to be used if the antecedent condition is known.

397 Diseases of other endocardial structures

Excludes with condition in:

- 394 (Diseases of mitral valve) (394)
- 395 (Diseases of aortic valve) (395)
- 396 (Diseases of mitral and aortic valves) (396)
- 400-404 Hypertensive disease

Excludes with conditions in 410-414 (Ischaemic heart disease) (410-414 with 4th digit. 0).

401-404 Hypertensive disease not specified as malignant

Excludes with conditions in 400 (Malignant hypertension) (400).

401 Essential benign hypertension

Excludes with conditions in:

- 430-438 (Cerebrovascular disease) (430-438 with 4th digit. 0)
- 427 (Symptomatic heart disease) (402)
- 428 (Other myocardial insufficiency) (402)
- 429 (Ill-defined heart disease) (402)
- 580-583 (Nephritis and nephrotic syndrome) (580-583)
- 584 (Renal sclerosis unqualified) (403)

and when reported as the underlying cause of conditions in 424 (Chronic disease of endocardium) (424)

402 Hypertensive heart disease

Excludes with conditions in:

- 403 (Hypertensive renal disease) (404)
- 584 (Renal sclerosis unqualified) (404)
- 403 Hypertensive renal disease

Excludes with conditions in:

- 402 (Hypertensive heart disease) (404)
- 427 (Symptomatic heart disease) (404)
- 428 (Other myocardial insufficiency) (404)
- 429 (Ill-defined heart disease) (404)

411 Other acute and subacute forms of ischaemic heart disease

412 Chronic ischaemic heart disease

413 Angina pectoris

Excludes with conditions in 410 (Acute myocardial infarction) (410)

424 Chronic disease of endocardium

When more than one valve is mentioned, priority in classification is in the order mitral, aortic, other.

426 Pulmonary heart disease

Not to be used if the underlying pulmonary condition is known (except for the term "kyphoscoliotic heart disease").

427 Symptomatic heart disease

428 Other myocardial insufficiency

429 Ill-defined heart disease

Excludes with:

malignant hypertension (400.1)

hypertension, benign or unspecified (402)

conditions in 410-414 (Ischaemic heart disease) (410-414)

428 Other myocardial insufficiency

Excludes with arteriosclerosis (412)

429 Ill-defined heart disease

Excludes with conditions in 519.1 (Acute oedema of lung) (427.1)

430-438 Cerebrovascular disease

Excludes with malignant hypertension (400.2)

437 Generalized ischaemic cerebrovascular disease

Excludes with conditions in 430-434 (Cerebral haemorrhage and infarction) (430-434)

and when reported as the underlying cause of conditions in 342 (Paralysis agitans) (342).

440 Arteriosclerosis

Excludes with conditions in:

400-404 Hypertensive disease) (400-404)

410-414 (Ischaemic heart disease) (410-414)

430-438 (Cerebrovascular disease) (430-438)

428 (Other myocardial insufficiency) (412)

445.9 (Gangrene not elsewhere classified) (445.0)

and when reported as the underlying cause of conditions in:

342 (Paralysis agitans) (342)

424 (Chronic disease of endocardium) (424)

441-444 } (Other diseases of arteries and arterioles,
446 } except gangrene) (441-444, 446)

584 (Renal sclerosis unqualified) (403)
and of the terms nephritis (chronic) (interstitial) and Bright's disease (chronic) in 582, 583 (403).

460 Acute nasopharyngitis

465 Acute upper respiratory infection of multiple or unspecified sites

Excludes when reported as the underlying cause of serious conditions such as meningitis (320), brain abscess (322), otitis media, mastoiditis (381-383), influenza (470-474), pneumonia (480-486), bronchitis (490, 491), acute nephritis (580).

490 Bronchitis, unqualified

Excludes with conditions in 492 (Emphysema) (491).

