


Coding Moment


CS Lymph Node Eval



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Seventh Edition TNM and CSv2 Changes

- CS Lymph Nodes Eval is coded based on the intent of the procedure.
 - If the *intent* of the procedure is part of the work-up, use codes 0, 1, 5, or 9.
 - If the *intent* of the procedure is therapeutic, use codes 2, 3, or 6.
- CS Manual Part 1 Section 1 Page 48




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CS Lymph Node Eval

Code	Description	Staging Basis
0	No regional lymph nodes removed for examination. • Evaluation based on physical examination, imaging examination, or other non-invasive clinical evidence.	Clinical (C)
1	No regional lymph nodes removed for examination. • Evaluation based on endoscopic examination or other invasive techniques, including surgical observation without biopsy. OR • Fine needle aspiration, incisional or core needle biopsy, or excisional biopsy of regional lymph nodes or sentinel nodes as part of the diagnostic workup WITHOUT removal of the primary site adequate for pathologic T classification (treatment).	Clinical (C)


CS Lymph nodes is based on the intent of the procedure.



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CS Lymph Node Eval

Code	Description	Staging Basis
3	Any microscopic assessment of regional nodes (including FNA, incisional or core needle biopsy, excisional biopsy, sentinel node biopsy or node resection) WITH removal of the primary site adequate for pathologic T classification (treatment) or biopsy assessment of the highest T category. OR Any microscopic assessment of a regional node in the highest N category, regardless of the T category information.	Path (P)

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CS Lymph Node Eval

Code	Description	Staging Basis
5	Regional lymph nodes removed for examination AFTER neoadjuvant therapy and lymph node evaluation based on clinical evidence, unless the pathologic evidence at surgery (AFTER neoadjuvant treatment) is more extensive.	Clinical (C)
6	Regional lymph nodes removed for examination AFTER neoadjuvant therapy AND lymph node evaluation based on pathologic evidence, because the pathologic evidence at surgery is more extensive than clinical evidence before treatment	Y-Path (yP)

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Diagnostic/ Staging vs. Therapeutic Intent

- If the microscopic assessment of the lymph nodes is intended to help choose the treatment plan, use CS LN Eval code 1.
- If the microscopic assessment of the lymph nodes is therapeutic, use CS LN Eval code 3.

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Diagnostic/ Staging vs. Therapeutic Intent

- A patient presented with a malignant melanoma of the left arm. An FNA of an enlarged regional lymph was performed and was negative for malignancy. The patient was treated with a wide excision only.
 - CS LN Eval Code is 1
 - The intent of the procedure was diagnostic and the information was used to determine the treatment.



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Diagnostic/ Staging vs. Therapeutic Intent

- A patient was found to have a lump in her breast on routine mammogram. A biopsy confirmed carcinoma. She returned for a lumpectomy and sentinel lymph node biopsy. Of the 22 lymph nodes removed, 3 were positive for metastasis.
 - CS LN Eval is 3
 - CS Lymph Nodes is coded based on information from a therapeutic procedure.



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Pop Quiz

- Patient presented with an enlarged cervical lymph node. The entire lymph node was excised and the patient was found to have squamous cell carcinoma from a laryngeal primary. The patient was treated with radiation only.
 - What is CS LN Eval?
 - Why?



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Pop Quiz

- Patient was found to have a large palpable breast mass as well as palpable lymph nodes. A sentinel lymph node biopsy showed metastasis to one of three lymph nodes. The patient opted for neoadjuvant chemotherapy followed by modified radical mastectomy. No positive lymph nodes were found.

- What is CS LN Eval?
- Why?
- What if she didn't receive the modified radical mastectomy?



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Pop Quiz

- A patient with breast cancer was diagnosed by mammography and core needle biopsy. Clinically the axillary nodes were negative. The patient opted for a lumpectomy and sentinel node biopsy which was negative.

- What is CS LN Eval?
- Why?



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Highest N Category

- If there is a positive biopsy of a lymph node in the highest N category, CS LN Eval should be coded as 3 regardless of whether the primary tumor is clinical or pathologic.



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Highest N Category

- Patient presented with a hard supraclavicular mass, which is excised and shows metastatic squamous carcinoma. Further diagnostic workup showed a mass in the left upper lobe of the lung with several satellite nodules.
 - Code CS LN Eval code 3 because supraclavicular nodes are in the highest N category (N3).



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**Lung
AJCC 7th Edition**

T	N	M	Stage
T1a or 1b	N3	M0	3B
T2a or 2b	N3	M0	3B
T3	N3	M0	3B
T4	N3	M0	3B



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Site Specific Rules

- A patient with prostate cancer presents for a radical prostatectomy and laparoscopic lymph node biopsy. The lymph node biopsy was positive so the radical prostatectomy was cancelled.
 - Code CS LN Eval as 3. According to AJCC staging rules for prostate, a positive biopsy of a regional lymph node is sufficient to meet the pathologic basis.

T	N	M	Stage
Any T	N1	M0	Stage IV



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