

2004+ FORDS

Site-Specific Surgery Codes

(Current thru 2009)

ORAL CAVITY

**Lip C00.0–C00.9, Base of Tongue C01.9, Other Parts of Tongue C02.0–C02.9,
Gum C03.0–C03.9, Floor of Mouth C04.0–C04.9, Palate C05.0–C05.9,
Other Parts of Mouth C06.0–C06.9**

(Except for M-9750, 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

25 Laser excision

Specimen sent to pathology from surgical events 20–27.

30 Wide excision, NOS

Code 30 includes:

Hemiglossectomy

Partial glossectomy

40 Radical excision of tumor, NOS

41 Radical excision of tumor ONLY

42 Combination of 41 WITH resection in continuity with mandible (marginal, segmental, hemi-, or total resection)

43 Combination of 41 WITH resection in continuity with maxilla (partial, subtotal, or total resection)

Codes 40–43 include:

Total glossectomy

Radical glossectomy

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

PAROTID AND OTHER UNSPECIFIED GLANDS

Parotid Gland C07.9, Major Salivary Glands C08.0–C08.9

(Except for M-9750, 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

25 Laser excision

Specimen sent to pathology from surgical events 20–27.

30 Less than total parotidectomy, NOS; less than total removal of major salivary gland, NOS

31 Facial nerve spared

32 Facial nerve sacrificed

33 Superficial lobe ONLY

34 Facial nerve spared

35 Facial nerve sacrificed

36 Deep lobe (Total)

37 Facial nerve spared

38 Facial nerve sacrificed

40 Total parotidectomy, NOS; total removal of major salivary gland, NOS

41 Facial nerve spared

42 Facial nerve sacrificed

50 Radical parotidectomy, NOS; radical removal of major salivary gland, NOS

51 WITHOUT removal of temporal bone

52 WITH removal of temporal bone

53 WITH removal of overlying skin (requires graft or flap coverage)

80 Parotidectomy, NOS

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

PHARYNX

**Tonsil C09.0–C09.9, Oropharynx C10.0–C10.9, Nasopharynx C11.0–C11.9
Pyrimiform Sinus C12.9, Hypopharynx C13.0–C13.9, Pharynx C14.0**

(Except for M-9750, 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
 - 15 Stripping

No specimen sent to pathology from surgical events 10–15.

- 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
 - 25 Laser excision
 - 28 Stripping

Specimens sent to pathology from surgical events 20–28.

- 30 Pharyngectomy, NOS
 - 31 Limited/partial pharyngectomy; tonsillectomy, bilateral tonsillectomy
 - 32 Total pharyngectomy

- 40 Pharyngectomy WITH laryngectomy OR removal of contiguous bone tissue, NOS (does NOT include total mandibular resection)
 - 41 WITH Laryngectomy (laryngopharyngectomy)
 - 42 WITH bone
 - 43 WITH both 41 and 42

- 50 Radical pharyngectomy (includes total mandibular resection), NOS
 - 51 WITHOUT laryngectomy
 - 52 WITH laryngectomy

- 90 Surgery, NOS

- 99 Unknown if surgery performed; death certificate ONLY

ESOPHAGUS**C15.0–C15.9**

(Except for M-9750, 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 - 25 Laser excision
- Specimen sent to pathology from surgical events 20–27.**
- 30 Partial esophagectomy
- 40 Total esophagectomy, NOS
- 50 Esophagectomy, NOS WITH laryngectomy and/or gastrectomy, NOS
 - 51 WITH laryngectomy
 - 52 WITH gastrectomy, NOS
 - 53 Partial gastrectomy
 - 54 Total gastrectomy
 - 55 Combination of 51 WITH any of 52–54
- 80 Esophagectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

STOMACH**C16.0–C16.9**

(Except for M-9750, 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

25 Laser excision

Specimen sent to pathology from surgical events 20–27.

30 Gastrectomy, NOS (partial, subtotal, hemi-)

31 Antrectomy, lower (distal-less than 40% of stomach)***

32 Lower (distal) gastrectomy (partial, subtotal, hemi-)

33 Upper (proximal) gastrectomy (partial, subtotal, hemi-)

Code 30 includes:

Partial gastrectomy, including a sleeve resection of the stomach

Billroth I: anastomosis to duodenum (duodenostomy)

Billroth II: anastomosis to jejunum (jejunostomy)

40 Near-total or total gastrectomy, NOS

41 Near-total gastrectomy

42 Total gastrectomy

A total gastrectomy may follow a previous partial resection of the stomach.

50 Gastrectomy, NOS WITH removal of a portion of esophagus

51 Partial or subtotal gastrectomy

52 Near total or total gastrectomy

Codes 50–52 are used for gastrectomy resection when only portions of esophagus are included in procedure.

60 Gastrectomy with a resection in continuity with the resection of other organs, NOS***

61 Partial or subtotal gastrectomy, in continuity with the resection of other organs***

62 Near total or total gastrectomy, in continuity with the resection of other organs***

63 Radical gastrectomy, in continuity with the resection of other organs***

Codes 60–63 are used for gastrectomy resections with organs other than esophagus. Portions of esophagus may or may not be included in the resection.

- 80 Gastrectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

*** Incidental splenectomy NOT included

COLON

C18.0–C18.9

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

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294).

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
 - 27 Excisional biopsy
 - 26 Polypectomy, NOS
 - 28 Polypectomy-endoscopic
 - 29 Polypectomy-surgical excision

Any combination of 20 or 26–29 WITH

 - 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation- 25 Laser excision

Specimen sent to pathology from surgical events 20–29.

- 30 Partial colectomy, segmental resection
 - 32 Plus resection of contiguous organ; example: small bowel, bladder

- 40 Subtotal colectomy/hemicolectomy (total right or left colon and a portion of transverse colon)
 - 41 Plus resection of contiguous organ; example: small bowel, bladder

- 50 Total colectomy (removal of colon from cecum to the rectosigmoid junction; may include a portion of the rectum)
 - 51 Plus resection of contiguous organ; example: small bowel, bladder

- 60 Total proctocolectomy (removal of colon from cecum to the rectosigmoid junction, including the entire rectum)
 - 61 Plus resection of contiguous organ; example: small bowel, bladder

- 70 Colectomy or coloproctectomy with resection of contiguous organ(s), NOS (where there is not enough information to code 32, 41, 51, or 61)

Code 70 includes: Any colectomy (partial, hemicolectomy, or total) WITH a resection of any other organs in continuity with the primary site. Other organs may be partially or totally removed. Other organs may include, but are not limited to, oophorectomy, partial proctectomy, rectal mucosectomy, or pelvic exenteration.

- 80 Colectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

RECTOSIGMOID**C19.9**

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

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294).**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 ablation

No specimen sent to pathology from surgical events 10–14.

- 20 Local tumor excision, NOS
 - 26 Polypectomy
 - 27 Excisional biopsy
- Combination of 20 or 26–27 WITH
 - 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
- 25 Laser excision

Specimen sent to pathology from surgical events 20–27.

- 30 Wedge or segmental resection; partial proctosigmoidectomy, NOS
 - 31 Plus resection of contiguous organs; example: small bowel, bladder

Procedures coded 30 include, but are not limited to:

- Anterior resection
- Hartmann operation
- Low anterior resection (LAR)
- Partial colectomy, NOS
- Rectosigmoidectomy, NOS
- Sigmoidectomy

- 40 Pull through WITH sphincter preservation (colo-anal anastomosis)
- 50 Total proctectomy
- 51 Total colectomy
- 55 Total colectomy WITH ileostomy, NOS
 - 56 Ileorectal reconstruction
 - 57 Total colectomy WITH other pouch; example: Koch pouch

- 60 Total proctocolectomy, NOS
 - 65 Total proctocolectomy WITH ileostomy, NOS
 - 66 Total proctocolectomy WITH ileostomy and pouch
- Removal of the colon from cecum to the rectosigmoid or a portion of the rectum.**
- 70 Colectomy or proctocolectomy resection in continuity with other organs; pelvic exenteration
- 80 Colectomy, NOS; Proctectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

RECTUM**C20.9**

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

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294).**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

27 Excisional biopsy

26 Polypectomy

Any combination of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

28 Curette and fulguration

Specimen sent to pathology from surgical events 20–28.

30 Wedge or segmental resection; partial proctectomy, NOS

Procedures coded 30 include, but are not limited to:

Anterior resection

Hartmann's operation

Low anterior resection (LAR)

Transsacral rectosigmoidectomy

40 Pull through WITH sphincter preservation (coloanal anastomosis)

50 Total proctectomy

Procedure coded 50 includes, but is not limited to:

Abdominoperineal resection (Miles Procedure)

60 Total proctocolectomy, NOS

70 Proctectomy or proctocolectomy with resection in continuity with other organs; pelvic exenteration

80 Proctectomy, NOS

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

ANUS**C21.0–C21.8**

(Except for M-9750, 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
 - 15 Thermal Ablation

No specimen sent to pathology from surgical events 10–15.

- 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
- 25 Laser excision

Specimen sent to pathology from surgical events 20–27.

- 60 Abdominal perineal resection, NOS (APR; Miles procedure)
 - 61 APR and sentinel node excision
 - 62 APR and unilateral inguinal lymph node dissection
 - 63 APR and bilateral inguinal lymph node dissection**The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item #1292) or *Scope of Regional Lymph Node Surgery at This Facility* (NAACCR Item #672).**

- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

LIVER AND INTRAHEPATIC BILE DUCTS**C22.0–C22.1**

(Except for M-9750, 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
 - 15 Alcohol (Percutaneous Ethanol Injection-PEI)
 - 16 Heat-Radio-frequency ablation (RFA)
 - 17 Other (ultrasound, acetic acid)

No specimen sent to pathology from surgical events 10–17.
- 20 Wedge or segmental resection, NOS
 - 21 Wedge resection
 - 22 Segmental resection, NOS
 - 23 One
 - 24 Two
 - 25 Three
 - 26 Segmental resection AND local tumor destruction

Specimen sent to pathology from surgical events 20–26.
- 30 Lobectomy, NOS
 - 36 Right lobectomy
 - 37 Left lobectomy
 - 38 Lobectomy AND local tumor destruction
- 50 Extended lobectomy, NOS (extended: resection of a single lobe plus a segment of another lobe)
 - 51 Right lobectomy
 - 52 Left lobectomy
 - 59 Extended lobectomy AND local tumor destruction
- 60 Hepatectomy, NOS
 - 61 Total hepatectomy and transplant
- 65 Excision of a bile duct (for an intra-hepatic bile duct primary only)
 - 66 Excision of a bile duct PLUS partial hepatectomy
- 75 Bile duct and hepatectomy WITH transplant
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

PANCREAS**C25.0–C25.9**

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

Codes

- 00 None; no surgery of primary site; autopsy ONLY
- 25 Local excision of tumor, NOS
- 30 Partial pancreatectomy, NOS; example: distal
- 35 Local or partial pancreatectomy and duodenectomy
 - 36 WITHOUT distal/partial gastrectomy
 - 37 WITH partial gastrectomy (Whipple)
- 40 Total pancreatectomy
- 60 Total pancreatectomy and subtotal gastrectomy or duodenectomy
- 70 Extended pancreatoduodenectomy
- 80 Pancreatectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

LARYNX**C32.0–C32.9**

(Except for M-9750, 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
 - 15 Stripping**No specimen sent to pathology from surgical events 10–15.**
 - 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 - 25 Laser excision
 - 28 Stripping
- Specimen sent to pathology from surgical events 20–28.**
- 30 Partial excision of the primary site, NOS; subtotal/partial laryngectomy NOS; hemilaryngectomy NOS
 - 31 Vertical laryngectomy
 - 32 Anterior commissure laryngectomy
 - 33 Supraglottic laryngectomy
- 40 Total or radical laryngectomy, NOS
 - 41 Total laryngectomy ONLY
 - 42 Radical laryngectomy ONLY
- 50 Pharyngolaryngectomy
- 80 Laryngectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

LUNG

C34.0–C34.9

(Except for M-9750, 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, NOS
 - 12 Laser ablation or cryosurgery
 - 13 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)**No specimen sent to pathology from surgical events 12–13 and 15.**

- 20 Excision or resection of less than one lobe, NOS
 - 23 Excision, NOS
 - 24 Laser excision
 - 25 Bronchial sleeve resection ONLY
 - 21 Wedge resection
 - 22 Segmental resection, including lingulectomy**Specimen sent to pathology from surgical events 20–25.**

- 30 Resection of lobe or bilobectomy, but less than the whole lung (partial pneumonectomy, NOS)
 - 33 Lobectomy WITH mediastinal lymph node dissection**The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item #1292) or *Scope of Regional Lymph Node Surgery at This Facility* (NAACCR Item #672).**

- 45 Lobe or bilobectomy extended, NOS
 - 46 WITH chest wall
 - 47 WITH pericardium
 - 48 WITH diaphragm

- 55 Pneumonectomy, NOS
 - 56 WITH mediastinal lymph node dissection (radical pneumonectomy)**The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item # 1292) or *Scope of Regional Lymph Node Surgery at This Facility* (NAACCR Item #672).**

- 65 Extended pneumonectomy
 - 66 Extended pneumonectomy plus pleura or diaphragm

- 70 Extended radical pneumonectomy
The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item # 1292) or *Scope of Regional Lymph Node Surgery at This Facility* (NAACCR Item #672).

- 80 Resection of lung, NOS

- 90 Surgery, NOS

- 99 Unknown if surgery performed; death certificate ONLY

(Revised 01/04)

**HEMATOPOIETIC/RETICULOENDOTHELIAL/
IMMUNOPROLIFERATIVE/MYELOPROLIFERATIVE DISEASE**

C42.0, C42.1, C42.3, C42.4 (with any histology)

or

M-9750, 9760–9764, 9800–9820, 9826, 9831–9920, 9931–9964, 9980–9989 (with any site)

Code

- 98 All hematopoietic/reticuloendothelial/immunoproliferative/myeloproliferative disease sites and/or histologies, WITH or WITHOUT surgical treatment.

Surgical procedures for hematopoietic/reticuloendothelial/immunoproliferative/myeloproliferative primaries are to be recorded using the data item *Surgical Procedure/Other Site* (NAACCR Item #1294) or *Surgical Procedure/Other Site at This Facility* (NAACCR Item #674).

BONES, JOINTS, AND ARTICULAR CARTILAGE C40.0–C41.9
PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM C47.0–C47.9
CONNECTIVE, SUBCUTANEOUS, AND OTHER SOFT TISSUES C49.0–C49.9

(Except for M-9750, 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

SPLEEN**Spleen C42.2**

(Except for M-9750, 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).
- 21 Partial splenectomy
- 22 Total splenectomy
- 80 Splenectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

SKIN

C44.0–C44.9

(Except for M-9750, 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 ablation

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

25 Laser excision

Specimen sent to pathology from surgical events 20–27.

30 Biopsy of primary tumor followed by a gross excision of the lesion (does not have to be done under the same anesthesia)

31 Shave biopsy followed by a gross excision of the lesion

32 Punch biopsy followed by a gross excision of the lesion

33 Incisional biopsy followed by a gross excision of the lesion

34 Mohs surgery, NOS

35 Mohs with 1-cm margin or less

36 Mohs with more than 1-cm margin

45 Wide excision or reexcision of lesion or minor (local) amputation with margins more than 1 cm, NOS. Margins MUST be microscopically negative.

46 WITH margins more than 1 cm and less than or equal to 2 cm

47 WITH margins greater than 2 cm

If the excision does not have microscopically negative margins greater than 1 cm, use the appropriate code, 20–36.

60 Major amputation

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

BREAST**C50.0–C50.9**

(Except for M-9750, 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, NOS
No specimen was sent to pathology for surgical events coded 19 (principally for cases diagnosed prior to January 1, 2003).
- 20 Partial mastectomy, NOS; less than total mastectomy, NOS
 - 21 Partial mastectomy WITH nipple resection
 - 22 Lumpectomy or excisional biopsy
 - 23 Reexcision of the biopsy site for gross or microscopic residual disease
 - 24 Segmental mastectomy (including wedge resection, quadrantectomy, tylectomy)**Procedures coded 20–24 remove the gross primary tumor and some of the breast tissue (breast-conserving or preserving). There may be microscopic residual tumor.**
- 30 Subcutaneous mastectomy
A subcutaneous mastectomy is the removal of breast tissue without the nipple and areolar complex or overlying skin.
- 40 Total (simple) mastectomy
 - 41 WITHOUT removal of uninvolved contralateral breast
 - 43 Reconstruction NOS
 - 44 Tissue
 - 45 Implant
 - 46 Combined (Tissue and Implant)
 - 42 WITH removal of uninvolved contralateral breast
 - 47 Reconstruction NOS
 - 48 Tissue
 - 49 Implant
 - 75 Combined (Tissue and Implant)**A total (simple) mastectomy removes all breast tissue, the nipple, and areolar complex. An axillary dissection is not done.**

For single primaries only, code removal of involved contralateral breast under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294) or *Surgical Procedure/Other Site at This Facility* (NAACCR Item #674).

If contralateral breast reveals a second primary, each breast is abstracted separately. The surgical procedure is coded 41 for the first primary. The surgical code for the contralateral breast is coded to the procedure performed on that site.
- 50 Modified radical mastectomy
 - 51 WITHOUT removal of uninvolved contralateral breast
 - 53 Reconstruction, NOS
 - 54 Tissue
 - 55 Implant
 - 56 Combined (Tissue and Implant)

- 52 WITH removal of uninvolved contralateral breast
 - 57 Reconstruction, NOS
 - 58 Tissue
 - 59 Implant
 - 63 Combined (Tissue and Implant)

Removal of all breast tissue, the nipple, the areolar complex, and variable amounts of breast skin in continuity with the axilla. The specimen may or may not include a portion of the pectoralis major muscle.

If contralateral breast reveals a second primary, it is abstracted separately. The surgical procedure is coded 51 for the first primary. The surgical code for the contralateral breast is coded to the procedure performed on that site.

For single primaries only, code removal of involved contralateral breast under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294) or *Surgical Procedure/Other Site at This Facility* (NAACCR Item #674).

- 60 Radical mastectomy, NOS
 - 61 WITHOUT removal of uninvolved contralateral breast
 - 64 Reconstruction, NOS
 - 65 Tissue
 - 66 Implant
 - 67 Combined (Tissue and Implant)
 - 62 WITH removal of uninvolved contralateral breast
 - 68 Reconstruction, NOS
 - 69 Tissue
 - 73 Implant
 - 74 Combined (Tissue and Implant)
- 70 Extended radical mastectomy
 - 71 WITHOUT removal of uninvolved contralateral breast
 - 72 WITH removal of uninvolved contralateral breast
- 80 Mastectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

CERVIX UTERI**C53.0–C53.9**

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

For invasive cancers, dilation and curettage is coded as an incisional biopsy (02) under the data item *Surgical Diagnostic and Staging Procedure* (NAACCR Item #1350).

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
 - 15 Loop Electrocautery Excision Procedure (LEEP)
 - 16 Laser ablation
 - 17 Thermal ablation

No specimen sent to pathology from surgical events 10–17.
- 20 Local tumor excision, NOS
 - 26 Excisional biopsy, NOS
 - 27 Cone biopsy
 - 24 Cone biopsy WITH gross excision of lesion
 - 29 Trachelectomy; removal of cervical stump; cervicectomy

Any combination of 20, 24, 26, 27 or 29 WITH

 - 21 Electrocautery
 - 22 Cryosurgery
 - 23 Laser ablation or excision
 - 25 Dilatation and curettage; endocervical curettage (for in situ only)
 - 28 Loop electrocautery excision procedure (LEEP)

Specimen sent to pathology from surgical events 20–29.
- 30 Total hysterectomy (simple, pan-) WITHOUT removal of tubes and ovaries

Total hysterectomy removes both the corpus and cervix uteri and may also include a portion of vaginal cuff.
- 40 Total hysterectomy (simple, pan-) WITH removal of tubes and/or ovary

Total hysterectomy removes both the corpus and cervix uteri and may also include a portion of vaginal cuff.
- 50 Modified radical or extended hysterectomy; radical hysterectomy; extended radical hysterectomy
 - 51 Modified radical hysterectomy
 - 52 Extended hysterectomy
 - 53 Radical hysterectomy; Wertheim procedure
 - 54 Extended radical hysterectomy
- 60 Hysterectomy, NOS, WITH or WITHOUT removal of tubes and ovaries
 - 61 WITHOUT removal of tubes and ovaries
 - 62 WITH removal of tubes and ovaries

- 70 Pelvic exenteration
 - 71 Anterior exenteration
Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes.
 - 72 Posterior exenteration
Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes.
 - 73 Total exenteration
Includes removal of all pelvic contents and pelvic lymph nodes.
 - 74 Extended exenteration
Includes pelvic blood vessels or bony pelvis.
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

CORPUS UTERI**C54.0–C55.9**

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

For invasive cancers, dilation and curettage is coded as an incisional biopsy (02) under the data item *Surgical Diagnostic and Staging Procedure* (NAACCR Item #1350).

