

Site-Specific Surgery Codes for Rx Summ- Surg 2023

ORAL CAVITY

Lip C00.0–C00.9, Base of Tongue C01.9, Other Parts of Tongue C02.0–C02.9, Gum C03.0–C03.9, Floor of Mouth C04.0–C04.9, Palate C05.0–C05.9, Other Parts of Mouth C06.0–C06.9

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A110 Photodynamic therapy (PDT)

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A130 Cryosurgery

A140 Laser

No specimen sent to pathology from surgical events A100–A140.

A200 Local tumor excision, NOS

A260 Polypectomy

A270 Excisional biopsy

Any combination of A200 or A260–A270 WITH

A210 Photodynamic therapy (PDT)

A220 Electrocautery

A230 Cryosurgery

A240 Laser ablation

A250 Laser excision

A300 Wide excision, NOS

Code A300 includes:

Hemiglossectomy

Partial glossectomy

A400 Radical excision of tumor, NOS

A410 Radical excision of tumor ONLY

A420 Combination of A410 WITH resection in continuity with mandible (marginal, segmental, hemi-, or total resection)

A430 Combination of A410 WITH resection in continuity with maxilla (partial, subtotal, or total resection)

Codes A400–A430 include:

Total glossectomy Radical glossectomy

Specimen sent to pathology from surgical events A200–A430.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

PAROTID AND OTHER UNSPECIFIED GLANDS

Parotid Gland C07.9, Major Salivary Glands C08.0–C08.9

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A110 Photodynamic therapy (PDT)

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A130 Cryosurgery

A140 Laser

No specimen sent to pathology from surgical events A100–A140.

A200 Local tumor excision, NOS

A260 Polypectomy

A270 Excisional biopsy

Any combination of A200 or A260–A270 WITH

A210 Photodynamic therapy (PDT)

A220 Electrocautery

A230 Cryosurgery

A240 Laser ablation

A250 Laser excision

A300 Less than total parotidectomy, NOS; less than total removal of major salivary gland, NOS

A310 Facial nerve spared

A320 Facial nerve sacrificed

A330 Superficial lobe ONLY

A340 Facial nerve spared

A350 Facial nerve sacrificed

A360 Deep lobe (Total)

A370 Facial nerve spared

A380 Facial nerve sacrificed

A400 Total parotidectomy, NOS; total removal of major salivary gland, NOS

A410 Facial nerve spared

A420 Facial nerve sacrificed

A500 Radical parotidectomy, NOS; radical removal of major salivary gland, NOS

A510 WITHOUT removal of temporal bone

A520 WITH removal of temporal bone

A530 WITH removal of overlying skin (requires graft or flap coverage)

A800 Parotidectomy, NOS

Specimen sent to pathology from surgical events A200–A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

PHARYNX

Tonsil C09.0–C09.9, Oropharynx C10.0–C10.9, Nasopharynx C11.0–C11.9 Pyriform Sinus C12.9, Hypopharynx C13.0–C13.9, Pharynx C14.0

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A110 Photodynamic therapy (PDT)

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A130 Cryosurgery

A140 Laser

A150 Stripping

No specimen sent to pathology from surgical events A100–A150.

A200 Local tumor excision, NOS

A260 Polypectomy

A270 Excisional biopsy

Any combination of A200 or A260–A270 WITH

A210 Photodynamic therapy (PDT)

A220 Electrocautery

A230 Cryosurgery

A240 Laser ablation

A250 Laser excision

A280 Stripping

A300 Pharyngectomy, NOS

A310 Limited/partial pharyngectomy; tonsillectomy, bilateral tonsillectomy

A320 Total pharyngectomy

A400 Pharyngectomy WITH laryngectomy OR removal of contiguous bone tissue, NOS (does NOT include total mandibular resection)

A410 WITH Laryngectomy (laryngopharyngectomy)

A420 WITH bone

A430 WITH both A410 and A420

A500 Radical pharyngectomy (includes total mandibular resection), NOS

A510 WITHOUT laryngectomy

A520 WITH laryngectomy

Specimen sent to pathology from surgical events A200–A520.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

ESOPHAGUS

C15.0–C15.9

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A110 Photodynamic therapy (PDT)

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A130 Cryosurgery

A140 Laser

No specimen sent to pathology from surgical events A100–A140.

A200 Local tumor excision,

NOS A260 Polypectomy

A270 Excisional biopsy

Any combination of A200 or A260–A270 WITH

A210 Photodynamic therapy (PDT)

A220 Electrocautery

A230 Cryosurgery

A240 Laser ablation

A250 Laser excision

A300 Partial esophagectomy

A400 Total esophagectomy, NOS

A500 Esophagectomy, NOS WITH laryngectomy and/or gastrectomy, NOS

A510 WITH laryngectomy

A520 WITH gastrectomy, NOS

A530 Partial gastrectomy

A540 Total gastrectomy

A550 Combination of A510 WITH any of A520–A540

A800 Esophagectomy, NOS

Specimen sent to pathology from surgical events A200–A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

STOMACH

C16.0–C16.9

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A110 Photodynamic therapy (PDT)

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A130 Cryosurgery

A140 Laser

No specimen sent to pathology from surgical events A100–A140.

A200 Local tumor excision, NOS

A260 Polypectomy

A270 Excisional biopsy

Any combination of A200 or A260–A270 WITH

A210 Photodynamic therapy (PDT)

A220 Electrocautery

A230 Cryosurgery

A240 Laser ablation

A250 Laser excision

A300 Gastrectomy, NOS (partial, subtotal, hemi-)

A310 Antrectomy, lower (distal-less than 40% of stomach)***

A320 Lower (distal) gastrectomy (partial, subtotal, hemi-)

A330 Upper (proximal) gastrectomy (partial, subtotal, hemi-)

Code A300 includes:

Partial gastrectomy, including a sleeve resection of the stomach

Billroth I: anastomosis to duodenum (duodenostomy)

Billroth II: anastomosis to jejunum (jejunostomy)

A400 Near-total or total gastrectomy, NOS

A410 Near-total gastrectomy

A420 Total gastrectomy

A total gastrectomy may follow a previous partial resection of the stomach.

A500 Gastrectomy, NOS WITH removal of a portion of esophagus

A510 Partial or subtotal gastrectomy

A520 Near total or total gastrectomy

Codes A500–A520 are used for gastrectomy resection when only portions of esophagus are included in procedure.

A600 Gastrectomy with a resection in continuity with the resection of other organs, NOS***

A610 Partial or subtotal gastrectomy, in continuity with the resection of other organs***

A620 Near total or total gastrectomy, in continuity with the resection of other organs***

A630 Radical gastrectomy, in continuity with the resection of other organs***

Site-Specific Surgery Codes for Rx Summ- Surg 2023

Codes A600–A630 are used for gastrectomy resections with organs other than esophagus. Portions of esophagus may or may not be included in the resection.

