

Collaborative Staging Codes**Ovary****C56.9**

C56.9 Ovary

Note: Laterality must be coded for this site**Ovary****CS Tumor Size****SEE STANDARD TABLE****Ovary****CS Extension (Revised: 09/17/2007)**

Note 1: Ascites WITH malignant cells changes FIGO stages I and II to IC and IIC, respectively. Ascites, NOS is considered negative.

Note 2: Both extension to and discontinuous metastasis to any of the following pelvic organs is considered FIGO Stage II and coded in the range 50-65: adnexae, NOS; bladder, bladder serosa; broad ligament (mesovarium); cul-de-sac; fallopian tubes; parametrium; pelvic peritoneum; pelvic wall; rectum; sigmoid colon; sigmoid mesentery; ureter; uterus; uterine serosa.

Note 3: Peritoneal implants outside the pelvis (codes 70-73) must be microscopically confirmed. Peritoneal implants may also be called seeding, salting, talcum powder appearance, or studding.

Note 4: If implants are mentioned, determine whether they are in the pelvis or in the abdomen and code appropriately (60-64) or (70-73). If the location is not specified, code as 75.

Note 5: Both extension to and discontinuous metastasis to any of the following abdominal organs is considered FIGO Stage III and coded in the range 70-75: abdominal mesentery; diaphragm; gallbladder; infracolic omentum; kidneys; large intestine except rectum and sigmoid colon; liver (peritoneal surface); omentum; pancreas; pericolic gutter; peritoneum, NOS; small intestine; spleen; stomach; ureters.

Note 6: Excludes parenchymal liver nodules, which are coded in CS Mets at DX

Note 7: Since "cancer cells in ascites or in peritoneal washings" was not specifically categorized in the 1977 Summary Stage Guide, it is unclear to which stage previous cases may have been coded.

Note 8: In some registries benign/borderline ovarian tumors are reportable by agreement. If the tumor being reported is benign or borderline, code CS Extension to 99.

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	Tis	IS	IS
10	Tumor limited to one ovary, capsule intact, no tumor on ovarian surface, no malignant cells in ascites or peritoneal washings FIGO Stage IA	T1a	L	L
20	Tumor limited to both ovaries, capsule(s) intact, no tumor on ovarian surface, no malignant cells in ascites or peritoneal washings FIGO Stage IB	T1b	L	L

30	Tumor limited to ovaries, unknown if capsule(s) ruptured or if one or both ovaries involved Localized, NOS FIGO Stage I, NOS	T1NOS	L	L
35	Tumor limited to ovary(ies), capsule(s) ruptured FIGO Stage 1C	T1c	L	RE
36	Tumor on ovarian surface FIGO Stage 1C	T1c	D	RE
41	Tumor limited to ovary(ies) WITH malignant cells in ascites or peritoneal washings FIGO Stage IC	T1c	RE	RE
43	(35) + (41) FIGO Stage IC	T1c	RE	RE
44	(36) + any of [(35) or (41)] FIGO Stage 1C	T1c	D	RE
50	Extension to or implants on (but no malignant cells in ascites or peritoneal washings): Adnexa, NOS, ipsilateral or NOS Fallopian tube(s), ipsilateral or NOS FIGO Stage IIA	T2a	RE	RE
52	Extension to or implants on (but no malignant cells in ascites or peritoneal washings): Adnexa, NOS, contralateral Fallopian tube(s), contralateral Uterus FIGO Stage IIA	T2a	D	RE
60	Extension to or implants on other pelvic structures (but no malignant cells in ascites or peritoneal washings): Pelvic tissue: Adjacent peritoneum Ligament(s): Broad, ipsilateral, NOS Ovarian Round Suspensory Mesovarium, ipsilateral, NOS Pelvic wall FIGO Stage IIB	T2b	RE	RE

61	Extension to or implants on other pelvic structures (but no malignant cells in ascites or peritoneal washings): Broad ligament(s), contralateral Mesovarium, contralateral FIGO Stage IIB	T2b	D	RE
62	[(50) and/or (60)] WITH malignant cells in ascites or peritoneal washings FIGO Stage IIC	T2c	RE	RE
63	[(52) and/or (60)] WITH malignant cells in ascites or peritoneal washings FIGO Stage IIC	T2c	D	RE
64	(61) WITH malignant cells in ascites or peritoneal washings FIGO IIC	T2c	D	RE
65	Tumor involves one or both ovaries with pelvic extension, NOS FIGO Stage II, NOS	T2NOS	RE	RE
70	Microscopic peritoneal implants beyond pelvis, including peritoneal surface/capsule of liver FIGO Stage IIIA (See Note 5)	T3a	D	D
71	Macroscopic peritoneal implants beyond pelvis, less than or equal to 2 cm in diameter, including peritoneal surface of liver FIGO Stage IIIB (See Note 5)	T3b	D	D
72	Peritoneal implants beyond pelvis, greater than 2 cm in diameter, including peritoneal surface of liver (liver capsule) FIGO Stage IIIC (See Note 5)	T3c	D	D
73	Tumor involves one or both ovaries with microscopically confirmed peritoneal metastasis outside the pelvis, NOS FIGO Stage III, NOS (See Note 5)	T3NOS	D	D
75	Peritoneal implants, NOS (See Note 5)	T3NOS	D	D
80	Further contiguous extension	T3NOS	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

