

Coding Pitfalls Quiz 1: New and Revised Data Items

1. Final diagnosis: Adenocarcinoma of rectosigmoid; low grade, grade ½
 - a. Grade Path Value = 1; Grade Path System = 1
 - b. Grade Path Value = 1; Grade Path System = 2
 - c. Grade Path Value = 2; Grade Path System = 1
 - d. Grade Path Value and System = blank
2. Final diagnosis: Non-Hodgkin lymphoma of cervical lymph node. What is the code for Lymphovascular Invasion (LVI)?
 - a. 0 – LVI not present
 - b. 1 – LVI present
 - c. 8 – Not applicable
 - d. 9 – Unknown
3. Patient diagnosed with adenocarcinoma of the sigmoid colon. CEA lab value prior to hemicolectomy was 3.57 ng/ml. CEA lab value is coded to the 10th of a ng/ml. What is the code for CS SSF3 (CEA Lab Value)?
 - a. 035
 - b. 036
 - c. 357
 - d. 999
4. Final diagnosis: Grade 1 adenocarcinoma of the endometrium
 - a. Grade Path Value = 1; Grade Path System = blank
 - b. Grade Path Value = blank; Grade Path System = 1
 - c. Grade Path Value = 1; Grade Path System = 1
 - d. Grade Path Value and System = blank
5. Final diagnosis: Clear cell carcinoma of the right kidney, Fuhrman grade 3
 - a. Grade Path Value = 3; Grade Path System = blank
 - b. Grade Path Value = blank; Grade Path System = 3
 - c. Grade Path Value = 3; Grade Path System = 3
 - d. Grade Path Value and System = blank
6. Final diagnosis from biopsy: adenocarcinoma in a villous adenoma of the rectum, grade 2/2. Final diagnosis from total mesorectal resection: adenocarcinoma of the rectum, grade 1/2.
 - a. Grade Path Value = 1; Grade Path System = 1
 - b. Grade Path Value = 1; Grade Path System = 2
 - c. Grade Path Value = 2; Grade Path System = 2
 - d. Grade Path Value and System = blank

7. Final diagnosis: Moderately differentiated of the fallopian tube, grade 2 of 3.
 - a. Grade Path Value = 1; Grade Path System = 3
 - b. Grade Path Value = 2; Grade Path System = 3
 - c. Grade Path Value = 3; Grade Path System = 3
 - d. Grade Path Value and System = blank

8. A patient was diagnosed at staff physician's office and then comes to your facility for treatment. What class of case is this?
 - a. 00 Initial diagnosis at the reporting facility AND all treatment or a decision not to treat was done elsewhere
 - b. 12 Initial diagnosis by staff physician AND all first course treatment or a decision not to treat was done at the reporting facility
 - c. 14 Initial diagnosis AND all first course treatment or a decision not to treat was done at the reporting facility
 - d. 20 Initial diagnosis elsewhere AND all or part of first course treatment was done at the reporting facility, NOS

9. A patient was diagnosed at your facility with stage 4 breast cancer. The patient refused all treatment. Rx Summ--Treatment Status would be coded:
 - a. 0 No treatment given
 - b. 1 Treatment given
 - c. 2 Active surveillance (watchful waiting)
 - d. 9 Unknown if treatment was given

10. Patient diagnosed with adenocarcinoma of the prostate had robotic assisted laparoscopic prostatectomy with extensive disease noted and approach converted to open. What is the code for RX Hosp – Surg App 2010?
 - a. 1 – Robotic assisted
 - b. 2 – Robotic assisted converted to open
 - c. 3 – Endoscopic
 - d. 4 – Endoscopic converted to open

Coding Pitfalls Quiz 2: CSv2

1. Descriptions of lab tests, tumor markers and site specific factors can be found in:
 - a. Section 1 part 1 of the CS Manual
 - b. Section 1 Part 2 of the CS Manual
 - c. Section 2 of the CS Manual
 - d. None of the above.
2. Final diagnosis: Melanoma of skin of the chin; isolated tumors cells present in buccinator lymph node; no other involvement. What is the code for CS Lymph Nodes?
 - a. 000 – No regional lymph node involvement
 - b. 100 – Regional nodes of face (buccinator)
 - c. 130 – Satellite nodule or in-transit metastasis, NOS, without regional lymph node involvement
 - d. 800 – Lymph Nodes, NOS
3. Patient with abnormal mammogram had core biopsy of axillary lymph node, which was positive for ductal carcinoma. Patient then had lumpectomy and axillary lymph node dissection; 2 cm ductal carcinoma in upper outer quadrant and 2/6 axillary nodes positive for ductal carcinoma. The code for Regional Nodes Positive is:
 - a. 95 - Positive aspiration or core biopsy of lymph nodes
 - b. 02
 - c. 03
 - d. 97- Positive nodes are documented, but the number is unspecified
4. In the scenario above the code for Regional Nodes Examined is:
 - a. 95 -No regional nodes were removed, but aspiration or core biopsy of regional nodes was performed
 - b. 06
 - c. 07
 - d. 97- Regional lymph node removal was documented as a dissection, and the number of nodes is unknown/not stated
5. The CS Extension code for high grade dysplasia of the esophagus is 000. High grade dysplasia of the esophagus should always be abstracted and included in the registry database.
 - a. True
 - b. False

6. FNA biopsy of an enlarged cervical lymph node was positive for metastatic carcinoma; primary site cervical esophagus. Patient treated with chemotherapy. Code for CS Lymph Nodes Eval is:
 - a. 0 – Non-invasive clinical evidence
 - b. 1 – Invasive clinical evidence
 - c. 3 – Pathologic evidence
 - d. 5 - Surgical resection performed AFTER neoadjuvant therapy and tumor size/extension based on clinical evidence

7. If site specific factor 12 for lymph nodes is not required by any of the standard setters or by your cancer committee, the correct code for this field is:
 - a. Code 988 not applicable
 - b. Code 998 Not Done
 - c. 999 Unknown
 - d. Complete the field based on information you have available
 - e. A&D

8. If a prostate tumor is clinically apparent, information from a biopsy can be used to determine how many lobes are involved.
 - a. True
 - b. False

9. A patient with prostate cancer opted for watchful waiting. After a year the patients PSA began to rise and the patient opted for a prostatectomy. This information should be collected in SSF 3 CS Extension - Pathologic Extension.
 - a. True
 - b. False

10. The hematopoietic database is the only tool necessary to determine multiple primaries and assign primary site and histology codes for reportable hematopoietic diseases diagnosed on or after January 1, 2010.
 - a. True
 - b. False