

**Texas Prior Authorization Program
Clinical Edit Criteria**

Drug/Drug Class

Plavix (Clopidogrel)

Clinical Edit Information Included in this Document

- **Drugs requiring prior authorization:** the list of drugs requiring prior authorization for this clinical edit
- **Prior authorization criteria logic:** a description of how the prior authorization request will be evaluated against the clinical edit criteria rules
- **Logic diagram:** a visual depiction of the clinical edit criteria logic
- **Supporting tables:** a collection of information associated with the steps within the criteria (diagnosis codes, procedure codes, and therapy codes)
- **References:** clinical publications and sources relevant to this clinical edit

Note: Click the hyperlink to navigate directly to that section.

Revision Notes

Initial publication and posting to website



Plavix (Clopidogrel)

Drugs Requiring Prior Authorization

Drugs Requiring Prior Authorization	
Label Name	GCN
CLOPIDOGREL 75MG TABLET	96010
CLOPIDOGREL 300MG TABLET	99266



Plavix (Clopidogrel)

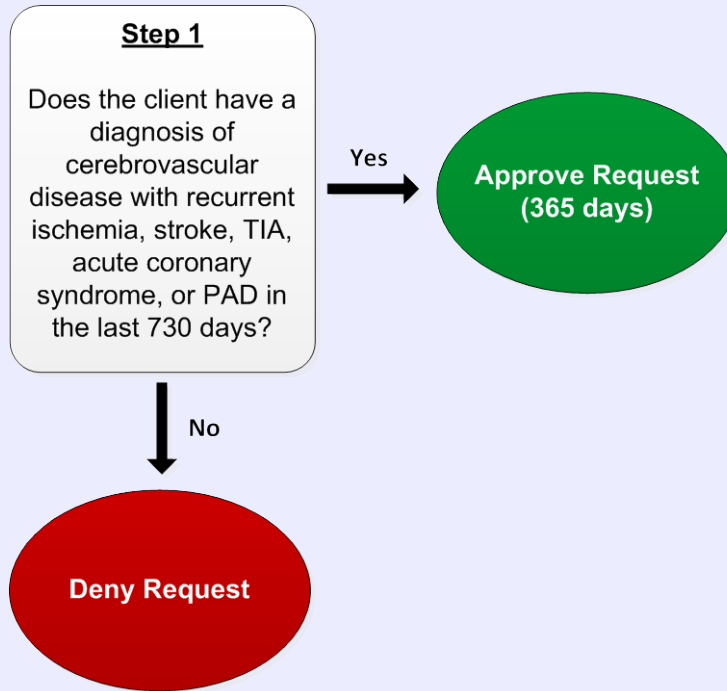
Clinical Edit Criteria Logic

1. Does the client have a diagnosis of cerebrovascular disease with recurrent ischemia, stroke, transient ischemic attack (TIA), acute coronary syndrome, or peripheral artery disease (PAD) in the last 730 days?
 - Yes – Approve (365 days)
 - No – Deny



Plavix (Clopidogrel)

Clinical Edit Criteria Logic Diagram





Plavix (Clopidogrel)

