APPENDIX B: Site-Specific Surgery Codes

BRAIN
Meninges C70.0–C70.9, Brain C71.0–C71.9, Spinal Cord, Cranial Nerves and Other Parts of Central Nervous System C72.0–C72.9

(Except for M-9750, 9760–9764, 9800–9820, 9826, 9831–9920, 9931–9964, 9980–9989)

Do not code laminectomies for spinal cord primaries.

Codes

00 None; no surgery of primary site; autopsy ONLY
10 Tumor destruction, NOS
   No specimen sent to pathology from surgical event 10.
   Do not record stereotactic radiosurgery as tumor destruction. It should be recorded in the radiation treatment items.
20 Local excision (biopsy) of lesion or mass
   Specimen sent to pathology from surgical event 20.
40 Partial resection
55 Gross total resection
90 Surgery, NOS
99 Unknown if surgery performed; death certificate ONLY
ALL OTHER SITES
C14.2–C14.8, C17.0–C17.9, C23.9, C24.0–C24.9, C26.0–C26.9, C30.0–C30.1,
C31.0–C31.9, C33.9, C37.9, C38.0–C38.8, C39.0–C39.9, C48.0–C48.8,
C51.0–C51.9, C52.9, C57.0–C57.9, C58.9, C60.0–C60.9, C63.0–C63.9,
C68.0–C68.9, C69.0–C69.9, C74.0–C74.9, C75.0–C75.9
(Except for M-9750, 9760–9764, 9800–9820, 9826, 9831–9920, 9931–9964, 9980–9989)

Codes

00 None; no surgery of primary site; autopsy ONLY
10 Local tumor destruction, NOS
  11 Photodynamic therapy (PDT)
  12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
  13 Cryosurgery
  14 Laser
  **No specimen sent to pathology from surgical events 10–14.**
20 Local tumor excision, NOS
  26 Polypectomy
  27 Excisional biopsy
  Any combination of 20 or 26–27 WITH
    21 Photodynamic therapy (PDT)
    22 Electrocautery
    23 Cryosurgery
    24 Laser ablation
  25 Laser excision
  **Specimen sent to pathology from surgical events 20–27.**
30 Simple/partial surgical removal of primary site
40 Total surgical removal of primary site; enucleation
  41 Total enucleation (for eye surgery only)
50 Surgery stated to be “debulking”
60 Radical surgery
  **Partial or total removal of the primary site WITH a resection in continuity (partial or total removal with other organs).**
90 Surgery, NOS
99 Unknown if surgery performed; death certificate ONLY
DETERMINING MULTIPLE PRIMARIES: HEMATOPOIETIC PRIMARIES (Lymphoma and Leukemia)

If the physician clearly states that a hematopoietic diagnosis is a new primary, use that information. If there is no clear information from the physician, use the SEER table “Definitions of Single and Subsequent Primaries for Hematologic Malignancies” to determine multiple primaries. Go to http://seer.cancer.gov/icd-o-3/ to download the SEER table in PDF format.

DETERMINING MULTIPLE PRIMARIES: BENIGN AND BORDERLINE PRIMARY INTRACRANIAL AND CNS TUMORS (C70.0-C72.9, C75.1-C75.3)

Definitions

Same site: The first two numeric digits of the ICD-O-3 topography code are identical.

Different site: The first two numeric digits of the ICD-O-3 topography code are different.

Timing: The amount of time between the original and subsequent tumors is not used to determine multiple primaries because the natural biology of non-malignant tumors is that of expansive, localized growth.

HOW TO DETERMINE SAME VS DIFFERENT HISTOLOGIES (BASED ON HISTOLOGIC GROUPINGS)

When there are multiple tumors, use the following table to determine if the tumors are the same histology or different histologies.

Histologic groupings to determine same histology for non-malignant brain tumors

<table>
<thead>
<tr>
<th>Histologic Group</th>
<th>ICD-O-3 Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Choroid plexus neoplasms</td>
<td>9390/0, 9390/1</td>
</tr>
<tr>
<td>Ependymomas</td>
<td>9383, 9394, 9444</td>
</tr>
<tr>
<td>Neuronal and neuronal-glial neoplasms</td>
<td>9384, 9412, 9413, 9442, 9505/1, 9506</td>
</tr>
<tr>
<td>Neurofibromas</td>
<td>9540/0, 9540/1, 9541, 9550, 9560/0</td>
</tr>
<tr>
<td>Neurinomatosis</td>
<td>9560/1</td>
</tr>
<tr>
<td>Neurothekeoma</td>
<td>9562</td>
</tr>
<tr>
<td>Neuroma</td>
<td>9570</td>
</tr>
<tr>
<td>Perineurioma, NOS</td>
<td>9571/0</td>
</tr>
</tbody>
</table>

Instructions for Using Histologic Group Table

1. Both histologies are listed in the table
   a. Histologies that are in the same grouping or row in the table are the same histology.
   b. Note: Histologies that are in the same grouping are a progression, differentiation or subtype of a single histologic category.
   c. Histologies listed in different groupings in the table are different histologies.