

SEER Site-Specific Coding Guidelines**THYROID GLAND****C739****Coding Hormone Therapy****Hormones as Replacement Therapy – Do Not Code as Treatment**

The thyroid gland produces hormones that influence essentially every organ, tissue and cell in the body. When the thyroid is partially or totally removed, it is no longer able to secrete these essential hormones and the patient is placed on hormone replacement therapy. Do not code replacement therapy as treatment.

Hormone Treatment for Follicular Thyroid Cancer – Code in the Hormone Field

The growth of follicular cell cancer depends on thyroid stimulating hormone. Suppression of these hormones is thought to deprive the cells of a growth-promoting influence. Patients with follicular cell-derived cancers have been treated with supraphysiologic doses of thyroid hormone to suppress serum thyroid-stimulating hormones. This treatment has been an industry standard for more than forty years. Record the delivery of these hormones in the Hormone treatment field.

Note: Use SEER Rx Version 01.02.00 to determine if a drug should be recorded as hormone therapy.*

Generic Thyroid Drug Names:

Levothyroxine /L-thyroxine

Liothyronine

Liotrix

Methimazole

Natural Thyroid

Propylthiouracil / PTU

Thyrotropin alfa

Thyroid Drugs Brand Names:

Armour Thyroid

Cytomel

Levothroid

Levoxyl

Naturethroid

Synthroid

Tapazole

Thyrogen

Thyrolar

Unithroid

Westhroid

Collaborative Staging Codes**Thyroid Gland****C73.9**

C73.9 Thyroid gland

Thyroid Gland**CS Tumor Size****SEE STANDARD TABLE****Thyroid Gland****CS Extension (Revised: 08/15/2006)**

Note: AJCC considers all anaplastic carcinomas to be T4. Collaborative Staging has implemented this as follows: If histology is equal to 8020 or 8021 and if CS Extension is equal to 00, 10, 20, 30, 40, 45, or 48, then T category is equal to T4a. For these histologies, if CS Extension is equal to 50, 52, 60, 62, 70, 72, or 80, then T category is equal to T4b. If CS Extension is equal to 95 or 99, the T category is T4NOS. For all other histologies, follow the rules as shown in the tables.

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive	Tis	IS	IS
10	Single invasive tumor confined to thyroid	*	L	L
20	Multiple foci confined to thyroid	*	L	L
30	Localized, NOS	*	L	L
40	Into thyroid capsule, but not beyond	*	L	L
45	Minimal extrathyroid extension including: Strap muscle(s): Omohyoid Sternohyoid Sternothyroid	T3	RE	RE
48	Pericapsular soft/connective tissue	T3	RE	RE
50	Parathyroid Nerves: Recurrent laryngeal Vagus	T4a	RE	RE
52	Cricoid cartilages Esophagus Larynx Sternocleidomastoid muscle	T4a	RE	RE
60	Thyroid cartilage Tumor is described as "FIXED to adjacent tissues"	T4b	RE	RE

62	Blood vessel(s) (major): Carotid artery Jugular vein Thyroid artery or vein	T4b	RE	RE
70	Bone Skeletal muscle, other than strap or sternocleidomastoid muscle	T4b	D	D
72	Trachea	T4a	D	D
80	Further contiguous extension Mediastinal tissues Prevertebral fascia	T4b	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

Thyroid Gland**CS TS/Ext-Eval**

SEE STANDARD TABLE

Thyroid Gland**CS Lymph Nodes (Revised: 08/18/2006)**

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

Note 2: This field includes all lymph nodes defined as Levels I-VI and Other by AJCC. The complete definitions are provided in the General Instructions for head and neck cancers.

Note 3: Codes 12-15 include ipsilateral, bilateral, contralateral, and midline lymph nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	OBSOLETE: Ipsilateral regional lymph nodes: Anterior deep cervical (laterotracheal) (recurrent laryngeal): Paralaryngeal Paratracheal Prelaryngeal Pretracheal Cervical, NOS Internal jugular, NOS: Deep cervical, NOS: Lower, NOS Jugulo-omohyoid (supraomohyoid)	N1a	RN	RN

10 cont'd	Middle Retropharyngeal Spinal accessory (posterior cervical) Note Review and recode in 12-15	N1a	RN	RN
11	OBSOLETE: Regional lymph nodes: Delphian node Mediastinal, NOS Posterior mediastinal (tracheoesophageal) Upper anterior mediastinal Supraclavicular (transverse cervical) Note: Review and recode in 12-15	N1b	D	RN
12	Level VI nodes (central compartment of the neck) Anterior deep cervical Laterotracheal Paralaryngeal Paratracheal Prelaryngeal/Delphian Pretracheal Recurrent laryngeal Stated as N1a, NOS	N1a	RN	RN
13	Cervical nodes (other than those in central compartment) Levels I-III and Levels IV-V (except supraclavicular nodes, see code 14) Level I node Submandibular (submaxillary) Submental Level II node Jugulodigastric (subdigastric) Upper Deep Cervical Upper jugular Level III node Middle deep cervical Mid jugular Level IV node Jugulo-omohyoid (supraomohyoid) Lower deep cervical Lower jugular Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) Other Groups Parapharyngeal Retropharyngeal	N1b	RN	RN

