


**COLLECTING CANCER DATA:
HEMATOPOIETIC AND LYMPHOID
NEOPLASMS**

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Q&A

- Please submit all questions concerning webinar content through the Q&A panel.

Reminder:

- If you have participants watching this webinar at your site, please collect their names and emails.
- We will be distributing a Q&A document in about one week. This document will fully answer questions asked during the webinar and will contain any corrections that we may discover after the webinar.



FABULOUS PRIZES







HEMATOPOIETIC AND LYMPHOID DATABASE AND MANUAL

- Determine reportability
- Determine multiple primaries
- Assign primary site
- Assign histology
- Assign grade

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DIAGNOSTIC CONFIRMATION

- Microscopically confirmed
 - 1: Positive histology
 - Tissue specimen
 - Bone marrow specimen
 - CBC, WBC, peripheral blood smear for leukemia only
 - 2: Positive cytology
 - 3: Positive histology PLUS:
 - Positive immunophenotyping AND/OR
 - Positive genetic studies
 - 4: Positive microscopic confirmation, method not specified

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DIAGNOSTIC CONFIRMATION

- Not microscopically confirmed
 - 5: Positive laboratory test/marker study
 - 6: Direct visualization without microscopic confirmation
 - 7: Radiology and other imaging techniques without microscopic confirmation
 - 8: Clinical diagnosis only (other than 5, 6, or 7)
 - 9: Unknown whether or not microscopically confirmed

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POP QUIZ

- Patient presents with unexplained weight loss, chronic fatigue, and bruising. Peripheral blood smear showed chronic myeloid leukemia.
- What is the code for diagnostic confirmation?

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POP QUIZ

- Bone marrow biopsy: B lymphoblastic leukemia
- FISH: Most likely represents a hyperdiploid clone
- What is the code for diagnostic confirmation?

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POP QUIZ

- Tonsillectomy and adenoidectomy path: Follicular lymphoma of the tonsil
- FISH: BCL2 gene rearrangements; follicular lymphoma grade 2.
- What is the code for diagnostic confirmation?

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POP QUIZ

- PET scan: Malignant adenopathy of mediastinal and retroperitoneal lymph nodes consistent with lymphoma.
- Patient refused any further work-up or treatment because of other serious co-morbidities.
- What is the code for diagnostic confirmation?

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POP QUIZ

- Bone marrow biopsy: Negative
- Cytogenetics: Loss of chromosome 7
- Discharge diagnosis: Myeloproliferative neoplasm, unclassifiable
- What is the code for diagnostic confirmation?

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AMBIGUOUS TERMINOLOGY

<p>REPORTABILITY</p> <ul style="list-style-type: none"> • Apparently • Appears • Comparable with <ul style="list-style-type: none"> • See page 20 of your manual for a full list • Do not report cases diagnosed only by ambiguous cytology (cytology diagnosis preceded by ambiguous term) 	<p>HISTOLOGY</p> <ul style="list-style-type: none"> • Do not use ambiguous terms to code a specific histology
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AMBIGUOUS TERMINOLOGY-HISTOLOGY

- Exception
 - CBC done, no histology or provisional diagnosis on the CBC or smear reports. CBC states abnormal lymphocytosis. Flow cytometry compatible with CLL. No other workup done.
 - Per the abstractor notes in the database, "abnormal lymphocytosis" is present in CLL.
 - *Assign histology for CLL (9823/3) since there is no other code that can be used.*

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TRANSFORMATION

- A chronic neoplasm is a neoplasm that can transform to an acute/more severe neoplasm
 - Follicular Lymphoma (9695/3) diagnosed in 2012
 - Diffuse large B-cell lymphoma (9680/3) diagnosed in 2014
- An acute neoplasm is a neoplasm that may have transformed from a chronic neoplasm
 - Acute myeloid leukemia (9861/3)
 - Refractory anemia with ring sideroblasts (9982/3)

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USING THE HEME DB AND HEMATOPOIETIC MANUAL

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REVIEW OF HEMATOPOIETIC WORKSHEET

