

**ICD-9-CM CASEFINDING LIST FOR REPORTABLE TUMORS – Jan-Sept 2015**

The following ICD-9-CM list is to be used to identify potentially reportable tumors. Some ICD-9-CM codes contain conditions that are not reportable. These records should be reviewed and assessed individually to verify whether or not they are reportable to FCDS.

<b>ICD-9-CM</b>	<b>Description</b>
140.00-209.36	Malignant neoplasms ( <b>excluding skin 173.0-173.9</b> )
209.70-209.79	Secondary neuroendocrine tumors
225.0-225.9	Benign neoplasm of brain and spinal cord neoplasm
227.3-227.4	Benign neoplasm of pituitary gland, pineal body, and intracranial endocrine-related structures
228.02	Hemangioma; of intracranial structures
228.1	Lymphangioma, any site brain, other parts of CNS
230.0-234.9	Carcinoma in situ ( <b>exclude: skin, cervix and prostate– 232.0-232.9, 233.1, 233.4</b> )
237.0-237.1, 237.5, 237.6, 237.9	Neoplasm of uncertain behavior (borderline) of intracranial endocrine glands, brain and CNS
238.4	Polycythemia vera (9950/3)
239.6-239.7	Neoplasms of unspecified nature Brain and CNS
273.3	Waldenstrom macroglobulinemia (9761/3)
511.81	Malignant pleural effusion (code first malignant neoplasm if known)
789.51	Malignant ascites (code the first malignant neoplasm if known)
V58.0	Encounter for radiotherapy
V58.1	Encounter for chemotherapy and immunotherapy
V58.11	Antineoplastic Chemotherapy
V58.12	Antineoplastic Immunotherapy

Note: Pilocytic/juvenile astrocytoma (M-9421) is reported with the behavior coded /3 (9421/3 not 9421/1).