13 cont'd	Sub-occipital Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Stated as N1b, NOS	N1b	RN	RN
14	Supraclavicular nodes (transverse cervical)	N1b	D	RN
15	Level VII node Posterior mediastinal (tracheoesophageal Superior mediastinal nodes Upper anterior mediastinal nodes Upper mediastinal nodes Mediastinal, NOS	N1b	D	RN
20	OBSOLETE - Regional lymph nodes as listed in code 10 Bilateral, contralateral or midline cervical nodes NOTE: Review and recode in 12-15	N1a	RN	RN
21	OBSOLETE - Regional lymph nodes as listed in code 11 Bilateral, contralateral, or midline nodes NOTE: Review and recode in 12-15	N1b	D	RN
30	OBSOLETE - Tracheoesophageal (posterior mediastinal) NOTE: Review and recode in 15	N1b	D	RN
31	OBSOLETE - Mediastinal, NOS Upper anterior mediastinal NOTE: Review and recode in 15	N1b	D	RN
50	Regional lymph node(s), NOS	N1NOS	RN	RN
80	Lymph nodes, NOS	N1NOS	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

Thyroid Gland

Reg LN Pos

SEE STANDARD TABLE

Thyroid Gland

Reg LN Exam

SEE STANDARD TABLE

Thyroid Gland**CS Mets at DX (Revised: 08/15/2006)**

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	OBSOLETE - Mandibular (facial) node. NOTE: Review and recode in CS Lymph Nodes	M1	D	D
11	OBSOLETE - Level I nodes. NOTE: Review and recode in CS Lymph Nodes	M1	D	D
12	Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 12) Carcinomatosis Distant metastasis, NOS	M1	D	D
50	OBSOLETE - Description: (40) + or any of [(10) to (12)] Distant lymph node(s) plus other distant metastasis NOTE : Review and recode to 40 or to 51 and appropriate code in CS Lymph Nodes	M1	D	D
51	(12) + (40) (Distant lymph node(s) plus other distant metastasis)	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

Collaborative Staging Codes**Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands****C37.9, C74.0-C74.1, C74.9, C75.0-C75.5, C75.8-C75.9****Note:** Laterality must be coded for sites C74.0, C74.1, C74.9, and C75.4.

C37.9 Thymus

C74.0 Cortex of adrenal gland

C74.1 Medulla of adrenal gland

C74.9 Adrenal gland, NOS

C75.0 Parathyroid gland

C75.1 Pituitary gland

C75.2 Craniopharyngeal duct

C75.3 Pineal gland

C75.4 Carotid body

C75.5 Aortic body and other paraganglia

C75.8 Overlapping lesion of endocrine glands and related structures

C75.9 Endocrine gland, NOS

Note: AJCC does not define TNM staging for this site.**Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands****CS Tumor Size****SEE STANDARD TABLE****Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands****CS Extension (Revised: 08/21/2006)**

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	NA	IS	IS
05	For C75.1 pituitary gland, C75.2 craniopharyngeal duct and C75.3 pineal gland ONLY: Benign or borderline tumors	NA	NA	NA
10	Invasive carcinoma confined to gland of origin	NA	L	L
30	Localized, NOS	NA	L	L
40	Adjacent connective tissue (See definition in General Instructions)	NA	RE	RE
60	Adjacent organs/structures Thymus and aortic body: Organs/structures in mediastinum Adrenal (suprarenal): Kidney Retroperitoneal structures Parathyroid Thyroid	NA	RE	RE

60 cont'd	Thyroid cartilage Pituitary and craniopharyngeal duct: Cavernous sinus Infundibulum Pons Sphenoid body and sinuses Pineal: Infratentorial and central brain Carotid body: Upper neck	NA	RE	RE
80	Further contiguous extension	NA	D	D
95	No evidence of primary tumor	NA	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	NA	U	U

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands**CS TS/Ext-Eval (Revised: 03/17/2004)**

Code	Description	Staging Basis
9	Not applicable for this site.	NA

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands**CS Lymph Nodes (Revised: 03/17/2004)**