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STEPS IN PRIORITY ORDER FOR USING THE HEME DB AND HEMATOPOIETIC CODING MANUAL

1. Assign a "working" histology code
2. Determine the number of primaries
3. Verify or revise the "working" histology
4. Determine the primary site
5. Determine grade
6. Use the Hematopoietic Multiple Primaries Calculator when instructed by the Hematopoietic Manual

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STEPS IN PRIORITY ORDER

1. Assign a "working" histology code
2. Determine the number of primaries
3. Verify or revise the "working" histology
4. Determine the primary site
5. Determine grade
6. Use the Hematopoietic Multiple Primaries Calculator when instructed by the Hematopoietic Manual

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EXAMPLE 1

- A patient was diagnosed with follicular lymphoma in 2008 that was never treated. He returns in 2014 with diffuse large B-cell lymphoma (DLBL). The 2014 path states that this is a transformation of the untreated follicular lymphoma from 2008.

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STEP 1 ASSIGN A WORKING HISTOLOGY

- Follicular Lymphoma, NOS
 - 9690
- DLBL
 - 9680

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STEP 2 APPLY THE MULTIPLE PRIMARY RULES

- M10
 - Abstract as multiple primaries when a neoplasm is originally diagnosed as a chronic neoplasm AND there is a second diagnosis of an acute neoplasm more than 21 days after the chronic diagnosis.

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EXAMPLE 1

- A patient was diagnosed with follicular lymphoma in 2008 that was never treated. He returns in 2014 with diffuse large B-cell lymphoma (DLBL). The 2014 path states that this is a transformation of the untreated follicular lymphoma from 2008.
- *Two primaries per rule M10*

What if in 2014 the patient was found to have large cell rich B-cell non-Hodgkin lymphoma of germinal center instead of DLBL?

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EXAMPLE 2

- A patient presents with a history of acute myeloid leukemia diagnosed 2/20/10. The patient was treated with chemotherapy. The patient has been disease free until he was recently found to have refractory anemia with ring sideroblasts.

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STEP 1 ASSIGN A WORKING HISTOLOGY

- Acute myeloid leukemia
 - 9861/3
- Refractory anemia with ring sideroblasts
 - 9982/3

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STEP 2 APPLY THE MULTIPLE PRIMARY RULES

- Rule M13
- Abstract multiple primaries when a neoplasm is originally diagnosed as acute AND reverts to a chronic neoplasm after treatment

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EXAMPLE 2

- A patient presents with a history of acute myeloid leukemia diagnosed 2/20/10. The patient was treated with chemotherapy. The patient has been disease free until he was recently found to refractory anemia with ring sideroblasts.
- Two primaries per rule M13

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EXAMPLE 3

- A patient presented to your facility on 10/11/13 for a colonoscopy and biopsy of a mass in the ascending colon. The pathology report showed diffuse large cell lymphoma. The patient had a bone marrow biopsy that came back positive for peripheral T-cell lymphoma. Is this one primary or two?

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STEP 1 ASSIGN A WORKING HISTOLOGY

- Diffuse Large B-Cell Lymphoma
 - 9680
- Peripheral T-cell lymphoma
 - 9702

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STEP 2 APPLY THE MULTIPLE PRIMARY RULES

- Rule M15
 - Use the Heme DB Multiple Primaries Calculator to determine the number of primaries for all cases that do not meet the criteria of M1-M14

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EXAMPLE 3

- A patient presented to your facility on 10/11/13 for a colonoscopy and biopsy of a mass in the ascending colon. The pathology report showed diffuse large cell lymphoma. The patient had a bone marrow biopsy that came back positive for peripheral T-cell lymphoma. Is this one primary or two?
 - Two primaries per Rule M15/multiple primary calculator

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STEPS IN PRIORITY ORDER

1. Assign a "working" histology code
2. Determine the number of primaries
3. **Verify or revise the "working" histology**
4. Determine the primary site
5. Determine grade
6. Use the Hematopoietic Multiple Primaries Calculator when instructed by the Hematopoietic Manual

