

CODING REFERENCE CARD

NON-PRESSURE CHRONIC ULCERS

L97 Non-pressure chronic ulcer of lower limb, not elsewhere classified

INCLUDES Chronic ulcer of skin of lower limb NOS, non-healing ulcer of skin, non-infected sinus of skin, trophic ulcer NOS, tropical ulcer NOS, ulcer of skin of lower limb NOS

L97.1 Non-pressure chronic ulcer of thigh

L97.10X	Non-pressure chronic ulcer of unspecified thigh
L97.11X	Non-pressure chronic ulcer of right thigh
L97.12X	Non-pressure chronic ulcer of left thigh

L97.2 Non-pressure chronic ulcer of calf

L97.20X	Non-pressure chronic ulcer of unspecified calf
L97.21X	Non-pressure chronic ulcer of right calf
L97.22X	Non-pressure chronic ulcer of left calf

L97.3 Non-pressure chronic ulcer of ankle

L97.30X	Non-pressure chronic ulcer of unspecified ankle
L97.31X	Non-pressure chronic ulcer of right ankle
L97.32X	Non-pressure chronic ulcer of left ankle

L97.4 Non-pressure chronic ulcer of heel and midfoot

L97.40X	Non-pressure chronic ulcer of unspecified heel and midfoot
L97.41X	Non-pressure chronic ulcer of right heel and midfoot
L97.42X	Non-pressure chronic ulcer of left heel and midfoot

L97.5 Non-pressure chronic ulcer of other part of foot

L97.50X	Non-pressure chronic ulcer of other part of unspecified foot
L97.51X	Non-pressure chronic ulcer of other part of right foot
L97.52X	Non-pressure chronic ulcer of other part of left foot

L97.8 Non-pressure chronic ulcer of other part of lower leg

L97.80X	Non-pressure chronic ulcer of other part of unspecified lower leg
L97.81X	Non-pressure chronic ulcer of other part of right lower leg
L97.82X	Non-pressure chronic ulcer of other part of left lower leg

Note: All codes ending in X require a 6th digit to represent the severity of the ulcer, see below

- 1- Limited to breakdown of skin**
- 2- With fat layer exposed**
- 3- With necrosis of muscle**
- 4- With necrosis of bone**
- 5- With muscle involvement without evidence of necrosis**
- 6- With bone involvement without evidence of necrosis**
- 8- With other specified severity**
- 9- With unspecified severity**

NOTE: This tool is intended to assist with documentation only and not intended to take the place of clinical analysis. Information regarding any law or regulation does not constitute legal or tax advice and is subject to change based upon the issuance of new guidance and/or change in laws or regulations. Reference Official ICD-10-CM coding guidelines and manuals or electronic medical coding software for accurate ICD-10-CM codes and specificity.



The following entities, which serve the noted regions, are independent licensees of the Blue Cross Blue Shield Association: Western and Northeastern PA: Highmark Inc. d/b/a Highmark Blue Cross Blue Shield, Highmark Choice Company, Highmark Health Insurance Company, Highmark Coverage Advantage Inc., Highmark Benefits Group Inc., First Priority Health, First Priority Life or Highmark Senior Health Company. Central and Southeastern PA: Highmark Inc. d/b/a Highmark Blue Shield, Highmark Benefits Group Inc., Highmark Health Insurance Company, Highmark Choice Company or Highmark Senior Health Company. Delaware: Highmark BCBS Inc. d/b/a Highmark Blue Cross Blue Shield. West Virginia: Highmark West Virginia Inc. d/b/a Highmark Blue Cross Blue Shield, Highmark Health Insurance Company or Highmark Senior Solutions Company. Western NY: Highmark Western and Northeastern New York Inc. d/b/a Highmark Blue Cross Blue Shield. Northeastern NY: Highmark Western and Northeastern New York Inc. d/b/a Highmark Blue Shield.