V0 OTHER REASONS FOR ENCOUNTER (REQUESTS)

V1000 REQUEST FOR MEDICAL EXAMINATION/CONTROL TESTS/SCREENING/CHECK UP V1010 REQUEST FOR MEDICAL EXAMINATION/DETAILED HEALTH ASSESSMENT V1020 REQUEST FOR MEDICAL EXAMINATION/PARTIAL HEALTH ASSESSMENT REQUEST FOR ROUTINE CHECK-UP V1030 V1040 REQUEST FOR CHECK BEFORE CONTRACEPTION/IN COURSE OF CONTRACEPTION V1050 REQUEST FOR PREGNANCY CHECK-UP/REQUEST FOR POST-NATAL CHECKS V1060 REQUEST FOR CHECKS ON NEW-BORN BABY/FOR CHECK ON INFANT V1070 REQUEST FOR CHECK OF PARAMETERS V1090 REQUEST FOR CHECKS/NEC V1100 REQUEST FOR CHECK-UP DURING TREATMENT REQUEST FOR CHECK OF ORTHOPAEDIC DEVICE V1110 REQUEST FOR CHECK OF TOLERANCE/EFFECT OF MEDICAMENTS V1120 V1130 REQUEST FOR CHECK ON HEAVY TREATMENT/E.G.CHEMOTHERAPY V1300 REQUEST FOR TAKING SAMPLE (BY NON M.D.) REQUEST FOR TAKING BLOOD SAMPLE V1310 V1320 REQUEST FOR TAKING URINE SAMPLE REQUEST FOR TAKING WOUND SWABS V1350 V1400 REQUEST FOR TEST/REQUEST FOR LABORATORY TEST/NOS V1410 REQUEST FOR BLOOD TEST REQUEST FOR URINE TEST V1420 V1490 REQUEST FOR OTHER LAB-TEST V1500 **REQUEST FOR INSTRUMENTAL TEST/NOS** V1510 REQUEST FOR FUNCTION TEST V1520 REQUEST FOR X-RAY/MEDICAL IMAGE/SCANNER V1530 REQUEST FOR ECG/ELECTRIC PLOTTING REQUEST FOR INSTRUMENTAL TEST/OTHER/NEC V1590 V1600 REQUEST FOR SPECIAL DIAGNOSIS/SCREENING TEST/NOS V1610 REQUEST FOR PREGNANCY TEST V1620 REQUEST FOR TEST FOR CANCER OF THE BREAST/WOMB V1630 REQUEST FOR AIDS TEST V1640 REQUEST FOR PREVENTIVE CHECK-UP REQUEST FOR SPECIAL TEST/OTHER/NEC V1690 V1700 REQUEST FOR NON CLASSICAL TEST/IRIDOLOGY V1800 REQUEST FOR CHECK REQUESTED BY A THIRD PARTY/NOS REQUEST FOR SPORTING CHECK V1820 V1830 REQUEST FOR EXAMINATION FOR A LABOUR CONTRACT V1850 REQUEST FOR MEDICAL CHECK AT WORK V1860 REQUEST FOR LIFE ASSURANCE CHECK/REQUEST FOR INSURANCE CHECK REQUEST FOR MEDICO-LEGAL APPRAISAL V1870 V1880 REQUEST FOR PSYCHOLOGICAL APPRAISAL/FOR PSYCHIATRIC APPRAISAL V1890 APPRAISAL DEMANDED BY A THIRD PARTY/NEC V2000 REQUEST FOR PREVENTIVE/MEDICAL TREATMENT/SURGERY/NURSING/NOS V2100 **REQUEST FOR PREVENTIVE TREATMENT/NOS** REQUEST FOR VACCINATION/REQUEST FOR IMMUNIZATION V2110 V2120 REQUEST FOR DESENSITATION REQUEST FOR PREVENTIVE TREATMENT/(EX.: GAMMATHERAPY) V2130 V2200 REQUEST FOR CONTRACEPTION/NOS/ V2210 REQUEST FOR COIL V2220 REQUEST FOR STERILIZATION V2290 OTHER REQUEST FOR CONTRACEPTION V2291 V5110 REQUEST FOR ADVICE ABOUT CONTRACEPTION V2292 V3100 REQUEST FOR ORAL CONTRACEPTION/FOR MORNING-AFTER PILL V2300 REQUEST FOR MEDICAL INTERVENTION/MINOR SURGERY/NOS REQUEST FOR