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STEPS IN PRIORITY ORDER

- *Example*
 - Patient has history of liver transplant.
 - Lymphadenopathy of axillary, mediastinal, and hilar nodes
 - Axillary lymph node biopsy: Post-transplant lymphoproliferative disorder (PLTD)
 - Cytogenetics: Translocations involving c-MYC, BCL6, and IgH genes; PLTD and diffuse large b-cell lymphoma (DLBCL)

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Hematopoietic and Lymphoid Neoplasm Database

Show Multiple Primaries Calculator

PTLD

2 diseases match

▲ Relevance	ICD-O-3 Morphology	Name
■	9971 / 3	Polymorphic <i>PTLD</i>
■	9971 / 1	Plasmacytic hyperplasia

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Polymorphic PTLD

Name
Polymorphic *PTLD*

ICD-O-3 Morphology
9971/3 (Effective 2010 and later)

Reportable
for cases diagnosed 2010 and later
Primary Site(s)
See Abstractor Notes

Help me code for diagnosis year : 2014

Coding Manual: Hematopoietic Coding Manual (PDF)

Grade
Code grade specified by pathologist. If no grade specified, code 9

Module Rule
M14 Module 1: PH1

Module 1: Post-Transplant Lymphoproliferative Disorder PHI

Post-transplant lymphoproliferative disorder (9971.5)

Rule PHI Code the primary site to the site of origin, lymph node(s) or lymph node region(s), tissue(s), or organ(s), and code the histology of the accompanying lymphoma or plasmacytoma myeloma when the diagnoses of post-transplant lymphoproliferative disorder and any B-cell lymphoma, T-cell lymphoma, Hodgkin lymphoma, or plasmacytoma myeloma occur simultaneously.

Hematopoietic and Lymphoid Neoplasm Database

Show Multiple Primary Calculator

DLBCL Search

9 diseases match

Relevance	ICD-O-3 Morphology	Name
9680/3		Diffuse large B-cell lymphoma (<i>DLBCL</i>)
9737/3		ALK-positive large B-cell lymphoma
9698/3		Follicular lymphoma, grade 3
9679/3		Primary mediastinal (thymic) large B-cell lymphoma
9684/3		Malignant lymphoma, large B-cell, diffuse, immunoblastic, NOS [abstract]
9690/3		Follicular lymphoma
9695/3		Follicular lymphoma, grade 1
9691/3		Follicular lymphoma, grade 2
9688/3		T-cell/histiocyte-rich large B-cell lymphoma

Diffuse large B-cell lymphoma (DLBCL)

Name
Diffuse large B-cell lymphoma (*DLBCL*)

ICD-O-2 Morphology
9680/3 Effective 1992 - 2000

ICD-O-3 Morphology
9680/3 Effective 2001 and later

Reportable
for cases diagnosed 1992 and later

Primary Site(s)
See Abstractor Notes and Module 7

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STEPS IN PRIORITY ORDER

1. Assign a "working" histology code
2. Determine the number of primaries
3. Verify or revise the "working" histology
- 4. Determine the primary site**
5. Determine grade
6. Use the Hematopoietic Multiple Primaries Calculator when instructed by the Hematopoietic Manual

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PRIMARY SITE AND HISTOLOGY CODING RULES

- Module 1: Post-Transplant Lymphoproliferative Disorder PH1
- Module 2: Plasmacytoma PH2-PH4
- Module 3: Chronic lymphocytic leukemia/small lymphocytic lymphoma (CLL/SLL) PH5-PH6
- Module 4: Lymphoma/Leukemia (Specific neoplasms that can manifest as either leukemia or lymphoma or both leukemia and lymphoma) PH7-PH8

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PRIMARY SITE AND HISTOLOGY CODING RULES

- Module 5: Myeloid Neoplasms and Mast Cell Neoplasms PH9-PH10
- Module 6: Coding Primary Site for Specified Lymphomas PH11-PH17
- Module 7: Coding Primary Site for Lymphomas Only PH18-PH27
- Module 8: NOS and More Specific Histology PH28-PH29
- Module 9: Coding Primary Site and Histology PH30-PH31