Clinical Edit Criteria Supporting Tables

Step 1 (diagnosis of cerebrovascular disease with recurrent ischemia, stroke, TIA, acute coronary syndrome, or peripheral artery disease) Required quantity: 1 Look back timeframe: 730 days	
ICD-9 Code	Description
410.1	ACUTE MYOCARDIAL INFARCTION OF OTHER ANTERIOR WALL
410.2	ACUTE MYOCARDIAL INFARCTION OF INFEROLATERAL WALL
410.3	ACUTE MYOCARDIAL INFARCTION OF INFEROPOSTERIOR WALL
410.4	ACUTE MYOCARDIAL INFARCTION OF OTHER INFERIOR WALL
410.5	ACUTE MYOCARDIAL INFARCTION OF OTHER LATERAL WALL
410.6	TRUE POSTERIOR WALL INFARCTION
410.7	SUBENDOCARDIAL INFARCTION
410.8	ACUTE MYOCARDIAL INFARCTION OF OTHER SPECIFIED SITES
410.9	ACUTE MYOCARDIAL INFARCTION OF UNSPECIFIED SITE
411.1	INTERMEDIATE CORONARY SYNDROME
411.81	ACUTE CORONARY OCCLUSION WITHOUT MYOCARDIAL INFARCTION
411.89	OTHER ACUTE AND SUBACUTE FORMS OF ISCHEMIC HEART DISEASE, OTHER
433.31	OCCLUSION AND STENOSIS OF MULTIPLE AND BILATERAL PRECEREBRAL ARTERIES WITH CEREBRAL INFARCTION
433.8	OCCLUSION AND STENOSIS OF OTHER SPECIFIED PRECEREBRAL ARTERY
433.80	OCCLUSION AND STENOSIS OF OTHER SPECIFIED PRECEREBRAL ARTERY WITHOUT MENTION OF CEREBRAL INFARCTION
433.81	OCCLUSION AND STENOSIS OF OTHER SPECIFIED PRECEREBRAL ARTERY WITH CEREBRAL INFARCTION
433.9	OCCLUSION AND STENOSIS OF UNSPECIFIED PRECEREBRAL ARTERY
433.90	OCCLUSION AND STENOSIS OF UNSPECIFIED PRECEREBRAL ARTERY WITHOUT MENTION OF CEREBRAL INFARCTION
433.91	OCCLUSION AND STENOSIS OF UNSPECIFIED PRECEREBRAL ARTERY WITH CEREBRAL INFARCTION
434.00	CEREBRAL THROMBOSIS WITHOUT MENTION OF CEREBRAL INFARCTION
434.01	CEREBRAL THROMBOSIS WITH CEREBRAL INFARCTION
434.1	CEREBRAL EMBOLISM
434.10	CEREBRAL EMBOLISM WITHOUT MENTION OF CEREBRAL INFARCTION

Step 1 (diagnosis of cerebrovascular disease with recurrent ischemia, stroke, TIA, acute coronary syndrome, or peripheral artery disease)	
Required quantity: 1	
Look back timeframe: 730 days	
ICD-9 Code	Description
434.11	CEREBRAL EMBOLISM WITH CEREBRAL INFARCTION
434.9	CEREBRAL ARTERY OCCLUSION UNSPECIFIED
434.90	CEREBRAL ARTERY OCCLUSION, UNSPECIFIED WITHOUT MENTION OF CEREBRAL INFARCTION
434.91	CEREBRAL ARTERY OCCLUSION, UNSPECIFIED WITH CEREBRAL INFARCTION
435.0	BASILAR ARTERY SYNDROME
435.1	VERTEBRAL ARTERY SYNDROME
435.2	SUBCLAVIAN STEAL SYNDROME
435.3	VERTEBROBASILAR ARTERY SYNDROME
435.8	OTHER SPECIFIED TRANSIENT CEREBRAL ISCHEMIAS
435.9	UNSPECIFIED TRANSIENT CEREBRAL ISCHEMIA
437.0	CEREBRAL ATHEROSCLEROSIS
437.1	OTHER GENERALIZED ISCHEMIC CEREBROVASCULAR DISEASE
440.20	ATHEROSCLEROSIS OF NATIVE ARTERIES OF THE EXTREMITIES, UNSPECIFIED
440.21	ATHEROSCLEROSIS OF NATIVE ARTERIES OF THE EXTREMITIES, WITH INTERMITTENT CLAUDICATION
440.22	ATHEROSCLEROSIS OF NATIVE ARTERIES OF THE EXTREMITIES, WITH REST PAIN
440.23	ATHEROSCLEROSIS OF NATIVE ARTERIES OF THE EXTREMITIES, WITH ULCERATION
440.24	ATHEROSCLEROSIS OF NATIVE ARTERIES OF THE EXTREMITIES, WITH GANGRENE
ICD-10 Code	Description
G45.0	VERTEBRO-BASILAR ARTERY SYNDROME
G45.1	CAROTID ARTERY SYNDROME (HEMISPHERIC)
G45.2	MULTIPLE AND BILATERAL PRECEREBRAL ARTERY SYNDROMES
G45.3	AMAUROSIS FUGAX
G45.4	TRANSIENT GLOBAL AMNESIA
G45.8	OTHER TRANSIENT CEREBRAL ISCHEMIC ATTACKS AND RELATED SYNDROMES
G45.9	TRANSIENT CEREBRAL ISCHEMIC ATTACK, UNSPECIFIED
I20.0	UNSTABLE ANGINA
I21.01	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING LEFT MAIN CORONARY ARTERY