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).
- 10 Local tumor destruction, NOS
 - 11 Photodynamic therapy (PDT)
 - 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
 - 13 Cryosurgery
 - 14 Laser
 - 15 Loop Electocautery Excision Procedure (LEEP)
 - 16 Thermal ablation**No specimen sent to pathology from surgical events 10–16.**
- 20 Local tumor excision, NOS; simple excision, NOS
 - 24 Excisional biopsy
 - 25 Polypectomy
 - 26 Myomectomy
 Any combination of 20 or 24–26 WITH
 - 21 Electrocautery
 - 22 Cryosurgery
 - 23 Laser ablation or excision**Specimen sent to pathology from surgical events 20–26.**
- 30 Subtotal hysterectomy/supracervical hysterectomy/fundectomy WITH or WITHOUT removal of tube(s) and ovary(ies).
 - 31 WITHOUT tube(s) and ovary(ies)
 - 32 WITH tube(s) and ovary(ies)
- 40 Total hysterectomy (simple, pan-) WITHOUT removal of tube(s) and ovary(ies)
Removes both the corpus and cervix uteri. It may also include a portion of the vaginal cuff.
- 50 Total hysterectomy (simple, pan-) WITH removal of tube(s) and/or ovary(ies)
Removes both the corpus and cervix uteri. It may also include a portion of the vaginal cuff.
- 60 Modified radical or extended hysterectomy; radical hysterectomy; extended radical hysterectomy
 - 61 Modified radical hysterectomy
 - 62 Extended hysterectomy
 - 63 Radical hysterectomy; Wertheim procedure
 - 64 Extended radical hysterectomy

- 65 Hysterectomy, NOS, WITH or WITHOUT removal of tube(s) and ovary(ies)
 - 66 WITHOUT removal of tube(s) and ovary(ies)
 - 67 WITH removal of tube(s) and ovary(ies)

- 75 Pelvic exenteration
 - 76 Anterior exenteration
Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes.

 - 77 Posterior exenteration
Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes.

 - 78 Total exenteration
Includes removal of all pelvic contents and pelvic lymph nodes.

 - 79 Extended exenteration
Includes pelvic blood vessels or bony pelvis.

- 90 Surgery, NOS

- 99 Unknown if surgery performed; death certificate ONLY

OVARY**C56.9**

(Except for M-9750, 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

- 50 Bilateral (salpingo-)oophorectomy; unknown if hysterectomy done
 - 51 WITHOUT hysterectomy
 - 52 WITH 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.**

- 70 Pelvic exenteration, NOS
 - 71 Anterior exenteration
Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes.

 - 72 Posterior exenteration
Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes.

73 Total exenteration

Includes removal of all pelvic contents and pelvic lymph nodes.

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

PROSTATE**C61.9**

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

Do not code an orchiectomy in this field. For prostate primaries, orchiectomies are coded in the data item *Hematologic Transplant and Endocrine Procedures* (NAACCR Item #3250).

Codes

- 00 None; no surgery of primary site; autopsy ONLY
- 18 Local tumor destruction or excision, NOS
- 19 Transurethral resection (TURP), NOS
Unknown whether a specimen was sent to pathology for surgical events coded 18 or 19 (principally for cases diagnosed prior to January 1, 2003).
- 10 Local tumor destruction, NOS
 - 14 Cryoprostatectomy
 - 15 Laser ablation
 - 16 Hyperthermia
 - 17 Other method of local tumor destruction**No specimen sent to pathology from surgical events 10–17.**
- 20 Local tumor excision, NOS
 - 21 Transurethral resection (TURP), NOS
 - 22 TURP—cancer is incidental finding during surgery for benign disease
 - 23 TURP—patient has suspected/known cancer
 Any combination of 20–23 WITH
 - 24 Cryosurgery
 - 25 Laser
 - 26 Hyperthermia**Specimen sent to pathology from surgical events 20–26.**
- 30 Subtotal, segmental, or simple prostatectomy, which may leave all or part of the capsule intact
- 50 Radical prostatectomy, NOS; total prostatectomy, NOS
Excised prostate, prostatic capsule, ejaculatory ducts, seminal vesicle(s) and may include a narrow cuff of bladder neck.
- 70 Prostatectomy WITH resection in continuity with other organs; pelvic exenteration
Surgeries coded 70 are any prostatectomy WITH resection in continuity with any other organs. The other organs may be partially or totally removed. Procedures may include, but are not limited to, cystoprostatectomy, radical cystectomy, and prostatectomy.
- 80 Prostatectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

TESTIS**C62.0–C62.9**

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

Codes

- 00 None; no surgery of primary site; autopsy ONLY
- 12 Local tumor destruction, NOS
No specimen sent to pathology from surgical event 12.
- 20 Local or partial excision of testicle
Specimen sent to pathology from surgical event 20.
- 30 Excision of testicle WITHOUT cord
- 40 Excision of testicle WITH cord or cord not mentioned (radical orchiectomy)
- 80 Orchiectomy, NOS (unspecified whether partial or total testicle removed)
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

KIDNEY, RENAL PELVIS, AND URETER**Kidney C64.9, Renal Pelvis C65.9, Ureter C66.9**

(Except for M-9750, 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
 - 15 Thermal ablation

No specimen sent to pathology from this surgical event 10–15.
- 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

25 Laser excision

Specimen sent to pathology from surgical events 20–27.
- 30 Partial or subtotal nephrectomy (kidney or renal pelvis) or partial ureterectomy (ureter)

Procedures coded 30 include, but are not limited to:

 - Segmental resection
 - Wedge resection
- 40 Complete/total/simple nephrectomy—for kidney parenchyma
Nephroureterectomy

Includes bladder cuff for renal pelvis or ureter.
- 50 Radical nephrectomy

May include removal of a portion of vena cava, adrenal gland(s), Gerota=s fascia, perinephric fat, or partial/total ureter.
- 70 Any nephrectomy (simple, subtotal, complete, partial, simple, total, radical) in continuity with the resection of other organ(s) (colon, bladder)

The other organs, such as colon or bladder, may be partially or totally removed.
- 80 Nephrectomy, NOS
Ureterectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

BLADDER**C67.0–C67.9**

(Except for M-9750, 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
 15 Intravesical therapy
 16 Bacillus Calmette-Guerin (BCG) or other immunotherapy
No specimen sent to pathology from surgical events 10–16.
- 20 Local tumor excision, NOS
 26 Polypectomy
 27 Excisional biopsy
 Combination of 20 or 26–27 WITH
 21 Photodynamic therapy (PDT)
 22 Electrocautery
 23 Cryosurgery
 24 Laser ablation
 25 Laser excision
Specimen sent to pathology from surgical events 20–27.
- 30 Partial cystectomy
- 50 Simple/total/complete cystectomy
- 60 Radical cystectomy (male only)
 61 Radical cystectomy PLUS ileal conduit
 62 Radical cystectomy PLUS continent reservoir or pouch, NOS
 63 Radical cystectomy PLUS abdominal pouch (cutaneous)
 64 Radical cystectomy PLUS in situ pouch (orthotopic)
- 70 Pelvic exenteration, NOS
 71 Radical cystectomy (female only); anterior exenteration
A radical cystectomy in a female includes removal of bladder, uterus, ovaries, entire vaginal wall, and entire urethra.
 72 Posterior exenteration
 73 Total exenteration
Includes removal of all pelvic contents and pelvic lymph nodes.
The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item #1292) or *Scope of Regional Lymph Node Surgery at This Facility* (NAACCR Item #672).
- 74 Extended exenteration
Includes pelvic blood vessels or bony pelvis.
- 80 Cystectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

(Revised 01/04)

BRAIN**Meninges C70.0–C70.9, Brain C71.0–C71.9,
Spinal Cord, Cranial Nerves and Other Parts of Central Nervous System C72.0–C72.9**

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

Do not code laminectomies for spinal cord primaries.**Codes**

00 None; no surgery of primary site; autopsy ONLY

10 Tumor destruction, NOS

No specimen sent to pathology from surgical event 10.**Do not record stereotactic radiosurgery as tumor destruction. It should be recorded in the radiation treatment items.**20 Local excision (biopsy) of lesion or mass
Specimen sent to pathology from surgical event 20.Per CoC, use code 20 to describe EXCISION OF PRIMARY TUMOR, or "DEBULKING" (< FULL REMOVAL OF TUMOR). **Most Primary Brain Surgery is code 20.**

40 Partial resection

Per CoC, use code 40 to describe **PARTIAL RESECTION OF A BRAIN LOBE.**

55 Gross total resection

Per CoC, use code 55 to describe **GROSS TOTAL RESECTION OF A BRAIN LOBE. THIS IS A LESS COMMON FORM OF SURGICAL TREATMENT.**

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

CoC Flash June 2008 Issue:

Clarification of Primary Brain Surgery Codes in FORDS

CoC has taken several steps recently to correct a widespread misinterpretation of the FORDS Primary Brain Surgery codes. The problematic codes are reproduced below with clarifications added in capital letters. Registries that have not applied the codes correctly or consistently are advised to review their brain surgery cases diagnosed since FORDS was implemented in 2003 with primary site surgery codes 40 or 55, and make any corrections necessary.

20	Local excision (biopsy) of lesion or mass. USE THIS CODE TO DESCRIBE EXCISION (REMOVAL) OF THE PRIMARY TUMOR, OR "DEBULKING" (LESS THAN FULL REMOVAL OF THE TUMOR). MOST PRIMARY BRAIN SURGERY IS CODE 20.
40	Partial resection. USE THIS CODE TO DESCRIBE PARTIAL RESECTION OF A LOBE.
55	Gross total resection. USE THIS CODE TO DESCRIBE GROSS TOTAL RESECTION OF A LOBE. THIS IS A LESS COMMON FORM OF SURGICAL TREATMENT.

THYROID GLAND**C73.9**

(Except for M-9750, 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

LYMPH NODES**C77.0–C77.9**

(Except for M-9750, 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 to 19 (principally for cases diagnosed prior to January 1, 2003).
- 15 Local tumor destruction, NOS
No specimen sent to pathology from surgical event 15.
- 25 Local tumor excision, NOS
Less than a full chain, includes an excisional biopsy of a single lymph node.
- 30 Lymph node dissection, NOS
 - 31 One chain
 - 32 Two or more chains
- 40 Lymph node dissection, NOS PLUS splenectomy
 - 41 One chain
 - 42 Two or more chains
- 50 Lymph node dissection, NOS and partial/total removal of adjacent organ(s)
 - 51 One chain
 - 52 Two or more chains
- 60 Lymph node dissection, NOS and partial/total removal of adjacent organ(s) PLUS splenectomy
 (Includes staging laparotomy for lymphoma.)
 - 61 One chain
 - 62 Two or more chains
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

ALL OTHER SITES

C14.2–C14.8, C17.0–C17.9, C23.9, C24.0–C24.9, C26.0–C26.9, C30.0–C30.1, C31.0–C31.9, C33.9, C37.9, C38.0–C38.8, C39.0–C39.9, C48.0–C48.8, C51.0–C51.9, C52.9, C57.0–C57.9, C58.9, C60.0–C60.9, C63.0–C63.9, C68.0–C68.9, C69.0–C69.9, C74.0–C74.9, C75.0–C75.9

(Except for M-9750, 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

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.

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

UNKNOWN AND ILL-DEFINED PRIMARY SITES**C76.0–C76.8, C80.9**

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

Code

98 All unknown and ill-defined disease sites, WITH or WITHOUT surgical treatment.

Surgical procedures for unknown and ill-defined primaries are to be recorded using the data item *Surgical Procedure/Other Site* (NAACCR Item #1294) or *Surgical Procedure/Other Site at This Facility* (NAACCR Item #674).

2004+ SEER

Site-Specific Surgery Codes

(Current thru 2009)

Appendix C

Site-Specific Coding Modules

The site-specific coding modules are stand-alone coding manuals that include SEER Coding Guidelines, Collaborative Staging Coding Instructions and Surgery of Primary Site codes. In the past, site-specific instructions were scattered throughout the SEER Program Code Manual. Collaborative Staging and Surgery codes were in two separate manuals. As part of the SEER commitment to continuing Quality Improvement, this appendix brings together the site-specific instructions needed to abstract a case, facilitating efficiency and accuracy. General instructions in the main manual are applicable in the absence of site-specific instructions. All modules include collaborative staging and surgery codes. Some modules include site-specific coding guidelines in addition to the collaborative staging and surgery codes. The goal is to have complete stand-alone modules for every anatomic site. SEER will continue to work toward this goal by enhancing site-specific guidelines as modules are expanded and revised.

The site-specific coding guidelines contain instructions for various data items other than collaborative stage and surgery of primary site. The Guidelines are a collaborative effort between NCI/SEER and the SEER Quality Control staff from the SEER registries. We gratefully acknowledge the valuable input provided by the SEER QC staff.

Part II of the Collaborative Staging manual is included in this appendix. For an introduction to Collaborative Staging, see Part I of the Collaborative Staging Manual and Coding Instructions, version 1.0.

The surgery codes are based on the American College of Surgeons Commission on Cancer's *Facility Oncology Registry Data System*, American College of Surgeons, Chicago, IL, 2004 (FORDS), Appendix B: Site-specific Surgery Codes (Revised 2004). The surgery codes in this document are identical to the FORDS manual; only formatting and annotations may vary. The **SEER Notes** that appear in the Surgery Code sections contain information or instructions not found in FORDS or that are different from FORDS.

* NO SURGERY CODE CHANGES FOR 2007

* SEPT 2008 REVISIONS WERE MADE TO THE FOLLOWING SURGERY SITES:

- SKIN (p C-544)
- BRAIN (p C-939)
- LYMPH NODES (pp C-1001)

THESE WERE CODING "CLARIFICATIONS" ONLY...
NO SURGERY CODES WERE CHANGED

Site-Specific Surgery Codes

Oral Cavity

Lip C000–C009, Base of Tongue C019, Other Parts of Tongue C020–C029,
Gum C030–C039, Floor of Mouth C040–C049, Palate C050–C059,
Other Parts of Mouth C060–C069
(Except for M-9750, 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
- 25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation or 25 Laser excision]

Specimen sent to **pathology** from surgical events 20–27

[**SEER Note:** Codes 20-27 include shave and wedge resection]

30 Wide excision, NOS

Code 30 includes:

- Hemiglossectomy
- Partial glossectomy

40 Radical excision of tumor, NOS

- 41 **Radical excision of tumor ONLY**
- 42 **Combination of 41 WITH resection in continuity with mandible (marginal, segmental, hemi-, or total resection)**
- 43 **Combination of 41 WITH resection in continuity with maxilla (partial, subtotal, or total resection)**

[**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]

Codes 40–43 include:

- Total glossectomy
- Radical glossectomy

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

Site-Specific Surgery Codes

Parotid and Other Unspecified Glands

Parotid Gland C079, Major Salivary Glands C080–C089

(Except for M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

Specimen sent to **pathology** from surgical events 20–27

[**SEER Note:** Codes 30-80 include major salivary gland, NOS]

30 Less than total parotidectomy, NOS; less than total removal of major salivary gland, NOS

[**SEER Notes:** Includes less than total removal of other major salivary gland When the operative report specifies nerve monitoring, it means that a nerve sparing surgery is being done]

31 Facial nerve spared

32 Facial nerve sacrificed

33 Superficial lobe ONLY

34 Facial nerve spared

35 Facial nerve sacrificed

36 Deep lobe (Total)

[**SEER Note:** With or without superficial lobe]

37 Facial nerve spared

38 Facial nerve sacrificed

[**SEER Note:** Codes 40-80 include submandibulectomy; submaxillectomy]

- 40 Total parotidectomy, NOS; total removal of major salivary gland, NOS
 - 41 Facial nerve spared
 - 42 Facial nerve sacrificed

- 50 Radical parotidectomy, NOS; radical removal of major salivary gland, NOS
 - 51 WITHOUT removal of temporal bone
 - 52 WITH removal of temporal bone
 - 53 WITH removal of overlying skin (requires graft or flap coverage)

- 80 Parotidectomy, NOS

- 90 Surgery, NOS

- 99 **Unknown** if surgery performed; **death certificate** ONLY

Site-Specific Surgery Codes**Pharynx**

Tonsil C090–C099, Oropharynx C100–C109, Nasopharynx C110–C119

Pyriiform Sinus C129, Hypopharynx C130–C139, Pharynx C140

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

Codes00 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

15 Stripping

No specimen sent to **pathology** from surgical events 10–1520 **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

25 Laser excision

28 Stripping

[**SEER Note:** Codes 21 to 25 and 28 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, 25 Laser excision, or 28 Stripping]

Specimen sent to **pathology** from surgical events 20–28

30 Pharyngectomy, NOS

31 Limited/partial pharyngectomy; tonsillectomy, bilateral tonsillectomy

32 Total pharyngectomy

40 Pharyngectomy WITH laryngectomy OR removal of contiguous bone tissue, NOS
(does NOT include total mandibular resection)

[**SEER Notes:** Code 40 includes mandibulectomy (marginal, segmental, hemi-, and/or laryngectomy)
NOS Contiguous bone tissue refers to the mandible]

41 WITH laryngectomy (laryngopharyngectomy)

42 WITH bone [mandibulectomy]

43 WITH both 41 and 42

[SEER Notes:

Use code 40 when the patient had a pharyngectomy and maybe some sort of mandibulectomy and/or maybe a laryngectomy, but the exact procedures are not clear

Use code 41 when the patient had pharyngectomy and laryngectomy but no mandibulectomy

Use code 42 when the patient had pharyngectomy and mandibulectomy but no laryngectomy

Use code 43 when it is certain that the patient had both a mandibulectomy and laryngectomy in addition to the pharyngectomy]

- 50 **Radical pharyngectomy** (includes total mandibular resection), NOS
 - 51 WITHOUT laryngectomy
 - 52 WITH laryngectomy
- 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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

Site-Specific Surgery Codes

Esophagus

C150–C159

(Except for M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

Specimen sent to pathology from surgical events 20–27

30 Partial esophagectomy

40 Total esophagectomy, NOS

50 Esophagectomy, NOS WITH laryngectomy and/or gastrectomy, NOS

[**SEER Note:** Esophagectomy WITH other procedures may be partial, total, or NOS]

51 WITH laryngectomy

52 WITH gastrectomy, NOS

53 Partial gastrectomy

54 Total gastrectomy

55 Combination of 51 WITH any of 52–54

80 Esophagectomy, NOS

90 Surgery, NOS

99 **Unknown** if surgery performed; **death certificate ONLY**

Site-Specific Surgery Codes**Stomach****C160–C169**

(Except for M-9750, 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 10–1420 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

25 Laser excision

[SEER Note: Codes 21 to 25 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]Specimen sent to **pathology** from surgical events 20–2730 **Gastrectomy**, NOS (**partial**, subtotal, hemi-)

31 Antrectomy, lower (distal-less than 40% of stomach)***

32 Lower (distal) gastrectomy (partial, subtotal, hemi-)

33 Upper (proximal) gastrectomy (partial, subtotal, hemi-)

Code 30 includes:

Partial gastrectomy, including a sleeve resection of the stomach

Billroth I: anastomosis to duodenum (duodenostomy)

Billroth II: anastomosis to jejunum (jejunostomy)

40 Near-total or total gastrectomy, NOS

41 Near-total gastrectomy

42 Total gastrectomy

A total gastrectomy may follow a previous partial resection of the stomach

50 **Gastrectomy**, NOS WITH removal of a portion of **esophagus**

51 Partial or subtotal gastrectomy

52 Near total or total gastrectomy

Codes 50–52 are used for gastrectomy resection when only portions of esophagus are included in procedure

60 **Gastrectomy** with a resection in continuity with the resection of **other organs**, NOS***

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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

Site-Specific Surgery Codes

Colon

C180–C189

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

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294)

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
 - 27 Excisional biopsy
 - 26 Polypectomy, NOS
 - 28 Polypectomy-endoscopic
 - 29 Polypectomy-surgical excision

Any **combination** of 20 or 26–29 WITH

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

[**SEER Note:** Codes 21 to 25 above combine 20 Local tumor excision, 27 Excisional biopsy, 26 Polypectomy, NOS, 28 Polypectomy-endoscopic or 29 Polypectomy-surgical excision WITH 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

Specimen sent to **pathology** from surgical events 20–29

- 30 Partial colectomy, [but less than hemicolectomy] **segmental** resection
 - 32 Plus resection of contiguous organ; example: small bowel, bladder

[**SEER Note:** Codes 30 and 32 include but are not limited to: Appendectomy (for an appendix primary only), enterocolectomy, ileocolectomy, partial colectomy, NOS, partial resection of transverse colon and flexures, and segmental resection, such as cecectomy or sigmoidectomy. Removal of a short portion of the distal ileum is not coded as removal of a contiguous organ.]