492 Emphysema

Excludes with conditions in 490, 491 (Bronchitis, chronic or unqualified) (491).

493 Asthma

Excludes with conditions in:

466 (Acute bronchitis and bronchiolitis) (466)

490 (Bronchitis, unqualified) (490)

491 (Chronic bronchitis) (491)

492 (Emphysema) (492).

515 Pneumoconiosis due to silica and silicates

Excludes with conditions in 011 (Pulmonary tuberculosis) (010).

519.1 Acute oedema of lung

Excludes with conditions in:

429 (Ill-defined heart disease) (427.1)

782.4 (Acute heart failure, undefined) (427.1)

580-584 Nephritis and nephrosis

Excludes with malignant hypertension (400.3).

580 Acute nephritis

Excludes when reported as the underlying cause of conditions in 582 (Chronic nephritis) (582).

584 Renal sclerosis unqualified

Excludes with conditions in:

401 (Essential benign hypertension) (403)

402 (Hypertensive heart disease) (404).

403 (Hypertensive renal disease) (403).

593.2 Other renal disease

Excludes renal disease NOS and renal failure NOS with:
hypertension, benign or unspecified (403).

606 Sterility, male

628 Sterility, female

Not to be used if the causative condition is known.

630 Infections of genital tract during pregnancy

631 Ectopic pregnancy

Includes deaths from these causes even though delivery occurred before death.

632 Haemorrhage of pregnancy

Excludes deaths occurring after onset of labour (651). If there is no information as to delivery before death, it may be assumed that delivery occurred and that the condition complicated delivery.

633 Anaemia of pregnancy

635-639 Urinary infections and toxaeimias of pregnancy and puerperium

Includes deaths from these causes even though delivery occurred before death.

636 Renal disease arising during pregnancy and the puerperium

Excludes with conditions in:

637.0 (Pre-eclampsia) (637.0)

637.1 (Eclampsia) (637.1).

640 Abortion induced for medical indications

Not to be used if the complication of pregnancy or other condition requiring induction is known.

655 Delivery complicated by foetopelvic disproportion

Excludes with conditions in 654 (Delivery complicated by abnormality of bony pelvis) (654).

656 Delivery complicated by malpresentation of foetus

Excludes with conditions in 655 (Delivery complicated by foetopelvic disproportion) (655).

711 Acute non-pyogenic arthritis

Not to be used if the antecedent condition is known.

735 Curvature of spine

Excludes with conditions in:

427.0 (Congestive heart failure) (426)

427.1 (Left ventricular failure) (426)

429 (Ill-defined heart disease) (426)

782.4 (Acute heart failure, undefined) (426).

764-768 Difficulty labour

Excludes residual cerebral paralysis at age 4 weeks or over (343).

When more than one type of difficult labour is mentioned, priority in classification is in the order 764-768.

770 Conditions of placenta

771 Conditions of umbilical cord

772 Birth injury without mention of cause

774 Haemolytic disease of newborn with kernicterus

Excludes residual cerebral paralysis at age 4 weeks or over (343)

776 Anoxic and hypoxic conditions not elsewhere classified

Excludes residual cerebral paralysis at age 4 weeks or over (343).

Excludes with conditions in 760-771 (Maternal conditions. Difficult labour. Conditions of placenta and cord) (760-771).

777 Immaturity, unqualified

778.1 Post-maturity

779.0 Maceration

Not to be used if any other cause of perinatal mortality is reported.

782.4 Acute heart failure, undefined

Excludes with conditions in 519.1 (Acute oedema of lung) (427.1).

792 Uraemia

Excludes with malignant hypertension (400.3).

E930, E931 Complications and misadventures in therapeutic procedures

Not to be used if the condition for which the treatment was given is known.

N800-N803 Fracture of skull

When more than one site is mentioned, priority in classification is in the order base, vault, other.

N995 Certain early complications of trauma

Not to be used if the nature of the antecedent injury is known.

