

Health Update

New ICD-10-CM codes for documenting medetomidine toxicity available October 9, 2026

Drug use continues to significantly contribute to morbidity and mortality in Philadelphia, which is complicated by a changing drug supply. Medetomidine, a non-opioid veterinary tranquilizer, was first detected in Philadelphia's illicit opioid supply in May 2024, and the toxic effects of medetomidine have led to changes in overdose presentations.¹ The characteristics of medetomidine toxicity are bradycardia (i.e., heart rate below 60) and prolonged sedation (i.e., 4 hours or longer).²⁻⁶ Hypotension has also been observed but has not been consistently associated with medetomidine exposure.⁴ Bradycardia has been described as a heart rate as low as 30 beats per minute and lasting longer than 4 hours.⁵ Sedation has been described as lasting at least 4 hours. Importantly, because presentations of medetomidine toxicity are almost always concurrent with opioid overdose, sedation that is not responsive to the opioid-reversal agent, naloxone, is another characteristic of medetomidine toxicity.^{2,3}

To ensure accurate diagnosis and documentation of medetomidine exposure, the Philadelphia Department of Public Health (PDPH) proposed new ICD-10-CM codes to the Centers for Disease Control and Prevention (CDC) to document medetomidine toxicity.⁷ As of October 1, 2026, the following ICD codes are approved for use (new codes are bolded):

SUMMARY POINTS

- ICD 10-CM codes are available for diagnosing and documenting medetomidine toxicity.
- Medetomidine toxicity is characterized by bradycardia and prolonged sedation that is not responsive to naloxone.
- Healthcare organizations should implement medetomidine toxicity ICD-10-CM codes in their electronic medical record systems and clinical protocols.

- T65: Toxic effect of other and unspecified substances
 - The appropriate 7th character is to be added to each code from category T65
 - A-initial encounter
 - D-subsequent encounter
 - S-sequela
 - T65.8 Toxic effect of other specified substances
- **New sub-subcategory: T65.85 Toxic effect of Medetomidine**
 - Add: Use additional code to identify associated manifestations, such as bradycardia NOS (R00.1) somnolence, stupor and coma (R40)
- **New code: T65.851 Toxic effect of medetomidine, accidental (unintentional)**
 - **Add: Toxic effect of medetomidine NOS**
- **New code: T65.852 Toxic effect of medetomidine, intentional self-harm**
- **New code: T65.853 Toxic effect of medetomidine, assault**
- **New code: T65.854 Toxic effect of medetomidine, undetermined**

Importance of using ICD-10-CM codes for medetomidine toxicity

This modification to ICD-10-CM to include medetomidine toxicity will ensure accurate diagnosis of medetomidine exposure, documentation of medetomidine-involved opioid overdoses, identification of individuals at risk of medetomidine withdrawal, as well as appropriate overdose reversal response. Please see the [PDPH HAN](#) from June 10, 2025, for recommendations on reversing medetomidine-involved opioid overdoses.⁸ Improved monitoring of medetomidine toxicity in healthcare settings will also lead to a better understanding of the public health impact of medetomidine exposure.

The addition of ICD-10-CM codes for medetomidine toxicity allows clinicians to more accurately document clinical presentations of people who use drugs and the complexity of their care. Patients who have medetomidine toxicity should be observed for extended periods of time for supportive care.³ In addition, patients with medetomidine toxicity are likely also at risk for medetomidine withdrawal. Current review of the literature suggests that medetomidine withdrawal can present within 4 to 24 hours since last use and include severe symptoms requiring hospitalization and intensive care.^{2,3} Thus, application of ICD-10-CM codes for medetomidine toxicity ensures that documentation and diagnosis are more accurately aligned with patients' medical needs.

ICD-10-CM codes for medetomidine toxicity should not be used to document medetomidine withdrawal.

The Philadelphia Department of Public Health submitted a proposal to the Centers for Disease Control and Prevention for ICD-10-CM codes to document medetomidine withdrawal.⁷ Pending any delays to the release of 2027 code files, ICD-10-CM codes for medetomidine withdrawal will be available on October, 1, 2027.

Recommendations

The modification of the ICD-10-CM in response to the changing drug supply can improve care for people who use drugs as well as the public health response to the overdose crisis, but only if fully implemented.⁹ While the CDC has made the ICD-10-CM code for medetomidine toxicity available, healthcare organizations must take steps to implement this new code for their providers to use.

- Clinical administrators should update their organization's electronic medical record to include the new ICD-10-CM codes.
- Clinical protocols should incorporate diagnostic criteria for medetomidine toxicity, such as bradycardia and prolonged sedation, and use the new ICD-10-CM codes.
- Healthcare organizations should train their staff to recognize, diagnose, and manage medetomidine toxicity.
- Healthcare organizations can use the new ICD-10-CM codes to monitor volume, care complexity, and quality metrics for patients diagnosed with medetomidine toxicity.

Resources

Medetomidine resources and clinical recommendations:

- www.substanceusephilly.com/medetomidine
- See the PDPH HAN from June 10, 2025, for recommendations on adapting overdose response to medetomidine: https://hip.phila.gov/document/5444/PDPH-HAN-SUPHR-Medetomidine-06.10.2025_1Zu1OZ4.pdf/

Substance Use Disorder Treatment:

- Learn about all substance use treatments: www.substanceusephilly.com/treatment
- Get help finding treatment: Community Behavioral Health: 888-545-2600
- Get virtual peer support and buprenorphine prescriptions: CareConnect Warmline: 484-278-1679
- Call the SAMHSA National Helpline: 800-662-HELP (4357)
- Decide the best treatment option for you: www.treatmentatlas.org/
- Find a buprenorphine prescriber: www.substanceusephilly.com/treatment#opioids
- Use the DBHIDS Treatment Finder: www.dbhids.org/services/addiction-services/mat/
- Use the PA DOH Patient Advocacy program for upcoming or abrupt ending of controlled prescription medications: www.pa.gov/agencies/health/programs/opioids/patient-advocacy-program

- Recommend patients try not to use alone. If that is what they are doing, then advise them to call the Never Use Alone hotline: 877-696-1996 or the SafeSpot Hotline: 800-972-0590
- Learn how to get and use naloxone: www.substanceusephilly.com/get-supplies
- Take a wound care training: www.substanceusephilly.com/trainings#xylazinetraining
- Get naloxone and fentanyl test strips shipped to you for free and confidentially:
 - nextdistro.org/philly
- Learn how to reverse an overdose and use fentanyl test strips:
 - www.substanceusephilly.com/trainings#trainingvideos
 - www.youtube.com/watch?v=GmhE6UOZ9YY

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