Ovary**CS TS/Ext-Eval****SEE STANDARD TABLE**

NOTE: For this primary site code CS Tumor Size/Ext Eval on the basis of the CS Extension field only.

Ovary**CS Lymph Nodes (Revised: 08/15/2006)**

Note 1: Code only regional nodes and nodes, NOS, in this field. Distant nodes are coded in the field Mets at DX.

Note 2: If the clinician says "adnexa palpated" but doesn't mention lymph nodes, assume lymph nodes are not involved, code "00".

Note 3: If either exploratory/definitive surgery is done with no mention of lymph nodes, assume nodes are negative.

Note 4: Regional nodes includes bilateral and contralateral involvement of named nodes.

Code	Description	TNM	SS77	SS2000
00	No regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Iliac, NOS: Common External Internal (hypogastric), NOS Obturator Pelvic, NOS	N1	RN	RN
12	Regional lymph node(s): Lateral sacral (laterosacral)	N1	D	RN
20	Regional lymph node(s): Aortic (para-, peri-, lateral) Retroperitoneal, NOS	N1	RN	RN
30	Regional lymph node(s): Inguinal	N1	D	RN
40	(10) + (20)	N1	RN	RN
42	[(12) or (30)] + [(10) or (20)]	N1	D	RN
50	Regional lymph node(s), NOS	N1	RN	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

Ovary**Reg LN Pos****SEE STANDARD TABLE****Ovary****Reg LN Exam****SEE STANDARD TABLE****Ovary****CS Mets at DX (Revised: 05/06/2004)**

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), NOS	M1	D	D
40	Distant metastases, except distant lymph node(s) (code 10), including: Liver parenchymal metastasis Pleural effusion WITH positive cytology Distant metastasis, NOS Carcinomatosis Stage IV, NOS	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

Site Specific Surgery Codes**C569**

(Except for M9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; no surgery of primary site; autopsy ONLY

17 Local tumor destruction, NOS

No specimen sent to pathology from surgical event 17

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

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

27 WITHOUT hysterectomy

28 WITH hysterectomy

Specimen sent to pathology from surgical events 25–28

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

36 WITHOUT hysterectomy

37 WITH hysterectomy

[SEER Note: Use code 37 for current unilateral (salpingo-) oophorectomy with previous history of hysterectomy]

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

51 WITHOUT hysterectomy

52 WITH hysterectomy

[SEER Note: Use code 52 for current bilateral (salpingo-) oophorectomy with previous history of hysterectomy]

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

56 WITHOUT hysterectomy

57 WITH hysterectomy

60 Debulking; cytoreductive surgery, NOS

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

62 WITH partial resection of urinary tract (not incidental)

63 Combination of 61 and 62

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.

[**SEER Note:** Debulking or cytoreductive surgery is implied by the following phrases (This is not intended to be a complete list. Other phrases may also imply debulking).

Adjuvant treatment pending surgical reduction of tumor

Ovaries, tubes buried in tumor

Tumor burden

Tumor cakes

Very large tumor mass

Do not code multiple biopsies alone as debulking or cytoreductive surgery. Do not code debulking or cytoreductive surgery based only on the mention of “multiple tissue fragments” or “removal of multiple implants.” Multiple biopsies and multiple specimens confirm the presence or absence of metastasis].

70 Pelvic exenteration, NOS

71 Anterior exenteration

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

[**SEER Note:** Do not code removal of pelvic lymph nodes under Surgical Procedure/Other Site]

72 Posterior exenteration

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

[**SEER Note:** Do not code removal of pelvic lymph nodes under Surgical Procedure/Other Site]

73 Total exenteration

Includes removal of all pelvic contents and pelvic lymph nodes.

[**SEER Note:** Do not code removal of pelvic lymph nodes under Surgical Procedure/Other Site]

74 Extended exenteration

Includes pelvic blood vessels or bony pelvis

80 (Salpingo-) oophorectomy, NOS

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY