

Quiz 1
Abstracting Thyroid Cancer Incidence and Treatment Data
Multiple Primary and Histologies

Case 1

A 72-year-old white female presents with a nodular thyroid. This was biopsied in her primary care physician's office and found to be malignant. She is here for a complete thyroidectomy.

Complete thyroidectomy was performed on 7/15/07.

Final Pathology:

Total thyroidectomy:

Right lobe single papillary thyroid carcinoma measuring 1.8cm. Left lobe is positive for multifocal follicular thyroid carcinoma. The largest foci measures 0.8 cm. Two lymph nodes submitted are negative for malignancy.

1. How many primaries are present in case 1?
 - a. One
 - b. Two
 - c. Three
 - d. Four
2. Which rule did you use to determine the number of primaries?
 - a. M1
 - b. M6
 - c. M8
 - d. M18
3. Which Rule would you use to determine the histology
 - a. H23
 - b. H26
 - c. H27
 - d. H30
4. What is the code for Multiplicity Counter?
 - a. 01
 - b. 02
 - c. 03
 - d. 99
5. What is the code for Type of Multiple Tumors Reported as One Primary?
 - a. 00
 - b. 02
 - c. 40
 - d. 99

Thyroid Case 2

A patient presents with history of papillary thyroid cancer diagnosed in 1995. She had a right and left subtotal thyroidectomy. She underwent an excision of local recurrence on the right side in 2001. She returned 3/07 with a new mass on the right side that the physician diagnosed as a recurrence. The mass was resected and the pathology was consistent with papillary carcinoma, follicular variant with focal evidence of resection margin involvement, metastatic papillary carcinoma in adjacent right cervical lymph node.

6. How many primaries are present in case 2?
 - a. One
 - b. Two
 - c. Three
 - d. Four
7. Which rule did you use to determine the number of primaries?
 - a. M6
 - b. M8
 - c. M10
 - d. M18
8. Which rule did you used to determine the histology?
 - a. H5
 - b. H6
 - c. H27
 - d. H30
9. What would be assigned to case 2?
 - a. Only one primary. Keep the original papillary carcinoma histology (8260)
 - b. This patient has only one primary. Change the original histology to papillary carcinoma, follicular variant (8340)
 - c. The 2007 tumor is a second primary. Code to papillary carcinoma (8260)
 - d. The 2007 tumor is a second primary. Code to papillary carcinoma, follicular variant
10. What is the code for Multiplicity Counter?
 - a. 01
 - b. 02
 - c. 03
 - d. 99
11. What is the code for Type of Multiple Tumors Reported as One Primary?
 - a. 00
 - b. 02
 - c. 40
 - d. 99

Thyroid Case 3

Total Thyroidectomy

Final Pathology:

Present within the right lobe is a 2.5 cm Hurthle cell tumor with a separate focus of papillary thyroid carcinoma 0.1cm in greatest dimension. The Hurthle cell tumor invades through the capsule and into the parathyroid tissue. There is one positive focus of blood vessel invasion.

12. How many primaries are present in case 2?
 - a. One
 - b. Two
 - c. Three
 - d. Four
13. Which rule did you use to determine the number of primaries?
 - a. M6
 - b. M8
 - c. M17
 - d. M18
14. What is coded for multiplicity counter?
 - a. 01 for each primary
 - b. 02
 - c. 03
 - d. 99
15. What is Type of Multiple Tumors Reported as One Primary?
 - a. 00 for each primary
 - b. 02
 - c. 40
 - d. 99

Quiz 2
Thyroid
Collaborative Stage and Treatment

Thyroid Case 1

A 35-year-old white female presents with a biopsy proven carcinoma of the thyroid. She is admitted for a total thyroidectomy. This will be followed by radioiodine ablation.

11/16/06-Total Thyroidectomy

Final Pathology:

Tumor is a 2.5 cm Hurthle cell carcinoma that invades through the capsule and is surrounded by three separate tumor foci.