ICD-10 Code	Description
I21.02	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING LEFT ANTERIOR DESCENDING CORONARY ARTERY
I21.09	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING OTHER CORONARY ARTERY OF ANTERIOR WALL
I21.1	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF INFERIOR WALL
I21.11	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING RIGHT CORONARY ARTERY
I21.19	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING OTHER CORONARY ARTERY OF INFERIOR WALL
I21.2	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF OTHER SITES
I21.21	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING LEFT CIRCUMFLEX CORONARY ARTERY
I21.29	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING OTHER SITES
I21.3	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF UNSPECIFIED SITE
I22.0	SUBSEQUENT ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF ANTERIOR WALL
I22.1	SUBSEQUENT ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF INFERIOR WALL
I22.8	SUBSEQUENT ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF OTHER SITES
I22.9	SUBSEQUENT ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF UNSPECIFIED SITE
I24.0	ACUTE CORONARY THROMBOSIS NOT RESULTING IN MYOCARDIAL INFARCTION
I24.8	OTHER FORMS OF ACUTE ISCHEMIC HEART DISEASE
I63.011	CEREBRAL INFARCTION DUE TO THROMBOSIS OF RIGHT VERTEBRAL ARTERY
I63.012	CEREBRAL INFARCTION DUE TO THROMBOSIS OF LEFT VERTEBRAL ARTERY
I63.019	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED VERTEBRAL ARTERY
I63.02	CEREBRAL INFARCTION DUE TO THROMBOSIS OF BASILAR ARTERY
I63.031	CEREBRAL INFARCTION DUE TO THROMBOSIS OF RIGHT CAROTID ARTERY
I63.032	CEREBRAL INFARCTION DUE TO THROMBOSIS OF LEFT CAROTID ARTERY
I63.039	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED CAROTID ARTERY
I63.10	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED PRECEREBRAL ARTERY
I63.111	CEREBRAL INFARCTION DUE TO EMBOLISM OF RIGHT VERTEBRAL ARTERY
I63.112	CEREBRAL INFARCTION DUE TO EMBOLISM OF LEFT VERTEBRAL ARTERY

ICD-10 Code	Description
I63.119	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED VERTEBRAL ARTERY
I63.12	CEREBRAL INFARCTION DUE TO EMBOLISM OF BASILAR ARTERY
I63.131	CEREBRAL INFARCTION DUE TO EMBOLISM OF RIGHT CAROTID ARTERY
I63.132	CEREBRAL INFARCTION DUE TO EMBOLISM OF LEFT CAROTID ARTERY
I63.139	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED CAROTID ARTERY
I63.19	CEREBRAL INFARCTION DUE TO EMBOLISM OF OTHER PRECEREBRAL ARTERY
I63.20	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED PRECEREBRAL ARTERIES
I63.211	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF RIGHT VERTEBRAL ARTERIES
I63.212	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF LEFT VERTEBRAL ARTERIES
I63.219	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED VERTEBRAL ARTERIES
I63.22	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF BASILAR ARTERIES
I63.231	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF RIGHT CAROTID ARTERIES
I63.232	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF LEFT CAROTID ARTERIES
I63.239	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED CAROTID ARTERIES
I63.29	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF OTHER PRECEREBRAL ARTERIES
I63.30	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED CEREBRAL ARTERY
I63.311	CEREBRAL INFARCTION DUE TO THROMBOSIS OF RIGHT MIDDLE CEREBRAL ARTERY
I63.312	CEREBRAL INFARCTION DUE TO THROMBOSIS OF LEFT MIDDLE CEREBRAL ARTERY
I63.319	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED MIDDLE CEREBRAL ARTERY
I63.32	CEREBRAL INFARCTION DUE TO THROMBOSIS OF ANTERIOR CEREBRAL ARTERY
I63.321	CEREBRAL INFARCTION DUE TO THROMBOSIS OF RIGHT ANTERIOR CEREBRAL ARTERY
I63.322	CEREBRAL INFARCTION DUE TO THROMBOSIS OF LEFT ANTERIOR CEREBRAL ARTERY
I63.329	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED ANTERIOR CEREBRAL ARTERY
I63.33	CEREBRAL INFARCTION DUE TO THROMBOSIS OF POSTERIOR CEREBRAL ARTERY