A800 Gastrectomy, NOS

Specimen sent to pathology from surgical events A200–A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

*** Incidental splenectomy NOT included

Site-Specific Surgery Codes for Rx Summ- Surg 2023

COLON

C18.0–C18.9

For cases diagnosed 1/1/2023-12/31/2023

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294).

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

No specimen sent to pathology from surgical events A100–A120.

A200 Local tumor excision, NOS

A260 Polypectomy, NOS

A270 Excisional biopsy

A280 Polypectomy-endoscopic

A290 Polypectomy-surgical excision

Any combination of A200 or A260-A290 WITH
A220 Electrocautery

A300 Partial colectomy, segmental resection

A320 Plus resection of contiguous organ; example: small bowel, bladder

A400 Subtotal colectomy/hemicolectomy (total right or left colon and a portion of transverse colon)

A410 Plus resection of contiguous organ; example: small bowel, bladder

A500 Total colectomy (removal of colon from cecum to the rectosigmoid junction; may include a portion of the rectum)

A510 Plus resection of contiguous organ; example: small bowel, bladder

A600 Total proctocolectomy (removal of colon from cecum to the rectosigmoid junction, including the entire rectum)

A610 Plus resection of contiguous organ; example: small bowel, bladder

A700 Colectomy or coloproctectomy with resection of contiguous organ(s), NOS (when there is not enough information to code A320, A410, A510, or A610)

Code A700 includes: Any colectomy (partial, hemicolectomy, or total) WITH a resection of any other organs in continuity with the primary site. Other organs may be partially or totally removed. Other organs may include, but are not limited to, oophorectomy, partial proctectomy, rectal mucosectomy, or pelvic exenteration.

A800 Colectomy, NOS

Specimen sent to pathology from surgical events A200–A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

COLON C18.0–C18.9

For cases diagnosed 1/1/2024 forward

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294).

Codes

B000 None; no surgery of primary site; autopsy ONLY

B100 Local tumor destruction, NOS, any form of local tumor destruction, includes electrocautery, and/or fulguration

Note: B100 includes electrocautery; fulguration (includes use of hot forceps for tumor destruction). **B120 is obsolete.**

No specimen sent to pathology from surgical event B100

B200 Local tumor excision, NOS

B260 Polypectomy, NOS

B270 Excisional biopsy

B280 Polypectomy-endoscopic

Note: Code B280 includes a polypectomy during an initial colonoscopy for screening or symptoms without knowledge of whether the polyp is benign or malignant.

B281 Polypectomy-endoscopic mucosal resection or dissection

Note: Code B281 includes a more complicated polypectomy performed during a colonoscopy. Usually, the polyp is known to be a superficial malignancy.

B290 Polypectomy-open approach surgical excision, or laparoscopic

Any combination of B200 or B260-B290 WITH

B220 Electrocautery

Note: Code B220 should be used when electrocautery is used to destroy the tumor but there is still tumor sent to pathology. Rarely used.

B291 Wide Local Excision with Tumor

Note: Code B291 includes procedures focused on just removing the primary tumor and not removing a portion of colon or rectum. In these local procedures the adjacent colon, rectum and lymph nodes are not removed, just the tumor with a bit of margin. Procedures are typically reserved for removal of early tumors that are superficial and not known to be associated with lymph node involvement.

Alternate names for B291 includes: Wide local excision, Wide excision, Local tumor resection, or Transanal resection

B300 Partial colectomy, removal of one or more segments with colon resection but less than half of colon is removed.

Note: Code B300 includes removal of one or more colon segments, but less than half of the colon.

- Segments include cecum, ascending, hepatic flexure, transverse colon, splenic flexure, sigmoid colon and/or the descending colon

- o Transverse colectomy includes transverse colon

- o Splenic flexure colectomy includes transverse colon and the splenic flexure

- o Sigmoidectomy includes removal of sigmoid colon and descending colon

B320 Plus resection of contiguous organ; example: small bowel, bladder

B330 Appendectomy for appendiceal primaries only, includes incidental findings

Note: When an appendix primary is found incidentally during resection for a colon primary,

Site-Specific Surgery Codes for Rx Summ- Surg 2023

code the extent of the surgical resection for the colon primary. Assign B330 for the appendix primary site.

- B400 Hemicolectomy (total right or left colon and a portion of the transverse colon)
- B401 Subtotal colectomy (total right or left colon and entire/all of transverse colon)
Note: Code B400 includes removal of the total right or left colon with a portion of the transverse colon
- A total left hemicolectomy includes removal of the splenic flexure, descending colon, and the sigmoid colon
 - A total right hemicolectomy includes removal of the cecum (with appendix, if present), ascending colon and the hepatic flexure
- B410 Plus resection of contiguous organ; example: small bowel, bladder
Note: Assign code B400 for extended left/right hemicolectomy
- B500 Total colectomy (removal of colon from cecum to the rectosigmoid junction; may include a portion of the rectum)
Note: Code B500 includes removal of all segments of colon, NOT including the entire rectum
- B510 Plus resection of contiguous organ; example: small bowel, bladder
- B600 Total proctocolectomy (removal of colon from cecum to the rectosigmoid junction, including the entire rectum)
Note: Code B600 includes removal of the entire colon, including the entire rectum
- B610 Plus resection of contiguous organ; example: small bowel, bladder
- B700 Colectomy or proctocolectomy with resection of contiguous organ(s), NOS,
Note: Use code B700 when there is not enough information to assign code B320, B410, B510, or B610. Code B700 includes any colectomy (partial, hemicolectomy, or total) WITH a resection of any other organs in continuity with the primary site (enbloc resection). Other organs may be partially or totally removed. Other organs may include, but are not limited to, oophorectomy, partial proctectomy, rectal mucosectomy, or pelvic exenteration.
- B800 Colectomy, NOS

Specimen sent to pathology from surgical events B200–B800.

- B900 Surgery, NOS
- B990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

RECTOSIGMOID

C19.9

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294).

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

No specimen sent to pathology from surgical events A100–A120.

A200 Local tumor excision, NOS

A260 Polypectomy, NOS

A270 Excisional biopsy

Any combination of A200 or A260-A270 WITH

A220 Electrocautery

A300 Segmental resection; partial proctosigmoidectomy, NOS

A310 Plus resection of contiguous organs; example: small bowel, bladder

Procedures coded A300 include, but are not limited to:

Anterior resection

Hartmann's operation

Low anterior resection (LAR)

Partial colectomy, NOS

Rectosigmoidectomy, NOS

Sigmoidectomy

A400 Pull through WITH sphincter preservation (colo-anal anastomosis)

A500 Total proctectomy

A510 Total colectomy

A550 Total colectomy WITH ileostomy, NOS

A560 Ileorectal reconstruction

A570 Total colectomy WITH other pouch; example: Koch pouch

A600 Total proctocolectomy, NOS

A650 Total proctocolectomy WITH ileostomy, NOS

A660 Total proctocolectomy WITH ileostomy and pouch

Removal of the colon from cecum to the rectosigmoid or a portion of the rectum.