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

Note 2: Use code 99, not applicable, for the following sites: Pituitary gland (C75.1), Craniopharyngeal duct (C75.2), and Pineal gland (C75.3)

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	NA	NONE	NONE
10	Regional lymph nodes Cervical for carotid body and parathyroid only Mediastinal for aortic body and thymus only Retroperitoneal for adrenal (suprarenal) gland only	NA	RN	RN
80	Lymph nodes, NOS	NA	RN	RN
99	Unknown; not stated Regional lymph nodes cannot be assessed Not documented in patient record For Pituitary gland (C75.1), Craniopharyngeal duct (C75.2), and Pineal gland (C75.3): Not applicable	NA	U	U

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands**Reg LN Pos (Revised: 08/08/2006)**

Note 1: Record this field even if there has been preoperative treatment.

Note 2: Use code 99, not applicable, for the following sites: Pituitary gland (C75.1), Craniopharyngeal duct (C75.2), and Pineal gland (C75.3)

Code	Description
00	All nodes examined negative.
01-89	1 – 89 nodes positive (code exact number of nodes positive)
90	90 or more nodes positive
95	Positive aspiration or core biopsy of lymph node(s)
97	Positive nodes – number not specified
98	No nodes examined
99	Unknown if nodes are positive; not applicable Not documented in patient record

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands**Reg LN Exam (Revised: 08/08/2006)**

Note: Use code 99, not applicable, for the following sites: Pituitary gland (C75.1), Craniopharyngeal duct (C75.2), and Pineal gland (C75.3).

Code	Description
00	No nodes examined
01-89	1 – 89 nodes examined (code exact number of regional lymph nodes examined)
90	90 or more nodes examined
95	No regional nodes removed, but aspiration or core biopsy of regional nodes performed
96	Regional lymph node removal documented as sampling and number of nodes unknown/not stated
97	Regional lymph node removal documented as dissection and number of nodes unknown/not stated
98	Regional lymph nodes surgically removed but number of lymph nodes unknown/not stated and not documented as sampling or dissection; nodes examined but number unknown
99	Unknown if nodes were examined; not applicable or negative Not documented in patient record

**Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands
CS Mets at DX (Revised: 12/09/2003)**

Code	Description	TNM	SS77	SS2000
00	No; none	NA	NONE	NONE
10	Distant lymph node(s), NOS	NA	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	NA	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	NA	D	D
99	Unknown if distant metastasis Cannot be assessed Not documented in patient record	NA	U	U

Site Specific Surgery Codes**Thyroid Gland****C739**

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

Codes

00 None; no surgery of primary site; autopsy ONLY

13 Local tumor destruction, NOS

No specimen sent to pathology from surgical event 13

25 Removal of less than a lobe, NOS

26 Local surgical excision

27 Removal of a partial lobe ONLY

Specimen sent to pathology from surgical events 25–27

20 Lobectomy and/or isthmectomy

21 Lobectomy ONLY

22 Isthmectomy ONLY

23 Lobectomy WITH isthmus

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

40 Subtotal or near total Thyroidectomy

50 Total Thyroidectomy

80 Thyroidectomy, NOS

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

Site Specific Surgery Codes**All Other Sites**

C142–C148, C170–C179, C239, C240–C249, C260–C269, C300–C301, C310–C319, C339, C379, C380–C388, C390–C399, C480–C488, C510–C519, C529, C570–C579, C589, C600–C609, C630–C639, C680–C689, C690–C699, **C740–C749, C750–C759**

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

Codes

- 00 None; no surgery of primary site; autopsy ONLY
- 10 Local tumor destruction, NOS
 - 11 Photodynamic therapy (PDT)
 - 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
 - 13 Cryosurgery
 - 14 Laser

No specimen sent to pathology from surgical events 10–14

- 20 Local tumor excision, NOS
 - 26 Polypectomy
 - 27 Excisional biopsy

Any combination of 20 or 26–27 WITH

- 21 Photodynamic therapy (PDT)
- 22 Electrocautery
- 23 Cryosurgery
- 24 Laser ablation

[SEER Note: Codes 21 to 24 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, or 24 Laser ablation]

- 25 Laser excision

Specimen sent to pathology from surgical events 20–27

- 30 Simple/partial surgical removal of primary site
- 40 Total surgical removal of primary site; enucleation
 - 41 Total enucleation (for eye surgery only)
- 50 Surgery stated to be “debulking”

- 60 Radical surgery
Partial or total removal of the primary site WITH a resection in continuity (partial or total removal) with other organs

[**SEER Note:** In continuity with or “en bloc” means that all of the tissues were removed during the same procedure, but not necessarily in a single specimen]

- 90 Surgery, NOS

- 99 Unknown if surgery performed; death certificate ONLY