- 40 Subtotal colectomy/hemicolectomy (total right or left colon and a portion of transverse colon)
 - 41 Plus resection of contiguous organ; example: small bowel, bladder

[**SEER Notes:** Code 40 includes extended (but less than total) right or left colectomy. Removal of a short portion of the distal ileum is not coded as removal of a contiguous organ]

- 50 Total colectomy (removal of colon from cecum to the rectosigmoid junction; may include a portion of the rectum)
 - 51 Plus resection of contiguous organ; example: small bowel, bladder

[**SEER Note:** Removal of a short portion of the distal ileum is not coded as removal of a contiguous organ]

- 60 Total proctocolectomy (removal of colon from cecum to the rectosigmoid junction, including the entire rectum)

[**SEER Note:** Commonly used for familial polyposis or polyposis coli]

61 Plus resection of contiguous organ; example: small bowel, bladder

[**SEER Note:** Removal of a short portion of the distal ileum is not coded as removal of a contiguous organ]

- 70 Colectomy or coloproctectomy with resection of contiguous organ(s), NOS (where there is not enough information to code 32, 41, 51, or 61)
Code 70 includes: Any colectomy (partial, hemicolectomy, or total) WITH a resection of any other organs in continuity with the primary site. Other organs may be partially or totally removed. Other organs may include, but are not limited to, oophorectomy, partial proctectomy, rectal mucosectomy, or pelvic exenteration.

[**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]

- 80 Colectomy, NOS

- 90 Surgery, NOS

- 99 **Unknown** if surgery performed; **death certificate ONLY**

Site-Specific Surgery Codes

Rectosigmoid

C199

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

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294)

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 ablation

No specimen sent to pathology from surgical events 10–14

20 **Local tumor excision**, NOS

26 Polypectomy

27 Excisional biopsy

Combination of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

Specimen sent to pathology from surgical events 20–27

30 Wedge or segmental resection; partial proctosigmoidectomy, NOS

31 Plus resection of contiguous organs; example: small bowel, bladder

Procedures coded 30 include, but are not limited to:

Anterior resection

Hartmann operation

Low anterior resection (LAR)

Partial colectomy, NOS

Rectosigmoidectomy, NOS

Sigmoidectomy

40 Pull through WITH sphincter preservation (colo-anal anastomosis)

[**SEER Note:** Procedures coded 40 include but are not limited to: Altemeier's operation, Duhamel's operation, Soave's submucosal resection, Swenson's operation, Turnbull's operation]

50 Total proctectomy

[**SEER Note:** Procedures coded 50 include but are not limited to: Abdominoperineal resection (A & P resection), anterior/posterior resection (A/P resection)/Miles' operation, Rankin's operation]

51 Total colectomy

[**SEER Note:** Removal of the colon from cecum to rectosigmoid or portion of rectum]

55 Total colectomy WITH ileostomy, NOS

56 Ileorectal reconstruction

57 Total colectomy WITH other pouch; example: Koch pouch

60 **Total proctocolectomy**, NOS [combination of 50 and 51]

65 Total proctocolectomy WITH ileostomy, NOS

66 Total proctocolectomy WITH ileostomy and pouch

[**SEER Note:** Removal of the colon from cecum to the rectosigmoid junction including the entire rectum.]

70 Colectomy or proctocolectomy resection in continuity with other organs; pelvic exenteration

[**SEER Notes:** Procedures that may be part of an en bloc resection include, but are not limited to: an oophorectomy and a rectal mucosectomy. Code 70 includes any colectomy (partial, hemicolectomy or total) with an en bloc resection of any other organs. There may be partial or total removal of other organs in continuity with the primary. 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]

80 Colectomy, NOS; Proctectomy, NOS

90 Surgery, NOS

99 **Unknown** if surgery performed; **death certificate ONLY**

Site-Specific Surgery Codes

Rectum

C209

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

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294)

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

- 27 Excisional biopsy
- 26 Polypectomy

Any **combination** of 20 or 26-27 WITH

- 21 Photodynamic therapy (PDT)
- 22 Electrocautery
- 23 Cryosurgery
- 24 Laser ablation
- 25 Laser excision
- 28 Curette and fulguration

[**SEER Note:** Codes 21 to 25 and 28 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, 25 Laser excision, or 28 Curette and fulguration]

Specimen sent to **pathology** from surgical events 20-28

30 Wedge or segmental resection; partial proctectomy, NOS

Procedures coded 30 include, but are not limited to:

- Anterior resection
- Hartmann's operation
- Low anterior resection (LAR)
- Transsacral rectosigmoidectomy

40 Pull through WITH sphincter preservation (colo-anal anastomosis)

[**SEER Note:** Procedures coded 40 include but are not limited to: Altemeier's operation, Duhamel's operation, Soave's submucosal resection, Swenson's operation, Turnbull's operation]

- 50 Total proctectomy
Procedure coded 50 includes, but is not limited to: Abdominoperineal resection (Miles Procedure)

[**SEER Note:** Also called A & P resection, anterior/posterior (A/P) resection/Miles' operation, Rankin's operation]
- 60 Total proctocolectomy, NOS
- 70 Proctectomy or proctocolectomy with resection in continuity with other organs; pelvic exenteration

[**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]
- 80 Proctectomy, NOS
- 90 Surgery, NOS
- 99 **Unknown** if surgery performed; **death certificate ONLY**

Site-Specific Surgery Codes

Anus

C210–C218

(Except for M-9750, 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
 - 15 Thermal ablation

No specimen sent to pathology from surgical events 10–15

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
- 25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

Specimen sent to pathology from surgical events 20–27

[**SEER Note:** Margins of resection may have microscopic involvement]

60 Abdominal perineal resection, NOS (APR; Miles procedure)

- 61 APR and sentinel node excision
- 62 APR and unilateral inguinal lymph node dissection
- 63 APR and bilateral inguinal lymph node dissection

The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item # 1292).

- 90 Surgery, NOS
- 99 **Unknown** if surgery performed; **death certificate ONLY**

Site-Specific Surgery Codes

Liver and Intrahepatic Bile Ducts

C220–C221

(Except for M-9750, 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

15 Alcohol (Percutaneous Ethanol Injection-PEI)

16 Heat-Radio-frequency ablation (RFA)

17 Other (ultrasound, acetic acid)

No specimen sent to pathology from surgical events 10–17

[**SEER Note:** Code 15 Alcohol (Percutaneous Ethanol Injection-PEI) can also be described as an “intratumoral injection of alcohol” or “alcohol ablation”]

20 Wedge or segmental resection, NOS

21 Wedge resection

22 Segmental resection, NOS

23 One

24 Two

25 Three

26 Segmental resection AND local tumor destruction

Specimen sent to pathology from surgical events 20–26

30 Lobectomy, NOS

36 Right lobectomy

37 Left lobectomy

38 Lobectomy AND local tumor destruction

[**SEER Note:** Code 30 also referred to as simple lobectomy]

50 **Extended lobectomy**, NOS (extended: resection of a single lobe plus a segment of another lobe)

51 Right lobectomy

52 Left lobectomy

59 Extended lobectomy AND local tumor destruction

60 Hepatectomy, NOS

61 Total hepatectomy and **transplant**

65 **Excision of a bile duct** (for an intrahepatic bile duct primary only)

66 Excision of a bile duct PLUS partial hepatectomy

75 Bile duct and hepatectomy WITH transplant

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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

Site-Specific Surgery Codes

Pancreas

C250–C259

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

Codes

- 00 None; **no surgery** of primary site; **autopsy ONLY**
- 25 **Local excision** of tumor, NOS
- 30 **Partial pancreatectomy**, NOS; example: distal
- 35 Local or partial pancreatectomy and duodenectomy
 - 36 WITHOUT distal/partial gastrectomy
 - 37 WITH partial gastrectomy (Whipple)
- 40 Total pancreatectomy
- 60 Total pancreatectomy and subtotal gastrectomy or duodenectomy
- 70 Extended pancreatoduodenectomy
- 80 Pancreatectomy, 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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

Site-Specific Surgery Codes**Larynx****C320–C329**

(Except for M-9750, 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

15 Stripping

No specimen sent to **pathology** from surgical events 10–1520 **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

25 Laser excision

28 Stripping

[**SEER Note:** Codes 21 to 25 and 28 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, 25 Laser excision, or 28 Stripping]

Specimen sent to **pathology** from surgical events 20–28

30 Partial excision of the primary site, NOS; subtotal/partial laryngectomy NOS; hemilaryngectomy NOS

31 Vertical laryngectomy

32 Anterior commissure laryngectomy

33 Supraglottic laryngectomy

[**SEER Note:** Vertical laryngectomy: Removal of involved true vocal cord, ipsilateral false vocal cord, intervening ventricle, ipsilateral thyroid and may include removal of the arytenoids.

Supraglottic laryngectomy: Conservative surgery intended to preserve the laryngeal function. Standard procedure involves removal of epiglottis, false vocal cords, aryepiglottic folds, arytenoid cartilages, ventricle, upper one third of thyroid cartilage, thyroid membrane. The true vocal cords and arytenoids remain in place to allow vocalization and deglutition.]

40 Total or radical laryngectomy, NOS

41 Total laryngectomy ONLY

42 Radical laryngectomy ONLY

[**SEER Note:** Radical laryngectomy: Includes removal of adjacent sites. Do not code the removal of adjacent sites in Surgical Procedure of Other Site.]

50 Pharyngolaryngectomy

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- 80 Laryngectomy, 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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

Site-Specific Surgery Codes

Lung

C340–C349

(Except for M-9750, 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 (Used principally for cases diagnosed prior to January 1, 2003)

15 Local tumor destruction, NOS

12 Laser ablation or cryosurgery

13 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

No specimen sent to pathology from surgical events 12-13 and 15

20 Excision or resection of less than one lobe, NOS

23 Excision, NOS

24 Laser excision

25 Bronchial sleeve resection **ONLY**

21 Wedge resection

22 Segmental resection, including lingulectomy

Specimen sent to pathology from surgical events 20–2530 **Resection** of [at least one] **lobe** or **bilobectomy**, but less than the whole lung (partial pneumonectomy, NOS)33 Lobectomy **WITH** mediastinal lymph node dissectionThe lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item # 1292).

45 Lobe or bilobectomy extended, NOS

46 **WITH** chest wall47 **WITH** pericardium48 **WITH** diaphragm

55 Pneumonectomy, NOS

[SEER Note: Code 55 includes complete pneumonectomy, Sleeve pneumonectomy, Standard pneumonectomy, Total pneumonectomy, Resection of whole lung]56 **WITH** mediastinal lymph node dissection (radical pneumonectomy)The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item # 1292).

65 Extended pneumonectomy

66 Extended pneumonectomy plus pleura or diaphragm

- 70 Extended radical pneumonectomy
The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item # 1292).

[**SEER Note:** An extended radical pneumonectomy is a radical pneumonectomy (including removal of mediastinal nodes) and the removal of other tissues or nodes]

- 80 Resection of lung, 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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

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 M-9750, 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**

SEER Program Coding and Staging Manual 2007

Surgery Codes

Skin

C440–C449

(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 ablation

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

[**SEER Notes:** Assign code 11 if there is no pathology specimen. Assign code 21 if there is a pathology specimen. Codes 20-27 include shave and wedge resection]

30 Biopsy of primary tumor followed by a gross excision of the lesion (does not have to be done under the same anesthesia)

31 Shave biopsy followed by a gross excision of the lesion

32 Punch biopsy followed by a gross excision of the lesion

33 Incisional biopsy followed by a gross excision of the lesion

34 Mohs surgery, NOS

35 Mohs with 1-cm margin or less

36 Mohs with more than 1-cm margin

[**SEER Notes:** Codes 30 to 35 include less than a wide excision, less than or equal to 1 cm margin or margins are unknown. If it is stated to be a **wide excision** or **reexcision**, but the **margins are unknown**, code to 30. Code 45 represents a wide excision in which it is known that the margins of excision are greater than 1 cm.]

Surgery Codes

- 45 Wide excision or reexcision of lesion or minor (local) amputation with margins more than 1 cm, NOS. Margins **MUST** be microscopically negative.
- 46 WITH margins more than 1 cm and less than or equal to 2 cm
- 47 WITH margins greater than 2 cm

If the excision does not have microscopically negative margins greater than 1 cm, use the appropriate code, 20-36.

- 60 Major amputation
- 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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

Site-Specific Surgery Codes**Breast****C500–C509**

(Except for M-9750, 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, NOS

No specimen was sent to pathology for surgical events coded 19 (principally for cases diagnosed prior to January 1, 2003)

20 Partial mastectomy, NOS; less than total mastectomy, NOS

21 Partial mastectomy WITH nipple resection

22 Lumpectomy or excisional biopsy

23 Reexcision of the biopsy site for gross or microscopic residual disease

24 Segmental mastectomy (including wedge resection, quadrantectomy, tylectomy)

Procedures coded **20–24** remove **the gross primary tumor** and some of the breast tissue (breast-conserving or preserving). There may be microscopic residual tumor.

30 Subcutaneous mastectomy

A subcutaneous mastectomy is the removal of breast tissue without the nipple and areolar complex or overlying skin

[**SEER Note:** This procedure is rarely used to treat malignancies]

40 **Total (simple) mastectomy, NOS**

41 WITHOUT removal of uninvolved contralateral breast

43 Reconstruction, NOS

44 Tissue

45 Implant

46 Combined (Tissue and implant)

42 WITH removal of uninvolved contralateral breast

47 Reconstruction, NOS

48 Tissue

49 Implant

75 Combined (Tissue and implant)

[**SEER Notes:** If axillary lymph nodes are present in the specimen, code the Surgery of Primary Site field to 51. If there are no axillary lymph nodes present in the specimen, code the Surgery of Primary Site field to 41. Placement of a tissue expander at the time of original surgery means that reconstruction is planned as part of the first course of treatment.]

A total (simple) mastectomy removes all breast tissue, the nipple, and areolar complex. An axillary dissection is not done.

For **single** primaries only, code removal of involved contralateral breast under the data item **Surgical Procedure/Other Site** (NAACCR Item # 1294)

If **contralateral breast** reveals a **second primary**, each breast is abstracted separately. The surgical procedure is coded 41 for the first primary. The surgical code for the contralateral breast is coded to the procedure performed on that site.

- 50 Modified radical mastectomy
- 51 WITHOUT removal of uninvolved contralateral breast
 - 53 Reconstruction, NOS
 - 54 Tissue
 - 55 Implant
 - 56 Combined (Tissue and Implant)
 - 52 WITH removal of uninvolved contralateral breast
 - 57 Reconstruction, NOS
 - 58 Tissue
 - 59 Implant

63 Combined (Tissue and Implant)

Removal of all breast tissue, the nipple, the areolar complex, and variable amounts of breast skin in continuity with the axilla. The specimen may or may not include a portion of the pectoralis major muscle. If contralateral breast reveals a second primary, it is abstracted separately. The surgical procedure is coded 51 for the first primary. The surgical code for the contralateral breast is coded to the procedure performed on that site.

For single primaries only, code removal of involved contralateral breast under the data item Surgical Procedure/Other Site (NAACCR Item # 1294)

[SEER Notes: 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. “Tissue” for reconstruction is defined as human tissue such as muscle (latissimus dorsi or rectus abdominis) or skin in contrast to artificial prostheses (implants). Placement of a tissue expander at the time of original surgery indicates that reconstruction is planned as part of the first course of treatment. Assign code 51 or 52 if a patient has an excisional biopsy and axillary dissection followed by a simple mastectomy during the first course of therapy.]

60 Radical mastectomy, NOS

- 61 WITHOUT removal of uninvolved contralateral breast
- 64 Reconstruction, NOS
- 65 Tissue
- 66 Implant
- 67 Combined (Tissue and Implant)
- 62 WITH removal of uninvolved contralateral breast
- 68 Reconstruction, NOS
- 69 Tissue

73 Implant

74 Combined (Tissue and Implant)

[SEER Notes: Removal of breast tissue, nipple, areolar complex, variable amount of skin, pectoralis minor, pectoralis major. Includes en bloc axillary dissection. Placement of a tissue expander at the time of original surgery indicates that reconstruction is planned as part of the first course of treatment.]

70 Extended radical mastectomy

- 71 WITHOUT removal of uninvolved contralateral breast
- 72 WITH removal of uninvolved contralateral breast

[SEER Note: Removal of breast tissue, nipple, areolar complex, variable amount of skin, pectoralis minor, pectoralis major. Includes removal of internal mammary nodes and en bloc axillary dissection.]

80 Mastectomy, 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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

Site-Specific Surgery Codes

Cervix Uteri

C530–C539

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

[**SEER Note:** For invasive cancers, dilation and curettage is NOT coded as Surgery of Primary Site]

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
 - 15 Loop Electrocautery Excision Procedure (LEEP)
 - 16 Laser ablation
 - 17 Thermal ablation

No specimen sent to **pathology** from surgical events 10–17

- 20 **Local tumor excision, NOS**
 - 26 Excisional biopsy, NOS
 - 27 Cone biopsy
 - 24 Cone biopsy WITH gross excision of lesion
 - 29 Trachelectomy; removal of cervical stump; cervicectomy

Any combination of 20, 24, 26, 27 or 29 WITH

- 21 Electrocautery
- 22 Cryosurgery
- 23 Laser ablation or excision

[**SEER Note:** Codes 21 to 23 above combine 20 Local tumor excision, 24 Cone biopsy WITH gross excision of lesion, 26 Excisional biopsy, NOS, 27 Cone biopsy or 29 Trachelectomy, removal of cervical stump; cervicectomy with 21 Electrocautery, 22 Cryosurgery, 23 Laser ablation or excision]

- 25 Dilatation and curettage; endocervical curettage (for insitu only)
- 28 Loop electrocautery excision procedure (LEEP)

[**SEER Notes:** Margins of resection may have microscopic involvement. Procedures in code 20 include but are not limited to: cryosurgery, electrocautery, excisional biopsy, laser ablation, thermal ablation.]