A700 Colectomy or proctocolectomy resection in continuity with other organs; pelvic exenteration

A800 Colectomy, NOS; Proctectomy, NOS

Specimen sent to pathology from surgical events A200–A800.

Site-Specific Surgery Codes for Rx Summ- Surg 2023

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

RECTUM

C20.9

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294).

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

No specimen sent to pathology from surgical events A100-A120

A200 Local tumor excision, NOS

A260 Polypectomy

A270 Excisional biopsy

Any combination of A200 or A260–A270 WITH

A220 Electrocautery

A280 Curette and fulguration

A300 Segmental resection; partial proctectomy, NOS

Procedures coded A300 include, but are not limited to:

Anterior resection

Hartmann's operation

Low anterior resection (LAR)

Transsacral rectosigmoidectomy

A400 Pull through WITH sphincter preservation (coloanal anastomosis)

A500 Total proctectomy

Procedure coded A500 includes, but is not limited to:

Abdominoperineal resection

A600 Total proctocolectomy, NOS

A700 Proctectomy or proctocolectomy with resection in continuity with other organs; pelvic exenteration

A800 Proctectomy, NOS

Specimen sent to pathology from surgical events A200–A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

ANUS

C21.0–C21.8

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A150 Thermal Ablation

No specimen sent to pathology from surgical events A100, A120 and A150.

A200 Local tumor excision, NOS

A260 Polypectomy

A270 Excisional biopsy

Any combination of A200 or A260–A270 WITH

A220 Electrocautery

A600 Abdominal perineal resection, NOS (APR)

A610 APR and sentinel node excision

A620 APR and unilateral inguinal lymph node dissection

A630 APR and bilateral inguinal lymph node dissection

The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item #1292) or *Scope of Regional Lymph Node Surgery at This Facility* (NAACCR Item #672).

Specimen sent to pathology from surgical events A200–A630.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

LIVER AND INTRAHEPATIC BILE DUCTS

C22.0–C22.1

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A110 Photodynamic therapy (PDT)

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A130 Cryosurgery

A140 Laser

A150 Alcohol (Percutaneous Ethanol Injection-PEI)

A160 Heat-Radio-frequency ablation (RFA)

A170 Other (ultrasound, acetic acid)

No specimen sent to pathology from surgical events A100–A170.

A200 Wedge or segmental resection, NOS

A210 Wedge resection

A220 Segmental resection, NOS

A230 One

A240 Two

A250 Three

A260 Segmental resection AND local tumor destruction

A300 Lobectomy, NOS

A360 Right lobectomy

A370 Left lobectomy

A380 Lobectomy AND local tumor destruction

A500 Extended lobectomy, NOS (extended: resection of a single lobe plus a segment of another lobe)

A510 Right lobectomy

A520 Left lobectomy

A590 Extended lobectomy AND local tumor destruction

A600 Hepatectomy, NOS

A610 Total hepatectomy and transplant

A650 Excision of a bile duct (for an intra-hepatic bile duct primary only)

A660 Excision of an intrahepatic bile duct PLUS partial hepatectomy

A750 Extrahepatic bile duct and hepatectomy WITH transplant

Specimen sent to pathology from surgical events A200–A750.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

PANCREAS

C25.0–C25.9

For cases diagnosed 1/1/2023-12/31/2023

Codes

A000 None; no surgery of primary site; autopsy ONLY

A250 Local excision of tumor, NOS

A300 Partial pancreatectomy, NOS; example: distal

A350 Local or partial pancreatectomy and duodenectomy

A360 WITHOUT distal/partial gastrectomy

A370 WITH partial gastrectomy (Whipple)

A400 Total pancreatectomy

A600 Total pancreatectomy and subtotal gastrectomy or duodenectomy

A700 Extended pancreatoduodenectomy

A800 Pancreatectomy, NOS

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

PANCREAS

C25.0–C25.9

For cases diagnosed 1/1/2024 forward

Codes

B000 None; no surgery of primary site; autopsy ONLY

B250 Local excision of tumor, NOS, Example Enucleation
Note: Laser tumor destruction, thermal therapy, or ablation

B300 Partial pancreatectomy, NOS; example: Distal pancreatectomy or subtotal pancreatectomy

B350 Local or partial pancreatectomy and duodenectomy, NOS, Example: Pancreaticoduodenectomy (Whipple Procedure)

B351 WITHOUT distal/partial gastrectomy, pylorus preserving Whipple

B352 WITH partial gastrectomy, Classic Whipple

Note: Use code B350 when it is not specified where the stomach was cut

B400 Total pancreatectomy

B600 Total pancreatectomy and subtotal gastrectomy and/or duodenectomy, extended pancreatoduodenectomy

Note: B600 includes extended pancreatoduodenectomy. ~~B700 is obsolete~~

B800 Pancreatectomy, NOS

B900 Surgery, NOS

B990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

LARYNX

C32.0–C32.9

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A110 Photodynamic therapy (PDT)

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A130 Cryosurgery

A140 Laser

A150 Stripping

No specimen sent to pathology from surgical events A100–A150.

A200 Local tumor excision, NOS

A260 Polypectomy

A270 Excisional biopsy

Any combination of A200 or A260–A270 WITH

A210 Photodynamic therapy (PDT)

A220 Electrocautery

A230 Cryosurgery

A240 Laser ablation

A250 Laser excision

A280 Stripping

A300 Partial excision of the primary site, NOS; subtotal/partial laryngectomy NOS; hemilaryngectomy NOS

A310 Vertical laryngectomy

A320 Anterior commissure laryngectomy

A330 Supraglottic laryngectomy

A400 Total or radical laryngectomy, NOS

A410 Total laryngectomy ONLY

A420 Radical laryngectomy ONLY

A500 Pharyngolaryngectomy

A800 Laryngectomy, NOS

Specimen sent to pathology from surgical events A200–A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

LUNG

C34.0–C34.9

For cases diagnosed 1/1/2023-12/31/2023

Codes

A000 None; no surgery of primary site; autopsy ONLY

A190 Local tumor destruction or excision, NOS

Unknown whether a specimen was sent to pathology for surgical events coded A190 (principally for cases diagnosed prior to January 1, 2003).

