ICD-10 Chapter XXI is used to record health related circumstances that are not a disease. These categories, coded with Z codes, contain a mix of concepts, including reasons for encounter, risk factors and interventions. The current scenario of the revision of ICD presents an opportunity to review the chapter and propose new ways of organising the content. The Topic Advisory Group on functioning (fTAG) has the mandate of suggesting a new structure of the Z codes chapter starting from the alignment of the revised ICD and ICF but also taking into account all the possibilities given by the joint uses of the WHO-FIC.

Methods & Materials
After a preliminary meeting of fTAG co-chairs with WHO a Z codes working group was formed. Background materials and briefing notes were made available and a work plan drafted. Current debate on Z codes and suggestions for change were collected through a search of scientific literature and through the commenting features of the WHO ICD-11 beta browser.

Results
Of the 801 ICD-10 chapter XXI categories considered in the analysis 158 ICD-10 categories relate to ICF contextual factors. In this regard the development and integration of a personal factors classification is encouraged. A large group of categories (367) could be represented in an interventions classification. Classifications of devices and assistive technology are considered in the analysis 158 ICD-10 categories relate to ICF contextual factors. The possibility offered by ICD-11 to post-coordinate dimensions such as “history of” would make redundant another 105 categories (see examples below in Tab. 1 and 2). For 171 categories alternative possibilities for ordering the concepts remain to be debated. Overall results are shown in Fig. 3.

Conclusions
Revising the structure of ICD-10 chapter XXI in the context of development of ICD-11 offers the possibility of testing the actual integration of the Family of International Classifications in terms to effectively represent, beyond the disease, all dimensions of health. In order to achieve this task the fTAG highly values the involvement, through the collaborating centres, of experts in all WHO reference classifications.

Acknowledgements
Authors are members of the fTAG and in their work took advantage of preparatory materials made available by the Group for this purpose.

References
2. icat http://icat.stanford.edu/