Specimen sent to **pathology** from surgical events 20–29

- 30 Total hysterectomy (simple, pan-) WITHOUT removal of tubes and ovaries
Total hysterectomy removes both the corpus and cervix uteri and may also include a portion of vaginal cuff
- 40 Total hysterectomy (simple, pan-) WITH removal of tubes and/or ovary
Total hysterectomy removes both the corpus and cervix uteri and may also include a portion of vaginal cuff

- 50 Modified radical or extended hysterectomy; radical hysterectomy; extended radical hysterectomy
 - 51 Modified radical hysterectomy
 - 52 Extended hysterectomy
 - 53 Radical hysterectomy; Wertheim procedure
 - 54 Extended radical hysterectomy

- 60 Hysterectomy, NOS, WITH or WITHOUT removal of tubes and ovaries
 - 61 WITHOUT removal of tubes and ovaries
 - 62 WITH removal of tubes and ovaries

- 70 Pelvic exenteration
 - 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

- 90 Surgery, NOS

- 99 **Unknown** if surgery performed; **death certificate ONLY**

Site-Specific Surgery Codes

Corpus Uteri

C540–C559

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

[**SEER Note:** For invasive cancers, dilation and curettage is NOT coded as Surgery of Primary Site]

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)

10 Local tumor destruction, NOS

11 Photodynamic therapy (PDT)

12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

13 Cryosurgery

14 Laser

15 Loop Electrocautery Excision Procedure (LEEP)

16 Thermal ablation

No specimen sent to pathology from surgical events 10–16

20 Local tumor excision, NOS; simple excision, NOS

24 Excisional biopsy

25 Polypectomy

26 Myomectomy

Any combination of 20 or 24–26 WITH

21 Electrocautery

22 Cryosurgery

23 Laser ablation or excision

[**SEER Note:** Codes 21 to 23 above combine 20 Local tumor excision, 24 Excisional biopsy, 25 Polypectomy, or 26 Myomectomy with 21 Electrocautery, 22 Cryosurgery or 23 Laser ablation or excision]

Specimen sent to pathology from surgical events 20–26

[**SEER Note:** Margins of resection may have microscopic involvement]

30 **Subtotal hysterectomy/supracervical hysterectomy/fundectomy** WITH or WITHOUT removal of tube(s) and ovary(ies)

31 WITHOUT tube(s) and ovary(ies)

32 WITH tube(s) and ovary(ies)

[**SEER Note:** For these procedures, the cervix is left in place]

- 40 Total hysterectomy (simple, pan-) WITHOUT removal of tube(s) and ovary(ies)
Removes both the corpus and cervix uteri. It may also include a portion of the vaginal cuff.
- 50 Total hysterectomy (simple, pan-) WITH removal of tube(s) and/or ovary(ies)
Removes both the corpus and cervix uteri. It may also include a portion of the vaginal cuff.
- 60 **Modified radical or extended** hysterectomy; radical hysterectomy; **extended radical** hysterectomy
 61 Modified radical hysterectomy
 62 Extended hysterectomy
 63 Radical hysterectomy; Wertheim procedure
 64 Extended radical hysterectomy
 [**SEER Note:** Use code 63 for “Type III” hysterectomy]
- 65 **Hysterectomy, NOS, WITH or WITHOUT** removal of tube(s) and ovary(ies)
 66 WITHOUT removal of tube(s) and ovary(ies)
 67 WITH removal of tube(s) and ovary(ies)
- 75 Pelvic exenteration
 76 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]
- 77 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]
- 78 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]
- 79 Extended exenteration
 Includes pelvic blood vessels or bony pelvis
- 90 Surgery, NOS
- 99 **Unknown** if surgery performed; **death certificate ONLY**

Site-Specific Surgery Codes**Ovary****C569**

(Except for M-9750, 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

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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

Site-Specific Surgery Codes**Prostate****C619**

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

Do not code an orchiectomy in this field. For prostate primaries, orchiectomies are coded in the data item "Hematologic Transplant and Endocrine Procedures" (NAACCR Item # 3250).

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

18 Local tumor destruction or excision, NOS

19 Transurethral resection (**TURP**), NOS

Unknown whether a specimen was sent to **pathology** for surgical events coded 18 or 19 (principally for cases diagnosed prior to January 1, 2003)

10 **Local tumor destruction**, [or excision] NOS

14 Cryoprostatectomy

15 Laser ablation

16 Hyperthermia

17 Other method of local tumor destruction

No specimen sent to pathology from surgical events 10–17

[**SEER Notes:** Code Transurethral Microwave Thermotherapy (TUMT) as 16

Code High Intensity Focused Ultrasonography (HIFU) as 17

Code Transurethral Needle Ablation (TUNA) as 17]

20 **Local tumor excision**, NOS

21 Transurethral resection (**TURP**), NOS

22 **TURP**—cancer is incidental finding during surgery for benign disease

23 **TURP**—patient has suspected/known cancer

Any combination of 20–23 **WITH**

24 Cryosurgery

25 Laser

26 Hyperthermia

[**SEER Note:** Codes 24 to 26 above combine 20 Local tumor excision, NOS, 21 **TURP**, NOS, 22 **TURP** incidental or 23 **TURP** suspected/known cancer with 24 Cryosurgery, 25 Laser or 26 Hyperthermia]

Specimen sent to pathology from surgical events 20–26

30 **Subtotal, segmental, or simple prostatectomy**, which may leave all or part of the capsule intact

50 **Radical prostatectomy**, NOS; **total prostatectomy**, NOS

Excised prostate, prostatic capsule, ejaculatory ducts, seminal vesicle(s) and may include a narrow cuff of bladder neck

70 **Prostatectomy WITH resection in continuity with other organs; pelvic exenteration**

Surgeries coded 70 are any prostatectomy WITH resection in continuity with any other organs. The other organs may be partially or totally removed. Procedures may include, but are not limited to, cystoprostatectomy, radical cystectomy, and prostatectomy.

[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]

80 Prostatectomy, NOS

90 Surgery, NOS

99 **Unknown** if surgery performed; **death certificate ONLY**

Site-Specific Surgery Codes

Testis

C620–C629

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

Codes

- 00 None; **no surgery** of primary site; **autopsy** ONLY

- 12 Local tumor destruction, NOS
 No specimen sent to **pathology** from surgical event 12

- 20 **Local** or **partial** excision of **testicle**
 Specimen sent to **pathology** from surgical event 20

- 30 Excision of testicle, WITHOUT cord
 [**SEER Note:** Orchiectomy not including spermatic cord]

- 40 Excision of testicle WITH cord or cord not mentioned (radical orchiectomy)
 [**SEER Note:** Orchiectomy with or without spermatic cord]

- 80 **Orchiectomy, NOS** (unspecified whether partial or total testicle removed)

- 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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

Site-Specific Surgery Codes

Kidney, Renal Pelvis, and Ureter

Kidney C649, Renal Pelvis C659, Ureter C669

(Except for M-9750, 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
 - 15 Thermal ablation

No specimen sent to **pathology** from this surgical event 10–1520 **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
- 25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

Specimen sent to **pathology** from surgical events 20–2730 **Partial or subtotal nephrectomy** (kidney or renal pelvis) or **partial ureterectomy** (ureter)

Procedures coded 30 include, but are not limited to:

- Segmental resection
- Wedge resection

40 Complete/total/simple nephrectomy—for kidney parenchyma
Nephroureterectomy

Includes bladder cuff for renal pelvis or ureter

50 Radical nephrectomy

May include removal of a portion of vena cava, adrenal gland(s), Gerota's fascia, perinephric fat, or partial/total ureter

70 **Any nephrectomy** (simple, subtotal, complete, partial, total, radical) in continuity with the resection of other organ(s) (colon, bladder)

The other organs, such as colon or bladder, may be partially or totally removed

[**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]

- 80 Nephrectomy, NOS
 Ureterectomy, NOS
- 90 Surgery, NOS
- 99 **Unknown** if surgery performed; **death certificate** ONLY

Site-Specific Surgery Codes**Bladder****C670–C679**

(Except for M-9750, 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

15 Intravesical therapy

16 Bacillus Calmette-Guerin (BCG) or other immunotherapy

No specimen sent to **pathology** from surgical events 10–16**[SEER Note:** Code BCG as both surgery and immunotherapy]20 Local tumor **excision**, NOS

26 Polypectomy

27 Excisional biopsy

[SEER Note: Code TURB as 27]

Combination of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

[SEER Note: Codes 21 to 25 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]Specimen sent to **pathology** from surgical events 20–27

30 Partial cystectomy

50 Simple/total/complete cystectomy

60 Radical cystectomy (male only)

[SEER Note: This code is used only for men. It involves removal of bladder and prostate, with or without urethrectomy. The procedure is also called cystoprostatectomy. If a radical cystectomy is the procedure for a woman, use code 71.]

61 Radical cystectomy PLUS ileal conduit

62 Radical cystectomy PLUS continent reservoir or pouch, NOS

63 Radical cystectomy PLUS abdominal pouch (cutaneous)

64 Radical cystectomy PLUS insitu pouch (orthotopic)

70 Pelvic exenteration, NOS

71 Radical cystectomy (**female** only); anterior exenteration

A radical cystectomy in a female includes removal of bladder, uterus, ovaries, entire vaginal wall, and entire urethra

72 Posterior exenteration

73 Total exenteration

Includes removal of all pelvic contents and pelvic lymph nodes

The lymph node dissection should also be coded under Scope of Regional Lymph Node Surgery (NAACCR item # 1292).

74 Extended exenteration

Includes pelvic blood vessels or bony pelvis

80 **Cystectomy, 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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

Surgery Codes

BRAIN [and other parts of central nervous system]

Meninges C700-C709, Brain C710-C719,

Spinal Cord, Cranial Nerves and Other Parts of Central Nervous System C720-C729

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

Do not code laminectomies for spinal cord primaries

Codes

00 None; no surgery of primary site; autopsy ONLY

10 Tumor destruction, NOS

[SEER Note: Local tumor destruction, NOS]

No specimen sent to pathology from surgical event 10

Do not record stereotactic radiosurgery as tumor destruction. It should be recorded in the radiation treatment item.

20 Local excision (biopsy) of lesion or mass

Specimen sent to pathology from surgical event 20

40 Partial resection

[SEER Note: Partial resection, NOS]

55 Gross total resection

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

Please refer to "Clarification" issued by CoC

CoC Flash June 2008 Issue:

Clarification of Primary Brain Surgery Codes in FORDS

CoC has taken several steps recently to correct a widespread misinterpretation of the FORDS Primary Brain Surgery codes. The problematic codes are reproduced below with clarifications added in capital letters. Registries that have not applied the codes correctly or consistently are advised to review their brain surgery cases diagnosed since FORDS was implemented in 2003 with primary site surgery codes 40 or 55, and make any corrections necessary.

20	Local excision (biopsy) of lesion or mass. USE THIS CODE TO DESCRIBE EXCISION (REMOVAL) OF THE PRIMARY TUMOR, OR "DEBULKING" (LESS THAN FULL REMOVAL OF THE TUMOR). MOST PRIMARY BRAIN SURGERY IS CODE 20.
40	Partial resection. USE THIS CODE TO DESCRIBE PARTIAL RESECTION OF A LOBE.
55	Gross total resection. USE THIS CODE TO DESCRIBE GROSS TOTAL RESECTION OF A LOBE. THIS IS A LESS COMMON FORM OF SURGICAL TREATMENT.

Site-Specific Surgery Codes

Thyroid Gland

C739

(Except for M-9750, 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 M-9750, 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

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 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**

Surgery Codes

Lymph Nodes

C770–C779

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

Note: For Surgery Codes: see site-specific scheme for primary sites other than C770-C779

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 to 19 (principally for cases diagnosed prior to January 1, 2003)

15 Local tumor destruction, NOS

No specimen sent to pathology from surgical event 15

25 Local tumor excision, NOS

[**SEER Note:** The use of code 25 in RX SUMM—SURG PRIM SITE [1290] is for a primary in one and only one lymph node in which the single involved lymph node is removed by an excisional biopsy only. CDC-NPCR, CoC, and SEER are in agreement on the wording of code 25:

Local Tumor Excision, NOS

Less than a full chain, includes an excisional biopsy of a single lymph node.]

30 Lymph node dissection, NOS

31 One chain

32 Two or more chains

40 Lymph node dissection, NOS PLUS splenectomy

41 One chain

42 Two or more chains

50 Lymph node dissection, NOS and partial/total removal of adjacent organ(s)

51 One chain

52 Two or more chains

60 Lymph node dissection, NOS and partial/total removal of adjacent organ(s) PLUS splenectomy (Includes staging laparotomy for lymphoma)

61 One chain

62 Two or more chains

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

[**SEER Note:** Lymph node chains are subsites of lymph node regions. Use information pertaining to lymph node chains to code lymph node surgery; use lymph node region information to code stage.]

SEER Program Coding and Staging Manual 2007

Surgery Codes

Lymphoma

Note: For Surgery Codes: See site-specific scheme for primary sites other than C770-C779

Site-Specific Surgery Codes

Hematopoietic/Reticuloendothelial/

Immunoproliferative/Myeloproliferative Disease

C420, C421, C423, C424 (with any histology)

or

**M-9750, 9760–9764, 9800–9820, 9826, 9831–9920, 9931–9964,
9980–9989** (with any site)

Codes

- 98 **All** hematopoietic/reticuloendothelial/immunoproliferative/myeloproliferative disease **sites** and/or **histologies**,
WITH or WITHOUT surgical treatment
*Surgical procedures for hematopoietic, reticuloendothelial, immunoproliferative, myeloproliferative
primaries are to be recorded using the data item Surgical Procedure/Other Site (NAACCR Item #
1294)*

[**SEER Note:** 99 Death certificate only]

Site-Specific Surgery Codes

Unknown And Ill-Defined Primary Sites

C760–C768, C809

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

Codes

- 98 **All unknown and ill-defined disease sites, WITH or WITHOUT surgical treatment**
Surgical procedures for unknown and ill-defined primaries are to be recorded using the data item Surgical Procedure/Other Site (NAACCR Item #1294)

[**SEER Note:** 99 Death certificate only]

Site-Specific Surgery Codes

Spleen

C42.2

(Except for M-9750, 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, NOS
- 21 Partial splenectomy
- 22 Total splenectomy
- 80 Splenectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

1998-2003

TREATMENT CODES

REASON FOR NO CANCER-DIRECTED SURGERY

Section V, Field 02.G

Reason for No Cancer-Directed Surgery

Code

- 0 Cancer-directed surgery performed
- 1 Cancer-directed surgery not recommended
- 2 Contraindicated due to other conditions; Autopsy Only case
- 6 Unknown reason for no cancer-directed surgery
- 7 Patient or patient's guardian refused
- 8 Recommended, unknown if done
- 9 Unknown if cancer-directed surgery performed; Death Certificate Only case

If the site-specific surgery is coded, then code the Reason for No Cancer-Directed Surgery as '0.'

Use code '7' if surgery was one of the treatment options and the patient or the physician opted for another modality.

RADIATION

Section V, Field 03

Radiation

Code

- 0 None
- 1 Beam radiation
- 2 Radioactive implants
- 3 Radioisotopes
- 4 Combination of 1 with 2 or 3
- 5 Radiation, NOS – method or source not specified
- 7 Patient or patient's guardian refused radiation therapy
- 8 Radiation recommended, unknown if administered
- 9 Unknown

| Record any type of radiation therapy in this field regardless of source, field being treated, or intent of
| treatment (curative or palliative). For cases diagnosed 1/1/1998 and after, include prophylactic radiation to
| the brain and/or central nervous system in this field.

Code '1' for beam radiation directed to cancer tissue regardless of source of radiation. Included is treatment via:

- Xray
- Cobalt
- Linear accelerator
- Neutron beam
- Betatron
- Spray radiation
- Stereotactic radiosurgery such as gamma knife and proton beam.

Code '2' for all interstitial implants, molds, seeds, needles, or intracavitary applicators of radioactive material such as cesium, radium, radon, or radioactive gold.

Code '3' for internal use of radioactive isotopes, such as I-131 or P-32, when given orally, intracavitarily, or by intravenous injection.

| For lung and leukemia cases diagnosed before 1998 only, code radiation to the brain and/or central nervous
| system in the Radiation to the Brain and/or Central Nervous System field. For lung and leukemia diagnosed
| in 1998 and after, code radiation to the brain and CNS as radiation in this field.

RADIATION TO THE BRAIN AND/OR CENTRAL NERVOUS SYSTEM

Section V, Field 04

Radiation to the Brain and/or Central Nervous System

- | This field is to be coded as 9 for all cases diagnosed in 1998 and thereafter.
- | This field is being maintained for historical purposes. Effective with cases diagnosed January 1, 1998, and after, ALL radiation to the brain and/or central nervous system is to be coded to Radiation (Section V, Field 03), regardless of the primary site.
- | For cases diagnosed before 1998, information contained in this field should be recoded to the Radiation field.
- | *For Lung and Leukemia Cases Only (before 1998)*

Code

- 0 No radiation to the brain and/or central nervous system
- 1 Radiation
- 7 Patient or patient's guardian refused
- 8 Radiation recommended, unknown if administered
- 9 Unknown

For All Other Cases

- 9 Not applicable

- | For lung and leukemia diagnoses only (before 1998)
 - 1. code '0' for all "Autopsy Only" cases
 - 2. code '9' for all "Death Certificate Only" cases
 - 3. code '0' - '9' for all other cases

Radiation should be coded whether or not there are known metastases to the brain or central nervous system.

For all sites except lung and leukemia diagnoses, code '9.'

RADIATION SEQUENCE WITH SURGERY

Section V, Field 05

Radiation Sequence with Surgery

Code

- 0 No radiation and/or cancer-directed surgery
- 2 Radiation before surgery
- 3 Radiation after surgery
- 4 Radiation both before and after surgery
- 5 Intraoperative radiation
- 6 Intraoperative radiation with other radiation given before or after surgery
- 9 Sequence unknown, but both surgery and radiation were given

If first course of treatment consisted of both cancer-directed surgery and radiation, use codes '2' - '9.'

For cases diagnosed after 1/1/98, use codes '2' - '9' for a case with Radiation codes '1' - '5' AND ANY of the following:

Surgery of Primary Site codes '10' - '90'

Scope of Regional Lymph Node Surgery code '1' - '8.'

Surgery of Other Regional Site(s), Distant Site(s), or Distant Lymph Node(s) codes '1' - '8.'

Use code '0' in this field if the Radiation code is '0' or '7' - '9' and/or there is no cancer directed surgery performed. No cancer-directed surgery is defined as Surgery of Primary Site code '00' or '99' AND Scope of Regional Lymph Node Surgery code '0' or '9' AND Surgery of Other Regional Site(s), Distant Site(s), or Distant Lymph Node(s) code '0' or '9.'

For cases diagnosed before 1998, radiation coded in either of the fields, Radiation OR Radiation to the Brain and/or Central Nervous System, is to be considered.

For cases where surgery was not cancer-directed, code Radiation Sequence with Surgery as '0' regardless of whether radiation or radiation to brain was administered. If radiation was not given or if radiation was refused, code Radiation Sequence with Surgery as '0' regardless of the type of surgery performed.

CHEMOTHERAPY

Section V, Field 06

Chemotherapy

Code

- 0 None
- 1 Chemotherapy, NOS
- 2 Chemotherapy, single agent
- 3 Chemotherapy, multiple agents (combination regimen)
- 7 Patient or patient's guardian refused chemotherapy
- 8 Chemotherapy recommended, unknown if administered
- 9 Unknown

Code any chemical which is administered to treat cancer tissue and which is not considered to achieve its effect through change of the hormone balance. Only the agent, not the method of administration, is to be considered in coding.

Two or more single agents given at separate times during the first course of cancer-directed therapy are considered a combination regimen.

Codes '1' - '3' have priority over codes '0,' '7' - '9.'

In the range '1' - '3,' the higher code has priority. Combination chemotherapy containing prednisone (a hormone) should be coded in this field by the number of chemotherapy agents in the combination. For example, if the patient received alkeran and prednisone, the chemotherapy field would be coded to '2' and the hormone therapy field would be coded to '1.' If the regimen contained oncovin, cyclophosphamide and prednisone, the chemotherapy field would be coded to '3' and the hormone field would be coded to '1.'

Code '8' means that a physician recommended chemotherapy but there is no indication in the record that the patient started the treatment.

Code '9' means that there is no indication in the record that chemotherapy was recommended or started.

Refer to *Self-Instructional Manual for Tumor Registrars: Book 8 - Antineoplastic Drugs* if in doubt as to which agents to include.

HORMONE THERAPY

Section V, Field 07

Hormone Therapy

Code

- 0 None
- 1 Hormones (including NOS and antihormones)
- 2 Endocrine surgery and/or endocrine radiation (if cancer is of another site)
- 3 Combination of 1 and 2
- 7 Patient or patient's guardian refused hormonal therapy
- 8 Hormonal therapy recommended, unknown if administered
- 9 Unknown

| This field was formerly called Endocrine (Hormone/Steroid) Therapy.

Code any therapy which is administered to treat cancer tissue and which is considered to achieve its effect on cancer tissue through change of the hormone balance. Included are the administration of hormones, agents acting via hormonal mechanisms, antihormones, or steroids, surgery for hormonal effect on cancer tissue, and radiation for hormonal effect on cancer tissue.

Hormones, agents acting via hormonal mechanisms, and antihormones (cancer-directed only) are to be coded for all sites (primary and metastatic).