A150 Local tumor destruction, NOS

A120 Laser ablation or cryosurgery

A130 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

No specimen sent to pathology from surgical events A120–A130 and A150.

A200 Excision or resection of less than one lobe, NOS

A210 Wedge resection

A220 Segmental resection, including lingulectomy

A230 Excision, NOS

A240 Laser excision

A250 Bronchial sleeve resection ONLY

A300 Resection of lobe or bilobectomy, but less than the whole lung (partial pneumonectomy, NOS)

A330 Lobectomy WITH mediastinal lymph node dissection

The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item #1292) or *Scope of Regional Lymph Node Surgery at This Facility* (NAACCR Item #672).

A450 Lobe or bilobectomy extended, NOS

A460 WITH chest wall

A470 WITH pericardium

A480 WITH diaphragm

A550 Pneumonectomy, NOS

A560 WITH mediastinal lymph node dissection (radical pneumonectomy)

The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item #1292) or *Scope of Regional Lymph Node Surgery at This Facility* (NAACCR Item #672).

A650 Extended pneumonectomy

A660 Extended pneumonectomy plus pleura or diaphragm

A700 Extended radical pneumonectomy

The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item #1292) or *Scope of Regional Lymph Node Surgery at This Facility* (NAACCR Item #672).

A800 Resection of lung, NOS

Site-Specific Surgery Codes for Rx Summ- Surg 2023

Specimen sent to pathology from surgical events A200–A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

LUNG

C34.0–C34.9

For cases diagnosed 1/1/2024 forward

Codes

B000 None; no surgery of primary site; autopsy ONLY

B150 Local tumor destruction, NOS

B120 Laser ablation or cryosurgery

B130 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

No specimen sent to pathology from surgical events B120–B130 and B150.

B190 Local tumor destruction or excision, NOS

Unknown whether a specimen was sent to pathology for surgical events coded B190

B200 Excision or resection of less than one lobe, NOS

B210 Wedge resection

B220 Segmental resection, for example a lingulectomy

B230 Excision, NOS

B240 Laser excision

B250 Bronchial sleeve resection ONLY

B300 Resection of lobe or lobectomy, but less than the whole lung (partial pneumonectomy, NOS)

B320 Bronchial sleeve lobectomy/bilobectomy

B330 Lobectomy WITH mediastinal lymph node dissection

Note: A sleeve lobectomy/bilobectomy includes resection of the entire lobe(s) in addition to part of the bronchus.

A sleeve lobectomy is distinct from a typical lobectomy or bilobectomy, in which the bronchus is not resected.

The lymph node dissection should also be coded under Scope of Regional Lymph Node Surgery (NAACCR Item #1292) or Scope of Regional Lymph Node Surgery at This Facility (NAACCR Item #672).

B450 Lobe or bilobectomy extended, NOS

B460 WITH chest wall

B470 WITH pericardium

B480 WITH diaphragm

Site-Specific Surgery Codes for Rx Summ- Surg 2023

B550 Pneumonectomy, NOS

B560 WITH mediastinal lymph node dissection (radical pneumonectomy)

The lymph node dissection should also be coded under Scope of Regional Lymph Node Surgery (NAACCR Item #1292)

or Scope of Regional Lymph Node Surgery at This Facility (NAACCR Item #672).

B650 Extended pneumonectomy, NOS

B660 Extended pneumonectomy plus pleura or diaphragm.

Note: An extended pneumonectomy is the resection of the entire lung in addition to one or more of the following structures: superior vena cava, carina, left atrium, aorta, or chest wall.

B800 Resection of lung, NOS

Specimen sent to pathology from surgical events B200–B800.

B900 Surgery, NOS

B990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

HEMATOPOIETIC/RETICULOENDOTHELIAL/ IMMUNOPROLIFERATIVE/ MYELOPROLIFERATIVE DISEASE

C42.0, C42.1, C42.3, C42.4 (with any histology)

Code

A980 All hematopoietic/reticuloendothelial/immunoproliferative/myeloproliferative disease sites and/or histologies, WITH or WITHOUT surgical treatment.

Surgical procedures for hematopoietic/reticuloendothelial/immunoproliferative/ myeloproliferative primaries are to be recorded using the data item *Surgical Procedure/Other Site* (NAACCR Item #1294) or *Surgical Procedure/Other Site at This Facility* (NAACCR Item #674).

Site-Specific Surgery Codes for Rx Summ- Surg 2023

BONES, JOINTS, AND ARTICULAR CARTILAGE

C40.0–C41.9

PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM

C47.0–C47.9

CONNECTIVE, SUBCUTANEOUS, AND OTHER SOFT TISSUES

C49.0–C49.9

Codes

A000 None; no surgery of primary site; autopsy ONLY

A190 Local tumor destruction or excision, NOS

Unknown whether a specimen was sent to pathology for surgical events coded A190 (principally for cases diagnosed prior to January 1, 2003).

A150 Local tumor destruction

No specimen sent to pathology from surgical event A150.

A250 Local excision

A260 Partial resection

A300 Radical excision or resection of lesion WITH limb salvage

A400 Amputation of limb

A410 Partial amputation of limb A420 Total amputation of limb

A500 Major amputation, NOS

A510 Forequarter, including scapula

A520 Hindquarter, including ilium/hip bone

A530 Hemipelvectomy, NOS

A540 Internal hemipelvectomy

Specimen sent to pathology from surgical events A250–A540.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

SPLEEN

C42.2

Codes

A000 None; no surgery of primary site; autopsy ONLY

A190 Local tumor destruction or excision, NOS

Unknown whether a specimen was sent to pathology for surgical events coded A190 (principally for cases diagnosed prior to January 1, 2003).

A210 Partial splenectomy

A220 Total splenectomy

A800 Splenectomy, NOS

Specimen sent to pathology for surgical events A210-A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

SKIN

C44.0–C44.9

The priority order for sources used to assign surgery codes is: Operative report, statement from a physician, description of the surgical procedure on a pathology report, results of the pathology report. Code based on the description of the procedure.

Do not code based on margin status documented in the pathology report.

B000 None; no surgery of primary site; autopsy ONLY

B100 Local tumor destruction, NOS

B110 Photodynamic therapy (PDT)

B120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

B130 Cryosurgery

B140 Laser

B200 Local tumor excision, NOS; Excisional biopsy, NOS

B220-Shave Biopsy, NOS

B230-Punch Biopsy, NOS

B240-Elliptical Biopsy (aka fusiform)

B300 Mohs Surgery NOS

B310 Mohs surgery performed on the same day (all Mohs procedures performed during the same day).

