

## Exercise Case Scenario 1

1/23/12

### History and Physical

Mrs. XXXX is a 69 year old female with a history of Stage II adenocarcinoma of the ascending colon. She was treated with a right hemicolectomy in February of 2011 followed by chemotherapy. She recently was noted to have an elevated CEA and was scheduled for colonoscopy. The colonoscopy showed recurrent tumor at the site of the surgical anastomosis. A CT and MRI of the abdomen failed to show any metastasis. A biopsy of the tumor confirmed adenocarcinoma. She is here today for a segmental resection.

1/23/12

### Pathology Report

Tumor Site-Transverse colon (anastomotic site from previous hemicolectomy)

Tumor Size- 2.4 x 1.2 x 1.1 cm

Histologic Type-Adenocarcinoma

Histologic Grade-Low grade

Tumor Extension-Tumor invades muscularis propria

Proximal and Distal Margins-Uninvolved by invasive carcinoma

Circumferential Margin-Uninvolved by invasive carcinoma.

Lymph-Vascular Invasion-Not identified

Perineural invasion-Not identified

Tumor Deposits-Not identified

Pathologic Staging-pT2 pN0

Number of Lymph Nodes Involved- 0

Number of Lymph Nodes Examined- 17

1/27/12

### Discharge Summary

Mrs. XXXX was discharged today. During her stay she was found to have a recurrent Stage I adenocarcinoma at the anastomotic site from her previous colon surgery. During her stay she had a consult with her oncologist who indicated chemotherapy was not warranted at this time.

- How many primaries are present in case scenario 1?
- How would we code the histology of the primary you are currently abstracting?

### Stage/ Prognostic Factors

|                         |  |           |  |
|-------------------------|--|-----------|--|
| CS Tumor Size           |  | CS SSF 9  |  |
| CS Extension            |  | CS SSF 10 |  |
| CS Tumor Size/Ext Eval  |  | CS SSF 11 |  |
| CS Lymph Nodes          |  | CS SSF 12 |  |
| CS Lymph Nodes Eval     |  | CS SSF 13 |  |
| Regional Nodes Positive |  | CS SSF 14 |  |
| Regional Nodes Examined |  | CS SSF 15 |  |
| CS Mets at Dx           |  | CS SSF 16 |  |
| CS Mets Eval            |  | CS SSF 17 |  |
| CS SSF 1                |  | CS SSF 18 |  |
| CS SSF 2                |  | CS SSF 19 |  |
| CS SSF 3                |  | CS SSF 20 |  |
| CS SSF 4                |  | CS SSF 21 |  |
| CS SSF 5                |  | CS SSF 22 |  |
| CS SSF 6                |  | CS SSF 23 |  |
| CS SSF 7                |  | CS SSF 24 |  |
| CS SSF 8                |  | CS SSF 25 |  |

### Treatment

|  |  |                                |  |
|--|--|--------------------------------|--|
| Diagnostic Staging Procedure               |  |                                |  |
| <b>Surgery Codes</b>                       |  | <b>Radiation Codes</b>         |  |
| Surgical Procedure of Primary Site         |  | Radiation Treatment Volume     |  |
| Scope of Regional Lymph Node Surgery       |  | Regional Treatment Modality    |  |
| Surgical Procedure/ Other Site             |  | Regional Dose                  |  |
|  |  | Boost Treatment Modality       |  |
| <b>Systemic Therapy Codes</b>              |  | Boost Dose                     |  |
| Chemotherapy                               |  | Number of Treatments to Volume |  |
| Hormone Therapy                            |  | Reason No Radiation            |  |
| Immunotherapy                              |  |                                |  |
| Hematologic Transplant/Endocrine Procedure |  |                                |  |

## Exercise Case Scenario 2

**1/22/12**

### **History and Physical**

Mr. YYYY presented today for a low anterior resection of the rectum. He originally presented 9/6/11 for a colonoscopy with a biopsy and was found to have a 4.2cm fungating tumor located in his upper rectum. A biopsy confirmed adenocarcinoma. An MRI was performed for staging purposes and the tumor was found to extend into the surrounding peri rectal adipose tissue, but did not involve any surrounding structures or organs. There was no indication of any lymph node involvement. A CT of the abdomen and chest were negative for metastatic involvement. His CEA was found to be elevated at 15.4 ng/ml.