N997–N999 Complications of medical care

Not to be used if the medical care was for purposes of treatment and the condition for which the treatment was given is known.

Notes for interpretation of entries of causes of death

The foregoing rules will usually determine the underlying cause of death for primary mortality tabulation. Each country will need to amplify the rules, depending on the consistency and completeness of medical certification. The following paragraphs will be of assistance in formulating such additional instructions.

I. *Guides for the determination of the probability of sequences*

A. *Assumption of intervening cause*

The assumption of an intervening cause in Part I is permissible for the purpose of accepting a sequence as reported, but it must not be used to modify the coding.

- Example 1: I(a) Cerebral haemorrhage
(b) Chronic nephritis

Code to chronic nephritis (582). It is necessary to assume hypertension as a condition intervening between cerebral haemorrhage and the underlying cause, chronic nephritis.

- Example 2: I(a) Mentally retarded baby
(b) Difficult birth (prolonged labour)

Code to difficult labour without mention of birth injury, asphyxia, anoxia or hypoxia (768.9). The assumption of an intervening birth injury or hypoxia does not allow assignment to one of the other subdivisions of 768.

B. *Interpretation of "highly improbable"*

As a guide to the acceptability of sequences in the application of the selections rules, the following relationships should be regarded as "highly improbable":

(a) an infective or parasitic disease (000–136) other than erysipelas (035), tetanus (037), septicaemia or pyaemia (038), and gas gangrene (039.0) reported as "due to" any disease outside the group;

(b) a malignant neoplasm reported as "due to" any other disease;

(c) a congenital anomaly (740–759) reported as "due to" any other disease of the individual, including immaturity;

(d) diabetes (250), haemophilia (286.0), or influenza (470–474) reported as "due to" any other disease;

(e) rheumatic fever (390, 391) or rheumatic heart disease (394–398) reported as “due to” any disease other than streptococcal sore throat (034.0), scarlet fever (034.1), streptococcal septicaemia (038.0), and acute tonsillitis (463);

(f) a non-inflammatory disease of the central nervous system (330–349), 430–438), except cerebral embolism (434), reported as “due to” endocarditis (394–397, 421, 424) or to a disease of the digestive system (520–577);

(g) a condition of stated date of onset “X” reported as “due to” a condition of stated date of onset “Y”, when “X” predates “Y”.

The above list does not cover all “highly improbable” sequences, but in other cases the general rule should be followed unless there are strong indications to the contrary.

The following should be accepted as possible sequences in Part I of the certificate:

Acute or terminal circulatory diseases in 410–440 when reported as due to malignant neoplasm, diabetes or asthma.

II. *Effect of duration on classification*

In evaluating the reported sequence of the direct and antecedent causes, consideration should be given to any statements of the interval between the onset of the disease or condition and time of death. This would apply in the interpretation of “highly improbable” relationships, item I(g), and in rule 11.

Conditions classified as congenital anomalies in the International Classification of Diseases (Nos 740–759), even when not specified as congenital on the medical certificate, should be coded as such if the interval between onset and death and the age of the decedent indicate that the condition existed from birth.

The Classification provides for late effects of certain conditions by specific categories (Nos. 019, 044, 066, 077, 130.2, 265.1, 324, E940–E949, E 959, E969, E977, E989, E999), and by a fourth-digit subcategory “9” in the section for accidents, poisoning, and violence by nature of injury (Nos. N800–N839, N850–N918, N940–N959). In many cases these late effects include conditions present one year or more after onset of the disease or injury. Rule 10 applies to these categories.

III. *Sex limitations*

Certain categories in the Classification are limited to one sex (Nos. 185–187, 222, 257, 600–607 for males only and Nos. 180–184, 218–221, 234–236, 256, 612–678 for females only). If, after verification, the sex and cause of death on the certificate are not consistent, the death should be coded to “Other unknown and unspecified causes (796.9)”.