B320 Mohs surgery performed on different days (slow Mohs)(each Mohs procedure performed on different day)

B500 Biopsy (NOS) of primary tumor followed wide excision of the lesion; Wide Excision NOS, Re-excision

B510-Incisional Biopsy followed by wide excision

B520-Shave Biopsy followed by wide excision

B530-Punch Biopsy followed by wide excision

B540-Elliptical Biopsy (aka fusiform) followed by wide excision

Note: An incisional biopsy would be a needle or core biopsy of the primary tumor. An incisional biopsy would be coded as a Diagnostic Staging Procedure (NAACCR Item 1350).

B600 Major Amputation

B900 Surgery, NOS

B990 Unknown if surgery performed; Death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

BREAST

C50.0–C50.9

For cases diagnosed 1/1/2023-12/31/2023

Codes

A000 None; no surgery of primary site; autopsy ONLY

A190 Local tumor destruction, NOS

No specimen was sent to pathology for surgical events coded A190 (principally for cases diagnosed prior to January 1, 2003).

A200 Partial mastectomy, NOS; less than total mastectomy, NOS

A210 Partial mastectomy WITH nipple resection

A220 Lumpectomy or excisional biopsy

A230 Reexcision of the biopsy site for gross or microscopic residual disease

A240 Segmental mastectomy (including wedge resection, quadrantectomy, tylectomy)

Procedures coded A200–A240 remove the gross primary tumor and some of the breast tissue (breast-conserving or preserving). There may be microscopic residual tumor.

A300 Subcutaneous mastectomy

A subcutaneous mastectomy, also called a nipple sparing mastectomy, is the removal of breast tissue without the nipple and areolar complex or overlying skin. It is performed to facilitate immediate breast reconstruction. Cases coded 30 may be considered to have undergone breast reconstruction.

A400 Total (simple) mastectomy

A410 WITHOUT removal of uninvolved contralateral breast

A430 With reconstruction NOS

A440 Tissue

A450 Implant

A460 Combined (Tissue and Implant)

A420 WITH removal of uninvolved contralateral breast

A470 With reconstruction NOS

A480 Tissue

A490 Implant

A750 Combined (Tissue and Implant)

A total (simple) mastectomy removes all breast tissue, the nipple, and areolar complex. An axillary dissection is not done, but sentinel lymph nodes may be removed.

For single primaries, involving both breasts use code A760.

If the contralateral breast reveals a second primary, each breast is abstracted separately. The surgical procedure is coded 41 for the first primary. The surgical code for the contralateral breast is coded to the procedure performed on that site.

Reconstruction that is planned as part of first course treatment is coded A430-A490 or A750, whether it is done at the time of mastectomy or later.

A760 Bilateral mastectomy for a single tumor involving both breasts, as for bilateral inflammatory carcinoma.

Site-Specific Surgery Codes for Rx Summ- Surg 2023

A500 Modified radical mastectomy

A510 WITHOUT removal of uninvolved contralateral breast

A530 Reconstruction, NOS

A540 Tissue

A550 Implant

A560 Combined (Tissue and Implant)

A520 WITH removal of uninvolved contralateral breast

A570 Reconstruction, NOS

A580 Tissue

A590 Implant

A630 Combined (Tissue and Implant)

Removal of all breast tissue, the nipple, the areolar complex, and variable amounts of breast skin in continuity with the axilla. The specimen may or may not include a portion of the pectoralis major muscle

If contralateral breast reveals a second primary, it is abstracted separately. The surgical procedure is coded A510 for the first primary. The surgical code for the contralateral breast is coded to the procedure performed on that site.

A600 Radical mastectomy, NOS

A610 WITHOUT removal of uninvolved contralateral breast

A640 Reconstruction, NOS

A650 Tissue

A660 Implant

A670 Combined (Tissue and Implant)

A620 WITH removal of uninvolved contralateral breast

A680 Reconstruction, NOS

A690 Tissue

A730 Implant

A740 Combined (Tissue and Implant)

A700 Extended radical mastectomy

A710 WITHOUT removal of uninvolved contralateral breast

A720 WITH removal of uninvolved contralateral breast

A800 Mastectomy, NOS

Specimen sent to pathology for surgical events coded A200-A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

BREAST

C50.0–C50.9

For cases diagnosed 1/1/2024 forward

Coding Instructions

- Code the surgical resection code for breast primaries performed with diagnosis date \geq 1/1/2024.
- Do not record reconstruction in this data items. See Rx Hosp-Recon Breast [item #751] and/or Rx Summ-Recon breast [item #1335].
- If contralateral breast reveals a second primary, each breast is abstracted separately.

Codes

B000 None; no surgery of primary site; autopsy ONLY

B200 Partial mastectomy; less than total mastectomy; lumpectomy, segmental mastectomy, quadrantectomy, tylectomy, with or without nipple resection.

Note: Use code B200 when there is a previous positive biopsy (either core or FNA).

B210 Excisional breast biopsy - Diagnostic excision, no pre-operative biopsy proven diagnosis of cancer

Note: Use code B210 when a surgeon removes the (positive) mass and there was no biopsy (either core or FNA) done prior to the mass being removed.

An excisional biopsy can occur when the nodule was previously not expected to be cancer.

B215 Excisional breast biopsy, for atypia

Note: Use code B215 when patient has biopsy that shows atypical ductal hyperplasia, an excision is then performed, and pathology shows in situ or invasive cancer. The excisional breast biopsy for ADH diagnosed the cancer, not the core biopsy.

An excisional breast biopsy removes the entire tumor and/or leaves only microscopic margins.

This surgical code was added for situations when atypia tissue is excised and found to be reportable.

Approx. 10-15% of excised atypia are cancer and reportable.

B240 Re-excision of margins from primary tumor site for gross or microscopic residual disease when less than total mastectomy performed

B290 Central lumpectomy, only performed for a prior diagnosis of cancer, which includes removal of the nipple areolar complex

Note: Use code B290 when the nipple areolar complex needs to be removed for patients with Paget disease or cancer directly involving the nipple areolar complex.

A central lumpectomy removes the nipple areolar complex, whereas a lumpectomy does not.

Central lumpectomy and central portion lumpectomy, central portion excision, central partial mastectomy are interchangeable terms.

B300 Skin-sparing mastectomy

B310 WITHOUT removal of uninvolved contralateral breast

B320 WITH removal of uninvolved contralateral breast

Note: A skin-sparing mastectomy removes all breast tissue and the nipple areolar complex and preserves native breast skin. It is performed with and without sentinel node biopsy or ALND.

B400 Nipple-sparing mastectomy

B410 WITHOUT removal of uninvolved contralateral breast

B420 WITH removal of uninvolved contralateral breast

Site-Specific Surgery Codes for Rx Summ- Surg 2023

Note: A nipple-sparing mastectomy removal all breast tissue but preserves the nipple areolar complex and breast skin. It is performed with and without sentinel node biopsy or ALND.

