

Caring for the Ages

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Response to the Letter to the Editor on “Advancing Coding and Education on Skin Failure”

Caring for the Ages appreciates Dr. Levine’s nuanced and well-referenced letter, which shares his perspective on the proposed new ICD-10 skin failure codes discussed in our October 2025 issue. Dr.



Levine is a renowned wound care expert and raises valid points about whether rushing to get new codes adopted without adequate scientific and diagnostic rigor best serves the medical community (including PALTC practitioners and institutions) and our patients, versus a more prudent, circumspect strategy that would likely better stand the test of time. Dr. Levine’s concerns are valid and are undoubtedly shared by others in the wound care community.

In particular, the notion of unavoidable wounds as a regulatory construct as opposed to a clinical one is accurate. Dr. Levine’s concern about the implicit assumption under the proposed paradigm that ‘skin failure’ is not causally related to pressure is also valid, since it is well established that unrelieved pressure on an area increases the probability of tissue necrosis—so why would it be any different in skin at risk for hypoperfusion due to other causes?

While many clinicians would welcome the adoption of the proposed skin failure codes (with their subcategorization into acute, chronic, or end-stage), even if not scientifically rigorous, it remains to be seen whether these codes, in their current format, will be adopted by the Centers for Disease Control and Prevention’s National Center for Health Statistics. If the ICD-10 codes are in fact adopted, we will strive to apply them as accurately as possible. And if they are not adopted, we will continue to work with interested parties to develop codes with more scientific and diagnostic precision.

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<https://paltmed.org/news-media/response-letter-editor-advancing-coding-and-education-skin-failure>