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EXAMPLE 4

- Final diagnosis: Chronic lymphocytic leukemia/small lymphocytic lymphoma; multiple lymph node regions and bone marrow involved
- Assign primary site to C42.1 (bone marrow)

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Chronic lymphocytic leukemia/small lymphocytic lymphoma

Name
Chronic lymphocytic leukemia/small lymphocytic lymphoma

ICD-O-1 Morphology
9823/3 (Effective 1978 - 1991)

ICD-O-2 Morphology
9823/3 (Effective 1992 - 2000)

ICD-O-3 Morphology
9823/3 (Effective 2001 and later)

Reportable
for cases diagnosed 1978 and later

Primary Site(s)
See Abstractor Notes and Module 3: Rules PH5, PH6

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EXAMPLE 4

- Module 3: CLL/SLL
- PH5: Code the primary site to bone marrow (C421) when the bone marrow is involved or when only peripheral blood is involved.
- PH6: Code the primary site to the involved lymph node(s) or lymph node region(s), the involved organ(s), or tissue(s) when there is no peripheral blood involvement AND no bone marrow involvement or when it is unknown if bone marrow is involved.

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EXAMPLE 5

- Peripheral blood smear: Chronic myeloid leukemia
- Assign primary site to C42.1 (bone marrow)

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Chronic myeloid leukemia, NOS

Name
Chronic myeloid leukemia, NOS

ICD-O-1 Morphology
 9863/3 (Effective 1978 - 1991)

ICD-O-2 Morphology
 9863/3 (Effective 1992 - 2000)

ICD-O-3 Morphology
 9863/3 (Effective 2001 and later)

Reportable
 for cases diagnosed 1978 and later

Primary Site(s)
 C421

Help me code for diagnosis year : 2014

Coding Manual: Hematopoietic Coding Manual (PDF)

Grade
 Code grade specified by pathologist. If no grade specified, code 9

Module Rule
 None

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EXAMPLE 5

- Module 9: Coding primary site and histology
- PH30: Use Heme DB to determine primary site & histology when PH1-PH29 do not apply

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MODULE 7: CODING PRIMARY SITE FOR LYMPHOMAS ONLY

- PH18: Code the primary site to the specified lymph node region when the site of lymphoma is described only as a mass.
 - Final diagnosis: Lymphoma of mesenteric mass
 - Assign code C77.2 (intra-abdominal nodes) for primary site
- PH19: Code the primary site to the specific lymph node region when only one lymph node or one lymph node region is involved.
 - Final diagnosis: Cervical lymphadenopathy positive for lymphoma
 - Assign code C77.0 (head, face, neck lymph nodes) for primary site

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MODULE 7: CODING PRIMARY SITE FOR LYMPHOMAS ONLY

- PH20: Code the primary site to the specific lymph node region when multiple lymph node chains within the same region as defined by ICD-O-3 are involved.
 - Final diagnosis: Lymphoma of abdominal, para-aortic, and retroperitoneal lymph nodes
 - Assign code C77.2 (intra-abdominal nodes) for primary site

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MODULE 7: CODING PRIMARY SITE FOR LYMPHOMAS ONLY

- PH21: Code the primary site to multiple lymph node regions, NOS (C778) when multiple lymph node regions, as defined by ICD-O-3, are involved and it is not possible to identify the lymph node region where the lymphoma originated.
- Final diagnosis: Lymphoma of abdominal, inguinal, and intrapelvic lymph nodes
- Assign code C77.8 for primary site

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MODULE 7: CODING PRIMARY SITE FOR LYMPHOMAS ONLY

- PH22: Code the primary site to lymph nodes, NOS (C779) when:
- Lymphoma is present in an organ and lymph nodes that are not regional for that organ and the origin of the lymphoma cannot be determined even after consulting the physician
 - Cervical node biopsy: Lymphoma
 - Gastric antrum biopsy: Lymphoma
- Assign code C77.9 for primary site