B500 Areolar-Sparing Mastectomy

B510 WITHOUT removal of uninvolved contralateral breast

B520 WITH removal of uninvolved contralateral breast

Note: An areolar-sparing mastectomy removes all breast tissue and the nipple but preserves the areola and breast skin. It is performed with and without sentinel node biopsy or ALND.

B600 Total (simple mastectomy)

B610 WITHOUT removal of uninvolved contralateral breast

B620 WITH removal of uninvolved contralateral breast

Note: A total (simple) mastectomy removes all breast tissue, the nipple areolar complex and breast skin. It is performed with and without sentinel node biopsy or ALND.

Use code B600, B610, B620 if patient had a modified radical mastectomy.

B700 Radical mastectomy, NOS

B710 WITHOUT removal of uninvolved contralateral breast

B720 WITH removal of uninvolved contralateral breast

B760 Bilateral mastectomy for a single tumor involving both breasts, as for bilateral inflammatory carcinoma

Note: A radical mastectomy removes all breast tissue, the nipple areolar complex, breast skin, and pectoralis muscle. It is performed with level I-III ALND.

B800 Mastectomy, NOS (including extended radical mastectomy)

B900 Surgery, NOS

B990 Unknown if surgery was performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

CERVIX UTERI

C53.0–C53.9

For invasive cancers, dilation and curettage is coded as an incisional biopsy (02) under the data item *Surgical Diagnostic and Staging Procedure* (NAACCR Item #1350).

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A110 Photodynamic therapy (PDT)

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A130 Cryosurgery

A140 Laser

A150 Loop Electrocautery Excision Procedure (LEEP)

A160 Laser ablation

A170 Thermal ablation

No specimen sent to pathology from surgical events A100–A170.

A200 Local tumor excision, NOS

A260 Excisional biopsy, NOS

A270 Cone biopsy

A240 Cone biopsy WITH gross excision of lesion

A290 Trachelectomy; removal of cervical stump; cervicectomy

Any combination of A200, A240, A260, A270 or A290 WITH

A210 Electrocautery

A220 Cryosurgery

A230 Laser ablation or excision

A250 Dilatation and curettage; endocervical curettage (for in situ only)

A280 Loop electrocautery excision procedure (LEEP)

A300 Total hysterectomy (simple, pan-) WITHOUT removal of tubes and ovaries

Total hysterectomy removes both the corpus and cervix uteri and may also include a portion of vaginal cuff.

A400 Total hysterectomy (simple, pan-) WITH removal of tubes and/or ovary

Total hysterectomy removes both the corpus and cervix uteri and may also include a portion of vaginal cuff.

A500 Modified radical or extended hysterectomy; radical hysterectomy; extended radical hysterectomy

A510 Modified radical hysterectomy

A520 Extended hysterectomy

A530 Radical hysterectomy; Wertheim procedure

A540 Extended radical hysterectomy

A600 Hysterectomy, NOS, WITH or WITHOUT removal of tubes and ovaries

A610 WITHOUT removal of tubes and ovaries

A620 WITH removal of tubes and ovaries

Site-Specific Surgery Codes for Rx Summ- Surg 2023

A700 Pelvic exenteration

A710 Anterior exenteration

Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes.

A720 Posterior exenteration

Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes.

A730 Total exenteration

Includes removal of all pelvic contents and pelvic lymph nodes.

A740 Extended exenteration

Includes pelvic blood vessels or bony pelvis.

Specimen sent to pathology from surgical events A200–A740.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

CORPUS UTERI

C54.0–C55.9

For invasive cancers, dilation and curettage is coded as an incisional biopsy (02) under the data item *Surgical Diagnostic and Staging Procedure* (NAACCR Item #1350).

Codes

A000 None; no surgery of primary site; autopsy ONLY

A190 Local tumor destruction or excision, NOS

Unknown whether a specimen was sent to pathology for surgical events coded A190 (principally for cases diagnosed prior to January 1, 2003).

A100 Local tumor destruction, NOS

A110 Photodynamic therapy (PDT)

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A130 Cryosurgery

A140 Laser

A150 Loop Electrocautery Excision Procedure (LEEP)

A160 Thermal ablation

No specimen sent to pathology from surgical events A100–A160.

A200 Local tumor excision, NOS; simple excision, NOS

A240 Excisional biopsy

A250 Polypectomy

A260 Myomectomy

Any combination of A200 or A240–A260 WITH

A210 Electrocautery

No specimen sent to pathology from surgical events A100–A160.

A200 Local tumor excision, NOS; simple excision, NOS

A240 Excisional biopsy

A250 Polypectomy A260 Myomectomy

Any combination of A200 or A240–A260 WITH

A210 Electrocautery

A220 Cryosurgery

A230 Laser ablation or excision

A300 Subtotal hysterectomy/supracervical hysterectomy/fundectomy WITH or WITHOUT removal of tube(s) and ovary(ies).

A310 WITHOUT tube(s) and ovary(ies)

A320 WITH tube(s) and ovary(ies)

A400 Total hysterectomy (simple, pan-) WITHOUT removal of tube(s) and ovary(ies)

Removes both the corpus and cervix uteri. It may also include a portion of the vaginal cuff.

A500 Total hysterectomy (simple, pan-) WITH removal of tube(s) and/or ovary(ies)

Removes both the corpus and cervix uteri. It may also include a portion of the vaginal cuff.

Site-Specific Surgery Codes for Rx Summ- Surg 2023

A600 Modified radical or extended hysterectomy; radical hysterectomy; extended radical hysterectomy

A610 Modified radical hysterectomy

A620 Extended hysterectomy

A630 Radical hysterectomy; Wertheim procedure

A640 Extended radical hysterectomy

A650 Hysterectomy, NOS, WITH or WITHOUT removal of tube(s) and ovary(ies)

A660 WITHOUT removal of tube(s) and ovary(ies)

A670 WITH removal of tube(s) and ovary(ies)

A750 Pelvic exenteration

A760 Anterior exenteration

Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes.

A770 Posterior exenteration

Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes.

A780 Total exenteration

Includes removal of all pelvic contents and pelvic lymph nodes.

A790 Extended exenteration

Includes pelvic blood vessels or bony pelvis.

Specimen sent to pathology from surgical events A200–A790.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

OVARY

C56.9

Codes

A000 None; no surgery of primary site; autopsy ONLY

A170 Local tumor destruction, NOS

No specimen sent to pathology from surgical event A170.