Refer to *Self-Instructional Manual for Tumor Registrars: Book 8 - Antineoplastic Drugs* if in doubt as to which drugs to include. For example: leuprolide and flutamide are both agents acting via hormonal mechanisms and should be coded as hormones.

Adrenocorticotrophic hormones (cancer-directed only) are coded for leukemias, lymphomas, multiple myelomas, breast, prostate. Exception: Prednisone given in combination with chemotherapy, e.g., MOPP or COPP, is coded as hormone therapy for any site unless it is specified that prednisone was given for other reasons.

Endocrine surgery or radiation is to be coded for breast and prostate only:

Breast:	Prostate:
oophorectomy	orchiectomy
adrenalectomy	adrenalectomy
hypophysectomy	hypophysectomy

Both glands or the remaining gland of paired glands must be removed or irradiated for the procedure to be considered endocrine surgery or radiation.

Code '8' means that a physician recommended hormone therapy but there is no indication in the record that the patient started the treatment.

Code '9' means that there is no indication in the record that hormone therapy was recommended or started.

IMMUNOTHERAPY

Section V, Field 08

Immunotherapy

Code

- 0 None
- 1 Biological response modifier
- 2 Bone marrow transplant - autologous
- 3 Bone marrow transplant - allogenic
- 4 Bone marrow transplant, NOS
- 5 Stem cell transplant
- 6 Combination of 1 plus 2, 3, 4 or 5
- 7 Patient or patient's guardian refused biological response modifier
- 8 Biological response modifier recommended, unknown if administered
- 9 Unknown

| This field was formerly called "Biological Response Modifiers."

| 'Biological response modifier' is a generic term which covers all chemical or biological agents that alter the immune system or change the host response (defense mechanism) to the cancer. Examples of biological response modifiers (immunotherapy) are:

	Allogeneic cells	Interleukin	Pyran copolymer
	BCG	LAK cells	Thymosin
	C-Parvum	Levamisole	Vaccine therapy
	Interferon	MVE2	Virus Therapy

Codes '2' through '6' are effective with cases diagnosed 1/1/96 and after. Code '5' includes both autologous and allogenic transplants.

Code '8' means that a physician recommended immunotherapy but there is no indication in the record that the patient started the treatment.

Code '9' means that there is no indication in the record that immunotherapy was recommended or started.

Refer to *Self-Instructional Manual for Tumor Registrars: Book 8 - Antineoplastic Drugs* if in doubt as to which drugs to include.

OTHER CANCER-DIRECTED THERAPY

Section V, Field 09

Other Cancer-Directed Therapy

Code

- 0 No other cancer-directed therapy except as coded elsewhere
- 1 Other cancer-directed therapy
- 2 Other experimental cancer-directed therapy (not included elsewhere)
- 3 Double-blind clinical trial, code not yet broken
- 6 Unproven therapy (including laetrile, krebiozen, etc.)
- 7 Patient or patient's guardian refused therapy which would have been coded 1-3 above
- 8 Other cancer-directed therapy recommended, unknown if administered
- 9 Unknown

Code '1,' Other Cancer-Directed Therapy includes any and all cancer-directed therapy not appropriately assigned to the other specific treatment codes. Examples are hyperbaric oxygen (as adjunct to definitive treatment), hyperthermia, PUVA (psoralen and ultraviolet A light) and arterial block for renal cell carcinoma.

Code '2,' includes any experimental or newly developed method of treatment differing greatly from proven types of cancer therapy.

Code '3,' double-blind clinical trial information: After the code is broken, review and recode therapy, as necessary, according to the treatment actually administered.

Do not code ancillary drugs in this field.

Use code '6' for unconventional methods (for example, laetrile) whether they are given alone or in combination with cancer-directed treatments. Use code '6' for alternative and complementary therapies ONLY IF the patient receives no other type of treatment (for example, do not code megavitamins if the patient also received cancer-directed surgery). Code '6' includes *but is not limited to*

Unconventional Methods

Cancell
Carnivora
Glyoxylide
Isador
Koch synthetic antitoxins
Krebiozen
Laetrile
Malonide
Parabenzoquinone

Alternative and Complementary Therapies

Alternative Systems
Acupuncture
Ayurveda
Environmental medicine
Homeopathic medicine
Natural Products
Native American, Latin American, or
traditional Oriental medicine

Reference: NCI CancerNet articles on
unconventional methods

Bioelectromagnetic Applications
Blue light treatment
Electroacupuncture
Magnetoresonance spectroscopy

Diet, Nutrition, Lifestyle
Changes in lifestyle
Diet
Gerson Therapy
Macrobiotics
Megavitamins
Nutritional Supplements

OTHER CANCER-DIRECTED THERAPY, (cont.)

Section V, Field 09

Alternative and Complementary Therapies, continued

Herbal Medicine

- Ginger
- Ginkgo Biloba extract
- Ginseng root

Manual Healing

- Acupressure
- Biofield Therapeutics
- Massage therapy
- Reflexology
- Zone therapy

Mind/Body Control

- Biofeedback
- Humor therapy
- Meditation
- Relaxation techniques
- Yoga

Pharmacological and Biological Treatments

- Anti-oxidizing agents
- Cell treatment
- Metabolic therapy
- Oxidizing agents

Reference: National Institutes of Health Office of Alternative Medicine

Code '8' means that a physician recommended other cancer-directed therapy but there is no indication in the record that the patient started the treatment.

Code '9' means that there is no indication in the record that other cancer-directed therapy was recommended or started.

FIELD NOT USED

Section V, Field 10

Blanks should be submitted in this field.

1998-2002

Site-Specific Surgery Codes

APPENDIX C

SITE-SPECIFIC SURGERY CODES

APPENDIX C
SITE-SPECIFIC SURGERY CODES

ORAL CAVITY

**Lip C00.0-C00.9, Base of Tongue C01.9, Other Parts of Tongue C02.0-C02.9,
Gum C03.0-C03.9, Floor of Mouth C04.0-C04.9, Palate C05.0-C05.9,
Other Parts of Mouth C06.0-C06.9**

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
- 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 this surgical event.

Procedures in codes 20-27 include, but are not limited to:

Shave Wedge resection

- 20 Local tumor excision, NOS (**WITH PATHOLOGY SPECIMEN**)
- 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy

Specimen sent to pathology from this surgical event.
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Procedures in code 30 include, but are not limited to:

Hemiglossectomy Partial glossectomy
--

- 30 Wide excision, NOS

APPENDIX C
SITE-SPECIFIC SURGERY CODES

ORAL CAVITY

Lip C00.0-C00.9, Base of Tongue C01.9, Other Parts of Tongue C02.0-C02.9,
Gum C03.0-C03.9, Floor of Mouth C04.0-C04.9, Palate C05.0-C05.9,
Other Parts of Mouth C06.0-C06.9

SURGERY OF PRIMARY SITE, continued

Procedures in codes 40-43 include, but are not limited to:

Radical glossectomy

- 40 Radical excision of tumor, NOS
- 41 Radical excision of tumor ONLY
- 42 Combination of 41 WITH en bloc mandibulectomy (marginal, segmental, hemi-, or total)
- 43 Combination of 41 WITH en bloc maxillectomy (partial, subtotal, total)

- 90 Surgery, NOS

- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

Regional cervical lymph nodes are:

Caudal jugular (deep cervical) Caudal jugular (deep cervical) Dorsal cervical (superficial cervical) Medial jugular (deep cervical) Occipital Paratracheal (anterior cervical) Prelaryngeal (anterior cervical) Retroauricular (mastoid, posterior auricular) Submandibular (submaxillary) Submental Supraclavicular
--

codes continue on next page

APPENDIX C
SITE-SPECIFIC SURGERY CODES

ORAL CAVITY

**Lip C00.0-C00.9, Base of Tongue C01.9, Other Parts of Tongue C02.0-C02.9,
Gum C03.0-C03.9, Floor of Mouth C04.0-C04.9, Palate C05.0-C05.9,
Other Parts of Mouth C06.0-C06.9**

SCOPE OF REGIONAL LYMPH NODE SURGERY, continued

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
 - 2 Neck dissection, NOS
 - 3 Selective, limited; nodal sampling; "berry picking"
 - 4 Modified/modified radical
 - 5 Radical
- 9 Unknown; not stated; death certificate ONLY

Terminology of neck dissection (Robbins et al. 1991):

A radical neck dissection includes the removal of all ipsilateral cervical lymph node groups, i.e., lymph nodes from levels I through V (submental, submandibular, cranial jugular, medial jugular, caudal jugular, dorsal cervical nodes along the accessory nerve, and supraclavicular), and removal of the spinal accessory nerve, internal jugular vein and sternocleidomastoid muscle.

In a modified radical neck dissection the same lymph nodes are removed as in a radical neck dissection; however, one or more non-lymphatic structures are preserved.

A selective neck dissection is a neck dissection with preservation of one or more lymph node groups routinely removed in radical neck dissection.

APPENDIX C
SITE-SPECIFIC SURGERY CODES

ORAL CAVITY

Lip C00.0-C00.9, Base of Tongue C01.9, Other Parts of Tongue C02.0-C02.9,
Gum C03.0-C03.9, Floor of Mouth C04.0-C04.9, Palate C05.0-C05.9,
Other Parts of Mouth C06.0-C06.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
- 2 Other regional site(s)
 - 3 Mandibulectomy (marginal, segmental, hemi-, or total)
 - 4 Maxillectomy (partial, subtotal, or total)

Code a mandibulectomy or a maxillectomy in this field only if the procedure is NOT a part of an en bloc resection of the primary tumor. If the mandibulectomy or maxillectomy IS a part of an en bloc resection of the primary tumor, code under "Surgery of Primary Site."

- 5 Distant lymph node(s)
- 6 Distant site(s)
- 7 Combination of 6 WITH 2, 3, 4, or 5
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

PAROTID AND OTHER UNSPECIFIED GLANDS
Parotid Gland C07.9, Major Salivary Glands C08.0-C08.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
 - 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 this surgical event.

- 20 Local tumor excision, NOS (**WITH PATHOLOGY SPECIMEN**)
 - 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy

Specimen sent to pathology from this surgical event.
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- 30 Less than total parotidectomy, NOS
 - 31 Facial nerve spared
 - 32 Facial nerve sacrificed
- 33 Superficial lobe ONLY
 - 34 Facial nerve spared
 - 35 Facial nerve sacrificed
- 36 Deep lobe (**WITH or WITHOUT superficial lobe**)
 - 37 Facial nerve spared
 - 38 Facial nerve sacrificed
- 40 Total parotidectomy, NOS
 - 41 Facial nerve spared
 - 42 Facial nerve sacrificed
- 50 Radical parotidectomy, NOS
 - 51 WITHOUT removal of temporal bone
 - 52 WITH removal of temporal bone

80 Parotidectomy, NOS

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

PAROTID AND OTHER UNSPECIFIED GLANDS
Parotid Gland C07.9, Major Salivary Glands C08.0-C08.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

Regional cervical lymph nodes are:

Buccal (facial)
Caudal jugular (deep cervical)
Cranial jugular (deep cervical)
Dorsal cervical (superficial cervical)
Medial jugular (deep cervical)
Occipital
Paratracheal (anterior cervical)
Parotid
Prelaryngeal (anterior cervical)
Retroauricular (mastoid, posterior auricular)
Retropharyngeal
Submandibular (submaxillary)
Submental
Supraclavicular

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
 - 2 Neck dissection, NOS
 - 3 Selective, limited; nodal sampling; "berry picking"
 - 4 Modified/modified radical
 - 5 Radical
- 9 Unknown; not stated; death certificate ONLY

Terminology of neck dissection (Robbins et al. 1991):

A radical neck dissection includes the removal of all ipsilateral cervical lymph node groups, i.e., lymph nodes from levels I through V (submental, submandibular, cranial jugular, medial jugular, caudal jugular, dorsal cervical nodes along the accessory nerve, and supraclavicular), and removal of the spinal accessory nerve, internal jugular vein and sternocleidomastoid muscle.

In a modified radical neck dissection, the same lymph nodes are removed as in a radical neck dissection; however, one or more non-lymphatic structures are preserved.

A selective neck dissection is a neck dissection with preservation of one or more lymph node groups routinely removed in radical neck dissection.

APPENDIX C
SITE-SPECIFIC SURGERY CODES

PAROTID AND OTHER UNSPECIFIED GLANDS
Parotid Gland C07.9, Major Salivary Glands C08.0-C08.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional sites
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

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APPENDIX C
SITE-SPECIFIC SURGERY CODES

PHARYNX

Tonsil C09.0-C09.9, Oropharynx C10.0-C10.9, Nasopharynx C11.0-C11.9
Pyriiform Sinus C12.9, Hypopharynx C13.0-C13.9, Pharynx C14.0

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
- 11 Photodynamic therapy (PDT)
 - 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
 - 13 Cryosurgery
 - 14 Laser
 - 15 Stripping
- No specimen sent to pathology from this surgical event.
- 20 Local tumor excision, NOS (**WITH PATHOLOGY SPECIMEN**)
- 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy
- Specimen sent to pathology from this surgical event.
- 30 Pharyngectomy, NOS
- 31 Limited/partial pharyngectomy
 - 32 Total pharyngectomy
- 40 Pharyngectomy WITH mandibulectomy (marginal, segmental, hemi-, and/or laryngectomy), NOS
- 41 WITH laryngectomy (laryngopharyngectomy)
 - 42 WITH mandibulectomy
 - 43 WITH both 41 and 42
- 50 Radical pharyngectomy (includes total mandibular resection), NOS
- 51 WITHOUT laryngectomy
 - 52 WITH laryngectomy
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

PHARYNX

Tonsil C09.0-C09.9, Oropharynx C10.0-C10.9, Nasopharynx C11.0-C11.9
Pyriiform Sinus C12.9, Hypopharynx C13.0-C13.9, Pharynx C14.0

SCOPE OF REGIONAL LYMPH NODE SURGERY

Regional cervical lymph nodes are:
Buccal (facial) Caudal jugular (deep cervical) Cranial jugular (deep cervical) Dorsal cervical (superficial cervical) Medial jugular (deep cervical) Occipital Paratracheal (anterior cervical) Parotid Prelaryngeal (anterior cervical) Retroauricular (mastoid, posterior auricular) Retropharyngeal Submandibular (submaxillary) Submental Supraclavicular

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
 - 2 Neck dissection, NOS
 - 3 Selective, limited; nodal sampling; "berry picking"
 - 4 Modified/modified radical
 - 5 Radical
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

PHARYNX

Tonsil C09.0-C09.9, Oropharynx C10.0-C10.9, Nasopharynx C11.0-C11.9

Pyriform Sinus C12.9, Hypopharynx C13.0-C13.9, Pharynx C14.0

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Laryngectomy ONLY
 - 3 Mandibulectomy ONLY (marginal, segmental, or hemi-)
 - 4 Combination of 2 and 3
 - 5 Removal of other regional sites
 - 6 Combination of 5 with 2-4
 - 7 Removal of other distant sites(s) or distant lymph node(s)
 - 8 Combination of 7 WITH any of 2-6
 - 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

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APPENDIX C
SITE-SPECIFIC SURGERY CODES

ESOPHAGUS
C15.0-C15.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
- 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 this surgical event.

- 20 Local tumor excision, NOS (**WITH PATHOLOGY SPECIMEN**)
- 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy

Specimen sent to pathology from this surgical event.
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- 30 Partial esophagectomy
- 40 Total esophagectomy
- 50 Partial esophagectomy WITH laryngectomy and/or gastrectomy, NOS
- 51 WITH laryngectomy
 - 52 WITH gastrectomy, NOS
 - 53 Partial gastrectomy
 - 54 Total gastrectomy
 - 55 Combination of 51 WITH any of 52-54
- 60 Total esophagectomy, NOS WITH laryngectomy and/or gastrectomy, NOS
- 61 WITH laryngectomy
 - 62 WITH gastrectomy, NOS
 - 63 Partial gastrectomy
 - 64 Total gastrectomy
 - 65 Combination of 61 WITH any of 62-64
- 70 Esophagectomy, NOS WITH pharyngectomy and laryngectomy

APPENDIX C
SITE-SPECIFIC SURGERY CODES

ESOPHAGUS
C15.0-C15.9

SURGERY OF PRIMARY SITE, continued

- 80 Esophagectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

Regional lymph nodes are different for each anatomical subsite. The following list identifies nodes classified as regional for each subsite:	
Cervical esophagus:	Cervical, NOS Internal jugular Periesophageal Scalene Supraclavicular Upper cervical
Intrathoracic esophagus (upper, middle, lower):	Carinal Hilar (pulmonary roots) Internal jugular Mediastinal, NOS Paracardial Periesophageal Perigastric Peritracheal Superior mediastinal Tracheobronchial

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY

Celiac nodes are distant for intrathoracic esophagus. Code removal of celiac nodes in the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."
--

APPENDIX C
SITE-SPECIFIC SURGERY CODES

ESOPHAGUS
C15.0-C15.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional sites
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

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APPENDIX C
SITE-SPECIFIC SURGERY CODES

STOMACH
C16.0-C16.9

SURGERY OF PRIMARY SITE

CODE

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS **(WITHOUT PATHOLOGY SPECIMEN)**
- 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 this surgical event.

- 20 Local tumor excision, NOS **(WITH PATHOLOGY SPECIMEN)**
- 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy

Specimen sent to pathology from this surgical event.

Code 30, partial gastrectomy, includes a sleeve resection of the stomach
Billroth I: anastomosis to duodenum (duodenostomy)
Billroth II: anastomosis to jejunum (jejunostomy)

- 30 Gastrectomy, NOS (partial, subtotal, hemi-)
- 31 Antrectomy, lower (distal)

Resection of less than 40% of stomach

- 32 Lower (distal) gastrectomy (partial, subtotal, hemi-)
- 33 Upper (proximal) gastrectomy (partial, subtotal, hemi-)

- 40 Near-total or total gastrectomy

A total gastrectomy may follow a previous partial resection of the stomach.

- 50 Gastrectomy, NOS WITH removal of a portion of esophagus
- 51 Partial or subtotal gastrectomy
 - 52 Near total or total gastrectomy

APPENDIX C
SITE-SPECIFIC SURGERY CODES

STOMACH
C16.0-C16.9

SURGERY OF PRIMARY SITE, continued

- 60 Gastrectomy WITH en bloc resection of other organs, NOS
- 61 Partial or subtotal gastrectomy WITH en bloc resection
- 62 Near total or total gastrectomy WITH en bloc resection
- 63 Radical gastrectomy WITH en bloc resection

EN BLOC RESECTION is the removal of organs in one piece at one time and may include an omentectomy.

- 80 Gastrectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are:	
Greater Curvature of Stomach	Gastroduodenal Gastroepiploic, left Gastroepiploic, right or NOS Greater omental Greater curvature Pancreaticoduodenal (anteriorly along the first part of duodenum) Pyloric, including subpyloric and infrapyloric
Pancreatic and Splenic Area:	Pancreaticolienal Peripancreatic Splenic hilum
Lesser Curvature of Stomach:	Cardioesophageal Celiac Common hepatic Hepatoduodenal Left gastric Lesser omental Lesser curvature Paracardial; cardial Perigastric, NOS

APPENDIX C
SITE-SPECIFIC SURGERY CODES

STOMACH
C16.0-C16.9

SCOPE OF REGIONAL LYMPH NODE SURGERY, continued

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

STOMACH
C16.0-C16.9

**SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH
NODE(S)**

DO NOT CODE the incidental removal of gallbladder, bile ducts, appendix, or vagus nerve. Incidental removal is when an organ is removed for a reason unrelated to the malignancy (gallbladder removed for obvious cholelithiasis).

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Removal of other regional sites, ONLY
 - 3 Removal of distant node(s)
 - 4 Removal of distant site
 - 5 Combination of 2 WITH 3 and/or 4
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

COLON
C18.0 - C18.9

SURGERY OF PRIMARY SITE

Code removal/surgical ablation of single or multiple liver metastases under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
 - 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 this surgical event.

- 20 Local tumor excision, NOS (**WITH PATHOLOGY SPECIMEN**)
 - 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy

Specimen sent to pathology from this surgical event.
--

Procedures coded 30-31 include, but are not limited to:
--

Appendectomy (for an appendix primary only) Enterocolectomy Ileocolectomy Partial colectomy, NOS Partial resection of transverse colon and flexures Segmental resection, e.g., cecectomy Sigmoidectomy
--

- 30 Partial colectomy, but less than hemicolectomy
- 31 Partial colectomy WITH permanent colostomy (Hartmann's operation)

APPENDIX C
SITE-SPECIFIC SURGERY CODES

COLON
C18.0 - C18.9

SURGERY OF PRIMARY SITE, continued

- 40 Hemicolectomy or greater (but less than total); right or left colectomy

A hemicolectomy is the removal of total right or left colon and a portion of transverse colon

- 50 Total colectomy

Removal of colon from cecum to the rectosigmoid or a portion of the rectum

- 60 Total proctocolectomy

Commonly used for familial polyposis or polyposis coli.

- 70 Colectomy or coloproctectomy WITH an en bloc resection of other organs; pelvic exenteration

CODE 70 includes any colectomy (partial, hemicolectomy, or total) WITH an en bloc resection of any other organs. The other organs may be partially or totally removed. Procedures that may be a **PART OF AN EN BLOC RESECTION** include, but are not limited to: oophorectomy, partial proctectomy, rectal mucosectomy

EN BLOC resection is the removal of organs in one piece at one time.

- 80 Colectomy, NOS

- 90 Surgery, NOS

- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

COLON
C18.0 - C18.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

The pathology report often describes regional lymph nodes by their anatomic location: colic nodes; mesenteric nodes; peri-\epi-\para-\colic. Regional lymph nodes differ for each anatomical subsite. The following list identifies the regional lymph nodes for each subsite of the colon:	
Cecum and appendix	Anterior cecal Ileocolic Posterior cecal Right colic
Ascending colon	Ileocolic Middle colic Right colic
Hepatic flexure	Middle colic Right colic
Transverse colon	Middle colic
Splenic flexure	Inferior mesenteric Middle colic Left colic
Descending colon	Inferior mesenteric Left colic Sigmoid
Sigmoid colon	Inferior mesenteric Sigmoid mesenteric Sigmoidal Superior rectal (hemorrhoidal)

Superior mesenteric, external iliac and common iliac nodes are distant lymph nodes. Code the removal of any of these nodes in the data item "Surgery of Other Regional Site(s), Distant Site(s), or Distant Lymph Node(s)."

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY

**APPENDIX C
SITE-SPECIFIC SURGERY CODES**

**COLON
C18.0 - C18.9**

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S), OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of appendix, gallbladder, bile ducts, or spleen. Incidental removal is when an organ is removed for a reason unrelated to the malignancy (gallbladder removed for obvious cholelithiasis).

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Removal of other regional site(s), ONLY
 - 3 Removal/surgical ablation of single liver metastasis
 - 4 Removal/surgical ablation of multiple liver metastases
 - 5 Combination of codes 2 WITH 3 or 4
 - 6 Removal of other distant site(s) or distant lymph node(s), ONLY
 - 7 Combination of code 6 WITH 3 or 5
 - 8 Combination of code 6 WITH 4
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

RECTOSIGMOID
C19.9

SURGERY OF PRIMARY SITE

CODE removal/surgical ablation of single or multiple liver metastases under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Node(s)."

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
- 11 Photodynamic therapy (PDT)
 - 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
 - 13 Cryosurgery
 - 14 Laser ablation

No specimen sent to pathology from this surgical event.

- 20 Local tumor excision, NOS (**WITH PATHOLOGY SPECIMEN**)
- 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy

Specimen sent to pathology from this surgical event.
--

Procedures coded 30 include, but are not limited to:

Anterior resection Hartmann's operation Low anterior resection (LAR) Partial colectomy, NOS Rectosigmoidectomy, NOS Sigmoidectomy
--

- 30 Wedge or segmental resection; partial proctosigmoidectomy, NOS

APPENDIX C
SITE-SPECIFIC SURGERY CODES

RECTOSIGMOID
C19.9

SURGERY OF PRIMARY SITE, continued

Procedures coded 40 include but are not limited to:
--

Altemeier's operation Duhamel's operation Soave's submucosal resection Swenson's operation Turnbull's operation

- 40 Pull through WITH sphincter preservation (colo-anal anastomosis)

Procedures coded 50 include but are not limited to:
--

Abdominoperineal resection (A & P resection) Anterior/posterior resection (A/P resection)/Miles' operation Rankin's operation

- 50 Total proctectomy
51 Total colectomy

Removal of the colon from cecum to the rectosigmoid or a portion of the rectum
--

- 60 Combination of 50 and 51
70 Colectomy or proctocolectomy WITH an en bloc resection of other organs; pelvic exenteration

EN BLOC RESECTION is the removal of organs in one piece at one time. Procedures that may be a part of an en bloc resection include, but are not limited to: an oophorectomy and a rectal mucosectomy.
--

Code 70 includes any colectomy (partial, hemicolectomy, or total) WITH an en bloc resection of any other organs. There may be partial or total removal of other organs in continuity with the primary.
--

- 80 Colectomy, NOS; Proctectomy, NOS
90 Surgery, NOS
99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

RECTOSIGMOID
C19.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

The pathology report often identifies regional lymph nodes by their anatomic location: colic; mesenteric; peri-/para-/ colic; perirectal; rectal.

The specific regional lymph nodes are:

Inferior mesenteric
Left colic
Middle rectal (hemorrhoidal)
Perirectal
Sigmoid mesenteric
Sigmoidal
Superior rectal (superior hemorrhoidal)

Superior mesenteric, external iliac and common iliac nodes are distant nodes. Code removal of these nodes under the data item "Surgery of Other Regional Site(s), Distant Site(s), or Distant Lymph Node(s)."

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

RECTOSIGMOID
C19.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S), OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of appendix, gallbladder, or bile ducts. Incidental removal is when an organ is removed for a reason unrelated to the malignancy (gallbladder removed for obvious cholelithiasis).

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Removal of other regional site(s), ONLY
 - 3 Removal/surgical ablation of single liver metastasis
 - 4 Removal/surgical ablation of multiple liver metastases
 - 5 Combination of codes 2 and 3 or 4
- 6 Removal of other distant site(s) or distant lymph node(s), ONLY
 - 7 Combination of code 6 WITH 3, 4 or 5
 - 8 Combination of code 6 WITH 3 or 5
- 9 Unknown; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

RECTUM
C20.9

SURGERY OF PRIMARY SITE

CODE removal/surgical ablation of single or multiple liver metastases under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
 - 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 this surgical event.

- 20 Local tumor excision, NOS (**WITH PATHOLOGY SPECIMEN**)
 - 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy
 - 28 Curette and fulguration

Specimen sent to pathology from this surgical event.
--

Procedures coded 30 include, but are not limited to:

Anterior resection Hartmann's operation Low anterior resection (LAR) Trans-sacral rectosigmoidectomy

- 30 Wedge or segmental resection; partial proctectomy, NOS

APPENDIX C
SITE-SPECIFIC SURGERY CODES

RECTUM
C20.9

SURGERY OF PRIMARY SITE, continued

Procedures coded 40 include but are not limited to:
--

Altemeier's operation Duhamel's operation Soave's submucosal resection Swenson's operation Turnbull's operation

40 Pull through WITH sphincter preservation (colo-anal anastomosis)

Procedures coded 50 include but are not limited to:
--

Abdominoperineal resection (A & P resection) Anterior/Posterior (A/P) resection/Miles' operation Rankin's operation

50 Total proctectomy

60 Total proctocolectomy, NOS

70 Proctectomy or proctocolectomy WITH an en bloc resection of other organs; pelvic exenteration

EN BLOC RESECTION is the removal of organs in one piece at one time.

80 Proctectomy, NOS

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

RECTUM
C20.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

The pathology report often identifies regional lymph nodes by their anatomic location: mesenteric nodes; perirectal nodes; rectal nodes.

The specific regional lymph nodes are:

Inferior rectal (hemorrhoidal)
Inferior mesenteric
Internal iliac
Lateral sacral
Middle rectal (hemorrhoidal)
Perirectal
Presacral
Sacral promontory (Gerota's)
Sigmoid mesenteric
Superior rectal (hemorrhoidal)

Superior mesenteric, external iliac and common iliac nodes are classified as distant lymph nodes. Code removal of these nodes under the data item "Surgery of Other Regional Site(s), Distant Site(s), or Distant Lymph Node(s)."

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

RECTUM
C20.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S), OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of appendix, gallbladder, bile ducts, or spleen. Incidental removal is when an organ is removed for a reason unrelated to the malignancy (gallbladder removed for obvious cholelithiasis).

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Removal of other regional site(s), ONLY
 - 3 Removal/surgical ablation of single liver metastasis
 - 4 Removal/surgical ablation of multiple liver metastases
 - 5 Combination of codes 2 with 3 or 4
 - 6 Removal of other distant site(s) or distant lymph node(s), ONLY
 - 7 Combination of code 6 WITH 3, 4 or 5
 - 8 Combination of code 6 WITH 3 or 5
- 9 Unknown; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

ANUS
C21.0-C21.8

SURGERY OF PRIMARY SITE

Codes

00 None; no cancer-directed surgery of primary site

Procedures for codes 10-14 include, but are not limited to:
--

Cryosurgery Electrocautery Excisional biopsy Laser Thermal ablation

- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
- 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 this surgical event.

- 20 Local tumor excision, NOS (**WITH PATHOLOGY SPECIMEN**)
- 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy

Specimen sent to pathology from this surgical event.
--

Margins of resection may have microscopic involvement.
--

- 60 Abdominal perineal resection, NOS
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

ANUS
C21.0-C21.8

SCOPE OF REGIONAL LYMPH NODE SURGERY

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
 - 2 Perirectal, anorectal lymph nodes
 - 3 Internal iliac lymph nodes (hypogastric), unilateral
 - 4 Inguinal lymph nodes, unilateral
 - 5 Combination of 2 and 4
 - 6 Bilateral internal iliac and/or bilateral inguinal lymph nodes
- 9 Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 90 or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

ANUS
C21.0-C21.8

**SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH
NODE(S)**

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional sites
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

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APPENDIX C
SITE-SPECIFIC SURGERY CODES

LIVER AND INTRAHEPATIC BILE DUCTS
C22.0-C22.1

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS
 - 11 Photodynamic therapy (PDT)
 - 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
 - 13 Cryosurgery
 - 14 Laser
 - 15 Alcohol (PEI)
 - 16 Heat
 - 17 Other (ultrasound, acetic acid)
- 20 Wedge resection, NOS; segmental resection
- 30 Lobectomy, NOS
 - 31 Simple
 - 32 Extended

Extended lobectomy: resection of a single lobe plus a segment of another lobe.
- 40 Excision of a bile duct (for an intrahepatic bile duct primary only)
- 70 Total hepatectomy with transplant

Liver transplant must also be coded under the data item "Reconstruction/Restoration."
- 80 Hepatectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

LIVER AND INTRAHEPATIC BILE DUCTS
C22.0-C22.1

SCOPE OF REGIONAL LYMPH NODE SURGERY

Regional lymph nodes are the hilar nodes:
Along the portal vein
Along the inferior vena cava
Along the proper hepatic artery
At the hepatic pedicle

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

LIVER AND INTRAHEPATIC BILE DUCTS
C22.0-C22.1

**SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH
NODE(S)**

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional sites
 - 3 Distant lymph node(s) (includes inferior phrenic lymph nodes)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

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APPENDIX C
SITE-SPECIFIC SURGERY CODES

PANCREAS
C25.0-C25.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local excision of tumor, NOS
- 20 Partial pancreatectomy, NOS
- 40 Total pancreatectomy
- 50 Local or partial pancreatectomy and duodenectomy
 - 51 Without subtotal gastrectomy
 - 52 With subtotal gastrectomy (Whipple)
- 60 Total pancreatectomy and subtotal gastrectomy or duodenectomy
- 70 Extended pancreatoduodenectomy
- 80 Pancreatectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

PANCREAS
C25.0-C25.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are:
Celiac (head only) Hepatic artery Infrapyloric (head only) Lateral aortic Pancreaticolienal (body and tail only) Peripancreatic (superior, inferior, anterior, posterior splenic) Retroperitoneal Splenic (body and tail only) Subpyloric (head only) Superior mesenteric

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 2 Extended lymphadenectomy

An extended pancreaticoduodenectomy incorporates selected aspects of the Whipple procedure and regional pancreatectomy. A wide Kocher maneuver removes all lymphatic tissue over the medial aspect of the right kidney, inferior vena cava, and left renal vein.
--

- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

PANCREAS
C25.0-C25.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Removal of other regional sites, ONLY
 - 3 Removal of distant node(s)
 - 4 Removal of distant site
 - 5 Combination of 2 WITH 3 and/or 4
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

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APPENDIX C
SITE-SPECIFIC SURGERY CODES

LARYNX
C32.0-C32.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS **(WITHOUT PATHOLOGY SPECIMEN)**
- 11 Photodynamic therapy (PDT)
 - 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
 - 13 Cryosurgery
 - 14 Laser
 - 15 Stripping
- No specimen sent to pathology from this surgical event.
- 20 Local tumor excision, NOS **(WITH PATHOLOGY SPECIMEN)**
- 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy
 - 28 Stripping
- Specimen sent to pathology from this surgical event.
- 30 Partial excision of the primary site, NOS; subtotal/partial laryngectomy NOS; hemilaryngectomy NOS
- 31 Vertical laryngectomy
 - 32 Anterior commissure laryngectomy
 - 33 Supraglottic laryngectomy
- 40 Total or radical laryngectomy, NOS
- 41 Total laryngectomy ONLY
 - 42 Radical laryngectomy ONLY
- 50 Pharyngolaryngectomy
- 80 Laryngectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

LARYNX
C32.0-C32.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional cervical lymph nodes are:

Buccal (facial)
Caudal jugular (deep cervical)
Cranial jugular (deep cervical)
Dorsal cervical (superficial cervical)
Medial jugular (deep cervical)
Occipital
Paratracheal (anterior cervical)
Parotid
Prelaryngeal (anterior cervical)
Retroauricular (mastoid, posterior auricular)
Retropharyngeal
Submandibular (submaxillary)
Submental
Supraclavicular

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
 - 2 Neck dissection, NOS
 - 3 Selective, limited; nodal sampling; "berry picking"
 - 4 Modified/modified radical
 - 5 Radical
- 9 Unknown; not stated; death certificate ONLY

Terminology of neck dissection (Robbins et al. 1991):

A radical neck dissection includes the removal of all ipsilateral cervical lymph node groups, i.e., lymph nodes from levels I through V (submental, submandibular, cranial jugular, medial jugular, caudal jugular, dorsal cervical nodes along the accessory nerve, and supraclavicular), and removal of the spinal accessory nerve, internal jugular vein and sternocleidomastoid muscle.

In a modified radical neck dissection the same lymph nodes are removed as in a radical neck dissection; however, one or more non-lymphatic structures are preserved.

A selective neck dissection is a neck dissection with preservation of one or more lymph node groups routinely removed in radical neck dissection.

APPENDIX C
SITE-SPECIFIC SURGERY CODES

LARYNX
C32.0-C32.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional sites
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

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APPENDIX C
SITE-SPECIFIC SURGERY CODES

LUNG
C34.0 - C34.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction or excision, NOS
 - 11 Excision
 - 12 Laser ablation or excision
 - 13 Cautery; fulguration
 - 14 Bronchial sleeve resection ONLY
- 20 Resection of less than one lobe
 - 21 Wedge resection
 - 22 Segmental resection, including lingulectomy
- 30 Resection of at least one lobe, but less than the whole lung (partial pneumonectomy, NOS)
 - 31 Lobectomy
 - 32 Bilobectomy

Procedures coded 40 include, but are not limited to:

Complete pneumonectomy Pneumonectomy, NOS Sleeve pneumonectomy Standard pneumonectomy Total pneumonectomy

- 40 Resection of whole lung
- 50 Resection of lung **WITH an en bloc resection of other organs**
 - 51 Wedge resection
 - 52 Lobectomy
 - 53 Bilobectomy
 - 54 Pneumonectomy (less than a radical or extended pneumonectomy)

EN BLOC resection is the removal of organs in one piece at one time.

- 60 Radical pneumonectomy

Radical pneumonectomy is a complete pneumonectomy WITH removal of mediastinal lymph nodes. Removal of mediastinal nodes is also coded in the data fields "Scope of Regional Lymph Node Surgery" and "Number of Regional Nodes Examined."
--

APPENDIX C
SITE-SPECIFIC SURGERY CODES

LUNG
C34.0 - C34.9

SURGERY OF PRIMARY SITE, continued

70 Extended radical pneumonectomy

An extended radical pneumonectomy is a radical pneumonectomy (including removal of mediastinal nodes) and the removal of other tissues or nodes. Removal of mediastinal nodes is also coded in the data fields "Scope of Regional Lymph Node Surgery" and "Number of Regional Nodes Examined."

80 Resection of lung, NOS

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

Mediastinal nodes are:

Aortic (includes subaortic, aortopulmonary window, periaortic, including ascending aorta or including azygos)
Periesophageal
Peritracheal (including those that may be designated tracheobronchial, i.e., lower peritracheal, phrenic)
Pre- and retrotracheal (includes precarinal)
Pulmonary ligament
Subcarinal

CODE

0 No regional lymph nodes removed

1 Regional lymph node(s) removed, NOS

2 Intrapulmonary (includes interlobar, lobar, segmental), ipsilateral hilar and/or ipsilateral peribronchial nodes

3 Ipsilateral mediastinal and/or subcarinal nodes

4 Combination of 2 and 3

5 Contralateral mediastinal, contralateral hilar, ipsilateral or contralateral scalene and/or supraclavicular nodes

6 Combination of 5 WITH 2 or 3

9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

LUNG
C34.0 - C34.9

NUMBER OF REGIONAL NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

LUNG
C34.0 - C34.9

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S), OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of ribs. Ribs are removed to provide access to the lung.

Codes

- 0 None; no surgery to other regional sites, distant sites or distant lymph nodes
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
- 2 Surgery to a regional site ONLY
 - 3 Removal of a solitary lesion in the same lung (primary site), different (non-primary) lobe

There is one primary. Patient has two tumors with the same histology in different lobes of the same lung.
 - 4 Resection of metastasis in a distant site(s) or resection of distant lymph nodes(s), NOS
 - 5 Removal of a solitary lesion in the contralateral lung

Patient has one primary. There is a primary tumor or tumor(s) in one lung and a solitary metastatic lesion in the contralateral lung.
 - 6 Removal of a solitary lesion in a distant site or a distant lymph node, NOS

This includes, but is not limited to the removal of a solitary metastatic brain lesion.
 - 7 Removal of multiple lesions in distant site(s)
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

BONES, JOINTS, AND ARTICULAR CARTILAGE C40.0 - C41.9
PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM C47.0 - C47.9
CONNECTIVE, SUBCUTANEOUS AND OTHER SOFT TISSUES C49.0 - C49.9

SURGERY OF PRIMARY SITE

Codes

- 10 Local tumor destruction or excision
- 20 Partial resection/internal hemipelvectomy (pelvis)
- 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
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

BONES, JOINTS, AND ARTICULAR CARTILAGE C40.0 - C41.9
PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM C47.0 - C47.9
CONNECTIVE, SUBCUTANEOUS AND OTHER SOFT TISSUES C49.0 - C49.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional site(s)
 - 5 Distant lymph node(s)
 - 6 Distant site(s)
 - 7 Combination of 6 WITH 2 or 5
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

SPLEEN AND LYMPH NODES
Spleen C42.2, Lymph Nodes C77.0 - C77.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local excision, destruction, NOS
- 20 Splenectomy, NOS
 - 21 Partial splenectomy
 - 22 Total splenectomy
- 30 Lymph node dissection, NOS
 - 31 One chain
 - 32 Two or more chains
- 40 Lymph node dissection, NOS plus splenectomy
 - 41 One chain
 - 42 Two or more chains
- 50 Lymph node dissection, NOS and partial/total removal of adjacent organ(s)
 - 51 One chain
 - 52 Two or more chains
- 60 Lymph node dissection, NOS and partial/total removal of adjacent organ(s) PLUS splenectomy
 - 61 One chain
 - 62 Two or more chains
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY (SPLEEN ONLY)

Note: For a lymph node primary, code this field as '9.'

