

**SEER Site-Specific Coding Guidelines****BONES, JOINTS, AND ARTICULAR CARTILAGE C400–C419****PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM C470–C479****CONNECTIVE, SUBCUTANEOUS, AND OTHER SOFT TISSUES C490–C499**

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

**Three Grade System (Nuclear Grade)**

There are several sites for which a three-grade system is used. The patterns of cell growth are measured on a scale of 1, 2, and 3 (also referred to as low, medium, and high grade). This system measures the proportion of cancer cells that are growing and making new cells and how closely they resemble the cells of the host tissue. Thus, it is similar to a four-grade system, but simply divides the spectrum into three rather than four categories (see comparison table below). The expected outcome is more favorable for lower grades. Soft tissue sarcomas are evaluated using a three-grade system.

If a grade is written as 2/3 that means this is a grade 2 of a three-grade system. Do not simply code the numerator. Use the following table to convert the grade to ICD-0-3 Morphology 6<sup>th</sup> Digit Code:

Term	Grade	ICD-0-3 Morphology 6 <sup>th</sup> Digit Code
1/3, 1/2	Low grade	2
2/3	Intermediate grade	3
3/3, 2/2	High grade	4

**Sarcoma**

Sarcomas are graded low, intermediate or high grade by the pathologist. Use the following table to convert these terms to a histologic grade.

Term	Grade	ICD-0-3 Morphology 6 <sup>th</sup> Digit Code
Well differentiated	I	1
Fairly well differentiated	II	2
Low grade	I-II	2
Mid differentiated	II	2
Moderately differentiated	II	2
Partially differentiated	II	2
Partially well differentiated	I-II	2
Partially well differentiated	II	2
Relatively or generally well differentiated	II	2
Medium grade, intermediate grade	II-III	3
Moderately poorly differentiated	III	3
Moderately undifferentiated	III	3
Poorly differentiated	III	3
Relatively poorly differentiated	III	3
Relatively undifferentiated	III	3
Slightly differentiated	III	3
High grade	III-IV	4
Undifferentiated, anaplastic, not differentiated	IV	4

## Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues

### C47.0-C47.6, C47.8-C47.9, C49.0-C49.6, C49.8-C49.9

C47.0 Peripheral nerves and autonomic nervous system of head face and neck

C47.1 Peripheral nerves and autonomic nervous system of upper limb and shoulder

C47.2 Peripheral nerves and autonomic nervous system of lower limb and hip

C47.3 Peripheral nerves and autonomic nervous system of thorax

C47.4 Peripheral nerves and autonomic nervous system of abdomen

C47.5 Peripheral nerves and autonomic nervous system of pelvis

C47.6 Peripheral nerves and autonomic nervous system of trunk, NOS

C47.8 Overlapping lesion of peripheral nerves and autonomic nervous system

C47.9 Autonomic nervous system, NOS

C49.0 Connective, subcutaneous and other soft tissues of head, face, and neck

C49.1 Connective, subcutaneous and other soft tissues of upper limb and shoulder

C49.2 Connective, subcutaneous and other soft tissues of lower limb and hip

C49.3 Connective, subcutaneous and other soft tissues of thorax

C49.4 Connective, subcutaneous and other soft tissues of abdomen

C49.5 Connective, subcutaneous and other soft tissues of pelvis

C49.6 Connective, subcutaneous and other soft tissues of trunk

C49.8 Overlapping lesion of connective, subcutaneous and other soft tissues

C49.9 Connective, subcutaneous and other soft tissues, NOS

**Note 1:** Laterality must be coded for C47.1-C47.2 and C49.1-C49.2.

**Note 2:** Soft tissue sarcomas of the heart and mediastinum (C38.0-C38.3 and C38.9) use the Heart, Mediastinum schema.

## Soft Tissue

### CS Tumor Size

**Note 1:** Use code 995 or 996 if the physician's statement about T value is the only information available about the size of the tumor.