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MODULE 7: CODING PRIMARY SITE FOR LYMPHOMAS ONLY

- PH22: Code the primary site to lymph nodes, NOS (C779) when:
- Lymphoma is present in more than one organ and the regional nodes for all organs involved
 - Cervical lymph node excision: Lymphoma
 - Excisional biopsy base of tongue: Lymphoma
 - Hemicolectomy: Lymphoma of ileocecal valve; 1/5 ileocolic nodes positive for lymphoma
- Assign code C77.9 for primary site

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MODULE 7: CODING PRIMARY SITE FOR LYMPHOMAS ONLY

- PH22: Code the primary site to lymph nodes, NOS (C779) when:
 - More than one organ and some combination of regional and distant nodes for the organs involved
 - Final diagnosis: Malignant lymphadenopathy, lymphoma, in axillary, ileocecal, gastric, and mesenteric nodes; lymphoma to stomach and ileocecal valve
 - Assign code C77.9 for primary site

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MODULE 7: CODING PRIMARY SITE FOR LYMPHOMAS ONLY

- PH22: Code the primary site to lymph nodes, NOS (C779) when:
 - Lymph node(s) and organ(s) involved but no primary site/particular lymph node region is identified
 - Final diagnosis: Widespread malignant lymphoma including abdominal and pelvic organs and lymph nodes
 - Assign code C77.9 for primary site

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MODULE 7: CODING PRIMARY SITE FOR LYMPHOMAS ONLY

- PH23: Code the primary site to the lymph node region as defined by ICD-O-3 when there is proof of extension from the regional lymph nodes into an organ. In rare cases a lymphoma may spread from lymph nodes to an extranodal site or extralymphatic organ by direct extension.
 - Partial gastrectomy: Lymphoma extends directly from pyloric lymph node to pylorus
 - Assign code C77.2 (intra-abdominal lymph nodes) for primary site

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MODULE 7: CODING PRIMARY SITE FOR LYMPHOMAS ONLY

- PH24: Code the primary site to the organ when lymphoma is present only in an organ.
 - Partial gastrectomy: Pyloric lymphoma
 - Assign code C16.4 (pylorus) for primary site
- PH25: Code the primary site to the organ when a lymphoma is present in an organ and that organ's regional lymph nodes.
 - Partial gastrectomy: Pyloric lymphoma; 2/5 pyloric nodes with lymphoma
 - Assign code C16.4 (pylorus) for primary site

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MODULE 7: CODING PRIMARY SITE FOR LYMPHOMAS ONLY

- PH26: Code the primary site to bone marrow (C421) when lymphoma is present only in the bone marrow.
 - Bone marrow biopsy: Lymphoma present
 - No evidence of lymphadenopathy or organomegaly present
 - Assign code C42.1 for primary site

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MODULE 7: CODING PRIMARY SITE FOR LYMPHOMAS ONLY

- PH27: Code primary site to unknown primary site C809 when there is no evidence of lymphoma in lymph nodes AND the physician documents in the medical record that he/she suspects that the lymphoma originates in an organ(s) OR multiple organ involvement without any nodal involvement. See ICD-O-3 Rule D.
 - Excisional biopsy base of tongue: Lymphoma
 - Hemicolectomy: Lymphoma of ileocecal valve; 0/10 nodes involved
 - Assign code C80.9 for primary site

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EXAMPLE 6

- Biopsy of para-spinal mass: Diffuse large b-cell lymphoma (DLBCL)
- No lymphadenopathy or other involvement
- Assign code C80.9 (unknown primary site)

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Diffuse large B-cell lymphoma (DLBCL)

Name
Diffuse large B-cell lymphoma (*DLBCL*)

ICD-O-2 Morphology
9680/3 Effective 1992 - 2000

ICD-O-3 Morphology
9680/3 Effective 2001 and later

Reportable
for cases diagnosed 1992 and later

Primary Site(s)
See Abstractor Notes and Module 7

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EXAMPLE 3

- Module 7: Coding primary site for lymphomas only
- PH27: Code primary site to unknown primary site C809 when there is no evidence of lymphoma in lymph nodes AND the physician documents in the medical record that he/she suspects that the lymphoma originates in an organ(s) OR multiple organ involvement without any nodal involvement.