IV. *Operations*

If an operation appears on the certificate as the cause of death without mention of the condition for which it was performed, or of the findings at operation, and the index provides no assignment for it, it is to be assumed that the condition for which the operation is usually performed was present, and assignment will be made in accordance with the above rules for selection of the cause of death. However, if the name of the operation leaves in doubt what specific morbid condition was present, additional information is to be sought. Failing this, code to the residual category for the organ or site indicated by the name of the operation (e.g. code "gastrectomy" to 537); if the operation does not indicate an organ or site (e.g. "laparotomy"), code to "Other unknown and unspecified causes (796.9)", unless there is mention of a therapeutic misadventure (E930, E931).

V. *Malignant neoplasms of multiple sites*

If malignant neoplasms of more than one site are entered on the certificate, the site indicated as primary should be selected. This indication may be the specification of one site as 'primary', or of the other(s) as "secondary" or as "metastases", or an acceptable order of entry pointing to one site as the primary. Malignant neoplasm of liver or lymph nodes without specification as primary should be assumed to be secondary and assignment made to the other site mentioned, even if this is entered in Part II.

If there is no indication as to which was the primary site (for example, if sites are entered on the same liver or in a sequence which does not point to one as the primary), prefer a defined site to an ill-defined site in category 195 and of two or more defined sites prefer the first mentioned.

Of two or more specified sites of secondary malignant neoplasm, prefer the first mentioned.

VI. *Rheumatic fever with heart involvement*

See note at 391. If there is no statement that the rheumatic process was active at the time of death, assume activity if the heart condition (other than terminal conditions and bacterial endocarditis) which is specified as rheumatic or stated to be due to rheumatic fever is described as acute or subacute; in the absence of such description, the terms "carditis", "endocarditis", "heart disease", "myocarditis", and "pancarditis" can be regarded as acute if the interval between onset and death is less than one year or, if no interval is stated, if the age at death is under 15, and the term "pericarditis" can be regarded as acute at any age.

VII. *Congenital anomalies*

The following conditions may be regarded as congenital when causing death at the ages stated provided there is no indication that they were acquired after birth.

Under 1 year: aneurysm, aortic stenosis, atresia, atrophy of brain, cyst of brain, deformity, displacement of organ, ectopia, hypoplasia of organ, malformation, pulmonary stenosis, valvular heart disease.

Under 4 weeks: endocarditis, heart disease NOS, hydrocephalus NOS, myocarditis.

VIII. *Nature of injury*

Where more than one kind of injury in N800–N959 is mentioned and there is no clear indication as to which caused death, the injury to be coded should be selected in accordance with the following order of preference, provided that there is no contrary instruction in the classification:

fracture of skull (N800, N801, N803, N804) and broken neck (N805.0, N805.1), internal injury of chest, abdomen, pelvis (N860–N869)

fracture of face bones, spine, trunk (N802, N805.2–N805.9, N806–N809)

other head injury (N850–N854), open wounds (multiple) of neck and chest (N874, N875, N879, N904–N908), traumatic amputation of limbs (N887, N897)

and spinal cord lesion without evidence of spinal bone injury (N958)

fracture of limbs (N810–N829)

burn (N940–N949)

others in N800–N959

IX. *Adverse effect of medicinal agents*

When combinations of medicinal agents classified differently are involved, proceed as follows. If one component of the combination is specified as the cause of death, code to that component. Otherwise if the components are classified to the same three-digit category, code to the residual sub-category (.9); if not, code to N977.8, except for the particular combinations identified in N978.

X. *Expressions indicating doubtful diagnosis*

Qualifying expressions indicating some doubt as to the accuracy of the diagnosis, such as “apparently”, “presumably”, “possibly”, etc., should be ignored, since entries without such qualification differ only in degree of certainty of the diagnosis.

Uitgegeven de tweede juli 1969.

De Minister van Buitenlandse Zaken,

J. LUNS