

FCDS Webcast – ICD-O-3/Solid Tumor Rules – Coding Intensive
Answer Sheet

	Primary Site	Histology and Behavior	Clinical Grade	Pathologic Grade
<u>Case # 1:</u> Upper Outer Quadrant Left Breast Mass, Excision: Papillary carcinoma, solid type with micro-invasion. Tumor completely excised. 2 sentinel lymph nodes negative for tumor.				
Case #1				
NOTES				
<u>Case # 2:</u> Sub-areolar Breast Mass, Excision: Intra-ductal carcinoma (DCIS) with cribriform, clear cell, micro-papillary, and lobular features. Tumor completely excised. 2 sentinel lymph nodes negative for tumor.				
Case #2				
NOTES				
<u>Case #3:</u> Descending Colon @ 75cm: Biopsy followed by complete resection - adenocarcinoma, poorly differentiated, with mucinous features arising in a large 8cm adenomatous polyp with invasion through the muscularis mucosae into the pericolic fat. 4 of 8 mesenteric lymph nodes are positive for metastatic adenocarcinoma. pT3 pN2a				
Case #3				
NOTES				
<u>Case #4:</u> Breast UOQ mass excision: mixed squamous cell carcinoma and small cell carcinoma, extending to the excisional margin with rare foci of high grade ductal carcinoma in situ, micropapillary, papillary and solid architectures, nuclear grade 2/3 identified. Tumor size 7.5 x 6.8 x 6cm. No nodes identified.				
Case #4				
NOTES				
<u>Case #5:</u> Breast UOQ mass excision: mixed squamous cell carcinoma and small cell carcinoma, extending to the excisional margin with rare foci of high grade ductal carcinoma in situ, micropapillary, papillary and solid architectures, nuclear grade 2/3 identified. Tumor size 7.5 x 6.8 x 6cm. No nodes identified.				
Case #5				
NOTES				
<u>Case #6:</u> Resection RUL Lung shows well differentiated lepidic predominant invasive bronchoalveolar adenocarcinoma with mucinous features, neg margins				
Case #6				
NOTES				

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Case #7: Right Occipital Brain Mass, biopsy: High-grade neuroendocrine carcinoma, large cell type. Immunohistochemistry stains for CK 7, CK 20, TTF-1, P40, synaptophysin, chromogranin, and CD 56. CK 7: strongly and diffusely positive CK 20: negative TTF-1: strongly and diffusely positive P40: negative Synaptophysin: strongly and diffusely positive; Chromogranin: strongly and focally positive; CD 56: strongly and diffusely positive				
Case #7				
NOTES				
Case #8: Right Lung Hilus FNA: NSCLC (non-small cell carcinoma of lung). ALK+, EGRF+, ROS1 neg, PD-L1 positive – favor adenocarcinoma of probable large cell type				
Case #8				
NOTES				
Case #9: Right Lung FNA: NSCLC (non-small cell carcinoma of lung). No molecular testing performed				
Case #9				
NOTES				
Case #10: Optic Nerve Biopsy – optic pathway glioma in patient with neurofibromatosis type 1 (NF1) and near total vision loss				
Case #10				
NOTES				
Case #11: Biopsy of Scalp – spindle cell neoplasm favor malignant fibrous histiocytoma, low grade				
Case #11				
NOTES				
Case #12: Appendix Biopsy and Biopsy Peritoneal Nodule – low grade appendiceal mucinous neoplasm (LAMN) with loss of lamina propria and muscularis mucosae and submucosal fibrosis. Low grade pseudomyxoma peritonei.				
Case #12				
NOTES				
Case #13: Right lower lobe lung, wedge – grade1 minimally invasive adenocarcinoma with predominantly lepidic pattern, non-mucinous				
Case #13				
NOTES				

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<u>Case #14:</u> Biopsy right tonsil with squamous cell carcinoma. p16+, HPV+				
Case #14				
NOTES				
<u>Case #15:</u> Left tonsil biopsy with well-differentiated squamous cell carcinoma with keratinizing features.				
Case #15				
NOTES				
<u>Case #16:</u> Biopsy right true vocal cord positive for squamous cell carcinoma. HPV test panel was negative for all types/subtypes. p16 testing was also negative.				
Case #16				
NOTES				
<u>Case #17:</u> Biopsy followed by gross total excision left parietal lobe with WHO Grade 4 glioblastoma multiforme of IDH-wild type variety				
Case #17				
NOTES				
<u>Case #18:</u> Excision cerebellopontine angle with glioblastoma multiforme IDH-mutant type, WHO Grade 4				
Case #18				
NOTES				
<u>Case #19:</u> Radical Left Nephrectomy with kidney showing 7.5cm papillary clear cell renal cell carcinoma, Grade 2 of 4 (WHO/ISUP). No lymph nodes identified.				
Case #19				
NOTES				
<u>Case #20:</u> Hepatic Flexure Tumor Resection shows 6cm large cell neuroendocrine carcinoma (NEC/NET). IHC stains positive for CD56, synaptophysin, CDX-2 and chromogranin). Ki-67 shows a high proliferative index (66%).				
Case #20				
NOTES				

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Bonus Case #1

QUESTIONS/COMMENTS

Bonus Case #2

QUESTIONS/COMMENTS

Bonus Case #3

QUESTIONS/COMMENTS

Bonus Case #4

QUESTIONS/COMMENTS

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Answer Sheet

Bonus Case #5

QUESTIONS/COMMENTS