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

SPLEEN AND LYMPH NODES
Spleen C42.2, Lymph Nodes C77.0 - C77.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED (SPLEEN ONLY)

Note: For a lymph node primary, code this field as '99.'

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional site(s)
 - 5 Distant lymph node(s)
 - 6 Distant site(s)
 - 7 Combination of 6 WITH 2 or 5
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

SKIN
C44.0 - C44.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
- 11 Photodynamic therapy (PDT)
 - 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
 - 13 Cryosurgery
 - 14 Laser ablation

No specimen sent to pathology from this surgical event.

- 20 Local tumor excision, NOS (**WITH PATHOLOGY SPECIMEN**)
- 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy

Specimen sent to pathology from this surgical event.

- 30 Biopsy of primary tumor followed by a gross excision of the lesion
- 31 Shave biopsy followed by a gross excision of the lesion
 - 32 Punch biopsy followed by a gross excision of the lesion
 - 33 Incisional biopsy followed by a gross excision of the lesion

Less than a wide excision, less than 1 cm margin.

- 40 Wide excision or re-excision of lesion or minor (local) amputation, NOS

Margins of excision are 1 cm or more. Margins may be microscopically involved.

Local amputation is the surgical resection of digits, ear, eyelid, lip, or nose.

- 50 Radical excision of a lesion, NOS

Margins of excision are greater than 1 cm and grossly tumor-free. The margins may be microscopically involved.

APPENDIX C
SITE-SPECIFIC SURGERY CODES

SKIN
C44.0 - C44.9

SURGERY OF PRIMARY SITE, continued

- 60 Major amputation, NOS
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

Regional lymph nodes are different for each anatomical subsite.

Head, neck	Cervical, ipsilateral preauricular, submandibular, and supraclavicular
Thorax	Ipsilateral axillary
Arm	Ipsilateral epitrochlear and axillary
Abdomen, loins, and buttocks	Ipsilateral inguinal
Anal margin and perianal skin	Ipsilateral inguinal
Leg	Ipsilateral inguinal and popliteal

There are boundary zones between the subsites (i.e., between the thorax and arm, the boundary zone is the shoulder and axilla). The boundary zones do not belong to either subsite. If a tumor originates in one of these 4 cm boundary zones, the nodes on either side of the bands are regional.

BETWEEN THE SUBSITES			THE BOUNDARY ZONE IS
Head and neck	AND	Thorax	Clavicle-acromion-upper shoulder blade edge
Thorax	AND	Arm	Shoulder-axilla-shoulder
Thorax	AND	Abdomen, loins, and buttocks	Front: Middle between navel and costal arch Back: Lower border of thoracic vertebrae (midtransverse axis)
Abdomen, loins, and buttock	AND	Leg	Groin-trochanter-gluteal sulcus
Right	AND	Left	Midline

APPENDIX C
SITE-SPECIFIC SURGERY CODES

SKIN
C44.0 - C44.9

SCOPE OF REGIONAL LYMPH NODE SURGERY, continued

Iliac, other pelvic, abdominal or intrathoracic lymph nodes are distant. Code the removal of these nodes under the data item "Surgery of Other Regional Site(s), Distant Site(s), or Distant Node(s)."

Codes

0 No regional lymph nodes removed

1 Sentinel node, NOS

A sentinel node is the first node to receive drainage from a primary tumor. It is identified by an injection of a dye or radio label at the site of the primary tumor

2 Regional lymph nodes removed, NOS

9 Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL NODES EXAMINED

Codes

00 No regional lymph nodes examined

01 One regional lymph node examined

02 Two regional lymph nodes examined

..

90 Ninety or more regional lymph nodes examined

95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed

96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated

97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated

98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection

99 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

SKIN
C44.0 - C44.9

**SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH
NODE(S)**

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional sites
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

BREAST
C50.0 - C50.9

SURGERY OF PRIMARY SITE

CODE

- 00 None; no cancer-directed surgery of primary site

Procedures coded as 10-17 remove the gross primary tumor and some of the breast tissue (breast-conserving or preserving). There may be microscopic residual tumor.

- 10 Partial mastectomy, NOS; less than total mastectomy, NOS
- 11 Nipple resection
 - 12 Lumpectomy or excisional biopsy
 - 13 Re-excision of the biopsy site for gross or microscopic residual disease.
 - 14 Wedge resection
 - 15 Quadrantectomy
 - 16 Segmental mastectomy
 - 17 Tylectomy

- 30 Subcutaneous mastectomy

A subcutaneous mastectomy is the removal of breast tissue without the nipple and areolar complex or overlying skin. **THIS PROCEDURE IS RARELY PERFORMED TO TREAT MALIGNANCIES.**

- 40 Total (simple) mastectomy, NOS
- 41 WITHOUT removal of uninvolved contralateral breast
 - 42 WITH removal of uninvolved contralateral breast

A simple mastectomy removes all breast tissue, the nipple, and areolar complex. An axillary dissection is not done.

For single primaries only, code removal of involved contralateral breast under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

APPENDIX C
SITE-SPECIFIC SURGERY CODES

BREAST
C50.0 - C50.9

SURGERY OF PRIMARY SITE, continued

- 50 Modified radical mastectomy
51 WITHOUT removal of uninvolved contralateral breast
52 WITH removal of uninvolved contralateral breast

Removes all breast tissue, the nipple, the areolar complex, and variable amounts of breast skin. The procedure involves an en bloc resection of the axilla. The specimen may or may not include a portion of the pectoralis major muscle. Includes an en bloc axillary dissection.

For single primaries only, code removal of involved contralateral breast under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

- 60 Radical mastectomy, NOS
61 WITHOUT removal of uninvolved contralateral breast
62 WITH removal of uninvolved contralateral breast

Removal of breast tissue, nipple, areolar complex, a variable amount of skin, pectoralis minor, and pectoralis major. Includes an en bloc axillary dissection.

For single primaries only, code removal of involved contralateral breast under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

- 70 Extended radical mastectomy
71 WITHOUT removal of uninvolved contralateral breast
72 WITH removal of uninvolved contralateral breast

Removal of breast tissue, nipple, areolar complex, variable amounts of skin, pectoralis minor, and pectoralis major. Includes removal of internal mammary nodes and an en bloc axillary dissection.

For single primaries only, code removal of involved contralateral breast under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

- 80 Mastectomy, NOS
90 Surgery, NOS
99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

BREAST
C50.0 - C50.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

0 No regional lymph nodes removed

1 Sentinel lymph node(s) removed

A sentinel node is the first node to receive drainage from a primary tumor. It is identified by an injection of a dye or radio label at the site of the primary tumor

2 Regional lymph node(s) removed, NOS; axillary, NOS (Levels I, II, or III lymph nodes)
Intramammary, NOS

3 Combination of 1 and 2

4 Internal mammary

5 Combination of 4 WITH any of 1-3

9 Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

00 No regional lymph nodes examined

01 One regional lymph node examined

02 Two regional lymph nodes examined

90 Ninety or more regional lymph nodes examined

95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed

96 Regional lymph node removal documented as a sampling and number of lymph nodes examined
unknown/not stated

97 Regional lymph node removal documented as dissection and number of lymph nodes examined
unknown/not stated

98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not
stated and not documented as sampling or dissection

99 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

BREAST
C50.0 - C50.9

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

DO NOT CODE removal of fragments or tags of muscles; removal of the pectoralis minor; the resection of pectoralis muscles, NOS; or the resection of fascia with no mention of muscle.

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional site(s)
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Removal of involved contralateral breast (single primary only)
 - 6 Combination of 4 or 5 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

RECONSTRUCTION - FIRST COURSE

The insertion of a tissue expander is often the beginning of the reconstructive procedure.

Codes

- 0 No reconstruction/restoration
- 1 Reconstruction, NOS (unknown if flap)
 - 2 Implant; reconstruction WITHOUT flap
 - 3 Reconstruction WITH flap, NOS
 - 4 Latissimus dorsi flap
 - 5 Abdominis recti flap
 - 6 Flap, NOS + implant
 - 7 Latissimus dorsi flap + implant
 - 8 Abdominis recti + implant
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

CERVIX UTERI
C53.0 - C53.9

SURGERY OF PRIMARY SITE

FOR INVASIVE CANCERS, dilatation and curettage is considered an incisional biopsy and is not coded as site-specific surgery.

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
- 11 Photodynamic therapy (PDT)
 - 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
 - 13 Cryosurgery
 - 14 Laser
 - 15 LEEP
- No specimen sent to pathology from this surgical event.
- 20 Local tumor destruction or excision, NOS (**WITH PATHOLOGY SPECIMEN**)
- 21 Electrocautery
 - 22 Cryosurgery
 - 23 Laser
 - 24 Cone biopsy WITH gross excision of lesion
 - 25 Dilatation and curettage; endocervical curettage (cancer-directed for in situ only)
 - 26 Excisional biopsy, NOS
 - 27 Cone biopsy
 - 28 LEEP
 - 29 Trachelectomy; removal of cervical stump; cervicectomy

Specimen sent to pathology from this surgical event.

- 30 Total hysterectomy (simple, pan-) WITHOUT removal of tubes and ovaries

Total hysterectomy removes both the corpus and cervix uteri and may also include a portion of vaginal cuff.

- 40 Total hysterectomy (simple, pan-) WITH removal of tubes or ovary

Total hysterectomy removes both the corpus and cervix uteri and may also include a portion of vaginal cuff.

APPENDIX C
SITE-SPECIFIC SURGERY CODES

CERVIX UTERI
C53.0 - C53.9

SURGERY OF PRIMARY SITE, continued

- 50 Modified radical or extended hysterectomy; radical hysterectomy; extended radical hysterectomy
 - 51 Modified radical hysterectomy
 - 52 Extended hysterectomy
 - 53 Radical hysterectomy; Wertheim's procedure
 - 54 Extended radical hysterectomy

- 60 Hysterectomy, NOS, WITH or WITHOUT removal of tubes and ovaries
 - 61 WITHOUT removal of tubes and ovaries
 - 62 WITH removal of tubes and ovaries

- 70 Pelvic exenteration

- 71 Anterior exenteration

Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

- 72 Posterior exenteration

Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

- 73 Total exenteration

Includes removal of all pelvic contents and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

- 74 Extended exenteration

Includes pelvic blood vessels or bony pelvis

- 90 Surgery, NOS

- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

CERVIX UTERI
C53.0 - C53.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are:
Common iliac
External iliac
Hypogastric (obturator)
Internal iliac
Paracervical
Parametrial
Presacral
Sacral

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

CERVIX UTERI
C53.0 - C53.9

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of an appendix. **DO NOT CODE** an omentectomy **IF** it was the only surgery performed in addition to hysterectomy. Incidental removal is when an organ is removed for a reason unrelated to the malignancy.

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional site(s)
 - 3 Distant lymph node(s), NOS
 - 4 Periaortic lymph nodes
 - 5 Distant site(s)
 - 6 Combinations of 5 with 4
 - 7 Combination of 5 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

CORPUS UTERI
C54.0 - C55.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
- 11 Photodynamic therapy (PDT)
 - 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
 - 13 Cryosurgery
 - 14 Laser
 - 15 LEEP

No specimen sent to pathology from this surgical event.

Procedures in code 20 include but are not limited to:
--

Cryosurgery Electrocautery Excisional biopsy Laser ablation Thermal ablation
--

- 20 Local tumor destruction or excision, NOS; simple excision, NOS (**WITH PATHOLOGY SPECIMEN**)
- 21 Electrocautery
 - 22 Cryosurgery
 - 23 Laser
 - 24 Excisional biopsy
 - 25 Polypectomy
 - 26 Myomectomy

Specimen sent to pathology from this surgical event.
--

Margins of resection may have microscopic involvement.
--

APPENDIX C
SITE-SPECIFIC SURGERY CODES

CORPUS UTERI
C54.0 - C55.9

SURGERY OF PRIMARY SITE, continued

30 Subtotal hysterectomy/supracervical hysterectomy/fundectomy WITH or WITHOUT removal of tube(s) and ovary(ies).

31 WITHOUT tube(s) and ovary (ies)

32 WITH tube(s) and ovary (ies)

Cervix left in place

40 Total hysterectomy (simple, pan-) WITHOUT removal of tube(s) and ovary (ies)

Removes both the corpus and cervix uteri. It may also include a portion of the vaginal cuff.

50 Total hysterectomy (simple, pan-) WITH removal of tube(s) or ovary (ies)

Removes both the corpus and cervix uteri. It may also include a portion of the vaginal cuff.

60 Modified radical or extended hysterectomy; radical hysterectomy; extended radical hysterectomy

61 Modified radical hysterectomy

62 Extended hysterectomy

63 Radical hysterectomy; Wertheim's procedure

64 Extended radical hysterectomy

70 Hysterectomy, NOS, WITH or WITHOUT removal of tube(s) and ovary(ies)

71 WITHOUT removal of tube(s) and ovary(ies)

72 WITH removal of tube(s) and ovary(ies)

80 Pelvic exenteration

81 Anterior exenteration

Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

82 Posterior exenteration

Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

APPENDIX C
SITE-SPECIFIC SURGERY CODES

CORPUS UTERI
C54.0 - C55.9

SURGERY OF PRIMARY SITE, continued

83 Total exenteration

Includes removal of all pelvic contents and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."
--

84 Extended exenteration

Includes pelvic blood vessels or bony pelvis
--

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are:
Common iliac and external iliac
Hypogastric (obturator)
Para aortic
Parametrial
Sacral

Codes

0 No regional lymph nodes removed

1 Regional lymph node(s) removed, NOS

2 Pariaortic with or without other regional lymph nodes

9 Unknown; not stated; death certificate ONLY

**APPENDIX C
SITE-SPECIFIC SURGERY CODES**

**CORPUS UTERI
C54.0 - C55.9**

NUMBER OF REGIONAL LYMPH NODES EXAMINED

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of the appendix or an omentectomy **IF** it was the only surgery performed in addition to hysterectomy. Incidental removal is when an organ is removed for a reason unrelated to the malignancy.

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional site(s)
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

OVARY
C56.9

SURGERY OF PRIMARY SITE

- 00 None; no cancer-directed surgery of primary site
- 10 Total removal of tumor or (single) ovary, NOS
 - 11 Resection of ovary (wedge, subtotal, or partial) ONLY, NOS; unknown if hysterectomy done
 - 12 WITHOUT hysterectomy
 - 13 WITH hysterectomy
 - 14 Unilateral (salpingo-) oophorectomy; unknown if hysterectomy done
 - 15 WITHOUT hysterectomy
 - 16 WITH hysterectomy
- 20 Bilateral (salpingo-) oophorectomy; unknown if hysterectomy done
 - 21 WITHOUT hysterectomy
 - 22 WITH hysterectomy
- 30 Unilateral or bilateral (salpingo-) oophorectomy **WITH OMENTECTOMY**, NOS; partial or total; unknown if hysterectomy done
 - 31 WITHOUT hysterectomy
 - 32 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 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.

- 70 Pelvic exenteration, NOS
 - 71 Anterior

Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

- 72 Posterior

Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

**APPENDIX C
SITE-SPECIFIC SURGERY CODES**

**OVARY
C56.9**

SURGERY OF PRIMARY SITE, continued

73 Total

Includes removal of all pelvic contents and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."
--

74 Extended

Includes pelvic blood vessels or bony pelvis.

80 (Salpingo-) oophorectomy, NOS

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are:
Common iliac External iliac Hypogastric (obturator) Inguinal Lateral sacral Para-aortic Pelvic, NOS Retroperitoneal, NOS

Codes

0 No regional lymph nodes removed

1 Regional lymph node(s) removed, NOS

9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

OVARY
C56.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

DO NOT CODE an incidental removal of the appendix. Incidental removal is when an organ is removed for a reason unrelated to the malignancy.

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional site(s)
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

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APPENDIX C
SITE-SPECIFIC SURGERY CODES

PROSTATE
C61.9

SURGERY OF PRIMARY SITE

Do not code an orchiectomy in this field. For prostate primaries, orchiectomies are coded in the field "Hormone Therapy."

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction or excision, NOS
- 11 Transurethral resection (TURP), NOS
 - 12 TURP - cancer is incidental finding during surgery for benign disease
 - 13 TURP - patient has suspected/known cancer
 - 14 Cryoprostatectomy
 - 15 Laser
 - 16 Hyperthermia
 - 17 Other method of local resection or destruction
- 30 Subtotal or simple prostatectomy, NOS
- A segmental resection or enucleation leaving the capsule intact.
- 40 Less than total prostatectomy, NOS
- An enucleation using an instrument such as a Vaprotome which may leave all or part of the capsule intact.
- 50 Radical prostatectomy, NOS; total prostatectomy, NOS
- Excised prostate, prostatic capsule, ejaculatory ducts, seminal vesicle(s) and may include a narrow cuff of bladder neck.
- 70 Prostatectomy WITH en bloc resection of other organs; pelvic exenteration
- Surgeries coded 70 are any prostatectomy WITH an en bloc resection of any other organs. The other organs may be partially or totally removed in continuity with the primary.

EN BLOC RESECTION is the removal of organs in one piece at one time. Procedures that may involve an en bloc resection include, but are not limited to: cystoprostatectomy, radical cystectomy and prostatectomy.
- 80 Prostatectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

PROSTATE
C61.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are:
Hypogastric
Iliac, NOS (internal and external)
Obturator
Pelvic, NOS
Periprostatic
Sacral, NOS (lateral presacral, promontory [Gerota's] or NOS)

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of nodes unknown /not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

PROSTATE
C61.9

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S), OR DISTANT LYMPH NODE(S)

DO NOT CODE orchiectomy. For prostate primaries, code orchiectomies under “Hormone Therapy.”

The most commonly removed distant lymph nodes are: aortic (para-aortic, peri-aortic, lumbar), common iliac, inguinal, superficial inguinal (femoral), supraclavicular, cervical, and scalene.

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional site(s)
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

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APPENDIX C
SITE-SPECIFIC SURGERY CODES

TESTIS
C62.0-C62.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local or partial excision of testicle
- 30 Excision of testicle, NOS WITHOUT cord
- 40 Excision of testicle, NOS WITH cord/or cord not mentioned
- 80 Orchiectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are:
Interaortocaval Paraaortic (Periaortic) Paracaval Preaortic Precaval Retroaortic Retrocaval

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS; not stated if bilateral or unilateral
 - 2 Unilateral regional lymph nodes
 - 3 Bilateral regional lymph nodes
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

TESTIS
C62.0-C62.9

NUMBER OF REGIONAL NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional sites
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

KIDNEY, RENAL PELVIS, AND URETER
Kidney C64.9, Renal Pelvis C65.9, Ureter C66.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
- 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 this surgical event.

- 20 Local tumor excision, NOS (**WITH PATHOLOGY SPECIMEN**)
- 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy

Specimen sent to pathology from this surgical event.

Procedures coded 30 include, but are not limited to:

Cryosurgery
Electrocautery
Excisional biopsy
Laser
Segmental resection
Thermal ablation
Wedge resection

- 30 Partial or subtotal nephrectomy (kidney or renal pelvis) or partial ureterectomy (ureter)

Margins of resection are grossly negative. There may be microscopic involvement.

APPENDIX C
SITE-SPECIFIC SURGERY CODES

KIDNEY, RENAL PELVIS, AND URETER
Kidney C64.9, Renal Pelvis C65.9, Ureter C66.9

SURGERY OF PRIMARY SITE, continued

- 40 Complete/total/simple nephrectomy - for kidney parenchyma
Nephroureterectomy

Includes bladder cuff for renal pelvis or ureter
- 50 Radical nephrectomy

May include removal of a portion of vena cava, adrenal gland(s), Gerota's fascia, perinephric fat, or partial/total ureter
- 70 Any nephrectomy (simple, subtotal, complete, partial, total, radical) **PLUS** an en bloc resection of other organ(s) (colon, bladder)

The other organs, such as colon or bladder, may be partially or totally removed.
- 80 Nephrectomy, NOS
Ureterectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

KIDNEY, RENAL PELVIS, AND URETER
Kidney C64.9, Renal Pelvis C65.9, Ureter C66.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are	
Kidney	Aortic (para-aortic, periaortic, lateral aortic) Paracaval Renal hilar Retroperitoneal, NOS
Renal pelvis	Aortic Paracaval Renal hilar Retroperitoneal, NOS
Ureter	Iliac (common, internal [hypogastric], external) Paracaval Pelvic, NOS Periureteral Renal hilar

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS; not stated if bilateral or unilateral
 - 2 Unilateral regional lymph nodes
 - 3 Bilateral regional lymph nodes
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

KIDNEY, RENAL PELVIS, AND URETER
Kidney C64.9, Renal Pelvis C65.9, Ureter C66.9

NUMBER OF REGIONAL NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of nodes unknown /not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of ribs during the operative approach.