INCISION/DRAINING/CLEANING/ASPIRATION/PUNCTION/V2330 PERFUSION V2310 V2320 REQUEST FOR LANCING/NOS V2321 REQUEST FOR LANCING/CAUTERIZATION REQUEST FOR EXCISION/EXERESE/BIOPSY/DESTRUTION/ V2322 V2330 REQUEST FOR FITTING/PERFUSION/INTUBATION/DILATATION REQUEST FOR REPAIR/FIXING/SUTURE/PLASTER/ARTIFICIAL LIMB/FITTING/REMOVING V2340 REQUEST FOR INJECTION/INFILTRATION/LOCAL TREATMENT V2350 REQUEST FOR DRESSING/BANDAGE/COMPRESSION/PLUGGING V2360 V2370 REQUEST FOR PHYSIOTHERAPY/MASSAGE/REVALIDATION REQUEST FOR CHILDBIRTH/V2400 IF REQUEST PRESENCE AT CHILDBIRTH V2380 REQUEST FOR PRESENCE AT CHILDBIRTH/AT SURGICAL OPERATION V2400 V2500 REQUEST FOR PERSONAL HYGIENE V2600 REQUEST FOR HELP WITH ELIMINATION V2700 REQUEST FOR MOBILIZATION/BEDSORE PREVENTION V2900 REQUEST FOR THERAPEUTIC PROCEDURE/MINOR SURGERY/NURSING/NEC V2910 REQUEST FOR ABORTION

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V3000
         REQUEST FOR MEDICATION/NOS
V3010
           REQUEST FOR SPECIFIC PRESCRIPTION/NOS
V3020
           REQUEST FOR INADEQUATE PRESCRIPTION
V3030
           REQUEST FOR RENEWAL/NOS
V3080
           REQUEST FOR MEDICAMENT ON BEHALF OF A THIRD PARTY
V3100
           REQUEST FOR A SPECIFIC DRUG
V4000
         REQUESTS:SPECIAL SENSES,TISSUES REPLAC.,TRANSPL.,ARTIFIC.OPENING,POSTSURG.STATES
V4010
           See : Section V40-49 of the International Classification of Diseases
V5000
         REQUEST FOR ADVICE/COUNSELING/NOS
           REQUEST ON BEHALF OF A THIRD PARTY/E.G:EXAMINATION RESULT FOR THIRD PARTY
V5080
V5100
          REQUEST FOR ADVICE ON LIFE
V5110
           REQUEST FOR ADVICE ON FERTILITY/SEXUALITY/CONTRACEPTION
V5120
           REQUEST FOR ADVICE ON GENETIC/EUGENIC
V5130
           REQUEST FOR ADVICE ON BRINGING UP CHILDREN
V5140
           REQUEST FOR ADVICE ON DIET/DIETARY ADVICE/SLIMMING
          REQUEST FOR ADVICE ON IMPROVING HARMFUL LIFE-STYLE
V5200
V5210
           REQUEST FOR ADVICE ON TOBACCO
V5220
           REQUEST FOR ADVICE ON ALCOHOL
V5230
           REQUEST FOR ADVICE ON DRUGS
           REQUEST FOR ADVICE ON SEDENTARY EXISTENCE/EXERCISE
V5240
V5300
          REQUEST FOR CONTROL ON ENVIRONMENTAL RISKS
           REQUEST FOR ADVICE ON PROFESSIONAL RISKS
V5310
V5320
           REQUEST FOR ADVICE ON ENVIRONMENTAL RISKS IN LIVING AREA
V5400
          REQUEST FOR EDUCATION TO SELF-SUFFICIENCY/NEED FOR SELF-SUFFICIENCY
V6000
         REQUEST FOR LISTENING/HELP/PSYCHOLOGICAL SUPPORT/NOS
V6080
           UNFORMULATED REQUEST/HEALTHY THIRD PARTY = PRETEXT
V6100
          REQUEST FOR HELP FOR JUSTIFIABLE FEAR /E.G:CANCER, HOSPITALIZATION