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STEPS IN PRIORITY ORDER

1. Assign a "working" histology code
2. Determine the number of primaries
3. Verify or revise the "working" histology
4. Determine the primary site
5. **Determine grade**
6. Use the Hematopoietic Multiple Primaries Calculator when instructed by the Hematopoietic Manual

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GRADE

Terminology	Grade Code
T-cell; T-precursor	5
B-cell; Pre-B; B-precursor	6
Null cell; Non T-non B	7
NK cell (natural killer cell)	8
Grade unknown	9

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Mast cell leukemia

Name
Mast cell leukemia

ICD-O-1 Morphology
 9900/3 (Effective 1978 - 1991)

ICD-O-2 Morphology
 9900/3 (Effective 1992 - 2000)

ICD-O-3 Morphology
 9742/3 (Effective 2001 and later)

Reportable
 for cases diagnosed 1978 and later

Primary Site(s)
 C421

Help me code for diagnosis year : 2014 v

Coding Manual: Hematopoietic Coding Manual (PDF)

Grade
 9 - Grade/differentiation unknown, not stated, or not applicable

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Diffuse large B-cell lymphoma (DLBCL)

Name
Diffuse large B-cell lymphoma (*DLBCL*)

ICD-O-2 Morphology
9680/3 (Effective 1992 - 2000)

ICD-O-3 Morphology
9680/3 (Effective 2001 and later)

Reportable
for cases diagnosed 1992 and later

Primary Site(s)
See Abstractor Notes and Module 7

Help me code for diagnosis year : 2014 v

Coding Manual: Hematopoietic Coding Manual (PDF)

Grade
6 - B-cell

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Acute erythroid leukemia

Name
Acute erythroid leukemia

ICD-O-1 Morphology
9840/3 (Effective 1978 - 1991)

ICD-O-2 Morphology
9840/3 (Effective 1992 - 2000)

ICD-O-3 Morphology
9840/3 (Effective 2001 and later)

Reportable
for cases diagnosed 1978 and later

Primary Site(s)
C421

Help me code for diagnosis year : 2014 v

Coding Manual: Hematopoietic Coding Manual (PDF)

Grade
Code grade specified by pathologist. If no grade specified, code 9


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QUESTIONS?

Quiz

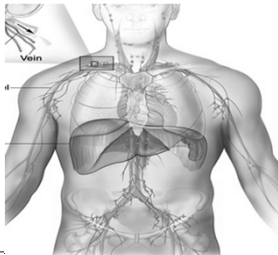

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STAGING LYMPHOMA




BILATERAL LYMPH NODE REGIONS

- Bilateral
 - Cervical
 - cervical, supraclavicular, occipital, preauricular
 - Infraclavicular
 - Axillary
 - Pelvic
 - Inguinal/femoral
- If both sides are involved, count as two lymph node regions

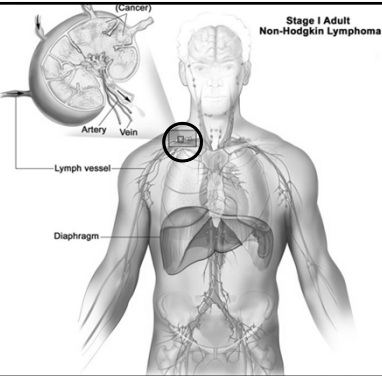
RULES FOR CLASSIFICATION

CLINICAL STAGE	PATHOLOGIC STAGE
<ul style="list-style-type: none"> • Biopsy (preferably excisional) • Medical history/physical exam • Imaging • Bone marrow • HIV testing • Hepatitis B testing 	<ul style="list-style-type: none"> • Based on information from a staging laparotomy • Has essentially been abandoned




STAGE I

- Involvement of a single lymphatic site
 - Nodal region
 - Waldeyer's ring
 - Thymus
 - Spleen
- Localized involvement of a single extralymphatic in the absence of any lymph node involvement