ICD-10 Code	Description
I63.331	CEREBRAL INFARCTION DUE TO THROMBOSIS OF RIGHT POSTERIOR CEREBRAL ARTERY
I63.332	CEREBRAL INFARCTION DUE TO THROMBOSIS OF LEFT POSTERIOR CEREBRAL ARTERY
I63.339	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED POSTERIOR CEREBRAL ARTERY
I63.34	CEREBRAL INFARCTION DUE TO THROMBOSIS OF CEREBELLAR ARTERY
I63.341	CEREBRAL INFARCTION DUE TO THROMBOSIS OF RIGHT CEREBELLAR ARTERY
I63.342	CEREBRAL INFARCTION DUE TO THROMBOSIS OF LEFT CEREBELLAR ARTERY
I63.349	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED CEREBELLAR ARTERY
I63.39	CEREBRAL INFARCTION DUE TO THROMBOSIS OF OTHER CEREBRAL ARTERY
I63.40	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED CEREBRAL ARTERY
I63.411	CEREBRAL INFARCTION DUE TO EMBOLISM OF RIGHT MIDDLE CEREBRAL ARTERY
I63.412	CEREBRAL INFARCTION DUE TO EMBOLISM OF LEFT MIDDLE CEREBRAL ARTERY
I63.419	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED MIDDLE CEREBRAL ARTERY
I63.42	CEREBRAL INFARCTION DUE TO EMBOLISM OF ANTERIOR CEREBRAL ARTERY
I63.421	CEREBRAL INFARCTION DUE TO EMBOLISM OF RIGHT ANTERIOR CEREBRAL ARTERY
I63.422	CEREBRAL INFARCTION DUE TO EMBOLISM OF LEFT ANTERIOR CEREBRAL ARTERY
I63.429	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED ANTERIOR CEREBRAL ARTERY
I63.43	CEREBRAL INFARCTION DUE TO EMBOLISM OF POSTERIOR CEREBRAL ARTERY
I63.431	CEREBRAL INFARCTION DUE TO EMBOLISM OF RIGHT POSTERIOR CEREBRAL ARTERY
I63.432	CEREBRAL INFARCTION DUE TO EMBOLISM OF LEFT POSTERIOR CEREBRAL ARTERY
I63.439	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED POSTERIOR CEREBRAL ARTERY
I63.44	CEREBRAL INFARCTION DUE TO EMBOLISM OF CEREBELLAR ARTERY
I63.441	CEREBRAL INFARCTION DUE TO EMBOLISM OF RIGHT CEREBELLAR ARTERY
I63.442	CEREBRAL INFARCTION DUE TO EMBOLISM OF LEFT CEREBELLAR ARTERY
I63.449	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED CEREBELLAR ARTERY