         REQUEST FOR TAKING IN CHARGE FOR PSYCHOLOGICAL PROBLEMS
V6200
V6300
          REQUEST FOR PSYCHOLOGICAL TESTS
V6400
          REQUEST FOR/NEED OF FRIENDSHIP
V6500
          REQUEST FOR SPIRITUAL GUIDANCE
V6510
           REQUEST FOR CATHOLIC/ORTHODOX GUIDANCE
V6520
           REQUEST FOR PROTESTANT/ANGLICAN GUIDANCE
V6530
           REQUEST FOR JEWISH GUIDANCE
V6540
           REQUEST FOR ISLAMIC GUIDANCE
           REQUEST FOR NON-RELIGIOUS GUIDANCE
V6580
V7000
         REQUEST FOR CERTIFICATE/NOS
           REQUEST FOR CERTIFICATE FOR A THIRD PARTY
V7080
V7100
          REQUEST FOR CHILDBIRTH CERTIFICATE
V7200
          REQUEST FOR INTERRUPTION OF WORK/REQUEST FOR SICKNESS LEAVE
V7210
           JUSTIFIABLE REQUEST FOR INTERRUPTION OF WORK
V7220
           UNJUSTIFIABLE REQUEST FOR INTERRUPTION OF WORK
          REQUEST TO RESTART WORK/SCHOOL/SPORT
V7300
V7600
          REQUEST FOR CONVEYING INFORMATION TO ANOTHER PRACTITIONER
V7700
          ASSEMBLY OF DOSSIER TO DEFEND A RIGHT
         REQUEST FOR A DEATH CERTIFICATE
V7800
V7900
          REQUEST FOR A CERTIFICATE/NEC
V8000
         REQUEST FOR TRANSFER/PLACEMENT COORDINATED HELP/NOS/(REFERRAL)
V8080
           REQUEST FOR PLACEMENT OF A THIRD PARTY
V8100
          REQUEST FOR PLACEMENT IN INSTITUTION/FOR HOSPITAL ADMISSION
V8200
         REQUEST FOR REFERRAL TO ANOTHER DOCTOR/DENTIST/NOS
V8500
         REQUEST FOR COORDINATED HELP AT HOME/REQUEST FOR PALLIATIVE CARE
         OTHER REASONS FOR ENCOUNTER/NOS/OTHER NEEDS FOR HELP/NOS
V9000
V9010
          REQUEST FOR HOME CARE/NEED OF HOME CARE/NOS
V9100
          REQUEST FOR CONTACT
V9110
           REQUEST FOR CONTACT DURING HOSPITALIZATION
V9130
           REQUEST FOR CONTACT WITH THIRD PARTIES
          REQUEST FOR FEEDING CARE/NEED OF FEEDING CARE
V9200
V9300
          REQUEST FOR HOUSEKEEPING/NEED OF HELP WITH HOUSEKEEPING
          REQUEST FOR MONITORING CARE/NEED OF MONITORING CARE
V9400
V9500
          REQUEST FOR SOCIAL HELP/NEED OF SOCIAL HELP
V9600
          REQUEST FOR HELP WITH TRANSPORT/NEED OF HELP WITH TRANSPORT
          REQUEST FOR/NEED OF HELP WITH HOUSING/EQUIPMENT/APPARATUS
V9700
V9800
          REQUEST FOR NON-CLASSIC TREATMENT/REQUEST FOR ALTERNATIVE MEDECINE
         OTHER DEMAND/REQUEST REASONS FOR/NEC
V9900
V9910
           REQUEST FOR COMMUNICATION OF RESULTS
V9920
           BLOOD DONOR/ORGAN DONOR
           REQUEST WITHOUT REASON FOR PATIENT/ACCOMPAN.PARTY NEEDS HELP
V9980
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