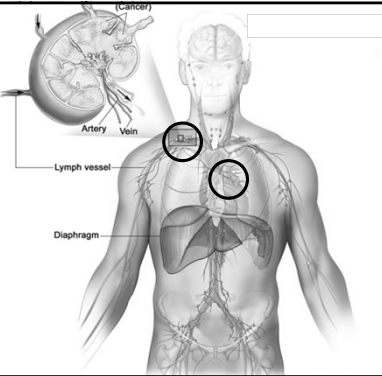
DEFINING LYMPH NODE INVOLVEMENT

- Clinical enlargement (without other explanation such as infection)
- Pathologic diagnosis
- Imaging: nodes larger than 1.5 cm



STAGE II

- Involvement of two or more lymph node regions on the same side of the diaphragm
- Localized involvement of a single extralymphatic site with regional lymph node involvement (IIE)
 - With or without involvement of other lymph node regions on the same side of the diaphragm



EXTRANODAL LYMPHATIC SITES

- Spleen (C42.2)
- Thymus Gland (C37.9)
- Lingual Tonsil (C02.4)
- Palatine Tonsil (C09.9)
- Waldeyer's ring (C14.2)
- Peyer's patches (C17.2)
- Lymphoid nodules of the appendix (C18.1)

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"E" SUFFIX EXAMPLES

- Stage IE: primary parotid lymphoma involving entire gland that undergoes curative surgery
- Stage IIE: primary lung lymphoma with hilar and mediastinal disease (presenting as 2 masses)
- Stage IIE: mediastinal lymph nodes with direct extension to lung

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STAGE III

- Involvement of regions on both side of the diaphragm
- May also be accompanied by extralymphatic extension in association with adjacent lymph nodes (IIIE)
- Or by spleen involvement (IIIS)
- Or by both (IIIE,S)

STAGE IV

- Diffuse or disseminated involvement of one or more extralymphatic organs
- Extralymphatic involvement in conjunction with disease in distant sites.

STAGE IV DISEASE

- Site of origin
 - Stomach, colon, brain, uterus
 - Most likely extralymphatic
 - Bone, lung
 - Most likely Stage IV
 - Liver, bone marrow, cerebrospinal fluid, pleura
 - ALWAYS stage IV

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A AND B CLASSIFICATIONS

- Each stage should be further classified as either A (asymptomatic) or B (symptomatic) indicating the absence or presence of the following constitutional symptoms.
 - Fevers
 - Unexplained fever with temperature above 38°C (100.4°F)
 - Night Sweats
 - Drenching sweats
 - Weight loss
 - Unexplained loss of more than 10% of usual body weight in the 6 months prior to diagnosis

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SUMMARY STAGE 2000

Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeoproliferative Neoplasms




SUMMARY STAGE 2000

- Hematopoietic, reticuloendothelial, immunoproliferative, and myeoproliferative neoplasms
- 1: Localized
 - Isolated/monostotic/single/solitary/unifocal
- 7: Distant
 - Polyostotic; disease disseminated at diagnosis
- 9: Death certificate only



SUMMARY STAGE 2000

- Hematopoietic, reticuloendothelial, immunoproliferative, and myeoproliferative neoplasms
- Assign code 1, 7, or 9
 - 9731/3, 9734/3
 - 9740/3, 9750/3, 9755/3, 9756/3, 9757/3, 9758/3, 9764/3, 9930/3
- Assign code 1 unless death certificate only (code 9)
 - 9751/3
- Assign all other listed histologies code 7 unless death certificate only (code 9)



SUMMARY STAGE 2000
 Hodgkin and Non-Hodgkin Lymphomas of All Sites

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SUMMARY STAGE 2000: LYMPHOMA

- 1 Localized
 - Stage I: Involvement of a single lymph node region
 - Stage IE
 - Localized involvement of a single extralymphatic organ/site
 - Multifocal involvement of one extralymphatic organ/site
 - Stage IS: Localized involvement of spleen only