Code	Description
000	No mass/tumor found
001-988	001 - 988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only and, no size of focus given
991	Described as "less than 1 cm"
992	Described as "less than 2 cm," or "greater than 1 cm," or "between 1 cm and 2 cm"

Code	Description
993	Described as "less than 3 cm," or "greater than 2 cm," or "between 2 cm and 3 cm"
994	Described as "less than 4 cm," or "greater than 3 cm," or "between 3 cm and 4 cm"
995	Described as "less than 5 cm," or "greater than 4 cm," or "between 4 cm and 5 cm" Stated as T1a or T1b
996	Described as "greater than 5 cm" Stated as T2a or T2b
999	Unknown; size not stated Not documented in patient record

## Soft Tissue

### CS Extension

**Note 1:** Connective tissue includes adipose tissue; aponeuroses; arteries; blood vessels; bursa; connective tissue, NOS; fascia; fatty tissue; fibrous tissue; ligaments; lymphatic channels (not nodes); muscle; skeletal muscle; subcutaneous tissue; synovia; tendons; tendon sheaths; veins; and vessels, NOS. Peripheral nerves and autonomic nervous system includes: ganglia, nerve, parasympathetic nervous system, peripheral nerves, spinal nerves, sympathetic nervous system.

**Note 2:** SUPERFICIAL lesions are located entirely in the subcutaneous tissues without any degree of extension through the muscular fascia or into underlying muscle. (Definition from AJCC 7th edition).

**Note 3:** DEEP lesions are located partly or completely within one or more muscle groups within the extremity. Deep tumors may extend through the muscular fascia into the subcutaneous tissues or even to the skin but the critical criterion is location of any portion of the tumor within the muscular components of the extremity. (Definition from AJCC 7th edition).

**Note 4:** If a vessel has a name, for example, brachial artery or recurrent laryngeal nerve, consider it a structure (code 600).

**Note 5:** For tumors of the extremities and trunk ONLY, superficial lesions are defined as those not involving the superficial muscular fascia. Deep lesions are those that involve or are beneath the superficial fascia.

**Note 6:** According to AJCC, "All intraperitoneal visceral lesions, retroperitoneal lesions, and intrathoracic lesions, and the majority of head and neck tumors are considered deep." For coding extension of soft tissue tumors in these sites (C47.0, C47.3-5, C49.0, C49.3-5), use only codes 120, 312, 315, 320, 420, 620, 800, 950, or 990.

**Note 7:** Definition of Adjacent Connective Tissue: Some of the schemes for ill-defined or non-specific sites in this manual contain a code 400, adjacent connective tissue, which is defined here as the unnamed tissues that immediately surround an organ or structure containing a primary cancer. Use this code when a tumor has invaded past the outer border (capsule, serosa, or other edge) of the primary organ into the organ's surrounding supportive structures but has not invaded into larger structures or adjacent organs.

In general, these tissues do not have specific names. These tissues form the framework of many organs, provide support to hold organs in place, bind tissues and organs together, and serve as storage sites for nutrients. Blood, cartilage and bone are sometimes considered connective tissues, but in this manual they are listed separately.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
100	Invasive tumor confined to site/tissue of origin, NOS	^	*	L	L
110	Superficial invasive tumor confined to site/tissue of origin (lesion does not involve superficial fascia)	^	*	L	L
120	Deep tumor confined to site/tissue of origin	^	*	L	L
300	Localized, NOS	^	*	L	L
302	Stated as T1a with no other information on extension	^	*	L	L
305	Stated as T2a with no other information on extension	^	*	L	L
310	Superficial: localized tumor, NOS	^	*	L	L
312	Stated as T1b with no other information on extension	^	*	L	L
315	Stated as T2b with no other information on extension	^	*	L	L
320	Deep: localized tumor, NOS	^	*	L	L
322	Stated as T1 [NOS] with no other information on extension	^	*	L	L
325	Stated as T2 [NOS] with no other information on extension	^	*	L	L