A250 Total removal of tumor or (single) ovary, NOS

A260 Resection of ovary (wedge, subtotal, or partial) ONLY, NOS; unknown if hysterectomy done

A270 WITHOUT hysterectomy

A280 WITH hysterectomy

A350 Unilateral (salpingo-)oophorectomy; unknown if hysterectomy done

A360 WITHOUT hysterectomy

A370 WITH hysterectomy

A500 Bilateral (salpingo-)oophorectomy; unknown if hysterectomy done

A510 WITHOUT hysterectomy

A520 WITH hysterectomy

A550 Unilateral or bilateral (salpingo-)oophorectomy WITH OMENTECTOMY, NOS; partial or total; unknown if hysterectomy done

A560 WITHOUT hysterectomy

A570 WITH hysterectomy

A600 Debulking; cytoreductive surgery, NOS

A610 WITH colon (including appendix) and/or small intestine resection (not incidental)

A620 WITH partial resection of urinary tract (not incidental)

A630 Combination of A610 and A620

Debulking is a partial or total removal of the tumor mass and can involve the removal of multiple organ sites. It may include removal of ovaries and/or the uterus (a hysterectomy). The pathology report may or may not identify ovarian tissue. A debulking is usually followed by another treatment modality such as chemotherapy.

A700 Pelvic exenteration, NOS

A710 Anterior exenteration

Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes.

A720 Posterior exenteration

Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes.

A730 Total exenteration

Includes removal of all pelvic contents and pelvic lymph nodes.

A740 Extended exenteration

Includes pelvic blood vessels or bony pelvis.

A800 (Salpingo-)oophorectomy, NOS

Site-Specific Surgery Codes for Rx Summ- Surg 2023

Specimen sent to pathology from surgical events A250–A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

PROSTATE

C61.9

Do not code an orchiectomy in this field. For prostate primaries, orchiectomies are coded in the data item *Hematologic Transplant and Endocrine Procedures* (NAACCR Item #3250).

Codes

A000 None; no surgery of primary site; autopsy ONLY

A180 Local tumor destruction or excision, NOS

A190 Transurethral resection (TURP), NOS, and no specimen sent to pathology or unknown if sent

Unknown whether a specimen was sent to pathology for surgical events coded A180 or A190 (principally for cases diagnosed prior to January 1, 2003).

A100 Local tumor destruction, NOS

A140 Cryoprostatectomy

A150 Laser ablation

A160 Hyperthermia

A170 Other method of local tumor destruction

No specimen sent to pathology from surgical events A100–A170.

A200 Local tumor excision, NOS

A210 Transurethral resection (TURP), NOS, with specimen sent to pathology

A220 TURP–cancer is incidental finding during surgery for benign disease

A230 TURP–patient has suspected/known cancer

Any combination of A200–A230 WITH

A240 Cryosurgery

A250 Laser

A260 Hyperthermia

A300 Subtotal, segmental, or simple prostatectomy, which may leave all or part of the capsule intact

A500 Radical prostatectomy, NOS; total prostatectomy, NOS

Excised prostate, prostatic capsule, ejaculatory ducts, seminal vesicle(s) and may include a narrow cuff of bladder neck.

A700 Prostatectomy WITH resection in continuity with other organs; pelvic exenteration

Surgeries coded A700 are any prostatectomy WITH resection in continuity with any other organs. The other organs may be partially or totally removed. Procedures may include, but are not limited to, cystoprostatectomy, radical cystectomy, and prostatectomy.

A800 Prostatectomy, NOS

Specimen sent to pathology from surgical events 20–80.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

TESTIS

C62.0–C62.9

Codes

A000 None; no surgery of primary site; autopsy ONLY

A120 Local tumor destruction, NOS

No specimen sent to pathology from surgical event A120.

A200 Local or partial excision of testicle

A300 Excision of testicle WITHOUT cord

A400 Excision of testicle WITH cord or cord not mentioned (radical orchiectomy)

A800 Orchiectomy, NOS (unspecified whether partial or total testicle removed)

Specimen sent to pathology from surgical events A200–A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

KIDNEY, RENAL PELVIS, AND URETER

Kidney C64.9, Renal Pelvis C65.9, Ureter C66.9

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A110 Photodynamic therapy (PDT)

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A130 Cryosurgery

A140 Laser

A150 Thermal ablation

No specimen sent to pathology from this surgical event A100–A150.

A200 Local tumor excision, NOS A

260 Polypectomy

A270 Excisional biopsy

Any combination of A200 or A260–A270 WITH

A210 Photodynamic therapy (PDT)

A220 Electrocautery

A230 Cryosurgery

A240 Laser ablation

A250 Laser excision

A300 Partial or subtotal nephrectomy (kidney or renal pelvis) or partial ureterectomy (ureter)

Procedures coded A300 include, but are not limited to:

Segmental resection

Wedge resection

A400 Complete/total/simple nephrectomy—for kidney parenchyma Nephroureterectomy

Includes bladder cuff for renal pelvis or ureter.

A500 Radical nephrectomy

May include removal of a portion of vena cava, adrenal gland(s), Gerota's fascia, perinephric fat, or partial/total ureter.

A700 Any nephrectomy (simple, subtotal, complete, partial, simple, total, radical) in continuity with the resection of other organ(s) (colon, bladder)

The other organs, such as colon or bladder, may be partially or totally removed.

A800 Nephrectomy, NOS

Ureterectomy, NOS

Specimen sent to pathology from surgical events A200–A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

BLADDER

C67.0–C67.9

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A111 Photodynamic therapy (PDT)

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A130 Cryosurgery

A140 Laser

A150 Intravesical therapy

A160 Bacillus Calmette-Guerin (BCG) or other immunotherapy

Also code the introduction of immunotherapy in the immunotherapy items.

If immunotherapy is followed by surgery of the type coded A200-A800 code that surgery instead and code the immunotherapy only as immunotherapy.

No specimen sent to pathology from surgical events A100–A160.

A200 Local tumor excision, NOS

A260 Polypectomy

A270 Excisional biopsy

Combination of A200 or A260-A270 WITH

A210 Photodynamic therapy (PDT)

A220 Electrocautery

A230 Cryosurgery

A240 Laser ablation

A250 Laser excision

A300 Partial cystectomy

A500 Simple/total/complete cystectomy

A600 Complete cystectomy with reconstruction

A610 Radical cystectomy PLUS ileal conduit

A620 Radical cystectomy PLUS continent reservoir or pouch, NOS

A630 Radical cystectomy PLUS abdominal pouch (cutaneous)

A640 Radical cystectomy PLUS in situ pouch (orthotopic)

When the procedure is described as a pelvic exenteration for males, but the prostate is not removed, the surgery should be coded as a cystectomy (code A600-A640).

A700 Pelvic exenteration, NOS

A710 Radical cystectomy including anterior exenteration

For females, includes removal of bladder, uterus, ovaries, entire vaginal wall, and entire urethra.

