

SEPTEMBER 2025

## Quadriplegia

At Healthfirst, we are committed to helping providers accurately document and code their patients' health records. This tip sheet is intended to assist providers and coding staff with the documentation and ICD-10-CM selection on services submitted to Healthfirst specifically for common types of **Quadriplegia**. It provides information from industry sources about proper coding practice. However, this document does not represent or guarantee that Healthfirst will cover and/or pay for the services outlined. Coverage decisions are based on the terms of the applicable evidence of coverage and the provider's participation agreement. This includes the determination of any amount that Healthfirst or the member owes the provider.

**Quadriplegia**, also known as tetraplegia, is a form of complete paralysis that affects all four limbs. This form of paralysis is usually due to traumatic injury or disease of the spinal cord in the region of the cervical neck. The most known cause of quadriplegia is damage to the spinal cord typically in the cervical vertebrae.

### Diagnosis Codes and Descriptions

ICD-10-CM	Descriptions
<b>G82.50</b>	Quadriplegia, unspecified
<b>G82.51</b>	Quadriplegia, C1-C4 complete
<b>G82.52</b>	Quadriplegia, C1-C4 incomplete
<b>G82.53</b>	Quadriplegia, C5-C7 complete
<b>G82.54</b>	Quadriplegia, C5-C7 incomplete

# Documentation and Coding

Documentation Recommendations		
Type Of Quadriplegia		
<ul style="list-style-type: none"><li>• Complete</li><li>• Incomplete</li></ul>	<ul style="list-style-type: none"><li>• Spastic</li><li>• Flaccid</li></ul>	
Cause Of Condition		
<ul style="list-style-type: none"><li>• Falls, Flying, and/or Falling Objects</li><li>• Congenital Abnormalities</li></ul>	<ul style="list-style-type: none"><li>• Gunshot Wounds</li><li>• Vehicular Accidents</li></ul>	<ul style="list-style-type: none"><li>• Surgical Complications</li><li>• Brain Damage</li></ul>
Physical Exam		
<ul style="list-style-type: none"><li>• Numbness/loss of sensation in the trunk and/or limbs</li><li>• Paralysis of the arms and legs</li><li>• Lack of muscle control</li></ul>	<ul style="list-style-type: none"><li>• Bed Bound/Bedfast/Bedridden</li><li>• Bowl dysfunction</li><li>• Urinary weakness</li></ul>	<ul style="list-style-type: none"><li>• Unsteady gait,</li><li>• Inability to balance</li><li>• Wheelchair dependence</li></ul>
Diagnostic Tests/Assessment Tools		
<ul style="list-style-type: none"><li>• Congenital screening test</li></ul>	<ul style="list-style-type: none"><li>• CT scan</li><li>• MRI scan</li></ul>	<ul style="list-style-type: none"><li>• Spinal tap</li><li>• Electromyography</li></ul>
Treatment/Management		
<ul style="list-style-type: none"><li>• Addressing and assessing level of care</li><li>• Brain and spinal cord surgeries</li></ul>	<ul style="list-style-type: none"><li>• Rehabilitation services: PT, OT, Language Therapy</li><li>• Psychotherapy</li></ul>	<ul style="list-style-type: none"><li>• Medication-reduce swelling, control pain, and manage muscle spasticity</li></ul>

## Coding Tips

- Category **G82.5\*** is to be used only when the listed condition is reported without further specification or stated to be old or longstanding but of unspecified cause
- If documentation states:
  - Bedbound, Bedridden, or Bedfast use additional code **Z74.01**
  - Wheelchair bound, use additional code **Z99.3**
  - For Conversion disorder with weakness/paralysis assign code **F44.4**
- Congenital spastic paralysis, also known as Spastic Quadriplegic Cerebral Palsy, is reported with code **G80.0**
- For Functional Quadriplegia use code **R53.2**
- This subcategory is classified based on the level of the **spinal cord damage, C1-C4 or C5-C7**, and whether the damage is considered complete or incomplete.
  - **Complete quadriplegia** occurs when the spinal cord is so severely damaged that there is permanent loss of motor and sensory functions in all four limbs.
  - In **incomplete quadriplegia** there is only partial damage to the spinal cord.
- Functionality of all four limbs will vary from patient to patient depending on where along the cervical spinal cord the damage occurred.

\*Requires additional digits to complete the code.

# Documentation and Coding

## Coding Example

<b>Case 1</b>	<p>A patient was transferred to our facility due to onset of quadriparesis following a fall on ground level two days earlier. The patient was diagnosed with C2 fracture and central cord syndrome at C3-4 and C4-5. The provider documented that the patient remained with incomplete quadriplegia status post C3 and C4 laminectomies. When referencing “quadriplegia, traumatic” in the Alphabetic index, there is a coding instruction to “see Injury, spinal (cord), cervical.” This appears to indicate that only a spinal injury code is reported when quadriplegia is associated with an injury. However, when referencing “quadriplegia, incomplete,” code G82.52, Quadriplegia, C1-C4, incomplete, is provided for this condition at levels C1-C4. What are the appropriate code assignments for incomplete quadriplegia in a patient with a C2 fracture and central cord syndrome (CCS)?</p>
<b>AHA Coding Clinic Coding Volume 11, 2024, Second Quarter, pg. 23</b>	<p>Assign codes <b>S14.123A</b>, Central cord syndrome at C3 level of cervical spinal cord, initial encounter, and <b>S12.100A</b>, Unspecified displaced fracture of second cervical vertebra, initial encounter, for closed fracture, for the CCS and C2 cervical fracture. As indicated in the instructional note at category S14, Injury of nerves and spinal cord at neck level, the highest level of cervical cord injury is reported, in this case, level C3. It would not be appropriate to separately report incomplete quadriplegia in a patient with cervical fracture and CCS. As instructed in the Alphabetic Index, only the appropriate spinal injury codes (CCS) are reported when a patient has quadriplegia with a current traumatic injury.</p> <p>CCS is the most common type of incomplete cord injury, which is most frequently due to a traumatic injury. CCS is also known as incomplete spinal cord injury and most people with this condition are not completely paralyzed. Although this condition typically results from an injury, this condition can also occur in people with tumors or vascular abnormalities within the center of the spinal cord.</p>

# Documentation and Coding

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## References

- [ICD-10 Coding Guidelines](#)
- [Quadriplegia | Merck Manuals](#)
- [Quadriplegia | Cleveland Clinic](#)

## Questions?

Contact us at [#Risk\\_Adjustments\\_and\\_clinical\\_Documentation@healthfirst.org](mailto:#Risk_Adjustments_and_clinical_Documentation@healthfirst.org).

For additional documentation and coding guidance, please visit the coding section on [HFproviders.org](http://HFproviders.org)

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