12/19/06

Iodine 131 ablation

1. What is the code for CS Extension?
 - a. 20
 - b. 40
 - c. 48
 - d. 60
2. What is the code for CS Site-specific Factor 1?
 - a. 000
 - b. 001
 - c. 002
 - d. 999
3. What is the code for Surgical Procedure of Primary Site?
 - a. 40
 - b. 50
 - c. 80
 - d. 90
4. What is the code for Regional Treatment Modality?
 - a. 20
 - b. 50
 - c. 51
 - d. 60
5. What is the code for Radiation Treatment Volume?
 - a. 05
 - b. 06
 - c. 33
 - d. 99

Thyroid Case 2

Patient is a 65-year-old black female found to have a nodule on the thyroid. On 1/16/07 a needle biopsy was performed and was positive for papillary carcinoma. On 2/10/07 a left thyroidectomy was performed and showed a 1.3cm tall cell variant papillary carcinoma with extension to the capsule. On 2/25/07 the remaining thyroid was removed (right lobe and isthmus). This was negative for residual. On 3/1/07 the patient was started on synthroid.

6. What is the code for CS Extension?
 - a. 10
 - b. 20
 - c. 40
 - d. 48
7. What is the code for Surgical Procedure of Primary Site?
 - a. 23
 - b. 40
 - c. 50
 - d. 80
8. Synthroid is:
 - a. An ancillary drug and not coded
 - b. Coded as Chemotherapy, single agent
 - c. Coded as Hormone Therapy
 - d. Coded as Other Treatment

Quiz 3
Abstracting Larynx Cancer Incidence and Treatment Data
Multiple Primary and Histologies

Larynx Case 1

The patient is a 74-year-old male who presented with otalgia.

1/10/08 Direct laryngoscopy with laryngeal biopsy.

Final pathologic diagnosis: invasive poorly differentiated squamous cell carcinoma of larynx.

1/24/08 Laryngectomy with bilateral neck dissections.

Final pathologic diagnosis: invasive verrucous cell carcinoma of the posterior surface of the epiglottis by the tumor, with metastases to bilateral lymph nodes (AJCC T3N2c).

16. How many primaries are present in case 1?
 - a. One
 - b. Two
 - c. Three
 - d. Four
17. Which rule did you use to determine the number of primaries?
 - a. M2
 - b. M7
 - c. M11
 - d. M12
18. Which Rule did you use to determine the histology?
 - a. H2
 - b. H4
 - c. H5
 - d. H6
19. What is the code for Multiplicity Counter?
 - a. 01
 - b. 02
 - c. 03
 - d. 99
20. What is the code for Type of Multiple Tumors Reported as One Primary?
 - a. 00
 - b. 02
 - c. 40
 - d. 99

Larynx Case 2

A 41-year-old man with a 20-pack-year smoking history and no other significant medical history presented with hoarseness of 6 months duration. An endoscopic examination revealed a lesion in the left posterior ventricle that approached the left false vocal cord. At the same time, a bulky right laryngeal lesion was seen arising in the right laryngeal ventricle extending into the right false vocal cord. The lesions were biopsied; the final pathologic diagnosis was combined squamous and small cell carcinoma of the larynx. Both chest radiography and computed tomography demonstrated evidence of bilateral malignant pulmonary disease and mediastinal lymphadenopathy consistent with metastasis. The remainder of the exam was negative. The patient underwent 2 cycles of chemotherapy, including cisplatin and etoposide, and is currently undergoing external beam radiotherapy.

21. How many primaries are present in case 2?
 - a. One
 - b. Two
 - c. Three
 - d. Four
22. Which rule did you use to determine the number of primaries?
 - a. M2
 - b. M7
 - c. M11
 - d. M12
23. Which rule did you use to determine the histology?
 - a. H9
 - b. H10
 - c. H11
 - d. H12
24. What histology code is assigned for case 2?
 - a. Malignancy NOS 8000/3
 - b. Squamous cell carcinoma 8070/3
 - c. Small cell carcinoma 8041/3
 - d. Combined Squamous and Small Cell Carcinoma 8045/3
25. What is the code for Multiplicity Counter?
 - a. 01 for each primary
 - b. 02
 - c. 03
 - d. 99
26. What is the code for Type of Multiple Tumors Reported as One Primary?
 - a. 00 for each primary
 - b. 02
 - c. 40
 - d. 99

Quiz 4
Abstracting Larynx Cancer Incidence and Treatment Data
Collaborative Stage and Treatment

Larynx Case 1

Microsuspension Direct Laryngoscopy 6/8/06:

A fungating lesion of the left false vocal cord was seen growing onto the laryngeal surface of the epiglottis. The mass was invading toward the right side of the laryngeal surface, but spared the anterior commissure. The mass was biopsied and the scope removed.