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SUMMARY STAGE 2000: LYMPHOMA

- 5 Regional NOS
 - Stage II: Involvement of two or more lymph node regions on the SAME side of the diaphragm
 - Stage IIE
 - Stage IIS
 - Stage IIES: Involvement of spleen PLUS localized involvement of a single extralymphatic organ/site BELOW the diaphragm WITH/WITHOUT involvement of lymph node(s) BELOW the diaphragm

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SUMMARY STAGE 2000: LYMPHOMA

- 7 Distant
 - Stage III: Involvement of lymph node regions on BOTH sides of the diaphragm
 - Stage IIIE: Involvement of an extralymphatic organ or site PLUS involvement of lymph node(s) on the OPPOSITE side of the diaphragm
 - Stage IIIES:
 - Involvement of the spleen PLUS involvement of lymph node region(s) ABOVE the diaphragm PLUS involvement of a single extralymphatic organ/site on either side of the diaphragm
 - Involvement of the spleen PLUS a single extralymphatic organ/site ABOVE the diaphragm WITH OR WITHOUT involvement of lymph node(s)

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SUMMARY STAGE 2000: LYMPHOMA

- 7 Distant (continued)
 - Stage IV:
 - Disseminated involvement of ONE OR MORE extralymphatic organ(s)/site(s)
 - (Multifocal) involvement of MORE THAN ONE extralymphatic organ/site
 - Metastases
 - Bone marrow
 - Liver
- 9 Unstaged; not stated

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COLLABORATIVE STAGE DATA COLLECTION SYSTEM (CSV02.05)

Lymphoma

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CS EXTENSION: LYMPHOMA

<p>CS EXTENSION</p> <ul style="list-style-type: none"> • Stage I CS Extension codes 100-120 • Stage II CS Extension codes 200-230 • Stage III CS Extension codes 300-330 • Stage IV CS Extension code 800 	<p>CS TUMOR SIZE EXT/EVAL</p> <ul style="list-style-type: none"> • 0-No staging laparotomy; no autopsy evidence used <ul style="list-style-type: none"> • Used if the criteria for AJCC pathologic staging is not met • 2-Autopsy(tumor suspected or diagnosed prior to autopsy) • 3-Staging Laparotomy • 8-Autopsy (tumor unsuspected or undiagnosed prior to autopsy) • 9 Unknown
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SSF1: ASSOCIATED WITH HIV/AIDS

Code	Description
000	Not associated with HIV/AIDS
010	Associated with HIV/AIDS
988	Not applicable: Information not collected for this case
999	Unknown

SSF2: SYSTEMIC SYMPTOMS AT DIAGNOSIS

Code	Description	Stage Classification
000	No B symptoms (asymptomatic)	A
010	Any B symptoms: Night sweats, unexplained fever, unexplained weight loss	B
020	Pruritus (recurrent and unexplained)	A
030	020 + 010	B
988	Not applicable: Information not collected for this case	
999	Unknown	

SSF3: INTERNATIONAL PROGNOSTIC INDEX (IPI)

- Code pre-treatment IPI score documented by clinician

IPI Prognostic Variables	
Age of patient at diagnosis	
Performance status of patient	
Lactate dehydrogenase (LDH) level	
Ann Arbor/AJCC stage	
Presence of extranodal involvement	

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SSF3: INTERNATIONAL PROGNOSTIC INDEX (IPI)

Code	Description
000	0 points
001	1 point
002	2 points
003	3 points
004	4 points
005	5 points
988	Not applicable
990	Stated as low risk (0-1 point)
991	Stated as low intermediate risk (2 points)
992	Stated as intermediate risk (3 points)
993	Stated as high risk (4-5 points)
999	Unknown

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QUESTIONS?

- Quiz
- Case Scenarios

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COMING UP...

- Using the Multiple Primary and Histology (MP/H) Coding Rules
 - 12/4/14
- Collecting Cancer Data: Testis
 - 1/8/15

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AND THE WINNERS ARE.....



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CE CERTIFICATE QUIZ/SURVEY

- Phrase
- Link

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