

## Quiz 1: Overview and Hematopoietic Database/Manual

1. Questions concerning the Hematopoietic Database/Manual should
  - a. Always go to Ask a SEER Registrar
  - b. Go to Ask a SEER Registrar if you are a SEER Registry. Otherwise go to the CAnswer Forum.
  - c. Always go to the CAnswer Forum
  - d. None of the above
2. T cells, B cells, and NK cells are
  - a. Are types of myeloid cells
  - b. Are types of lymphoid cells
  - c. Are types of thrombocytes
  - d. Are types of macrophages
3. Which of the following is not a lymphatic organ?
  - a. Spleen
  - b. Stomach
  - c. Thymus
  - d. Lingual tonsil
4. A link to the 2010 Hematopoietic Database can be found on the same page as the 2012 Hematopoietic Database
  - a. True
  - b. False
5. When a reportable neoplasm transforms from the chronic phase to an acute phase, it is always the same primary.
  - a. True
  - b. False
6. Table B10 in appendix B of the hematopoietic manual contains a complete listing of all Hodgkin lymphomas.
  - a. True
  - b. False
7. When assigning the histology to a hematopoietic neoplasm a registrar should first look the histology up in the ICD O 3 manual. If the histology is not in the ICD O 3 manual, they should then use the Hematopoietic Database to determine the histology.
  - a. True
  - b. False
8. A patient has lymphoma involving multiple lymph node regions above the diaphragm. The primary site code would be...
  - a. C77.8 Lymph Nodes of Multiple Regions
  - b. C77.9 Lymph Nodes NOS
  - c. C80.9 Unknown Primary
  - d. None of the above

9. Which of the following statements are incorrect?
- a. If lymphoma is found in the bone marrow but is not identified in any other sites, the primary site should be coded to lymph nodes nos (C77.9).
  - b. If a lymphoma originates in the stomach (16.9) but also involves gastric lymph nodes (C77.2), primary site should be coded to stomach (C16.9).
  - c. If a lymphoma is found in the stomach and the cervical lymph nodes, primary site should be coded to lymph nodes NOS (C77.9).
  - d. If a lymphoma is limited to the hilar (C77.1) and mediastinal lymph nodes (77.1), primary site should be coded to lymph nodes of multiple regions (C77.8).
10. A patient had a bone marrow biopsy that that was positive for Non Hodgkin lymphoma. A sample was sent for genetic testing and the results came back "cannot rule out follicular lymphoma". The diagnostic confirmation would be...
- a. 1 Positive Histology
  - b. 3 Positive Histology plus positive immunophenotyping and/or positive genetic testing
  - c. 5 Positive laboratory test or marker study
  - d. 8 Clinical Diagnosis only

## Quiz 2: Collaborative Stage

1. Final diagnosis: Diffuse Large B-cell Lymphoma (DLBCL) of the spleen. Splenectomy with partial gastrectomy, pancreatic tail resection and perisplenic node dissection showed a 9 cm splenic tumor (DLBCL) directly extending into the pancreas and into the gastric wall; resected nodes were involved. Complete workup showed no other evidence of lymphoma anywhere. What is the CS Extension code?
  - a. 230: Involvement of spleen PLUS involvement of a single extralymphatic organ/site BELOW the diaphragm WITH/WITHOUT involvement of lymph node(s) BELOW the diaphragm
  - b. 330: Involvement of the spleen PLUS a single extralymphatic site ABOVE the diaphragm WITH or WITHOUT involvement of lymph node(s)
  - c. 800: Diffuse or disseminated (multifocal) involvement of ONE OR MORE extralymphatic organ(s)/site(s) WITH OR WITHOUT associated lymph node involvement
  - d. 999: Unknown
2. Non-Hodgkin lymphoma of the stomach; foci in fundus, body, and antrum of the stomach. What is the CS Extension code?
  - a. 100: Involvement of a single lymph node region
  - b. 110: Multifocal involvement of one extralymphatic organ/site
  - c. 800: Diffuse or disseminated (multifocal) involvement of ONE OR MORE extralymphatic organ(s)/site(s) WITH OR WITHOUT associated lymph node involvement; multifocal involvement of MORE THAN ONE extralymphatic organ/site
  - d. 999: Unknown
3. CT scan showed 2 cm mass in gastric antrum; probably lymphoma. There was no lymphadenopathy and all other systems were normal. Gastrectomy performed; path report documented non-Hodgkin lymphoma, 2 cm, of gastric antrum. What is the code for CS Tumor Size/Ext Eval?
  - a. 0: Does not meet criteria for AJCC pathologic staging: No staging laparotomy done. No autopsy evidence used.
  - b. 3: Meets criteria for AJCC pathologic staging: Staging laparotomy done.
4. Patient has right cervical adenopathy. No splenomegaly or adenopathy anywhere else. All other systems are normal. Right cervical lymphadenectomy diagnosed Hodgkin lymphoma. What is the code for SSF2 (Systemic Symptoms at Diagnosis)?
  - a. 000: No B symptoms
  - b. 010: Any B symptoms
  - c. 020: Pruritis
  - d. 999: Unknown
5. JAK2 test was done to confirm polycythemia vera. The report states JAK2 V617F mutation detected. No specific exons are mentioned. What is the code for SSF1 (JAK2)?

- a. 010: JAK2 positive for mutation V617F in exon 14
- b. 850: JAK2 positive NOS; specific mutation(s) not stated

### Quiz 3: Treatment

1. A patient presents with a single enlarged lymph node. The lymph node is excised and pathology confirms lymphoma. A complete diagnostic work-up was done and no further lymphoma was identified. The excision of the single lymph node would be coded as...
  - a. 02- A biopsy (incisional, needle, or aspiration) was done to the primary site; or biopsy or removal of a lymph node to diagnose or stage lymphoma in the data item *Diagnostic Staging Procedure*
  - b. 25-local tumor excision, NOS in the data item *Surgery of Primary Site*
  - c. 1- Biopsy or aspiration of regional lymph node(s) in the data item *Scope of Regional Lymph Node Surgery*
  - d. 3- Non primary surgical procedure to distant lymph node(s) in the data item *Surgical Procedure/ Other Site*
2. Bexxar is a type of drug that uses radioactive iodine to kill cancer cells. This type of therapy would be coded as...
  - a. Chemotherapy
  - b. Hormone therapy
  - c. Radiation therapy
  - d. Other therapy
3. A treatment regimen such as CHOP would be coded as both chemotherapy and hormone therapy.
  - a. True
  - b. False
4. An autologous bone marrow or stem cell transplant indicates that the patient's own bone marrow or stem cells were used in the procedure.
  - a. True
  - b. False
5. SEER Rx can be used to...
  - a. Determine how drug should be coded (chemotherapy vs. hormone vs. immunotherapy, etc.)
  - b. Used to determine how regimens of drugs can be coded (CHOPP, FOLFOX, etc.)
  - c. Can be downloaded to your desktop, or you can use the interactive website.
  - d. All of the above