ICD-10 Code	Description
I63.49	CEREBRAL INFARCTION DUE TO EMBOLISM OF OTHER CEREBRAL ARTERY
I63.50	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED CEREBRAL ARTERY
I63.511	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF RIGHT MIDDLE CEREBRAL ARTERY
I63.512	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF LEFT MIDDLE CEREBRAL ARTERY
I63.519	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED MIDDLE CEREBRAL ARTERY
I63.52	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF ANTERIOR CEREBRAL ARTERY
I63.521	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF RIGHT ANTERIOR CEREBRAL ARTERY
I63.522	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF LEFT ANTERIOR CEREBRAL ARTERY
I63.529	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED ANTERIOR CEREBRAL ARTERY
I63.53	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF POSTERIOR CEREBRAL ARTERY
I63.531	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF RIGHT POSTERIOR CEREBRAL ARTERY
I63.532	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF LEFT POSTERIOR CEREBRAL ARTERY
I63.539	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED POSTERIOR CEREBRAL ARTERY
I63.54	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF CEREBELLAR ARTERY
I63.541	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF RIGHT CEREBELLAR ARTERY
I63.542	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF LEFT CEREBELLAR ARTERY
I63.549	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED CEREBELLAR ARTERY
I63.59	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF OTHER CEREBRAL ARTERY
I63.6	CEREBRAL INFARCTION DUE TO CEREBRAL VENOUS THROMBOSIS, NONPYOGENIC
I63.8	OTHER CEREBRAL INFARCTION
I63.9	CEREBRAL INFARCTION, UNSPECIFIED
I65.01	OCCLUSION AND STENOSIS OF RIGHT VERTEBRAL ARTERY
I65.02	OCCLUSION AND STENOSIS OF LEFT VERTEBRAL ARTERY
I65.03	OCCLUSION AND STENOSIS OF BILATERAL VERTEBRAL ARTERIES
I65.09	OCCLUSION AND STENOSIS OF UNSPECIFIED VERTEBRAL ARTERY

ICD-10 Code	Description
I65.1	OCCLUSION AND STENOSIS OF BASILAR ARTERY
I65.21	OCCLUSION AND STENOSIS OF RIGHT CAROTID ARTERY
I65.22	OCCLUSION AND STENOSIS OF LEFT CAROTID ARTERY
I65.23	OCCLUSION AND STENOSIS OF BILATERAL CAROTID ARTERIES
I65.29	OCCLUSION AND STENOSIS OF UNSPECIFIED CAROTID ARTERY
I65.8	OCCLUSION AND STENOSIS OF OTHER PRECEREBRAL ARTERIES
I65.9	OCCLUSION AND STENOSIS OF UNSPECIFIED PRECEREBRAL ARTERY
I66.01	OCCLUSION AND STENOSIS OF RIGHT MIDDLE CEREBRAL ARTERY
I66.02	OCCLUSION AND STENOSIS OF LEFT MIDDLE CEREBRAL ARTERY
I66.03	OCCLUSION AND STENOSIS OF BILATERAL MIDDLE CEREBRAL ARTERIES
I66.09	OCCLUSION AND STENOSIS OF UNSPECIFIED MIDDLE CEREBRAL ARTERY
I66.1	OCCLUSION AND STENOSIS OF ANTERIOR CEREBRAL ARTERY
I66.11	OCCLUSION AND STENOSIS OF RIGHT ANTERIOR CEREBRAL ARTERY
I66.12	OCCLUSION AND STENOSIS OF LEFT ANTERIOR CEREBRAL ARTERY
I66.13	OCCLUSION AND STENOSIS OF BILATERAL ANTERIOR CEREBRAL ARTERIES
I66.19	OCCLUSION AND STENOSIS OF UNSPECIFIED ANTERIOR CEREBRAL ARTERY
I66.2	OCCLUSION AND STENOSIS OF POSTERIOR CEREBRAL ARTERY
I66.21	OCCLUSION AND STENOSIS OF RIGHT POSTERIOR CEREBRAL ARTERY
I66.22	OCCLUSION AND STENOSIS OF LEFT POSTERIOR CEREBRAL ARTERY
I66.23	OCCLUSION AND STENOSIS OF BILATERAL POSTERIOR CEREBRAL ARTERIES
I66.29	OCCLUSION AND STENOSIS OF UNSPECIFIED POSTERIOR CEREBRAL ARTERY
I66.3	OCCLUSION AND STENOSIS OF CEREBELLAR ARTERIES
I66.8	OCCLUSION AND STENOSIS OF OTHER CEREBRAL ARTERIES
I66.9	OCCLUSION AND STENOSIS OF UNSPECIFIED CEREBRAL ARTERY
I67.2	CEREBRAL ATHEROSCLEROSIS
I67.81	ACUTE CEREBROVASCULAR INSUFFICIENCY
I67.82	CEREBRAL ISCHEMIA
I67.83	POSTERIOR REVERSIBLE ENCEPHALOPATHY SYNDROME
I67.84	CEREBRAL VASOSPASM AND VASOCONSTRICTION
I67.841	REVERSIBLE CEREBROVASCULAR VASOCONSTRICTION SYNDROME
I67.848	OTHER CEREBROVASCULAR VASOSPASM AND VASOCONSTRICTION

