

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 6th Digit Code:

| Term | Grade | ICD-0-3 Morphology 6 th 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 6th 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 |

Collaborative Staging Codes**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.

Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**CS Tumor Size**

SEE STANDARD TABLE

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

CS Extension (Revised: 12/20/2003)

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: If a vessel has a name, for example, brachial artery or recurrent laryngeal nerve, consider it a structure (code 60).

Note 3: 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 4: 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 12, 32, 42, 62, 80, 95, or 99.

Note 5: Definition of Adjacent Connective Tissue: Some of the schemes for ill-defined or non-specific sites in this manual contain a code 40, 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 | SS77 | SS2000 |
|------|---|-----|------|--------|
| 10 | Invasive tumor confined to site/tissue of origin, NOS | *** | L | L |
| 11 | Superficial invasive tumor confined to site/tissue of origin (lesion does not involve superficial fascia) | * | L | L |
| 12 | Deep tumor confined to site/tissue of origin | ** | L | L |
| 30 | Localized, NOS | *** | L | L |
| 31 | Superficial: localized tumor, NOS | * | L | L |
| 32 | Deep: localized tumor, NOS | ** | L | L |
| 40 | Adjacent connective tissue (see Note 5) | *** | RE | RE |
| 41 | Superficial tumor involving adjacent connective tissue | * | RE | RE |
| 42 | Deep tumor involving adjacent connective tissue | ** | RE | RE |

| | | | | |
|----|--|-----|----|----|
| 60 | Adjacent organs/structures including bone/cartilage (including major vessel invasion) (see Note 5) | *** | RE | RE |
| 61 | Superficial tumor involving adjacent organs/structures including bone/cartilage (including major vessel invasion) (see Note 5) | * | RE | RE |
| 62 | Deep tumor involving adjacent organs/structures including bone/cartilage (including major vessel invasion) (see Note 5) | ** | RE | RE |
| 80 | Further contiguous extension | ** | 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 |

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

CS TS/Ext-Eval

SEE STANDARD TABLE

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

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

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 00). Use code 99 (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 | SS77 | SS2000 |
|------|--|-----|------|--------|
| 00 | None; no regional lymph node involvement | N0 | NONE | NONE |
| 10 | Regional lymph node(s) by primary site (bilateral or contralateral for head, neck, trunk) All Head and Neck Subsites: All subsites: Cervical, NOS Lip: Facial, NOS: Buccinator (buccal) Nasolabial | N1 | RN | RN |

| | | | | |
|----------------------|---|-----------|-----------|-----------|
| <p>10 cont'd</p> | <p>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: 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)</p> | <p>N1</p> | <p>RN</p> | <p>RN</p> |
|----------------------|---|-----------|-----------|-----------|

| | | | | |
|--------------|--|----|----|----|
| 10 cont'd | 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: 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 | N1 | RN | RN |
| 12 | Submental nodes for neck primary only (bilateral or contralateral) | N1 | D | RN |
| 15 | Neck primary only: (10) + (12) | N1 | D | RN |
| 80 | Lymph nodes, NOS | N1 | RN | RN |
| 99 | Unknown (see Note 2) | NX | U | U |

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

Reg LN Pos

SEE STANDARD TABLE

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

Reg LN Exam

SEE STANDARD TABLE

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

CS Mets at DX

SEE STANDARD TABLE

Collaborative Staging Codes**Retroperitoneum and Peritoneum****C48.0-C48.2, C48.8**

C48.0 Retroperitoneum

C48.1 Specified parts of peritoneum (including omentum and mesentery)

C48.2 Peritoneum, NOS

C48.8 Overlapping lesion of retroperitoneum and peritoneum

Note: AJCC includes these sites with soft tissue sarcomas (C47.0-C48.9)**Retroperitoneum and Peritoneum****CS Tumor Size****SEE STANDARD TABLE****Retroperitoneum and Peritoneum****CS Extension (Revised: 12/04/2003)****Note:** For AJCC TNM staging, all retroperitoneal lesions are considered deep lesions.

| Code | Description | TNM | SS77 | SS2000 |
|------|--|-----|------|--------|
| 10 | Tumor confined to site of origin | * | L | L |
| 30 | Localized, NOS | * | L | L |
| 40 | Adjacent connective tissue see; definition of adjacent connective tissue in General Instructions. | * | RE | RE |
| 60 | Adjacent organs/structures including bone/cartilage Retroperitoneum: Adrenal(s) (suprarenal gland(s)) Aorta Ascending colon Descending colon Kidney(s) Pancreas Vena cava Vertebra Peritoneum: Colon (except ascending and descending colon) Esophagus Gallbladder Liver Small intestine Spleen Stomach | * | RE | RE |

| | | | | |
|----|--|----|---|---|
| 80 | Further contiguous extension, including: For retroperitoneum: extension to colon other than ascending or descending For peritoneum: extension to ascending or descending colon | * | 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 |

Retroperitoneum and Peritoneum**CS TS/Ext-Eval****SEE STANDARD TABLE****Retroperitoneum and Peritoneum****CS Lymph Nodes (Revised: 12/04/2003)****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 00). Use code 99 (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.

| Code | Description | TNM | SS77 | SS2000 |
|------|--|-----|------|--------|
| 00 | None; no regional lymph node involvement | N0 | NONE | NONE |
| 10 | Regional lymph node(s): Intra-abdominal Paracaval Pelvic Subdiaphragmatic Regional lymph node(s), NOS | N1 | RN | RN |
| 80 | Lymph nodes, NOS | N1 | RN | RN |
| 99 | Unknown (see Note 2) | NX | U | U |

Retroperitoneum and Peritoneum**Reg LN Pos****SEE STANDARD TABLE****Retroperitoneum and Peritoneum****Reg LN Exam****SEE STANDARD TABLE**

**Retroperitoneum and Peritoneum
CS Mets at DX
SEE STANDARD TABLE**

Site Specific Surgery Codes

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

Codes

00 None; no surgery of primary site; autopsy ONLY

19 Local tumor destruction or excision, NOS

Unknown whether a specimen was sent to pathology for surgical events coded 19 (Principally for cases diagnosed prior to January 1, 2003)

15 Local tumor destruction

No specimen sent to pathology from surgical event 15

25 Local excision

26 Partial resection

Specimen sent to pathology from surgical events 25–26

30 Radical excision or resection of lesion WITH limb salvage

40 Amputation of limb

41 Partial amputation of limb

42 Total amputation of limb

50 Major amputation, NOS

51 Forequarter, including scapula

52 Hindquarter, including ilium/hip bone

53 Hemipelvectomy, NOS

54 Internal hemipelvectomy

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