Physical Exam:

A neck exam showed palpable high left lymph nodes. The physician staged this as T2N1M0 and indicated a single positive lymph node at level I and two positive lymph nodes at level III. The largest positive lymph node was 2.5cm.

Treatment Plan:

The patient began radiation treatment on 6/26/06 to the upper neck. The primary volume received 45gy using 6mv via IMRT. The patient received 180cGy dose per fraction at 5 fx per week for a total of 25 fx's. A boost of 2520cGy was delivered to the tumor bed using 6mv via IMRT. The patient received concurrent chemotherapy starting 7/5/06.

1. What is the code for CS Extension?
 - a. 10
 - b. 20
 - c. 40
 - d. 65
2. What is the code for CS TS/Ext Eval?
 - a. 0
 - b. 1
 - c. 3
 - d. 9
3. What is the code for CS Lymph Nodes?
 - a. 10
 - b. 11
 - c. 20
 - d. 21
4. What is the code for SSF1?
 - a. 000
 - b. 025
 - c. 993
 - d. 999

5. What is the code for SSF2?
 - a. 000
 - b. 001
 - c. 005
 - d. 999
6. What is the code for SSF3?
 - a. 000
 - b. 100
 - c. 101
 - d. 999
7. What is the code for SSF4?
 - a. 000
 - b. 100
 - c. 200
 - d. 010
8. What is the code for SSF5?
 - a. 000
 - b. 010
 - c. 101
 - d. 999
9. What is the code for SSF6?
 - a. 000
 - b. 100
 - c. 110
 - d. 999
10. What is the code for Regional Treatment Modality?
 - a. 20
 - b. 24
 - c. 31
 - d. 40
11. What is the code for Boost Treatment Modality?
 - a. 20
 - b. 24
 - c. 31
 - d. 40

Larynx Case 2

A 41-year-old man with a 20-pack-year smoking history and no other significant medical history presented with hoarseness of 6 months duration. An endoscopic examination revealed a lesion in the left posterior ventricle that approached the left false vocal cord. At the same time, a bulky right laryngeal lesion was seen arising in the right laryngeal ventricle extending into the right false vocal cord. The lesions were biopsied, and the final pathologic diagnosis of combined squamous and small cell carcinoma of the larynx was rendered for both lesions. Both chest radiography and computed tomography demonstrated evidence of bilateral malignant pulmonary disease and mediastinal lymphadenopathy consistent with metastasis. The remainder of the exam was negative.

The patient underwent 2 cycles of chemotherapy, including cisplatin and etoposide. The patient also received concurrent external beam radiotherapy.

12. What is the code for CS Extension?
 - a. 10
 - b. 20
 - c. 40
 - d. 99
13. What is the code for CS Lymph Nodes?
 - a. 00
 - b. 10
 - c. 40
 - d. 80
14. What is the code for CS Mets at Dx?
 - a. 00
 - b. 10
 - c. 40
 - d. 50
15. What is the code for Chemotherapy?
 - a. 01
 - b. 02
 - c. 03
 - d. 99
16. What is the code for Regional Treatment Modality?
 - a. 00
 - b. 20
 - c. 24
 - d. 99

Larynx Case 3

A 78-year-old white male presented with a two month history of hoarseness. A direct laryngoscopy was performed and a small mass measuring 0.3 cm was identified on the left true vocal cord. The tumor was excised and CO² laser applied to tumor bed. No further treatment indicated.

Final Pathology:

Moderately Differentiated Squamous Cell Carcinoma.

Tumor Size: 0.4cm

Margins: Negative

17. What is the code for CS Tumor Size?
 - a. 030
 - b. 003
 - c. 040
 - d. 004
18. What is the code for CS Extension?
 - a. 10
 - b. 20
 - c. 48
 - d. 99
19. What is the code for CS TS/Ext Eval?
 - a. 0
 - b. 1
 - c. 3
 - d. 9
20. What is Surgery Primary Site?
 - a. 20
 - b. 27
 - c. 24
 - d. 25