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
400	Adjacent connective tissue (see Note 5)	^	*	RE	RE
410	Superficial tumor involving adjacent connective tissue	^	*	RE	RE
420	Deep tumor involving adjacent connective tissue	^	*	RE	RE
600	Adjacent organs/structures including bone/cartilage (including major vessel invasion) (see Note 5)	^	*	RE	RE
610	Superficial tumor involving adjacent organs/structures including bone/cartilage (including major vessel invasion) (see Note 5)	^	*	RE	RE
620	Deep tumor involving adjacent organs/structures including bone/cartilage (including major vessel invasion) (see Note 5)	^	*	RE	RE
800	Further contiguous extension	^	*	D	D
950	No evidence of primary tumor	T0	T0	U	U
999	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	TX	U	U

\* For Extension codes 100-800 the T category is assigned based on the value of CS Tumor Size as shown in the Extension Size Table for this site.

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### Soft Tissue

#### CS Tumor Size/Ext Eval

See Standard Table

**SoftTissue****CS Lymph Nodes**

**Note 1:** Regional lymph nodes are defined as those in the vicinity of the primary tumor.

**Note 2:** Regional lymph node involvement is rare. For this schema, if there is no mention of lymph node involvement clinically, assume that lymph nodes are negative (code 000). Use code 999 (Unknown) only when there is no available information on the extent of the patient's disease, for example, when a lab-only case is abstracted from a biopsy report and no clinical history is available.

**Note 3:** For head, neck and trunk primaries ONLY, regional lymph nodes include bilateral or contralateral nodes.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	None; no regional lymph node involvement	N0	N0	NONE	NONE
100	Regional lymph nodes by primary site: All Head and Neck Subsites: Cervical Lip: Facial, NOS: Buccinator (buccal) Nasolabial Mandibular, NOS: Submandibular (submaxillary) Submental Parotid, NOS: Infra-auricular Preauricular Eyelid/canthus: Facial, NOS: Buccinator (buccal) Nasolabial Mandibular, NOS: Submandibular (submaxillary) Submental Parotid, NOS: Infra-auricular External ear and auditory canal: Mastoid (posterior, retro-auricular) (occipital) Preauricular Face, Other (cheek, chin, forehead, jaw, nose, and temple): Facial, NOS:	N1	N1	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
100 cont'd	Buccinator (buccal) Nasolabial Mandibular, NOS: Submandibular (submaxillary) Submental Parotid, NOS: Infra-auricular Preauricular Scalp: Mastoid (posterior, retro-auricular) (occipital) Parotid, NOS: Infra-auricular Preauricular Spinal accessory (posterior cervical) Neck: Axillary Mastoid (posterior, retro-auricular) (occipital) Mandibular, NOS Parotid, NOS: Infra-auricular Preauricular Spinal accessory (posterior cervical) Supraclavicular (transverse cervical) Arm/shoulder: Axillary Spinal accessory for shoulder Epitrochlear for hand/forearm Leg/hip: Femoral (superficial inguinal) Popliteal for heel and calf Thorax: Hilar (bronchopulmonary) (proximal lobar) (pulmonary root) Mediastinal Abdomen: Celiac Iliac Para-aortic Pelvis: Deep inguinal, NOS:	N1	N1	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
100 cont'd	Rosenmuller or Cloquet node Superficial inguinal (femoral) Upper trunk: Axillary Cervical Internal mammary Supraclavicular (transverse cervical) Lower trunk: Superficial inguinal (femoral) All sites: Regional lymph node(s), NOS Stated as N1	N1	N1	RN	RN
120	Submental nodes for neck primary only (including bilateral or contralateral)	N1	N1	D	RN
150	Neck primary only: (100) + (120)	N1	N1	D	RN
800	Lymph nodes, NOS	N1	N1	RN	RN
999	Unknown (see Note 2)	NX	NX	U	U

**SoftTissue****Reg LN Pos**

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

**See Standard Table**

**SoftTissue****Reg LN Exam**

**See Standard Table**

**Soft Tissue  
CS Mets at DX**

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
00	No; none	M0	M0	NONE	NONE
10	Distant lymph node(s)	M1	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Carcinomatosis	M1	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	M1	D	D
60	Distant metastasis, NOS Stated as M1, NOS	M1	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	M0	MX	U	U