Mr. YYYY was started on 5-fu and Leucovorin with concurrent radiation treatment on 9/23/11. He received 45 Gy in 25 fractions to the tumor, the presacral nodes and the internal iliac nodes. An additional boost of 5.4 Gy was given to the tumor in 3 fractions.

He is here today for a total mesorectal excision (TME) of his rectal tumor.

**1/22/12**

### **Pathology –Total Mesorectal Excision**

Tumor Site-Rectum

Tumor Size- 1.2 x .8 x .5 cm

Histologic Type-Adenocarcinoma

Histologic Grade-Low grade

Tumor Extension-Tumor confined to the submucosa

Proximal and Distal Margins-Uninvolved by invasive carcinoma

Circumferential Margin-Uninvolved by invasive carcinoma.

Treatment effect-Present-Grade 2

Lymph-Vascular Invasion-Not identified

Perineural invasion-Not identified

Tumor Deposits-Not identified

Pathologic Staging-ypT1 pN1

Number of Lymph Nodes Involved- 1

A single inferior mesenteric lymph node was identified with metastatic adenocarcinoma

Number of Lymph Nodes Examined- 36

### **Discharge Summary**

The patient is recovering from his surgery and has been discharged home. During his stay we had a long discussion on the role of adjuvant chemotherapy in the treatment of his disease.

### **Follow-up Note**

Mr. YYYY had just completed a full course of 5-fu, leucovorin, and oxaliplatin (FOLFOX).

- **How many primaries are present in case scenario 1?**
- **How would we code the histology of the primary you are currently abstracting?**

| <b>Stage/ Prognostic Factors</b>           |  |                                |  |
|--|--|--------------------------------|--|
| CS Tumor Size                              |  | CS SSF 9                       |  |
| CS Extension                               |  | CS SSF 10                      |  |
| CS Tumor Size/Ext Eval                     |  | CS SSF 11                      |  |
| CS Lymph Nodes                             |  | CS SSF 12                      |  |
| CS Lymph Nodes Eval                        |  | CS SSF 13                      |  |
| Regional Nodes Positive                    |  | CS SSF 14                      |  |
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| CS Mets at Dx                              |  | CS SSF 16                      |  |
| CS Mets Eval                               |  | CS SSF 17                      |  |
| CS SSF 1                                   |  | CS SSF 18                      |  |
| CS SSF 2                                   |  | CS SSF 19                      |  |
| CS SSF 3                                   |  | CS SSF 20                      |  |
| CS SSF 4                                   |  | CS SSF 21                      |  |
| CS SSF 5                                   |  | CS SSF 22                      |  |
| CS SSF 6                                   |  | CS SSF 23                      |  |
| CS SSF 7                                   |  | CS SSF 24                      |  |
| CS SSF 8                                   |  | CS SSF 25                      |  |
| <b>Treatment</b>                           |  |                                |  |
| Diagnostic Staging Procedure               |  |                                |  |
| <b>Surgery Codes</b>                       |  | <b>Radiation Codes</b>         |  |
| Surgical Procedure of Primary Site         |  | Radiation Treatment Volume     |  |
| Scope of Regional Lymph Node Surgery       |  | Regional Treatment Modality    |  |
| Surgical Procedure/ Other Site             |  | Regional Dose                  |  |
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| <b>Systemic Therapy Codes</b>              |  | Boost Dose                     |  |
| Chemotherapy                               |  | Number of Treatments to Volume |  |
| Hormone Therapy                            |  | Reason No Radiation            |  |
| Immunotherapy                              |  |                                |  |
| Hematologic Transplant/Endocrine Procedure |  |                                |  |