ICD-10 Code	Description
I67.89	OTHER CEREBROVASCULAR DISEASE
I70.201	UNSPECIFIED ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, RIGHT LEG
I70.202	UNSPECIFIED ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, LEFT LEG
I70.203	UNSPECIFIED ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, BILATERAL LEGS
I70.208	UNSPECIFIED ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, OTHER EXTREMITY
I70.209	UNSPECIFIED ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, UNSPECIFIED EXTREMITY
I70.21	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH INTERMITTENT CLAUDICATION
I70.211	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH INTERMITTENT CLAUDICATION, RIGHT LEG
I70.212	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH INTERMITTENT CLAUDICATION, LEFT LEG
I70.213	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH INTERMITTENT CLAUDICATION, BILATERAL LEGS
I70.218	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH INTERMITTENT CLAUDICATION, OTHER EXTREMITY
I70.219	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH INTERMITTENT CLAUDICATION, UNSPECIFIED EXTREMITY
I70.22	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH REST PAIN
I70.221	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH REST PAIN, RIGHT LEG
I70.222	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH REST PAIN, LEFT LEG
I70.223	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH REST PAIN, BILATERAL LEGS
I70.228	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH REST PAIN, OTHER EXTREMITY
I70.229	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH REST PAIN, UNSPECIFIED EXTREMITY
I70.23	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION
I70.231	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF THIGH
I70.232	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF CALF
I70.233	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF ANKLE
I70.234	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF HEEL AND MIDFOOT

ICD-10 Code	Description
I70.235	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF OTHER PART OF FOOT
I70.238	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF OTHER PART OF LOWER RIGHT LEG
I70.239	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF UNSPECIFIED SITE
I70.24	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION
I70.241	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF THIGH
I70.242	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF CALF
I70.243	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF ANKLE
I70.244	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF HEEL AND MIDFOOT
I70.245	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF OTHER PART OF FOOT
I70.248	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF OTHER PART OF LOWER LEFT LEG
I70.249	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF UNSPECIFIED SITE
I70.25	ATHEROSCLEROSIS OF NATIVE ARTERIES OF OTHER EXTREMITIES WITH ULCERATION
I70.261	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH GANGRENE, RIGHT LEG
I70.262	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH GANGRENE, LEFT LEG
I70.263	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH GANGRENE, BILATERAL LEGS
I70.268	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH GANGRENE, OTHER EXTREMITY
I70.269	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH GANGRENE, UNSPECIFIED EXTREMITY



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Clinical Edit Criteria References

1. Clinical Pharmacology [online database]. Tampa, FL: Elsevier / Gold Standard, Inc. 2014. Available at <http://www.clinicalpharmacology.com>. Accessed on January 13, 2014.
2. 2014 ICD-9-CM Diagnosis Codes, Volume 1. 2013. Available at <http://www.icd9data.com/>. Accessed on January 13, 2014.
3. Plavix [package insert]. Bridgewater, NJ: Bristol-Myers Squibb/Sanofi Pharmaceuticals Partnership. December 2013.

Publication History

The Publication History records the publication iterations and revisions to this document. Notes for the *most current revision* are also provided in the **Revision Notes** on the first page of this document.

Publication Date	Notes
01/24/2014	Initial publication and posting to website