

**CarcinoidAppendix****Carcinoid Tumors and Neuroendocrine Carcinomas of Appendix****C18.1 Appendix**

(M-8153, 8240-8242, 8246, 8249)

**Note 1:** Carcinoid tumors of the appendix are typically not reportable. Use this schema if your institution collects these tumors as reportable by agreement.

**Note 2:** This schema is also used for neuroendocrine carcinomas and malignant gastrinomas.

**Note 3:** The histologies included in this schema were not staged with AJCC 6th Edition. Therefore, the algorithm will not derive an AJCC 6th TNM or stage group.

**CarcinoidAppendix****CS Tumor Size**

**Note:** Code the specific tumor size as documented in the medical record. If the ONLY information regarding tumor size is the clinician's statement of the "T" category, assign code 991 (T1, NOS or T1a, NOS), 992 (T1b, NOS), 994 (T2, NOS) or 995 (T3, NOS). (Refer to the CS Extension table for instructions on coding extension).

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, no size of focus given
991	Described as "less than 1 cm" Stated as T1, NOS or T1a, NOS with no documentation of tumor size
992	Described as "less than 2 cm," or "greater than 1 cm," or "between 1 cm and 2 cm" Stated as T1b, NOS with no documentation of tumor size
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" Stated as T2, NOS with no documentation of tumor size
995	Described as "less than 5 cm," or "greater than 4 cm," or "between 4 cm and 5 cm"

Code	Description
995 cont'd	Stated as T3, NOS with no documentation of tumor size
998	Familial/multiple polyposis (M-8220/8221)
999	Unknown; size not stated Not documented in patient record

## CarcinoidAppendix

### CS Extension

**Note 1:** If the only information regarding tumor extension is the clinician's physician's statement of the "T" category, assign code 310, 320, 330, 340, 350 or 850. (Refer to CS Tumor Size table for instructions on coding tumor size if assigning code 310-350).

**Note 2:** Codes 500-800 are used for contiguous extension from the site of origin. Discontinuous involvement is coded in CS Mets at DX.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	In situ; noninvasive; intraepithelial	^	Tis	IS	IS
050	(Adeno)carcinoma in a polyp or adenoma, noninvasive	^	Tis	IS	IS
100	Invasive tumor confined to mucosa, NOS (including intramucosal, NOS)	^	Tis	L	L
110	Invades lamina propria	^	Tis	L	L
120	Invades muscularis mucosae	^	Tis	L	L
130	OBSOLETE DATA RETAINED V0200 Confined to head of polyp, NOS	ERROR	T1	L	L
140	OBSOLETE DATA RETAINED V0200 Confined to stalk of polyp, NOS	ERROR	T1	L	L
150	OBSOLETE DATA RETAINED V0200 Invasive tumor in polyp, NOS	ERROR	T1	L	L
160	Invades submucosa (superficial invasion)	^	T1	L	L

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
200	Invades muscularis propria	^	T2	L	L
300	Localized, NOS	^	T1	L	L
310	Stated as T1, NOS with no other information on extension	^	T1	L	L
320	Stated as T1a, NOS with no other information on extension	^	T1	L	L
330	Stated as T1b, NOS with no other information on extension	^	T1	L	L
340	Stated as T2, NOS with no other information on extension	^	T2	L	L
350	Stated as T3, NOS with no other information on extension	^	T2	L	L
400	Extension to cecum	^	T3	L	L
420	OBSOLETE DATA RETAINED V0200 Fat, NOS	ERROR	T3	RE	RE
450	Extension to ileum	^	T3	RE	RE
460	OBSOLETE DATA RETAINED V0200 Adherent to other organs or structures, but no microscopic tumor found in adhesion(s)	ERROR	T3	RE	RE
500	Abdominal wall Skeletal muscles	T4	T4	RE	RE
550	OBSOLETE DATA RETAINED V0200 Any of [(420) to (450)] + (500)	ERROR	T4	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
570	OBSOLETE DATA RETAINED V0200 Adherent to other organs or structures, NOS	ERROR	T4	RE	RE
600	Perineum Vulva	T4	T4	RE	RE
650	OBSOLETE DATA RETAINED V0200 All colon sites: Abdominal wall Retroperitoneum (excluding fat)	ERROR	T4	RE	RE
660	OBSOLETE DATA RETAINED V0200 Ascending colon: Right kidney Right ureter Descending colon: Left kidney: Left ureter	ERROR	T4	RE	RE
700	Bladder Pelvic peritoneum Urethra Vagina	T4	T4	D	D
750	Broad ligament(s) Cervix uteri Corpus uteri Prostate	T4	T4	D	D
800	Further contiguous extension	T4	T4	D	D
850	Stated as T4, NOS	T4	T4	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 codes 000-450 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size 7th Table for this site.

**CarcinoidAppendix**  
**CS Tumor Size/Ext Eval**  
**See Standard Table**

**CarcinoidAppendix**  
**CS Lymph Nodes**

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

**Note 2:** Superior and inferior mesenteric nodes are coded in CS Mets at DX.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	None; no regional lymph node involvement	N0	N0	NONE	NONE
100	Colic (NOS) Epicolic (adjacent to bowel wall) Mesocolic (NOS) Paracolic/pericolic	N1	*	RN	RN
200	Anterior cecal (prececal), Posterior (retrocecal); NOS	N1	*	RN	RN
300	Mesenteric, NOS Regional lymph node(s), NOS	N1	*	RN	RN
400	Stated as N1	N1	N1	RN	RN
450	OBSOLETE DATA RETAINED V0200 Stated as N2 pathologic	ERROR	N2	RN	RN
800	Lymph nodes, NOS	N1	*	RN	RN
999	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	NX	U	U

\* For codes 100-300 and 800 ONLY: when CS Lymph Nodes Eval is 0, 1, 5, or 9, the N category is assigned from the Lymph Nodes Clinical Evaluation 6th Table, using Reg LN Pos and CS Site-Specific Factor 2; when CS Regional Nodes Eval is 2, 3, 6, 8, or not coded, the N category is determined from the Lymph Nodes Pathologic Evaluation 6th Table Also Used When CS Reg Nodes Eval is Not Coded using Reg LN Pos.

**CarcinoidAppendix****Reg LN Pos****Note:** Record this field even if there has been preoperative treatment**See Standard Table****CarcinoidAppendix****Reg LN Exam****See Standard Table****CarcinoidAppendix****CS Mets at DX**

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
00	No; none	M0	M0	NONE	NONE
08	Superior mesenteric lymph nodes	M1	M1	RN	D
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	(08-10) + (40)	M1	M1	D	D
60	Distant metastasis, NOS M1, NOS	M1	M1	D	D
99	Unknown if distant metastasis Cannot be assessed Not documented in patient record	M0	MX	U	U