

QUIZ 1

QUIZ – OVERVIEW OF MULTIPLE PRIMARY/HISTOLOGY CODING RULES

<p>1. The medical record documents that the patient was diagnosed with a squamous cell carcinoma of the anterior tongue in 2000 with a recurrence in 2005. The patient returns in 2007 with a tumor on the anterior tongue with a histologic diagnosis of squamous carcinoma.</p> <ul style="list-style-type: none"> a. The patient has a new primary in 2007 because this tumor was diagnosed after the MP/H rules went into effect. b. The patient does not have a new primary in 2007 because the five-year timing rule for head and neck cancers runs from the date of the most recent tumor diagnosed in 2005. c. The patient has a new primary in 2007 because the five-year timing rule for head and neck cancers runs from the original date of diagnosis in 2000. 	<p>_____</p>
<p>2. The pathologic diagnosis for an endometrial biopsy, sent for review to a reference lab, is reported as endometrioid adenocarcinoma with clear cell and papillary serous features. The pathologic diagnosis for the hysterectomy specimen is reported as endometrioid adenocarcinoma with invasion of one-third of the myometrium.</p> <ul style="list-style-type: none"> a. The histologic diagnosis is coded for the single histologic type from the hysterectomy because this is the most representative tumor specimen. b. The histologic diagnosis is coded with the combination code for gynecologic malignancies because multiple specific histologic types are identified on the biopsy report. 	<p>_____</p>
<p>3. In 2007 a patient with a rectal adenocarcinoma undergoes an abdominoperineal resection with clear margins. Four years later a soft tissue tumor excised from the rectal area is diagnosed as adenocarcinoma, clinically recurrent from the 2007 cancer.</p> <ul style="list-style-type: none"> a. The 2011 tumor is not a new primary because it represents a metastasis from the 2007 cancer, and the MP/H rules do not apply to metastatic disease. b. The 2011 tumor is a new primary because it occurs outside the one year timeframe for recurrent rectal cancers and the pathologist did not compare histologies from 2007 and 2011. 	<p>_____</p>

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<p>4. In coding histology for a case, Rules H9 and H11 give different answers for the code to use. How can I tell which code is correct?</p> <p>a. Always apply the rule that will give you the histology code with the higher numeric value.</p> <p>b. Take the code according to the first rule that applies.</p>	<hr/>
<p>5. The pathologic diagnosis from fine needle aspirate of a lung mass was stated as non-small cell carcinoma. The pathologic diagnosis from excision of a subcarinal node was stated as large cell undifferentiated carcinoma.</p> <p>a. The histology is coded for large cell carcinoma because the lung histology tree shows that this is the more specific diagnosis.</p> <p>b. The histology is coded for non-small cell carcinoma because this is the diagnosis from the primary site.</p>	<hr/>
<p>6. The patient has three separate tumors in her right breast. Applying the multiple primary rules for invasive tumors, she has two primary cancers.</p> <p>a. Use the "Multiple Tumors Abstracted as a Single Primary" module to determine the histology code for each cancer, because the case started with multiple tumors.</p> <p>b. Use the "Single Tumor" module to abstract the cancer with one tumor, and the "Multiple Tumors Abstracted as a Single Primary" module to abstract the cancer with two tumors, because the histology rules are applied to each cancer separately.</p>	<hr/>
<p>7. The final diagnosis for a kidney cancer is stated as renal cell carcinoma. The microscopic section of the report states that this is a renal cell carcinoma clear cell type.</p> <p>a. Code renal cell carcinoma clear cell type as this is the more specific diagnosis.</p> <p>b. Code renal cell carcinoma as this is the final diagnosis.</p>	<hr/>

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<p>8. At colonoscopy, four polyps are identified and removed . On histologic examination, one of the polyps is found to contain adenocarcinoma. The appropriate Multiple Primary module to use is:</p> <ul style="list-style-type: none"> a. Unknown if Single or Multiple Tumors b. Single Tumor c. Multiple Tumors 	
<p>9. A patient is diagnosed with choroid melanoma on clinical examination and treated with radiation.</p> <ul style="list-style-type: none"> a. The histology is code as malignancy, 80003, because no biopsy was performed. b. The histology is coded as melanoma, 87203, based on the clinical diagnosis. 	
<p>10. The diagnosis at resection of a lung tumor was stated as “Non-small cell carcinoma, favor squamous cell carcinoma”.</p> <ul style="list-style-type: none"> a. The histology is coded as non-small cell carcinoma because “favor” is not included in the list of terms which identify a more specific type of histology. b. The histology is coded as squamous cell carcinoma because “favor” is in the list of ambiguous terms that are used to code histology. 	
<p>11. The general rules state that bilaterality is not an indication of single or multiple primaries. Therefore all decisions referring to laterality must be based on site-specific rules.</p> <ul style="list-style-type: none"> a. TRUE b. FALSE 	
<p>12. A patient is diagnosed with ductal carcinoma in situ on biopsy 2/3, and with invasive mucinous carcinoma at lumpectomy on 2/15. Rule M8 in the Breast Multiple Tumors module states that an invasive tumor following an in situ tumor more than 60 days after diagnosis is a multiple primary. In this situation there is an invasive tumor following an in situ tumor within 60 days after diagnosis, so this must be a single primary.</p> <ul style="list-style-type: none"> a. TRUE b. FALSE 	

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<p>13. "Focal" indicates a diagnosis of a histologic type which should be coded in which of the following statements:</p> <ul style="list-style-type: none">a. Adenomatous polyp with focal adenocarcinomab. Squamous cell carcinoma with focal keratinizationc. Both a and bd. Neither a nor b	
<p>14. "Tumor", "mass", "lesion", and "neoplasm" are equivalent terms in the MP/H rules. A diagnosis of bladder neoplasm on cystoscopy, treated with fulguration, is picked up as a reportable cancer.</p> <ul style="list-style-type: none">a. TRUEb. FALSE	
<p>15. Small cell carcinoma of the lung is diagnosed based on needle biopsy of a single liver lesion. Which module is used to determine number of primary cancers?</p> <ul style="list-style-type: none">a. Unknown if Single or Multiple Tumorsb. Single Tumorc. Multiple Tumors	
<p>16. Adenocarcinoma and glandular carcinoma are equivalent terms only for the Other Sites Rules.</p> <ul style="list-style-type: none">a. TRUEb. FALSE	
<p>17. Satellite lesions are counted as tumors in applying the Multiple Primary rules for melanomas.</p> <ul style="list-style-type: none">a. TRUEb. FALSE	