For males, includes removal of the prostate. When a procedure is described as a pelvic exenteration for males, but the prostate is not removed, the surgery should be coded as a cystectomy (code A600-A640).

A720 Posterior exenteration

Site-Specific Surgery Codes for Rx Summ- Surg 2023

For females, also includes removal of vagina, rectum and anus. For males, also includes prostate, rectum and anus.

A730 Total exenteration

Includes all tissue and organs removed for an anterior and posterior exenteration.

A740 Extended exenteration

Includes pelvic blood vessels or bony pelvis.

A800 Cystectomy, NOS

Specimen sent to pathology from surgical events A200–A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

BRAIN

Meninges C70.0–C70.9, Brain C71.0–C71.9,

Spinal Cord, Cranial Nerves and Other Parts of Central Nervous System C72.0–C72.9

Do not code laminectomies for spinal cord primaries.

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Tumor destruction, NOS

No specimen sent to pathology from surgical event A100.

Do not record stereotactic radiosurgery (SRS), Gamma knife, Cyber knife, or Linac radiosurgery as surgical tumor destruction. All of these modalities are recorded in the radiation treatment fields.

A200 Local excision of tumor, lesion or mass; excisional biopsy

A210 Subtotal resection of tumor, lesion or mass in brain

A220 Resection of tumor of spinal cord or nerve

A300 Radical, total, gross resection of tumor, lesion or mass in brain

A400 Partial resection of lobe of brain, when the surgery cannot be coded as A200-A300.

A550 Gross total resection of lobe of brain (lobectomy)

Codes A300-A550 are not applicable for spinal cord or spinal nerve primary sites.

Specimen sent to pathology from surgical events A200–A550.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

THYROID GLAND

C73.9

For cases diagnosed 1/1/2023-12/31/2023

Codes

A000 None; no surgery of primary site; autopsy ONLY

A130 Local tumor destruction, NOS

No specimen sent to pathology from surgical event A130.

A250 Removal of less than a lobe, NOS

A260 Local surgical excision

A270 Removal of a partial lobe ONLY

A200 Lobectomy and/or isthmectomy

A210 Lobectomy ONLY

A220 Isthmectomy ONLY

A230 Lobectomy WITH isthmus

A300 Removal of a lobe and partial removal of the contralateral lobe

A400 Subtotal or near total thyroidectomy

A500 Total thyroidectomy

A800 Thyroidectomy, NOS

Specimen sent to pathology from surgical events A200–A800.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

THYROID GLAND

C73.9

For cases diagnosed 1/1/2024 forward

Please note the order of the Codes B200-B253 have changed from STORE 2023.

Codes

B000 None; no surgery of primary site; autopsy ONLY

B130 Local tumor destruction, NOS

No specimen sent to pathology from surgical event B130

B200 Removal of less than a lobe, NOS

B210 Local surgical excision

B220 Removal of a partial lobe ONLY

B250 Lobectomy and/or isthmectomy, NOS

B251 Lobectomy ONLY (right or left)

B252 Isthmectomy ONLY

B253 Lobectomy WITH isthmus

B300 Removal of a lobe and partial removal of the contralateral lobe

B400 Subtotal or near total thyroidectomy

B500 Total thyroidectomy

B800 Thyroidectomy, NOS

Specimen sent to pathology from surgical events B200–B800.

B900 Surgery, NOS

B990 Unknown if surgery performed; death certificate ONLY

LYMPH NODES

C77.0–C77.9

Codes

A000 None; no surgery of primary site; autopsy ONLY

A190 Local tumor destruction or excision, NOS

Unknown whether a specimen was sent to pathology for surgical events coded to A190 (principally for cases diagnosed prior to January 1, 2003).

A150 Local tumor destruction, NOS

No specimen sent to pathology from surgical event A150.

A250 Local tumor excision, NOS

Less than a full chain, includes an excisional biopsy of a single lymph node.

Additional Note: Code A250 local tumor excision should only be used when the node removed is the only node involved with lymphoma. If there is only one node involved and this can be confirmed – then you can code the removal as surgical treatment. Otherwise, the lymph node removal is just a biopsy removed to confirm the diagnosis, classify the lymphoma, and/or stage the lymphoma. STORE Manual – Item 1350.

A300 Lymph node dissection, NOS

A310 One chain

A320 Two or more chains

A400 Lymph node dissection, NOS PLUS splenectomy

A410 One chain

A420 Two or more chains

A500 Lymph node dissection, NOS and partial/total removal of adjacent organ(s)

A510 One chain

A520 Two or more chains

A600 Lymph node dissection, NOS and partial/total removal of adjacent organ(s) PLUS splenectomy (Includes staging laparotomy for lymphoma.)

A610 One chain

A620 Two or more chains

Specimen sent to pathology for surgical events A250-A620.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

ALL OTHER SITES

C14.2–C14.8, C17.0–C17.9, C23.9, C24.0–C24.9, C26.0–C26.9, C30.0–C 30.1, C31.0–C31.9, C33.9, C37.9, C38.0–C38.8, C39.0–C39.9, C48.0–C48.8, C51.0–C51.9, C52.9, C57.0–C57.9, C58.9, C60.0–C60.9, C63.0–C63.9, C68.0–C68.9, C69.0–C69.9, C74.0–C74.9, C75.0–C75.9

Codes

A000 None; no surgery of primary site; autopsy ONLY

A100 Local tumor destruction, NOS

A110 Photodynamic therapy (PDT)

A120 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

A130 Cryosurgery

A140 Laser

No specimen sent to pathology from surgical events A100–A140.

A200 Local tumor excision, NOS

A260 Polypectomy

A270 Excisional biopsy

Any combination of A200 or A260–A270 WITH

A210 Photodynamic therapy (PDT)

A220 Electrocautery

A230 Cryosurgery

A240 Laser ablation

A250 Laser excision

A300 Simple/partial surgical removal of primary site

A400 Total surgical removal of primary site; enucleation

A410 Total enucleation (for eye surgery only)

A500 Surgery stated to be “debulking”

A600 Radical surgery

Partial or total removal of the primary site WITH a resection in continuity (partial or total removal) with other organs.

Specimen sent to pathology from surgical events A200–A600.

A900 Surgery, NOS

A990 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes for Rx Summ- Surg 2023

UNKNOWN AND ILL-DEFINED PRIMARY SITES

C76.0–C76.8, C80.9

Code

A980 All unknown and ill-defined disease sites, WITH or WITHOUT surgical treatment.

Surgical procedures for unknown and ill-defined primaries are to be recorded using the data item *Surgical Procedure/Other Site* (NAACCR Item #1294) or *Surgical Procedure/Other Site at This Facility* (NAACCR Item #674).