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional site(s)
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

BLADDER
C67.0-C67.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS **(WITHOUT PATHOLOGY SPECIMEN)**
- 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 this surgical event.

- 20 Local tumor excision, NOS **(WITH PATHOLOGY SPECIMEN)**
- 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy (TURB)

Specimen sent to pathology from this surgical event.

- 30 Partial cystectomy
- 50 Simple/total/complete cystectomy
- 60 Radical cystectomy (male only)

This code is used only for men. It involves the removal of bladder and prostate, with or without urethrectomy. The procedure is also called cystoprostatectomy.

If a radical cystectomy is the procedure name for a woman, use code 71.

APPENDIX C
SITE-SPECIFIC SURGERY CODES

BLADDER
C67.0-C67.9

70 Pelvic exenteration, NOS

71 Radical cystectomy (female only); anterior exenteration

A radical cystectomy in a female includes removal of bladder, uterus, ovaries, entire vaginal wall and entire urethra.

72 Posterior exenteration

73 Total exenteration

Includes removal of all pelvic contents and pelvic lymph nodes.

74 Extended exenteration

Includes pelvic blood vessels or bony pelvis.

80 Cystectomy, NOS

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are:
Hypogastric
Iliac (internal, external, NOS)
Obturator
Pelvic, NOS
Perivesical, Pericystic
Presacral
Sacral (lateral, sacral promontory [Gerota's])

Codes

0 No regional lymph nodes removed

1 Regional lymph node(s) removed, NOS; not stated if bilateral or unilateral

2 Unilateral regional lymph nodes

3 Bilateral regional lymph nodes

9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

BLADDER
C67.0-C67.9

NUMBER OF REGIONAL NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

DO NOT CODE the partial or total removal of a ureter during a cystectomy.

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional site(s)
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

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APPENDIX C
SITE-SPECIFIC SURGERY CODES

BRAIN AND OTHER PARTS OF CENTRAL NERVOUS SYSTEM

Meninges C70.0 - C70.9, Brain C71.0 - C71.9

Other Parts of Central Nervous System C72.0 - C72.9

SURGERY OF PRIMARY SITE

DO NOT CODE laminectomies for spinal cord primaries.

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction
- 20 Excision of tumor, lesion, or mass
 - 21 Subtotal resection, NOS
 - 22 Partial resection
 - 23 Debulking
- 30 Excision of tumor, lesion, or mass, NOS
 - 31 Total resection
 - 32 Gross resection
- 40 Partial resection, NOS
 - 41 Partial lobe
 - 42 Partial meninges
 - 43 Partial nerve(s)
- 50 Total resection (lobectomy of brain)
- 60 Radical resection
 - Resection of primary site plus partial or total removal of surrounding organs/tissue
- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

**APPENDIX C
SITE-SPECIFIC SURGERY CODES**

BRAIN AND OTHER PARTS OF CENTRAL NERVOUS SYSTEM

Meninges C70.0 - C70.9, Brain C71.0 - C71.9

Other Parts of Central Nervous System C72.0 - C72.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

There are no regional lymph nodes for brain. Code no regional lymph nodes removed (0). Central nervous system sites, however, have regional lymph nodes.

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

There are no regional lymph nodes for brain. Code no regional lymph nodes examined (00). Central nervous system tumors, however, have regional lymph nodes.

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

BRAIN AND OTHER PARTS OF CENTRAL NERVOUS SYSTEM

Meninges C70.0 - C70.9, Brain C71.0 - C71.9

Other Parts of Central Nervous System C72.0 - C72.9

**SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH
NODE(S)**

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional site(s)
 - 5 Distant lymph node(s)
 - 6 Distant site(s)
 - 7 Combination of 6 WITH 2 or 5
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

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APPENDIX C
SITE-SPECIFIC SURGERY CODES

THYROID GLAND
C73.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Removal of less than a lobe, NOS
 - 11 Local surgical excision
 - 12 Removal of a partial lobe ONLY
- 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 cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

THYROID GLAND
C73.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are the cervical and upper mediastinal lymph nodes.

Terminology of neck dissection (Robbins et al. 1991):

A radical neck dissection includes the removal of all ipsilateral cervical lymph node groups, i.e., lymph nodes from levels I through V (submental, submandibular, cranial jugular, medial jugular, caudal jugular, dorsal cervical nodes along the accessory nerve, and supraclavicular), and removal of the spinal accessory nerve, internal jugular vein and sternocleidomastoid muscle.

In a modified radical neck dissection the same lymph nodes are removed as in a radical neck dissection; however, one or more non-lymphatic structures are preserved.

A selective neck dissection is a neck dissection with preservation of one or more lymph node groups routinely removed in radical neck dissection.

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
 - 2 Neck dissection, NOS
 - 3 Selective, limited; nodal sampling; "berry picking"
 - 4 Modified/modified radical
 - 5 Radical
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

THYROID GLAND
C73.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional site(s)
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

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APPENDIX C
SITE-SPECIFIC SURGERY CODES

ALL OTHER SITES

**C14.1 - C14.8, C17.0 - C17.9, C23.9, C24.0 - C24.9, C26.0 - C26.9, C30.0 - C30.1, C31.0 - C31.9,
C33.9, C37.9, C38.0 - C38.8, C39.0 - C39.9, C42.0 - C42.1, C42.3 - C42.4, C48.0 - C48.8,
C51.0 - C51.9, C52.9, C57.0 - C57.9, C58.9, C60.0 - C60.9, C63.0 - C63.9, C68.0 - C68.9,
C69.0 - C69.9, C74.0 - C76.8, C80.9**

The following codes apply to these sites:

C14.1 - C14.8	Other and Ill-defined Sites in Lip, Oral Cavity and Pharynx
C17.0 - C17.9	Small Intestine
C23.9	Gallbladder
C24.0 - C24.8	Extrahepatic Bile Duct, Ampulla of Vater, Overlapping lesion of Biliary Tract, Biliary Tract, NOS
C26.0 - C26.9	Intestinal Tract, NOS, Overlapping Lesion of Digestive System, Gastrointestinal Tract, NOS
C30.0 - C30.1	Nasal Cavity, Middle Ear
C31.0 - C31.9	Accessory (paranasal) Sinuses
C33.9	Trachea
C37.9	Thymus
C38.0 - C38.8	Heart, Mediastinum, Pleura
C39.0 - C39.9	Other and Ill-defined Sites within Respiratory System and Intrathoracic Organs
C42.0 - C42.1	Blood, Bone Marrow
C42.3 - C42.4	Reticuloendothelial System, NOS, Hematopoietic System, NOS
C48.0 - C48.8	Retroperitoneum and Peritoneum
C51.0 - C51.9	Vulva
C52.9	Vagina
C57.0 - C57.9	Other and Unspecified Female Genital Organs
C58.9	Placenta
C60.0 - C60.9	Penis
C63.0 - C63.9	Other and Unspecified Male Genital Organs
C68.0 - C68.9	Other and Unspecified Urinary Organs
C69.0 - C69.9	Eye and Adnexa
C74.0 - C75.9	Adrenal Gland, Other Endocrine Glands and Related Structures
C76.0 - C76.8	Other and Ill-defined Sites
C80.9	Unknown Primary Site

APPENDIX C
SITE-SPECIFIC SURGERY CODES

ALL OTHER SITES

C14.1 - C14.8, C17.0 - C17.9, C23.9, C24.0 - C24.9, C26.0 - C26.9, C30.0 - C30.1, C31.0 - C31.9,
C33.9, C37.9, C38.0 - C38.8, C39.0 - C39.9, C42.0 - C42.1, C42.3 - C42.4, C48.0 - C48.8,
C51.0 - C51.9, C52.9, C57.0 - C57.9, C58.9, C60.0 - C60.9, C63.0 - C63.9, C68.0 - C68.9,
C69.0 - C69.9, C74.0 - C76.8, C80.9

SURGERY OF PRIMARY SITE

Codes

- 00 None; no cancer-directed surgery of primary site
- 10 Local tumor destruction, NOS (**WITHOUT PATHOLOGY SPECIMEN**)
 - 11 Photodynamic therapy (PDT)
 - 12 Electrocautery; fulguration
 - 13 Cryosurgery
 - 14 Laser

No specimen sent to pathology from this surgical event.

- 20 Local tumor excision, NOS (**WITH PATHOLOGY SPECIMEN**)
 - 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 26 Polypectomy
 - 27 Excisional biopsy

Specimen sent to pathology from this surgical event.

- 30 Simple/partial surgical removal of primary site
- 40 Total surgical removal of primary site
- 50 Surgery stated to be “debulking”
- 60 Radical surgery

Partial or total removal of the primary site WITH an en bloc resection (partial or total removal) of other organs.

- 90 Surgery, NOS
- 99 Unknown if cancer-directed surgery performed; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

ALL OTHER SITES

C14.1 - C14.8, C17.0 - C17.9, C23.9, C24.0 - C24.9, C26.0 - C26.9, C30.0 - C30.1, C31.0 - C31.9,
C33.9, C37.9, C38.0 - C38.8, C39.0 - C39.9, C42.0 - C42.1, C42.3 - C42.4, C48.0 - C48.8,
C51.0 - C51.9, C52.9, C57.0 - C57.9, C58.9, C60.0 - C60.9, C63.0 - C63.9, C68.0 - C68.9,
C69.0 - C69.9, C74.0 - C76.8, C80.9

SCOPE OF REGIONAL LYMPH NODE SURGERY .

Codes

- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

- 00 No regional lymph nodes examined
- 01 One regional lymph node examined
- 02 Two regional lymph nodes examined
- ..
- 90 Ninety or more regional lymph nodes examined
- 95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
- 96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
- 97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
- 98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
- 99 Unknown; not stated; death certificate ONLY

APPENDIX C
SITE-SPECIFIC SURGERY CODES

ALL OTHER SITES

C14.1 - C14.8, C17.0 - C17.9, C23.9, C24.0 - C24.9, C26.0 - C26.9, C30.0 - C30.1, C31.0 - C31.9,
C33.9, C37.9, C38.0 - C38.8, C39.0 - C39.9, C42.0 - C42.1, C42.3 - C42.4, C48.0 - C48.8,
C51.0 - C51.9, C52.9, C57.0 - C57.9, C58.9, C60.0 - C60.9, C63.0 - C63.9, C68.0 - C68.9,
C69.0 - C69.9, C74.0 - C76.8, C80.9

**SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH
NODE(S)**

Codes

- 0 None; no surgery to other regional or distant sites
- 1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
 - 2 Other regional sites
 - 3 Distant lymph node(s)
 - 4 Distant site(s)
 - 5 Combination of 4 WITH 2 or 3
- 9 Unknown; not stated; death certificate ONLY

2003 REVISED

Site-Specific Surgery Codes

APPENDIX F
SITE-SPECIFIC SURGERY CODES

SEER Site-Specific Surgery of Primary Site Codes SEER Program Code Manual, 3rd Edition, Revision 1

KEY TO ANNOTATIONS

~~New~~ (Not in *SEER Program Code Manual, third edition*)

[SEER information ~~or~~ instructions not found in FORDS or different from FORDS]

GLOBAL CHANGES from SEER Program Code Manual, third edition (not marked)

1. Delete "cancer-directed" from codes 00 and 99.
2. Add "autopsy only" to code 00.
3. Change in priority order of codes.

This document is based on the American College of Surgeons Commission on Cancer's FORDS surgery codes, with supplementary annotations from the previous version of the *SEER Program Code Manual, third edition 1998*. The codes in this document are identical to the FORDS manual; only formatting and annotations may vary.

Reference: *Facility Oncology Registry Data System*, American College of Surgeons, Chicago, IL, 2002.

Previous versions of this document are rescinded.

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

ORAL CAVITY

**Lip C00.0–C00.9, Base of Tongue C01.9, Other Parts of Tongue C02.0–C02.9,
Gum C03.0–C03.9, Floor of Mouth C04.0–C04.9, Palate C05.0–C05.9,
Other Parts of Mouth C06.0–C06.9**

(Except for M-9750, 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

[SEER Guideline: the following codes INCLUDE local tumor excision, polypectomy or excisional biopsy]

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

Specimen sent to pathology from surgical events 20–27.

[SEER Guideline: Codes 20-27 include shave and wedge resection]

- 30 Wide excision, NOS

Code 30 includes:

Hemiglossectomy
Partial glossectomy

- 40 Radical excision of tumor, NOS
 - 41 Radical excision of tumor ONLY
 - 42 Combination of 41 WITH resection in continuity with mandible (marginal, segmental, hemi-, or total resection)
 - 43 Combination of 41 WITH resection in continuity with maxilla (partial, subtotal, or total resection)

[SEER Guideline: 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]

Codes 40–43 include:

*Total glossectomy
Radical glossectomy*

- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

PAROTID AND OTHER UNSPECIFIED GLANDS

Parotid Gland C07.9, Major Salivary Glands C08.0–C08.9

(Except for M-9750, 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

[SEER Guideline: the following codes INCLUDE local tumor excision, polypectomy or excisional biopsy]

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

Specimen sent to pathology from surgical events 20–27.

- | 30 Less than total parotidectomy, NOS; less than total removal of major salivary gland, NOS
 - 31 Facial nerve spared
 - 32 Facial nerve sacrificed
- 33 Superficial lobe ONLY
 - 34 Facial nerve spared
 - 35 Facial nerve sacrificed
- | 36 Deep lobe (Total)
[SEER Guideline: with or without superficial lobe]
 - 37 Facial nerve spared
 - 38 Facial nerve sacrificed

- | 40 Total parotidectomy, NOS; total removal of major salivary gland, NOS
 - 41 Facial nerve spared
 - 42 Facial nerve sacrificed

- | 50 Radical parotidectomy, NOS; radical removal of major salivary gland, NOS
 - 51 WITHOUT removal of temporal bone
 - 52 WITH removal of temporal bone
 - | 53 WITH removal of overlying skin (requires graft or flap coverage)

- 80 Parotidectomy, NOS

- 90 Surgery, NOS

- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

PHARYNX

Tonsil C09.0–C09.9, Oropharynx C10.0–C10.9, Nasopharynx C11.0–C11.9
Pyriform Sinus C12.9, Hypopharynx C13.0–C13.9, Pharynx C14.0
(Except for M-9750, 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

15 Stripping

No specimen sent to pathology from surgical events 10–15.

20 Local tumor excision, NOS

26 Polypectomy

27 Excisional biopsy

Any combination of 20 or 26–27 WITH

[SEER Guideline: the following codes INCLUDE local tumor excision, polypectomy or excisional biopsy]

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

28 Stripping

Specimens sent to pathology from surgical events 20–28.

30 Pharyngectomy, NOS

31 Limited/partial pharyngectomy; tonsillectomy, bilateral tonsillectomy

32 Total pharyngectomy

40 Pharyngectomy WITH laryngectomy OR removal of contiguous bone tissue, NOS (does NOT include total mandibular resection)

[SEER Guideline: code 40 includes mandibulectomy (marginal, segmental, hemi-, and/or laryngectomy) NOS]

[SEER Guideline: contiguous bone tissue refers to the mandible]

41 WITH laryngectomy (laryngopharyngectomy)

42 WITH bone [mandibulectomy]

43 WITH both 41 and 42

50 Radical pharyngectomy (includes total mandibular resection), NOS

51 WITHOUT laryngectomy

52 WITH laryngectomy

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

ESOPHAGUS

C15.0–C15.9

(Except for M-9750, 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
[SEER Guideline: the following codes INCLUDE local tumor excision,
polypectomy or excisional biopsy]

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

Specimen sent to pathology from surgical events 20–27.

- 30 Partial esophagectomy
- 40 Total esophagectomy, NOS
- 50 Esophagectomy, NOS WITH laryngectomy and/or gastrectomy, NOS
[SEER Guideline: esophagectomy may be partial, total, or NOS]
 - 51 WITH laryngectomy
 - 52 WITH gastrectomy, NOS
 - 53 Partial gastrectomy
 - 54 Total gastrectomy
 - 55 Combination of 51 WITH any of 52–54
- 80 Esophagectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

STOMACH

C16.0–C16.9

(Except for M-9750, 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

[SEER Guideline: the following codes INCLUDE local tumor excision, polypectomy or excisional biopsy]

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

Specimen sent to pathology from surgical events 20–27.

30 Gastrectomy, NOS (partial, subtotal, hemi-)

31 Antrectomy, lower (distal-less than 40% of stomach)***

32 Lower (distal) gastrectomy (partial, subtotal, hemi-)

33 Upper (proximal) gastrectomy (partial, subtotal, hemi-)

Code 30 includes:

Partial gastrectomy, including a sleeve resection of the stomach

Billroth I: anastomosis to duodenum (duodenostomy)

Billroth II: anastomosis to jejunum (jejunostomy)

40 Near-total or total gastrectomy, NOS

41 Near-total gastrectomy

42 Total gastrectomy

A total gastrectomy may follow a previous partial resection of the stomach.

50 Gastrectomy, NOS WITH removal of a portion of esophagus

51 Partial or subtotal gastrectomy

52 Near total or total gastrectomy

Codes 50–52 are used for gastrectomy resection when only portions of esophagus are included in procedure.

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

STOMACH, continued
C16.0–C16.9

- 60 Gastrectomy with a resection in continuity with the resection of other organs, NOS***
 - 61 Partial or subtotal gastrectomy, in continuity with the resection of other organs***
 - 62 Near total or total gastrectomy, in continuity with the resection of other organs***
 - 63 Radical gastrectomy, in continuity with the resection of other organs***
- Codes 60–63 are used for gastrectomy resections with organs other than esophagus. Portions of esophagus may or may not be included in the resection.*
- [SEER Guideline: codes 60-63 may include omentectomy]
- [SEER Guideline: 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]
-
- 80 Gastrectomy, NOS
 - 90 Surgery, NOS
 - 99 Unknown if surgery performed; death certificate ONLY

*** Incidental splenectomy NOT included

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

COLON

C18.0–C18.9

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

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure of Other Site*.

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
 - 27 Excisional biopsy
 - 26 Polypectomy, NOS
 - 28 Polypectomy-endoscopic
 - 29 Polypectomy-surgical excision

Any combination of 20 or 26–29 WITH

[SEER Guideline: the following codes INCLUDE local tumor excision, polypectomy (NOS, endoscopic or surgical excision) or excisional biopsy]

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

Specimen sent to pathology from surgical events 20–29.

- 30 Partial colectomy, [but less than hemicolectomy] segmental resection
 - 32 Plus resection of contiguous organ; example: small bowel, bladder

[SEER Guideline: codes 30–31 include but are not limited to: appendectomy (for an appendix primary only), enterocolectomy, ileocolectomy, partial colectomy, NOS, partial resection of transverse colon and flexures, segmental resection, e.g., cecectomy, sigmoidectomy]

- 40 Subtotal colectomy/hemicolectomy [or greater (but less than total); right or left colectomy] (total right or left colon and a portion of transverse colon)
 - 41 Plus resection of contiguous organ; example: small bowel, bladder
- 50 Total colectomy (removal of colon from cecum to the rectosigmoid junction; may include a portion of the rectum)
 - 51 Plus resection of contiguous organ; example: small bowel, bladder

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

COLON, continued
C18.0–C18.9

- 60 Total proctocolectomy (removal of colon from cecum to the rectosigmoid junction, including the entire rectum)
[SEER Guideline: commonly used for familial polyposis or polyposis coli]
61 Plus resection of contiguous organ; example: small bowel, bladder
- 70 Colectomy or coloproctectomy with resection of contiguous organ(s), NOS (where there is not enough information to code 32, 41, 51, or 61)
Code 70 includes any colectomy (partial, hemicolectomy, or total) WITH a resection of any other organs in continuity with the primary site. Other organs may be partially or totally removed. Other organs may include, but are not limited to, oophorectomy, partial proctectomy, rectal mucosectomy, or pelvic exenteration.
[SEER Guideline: 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]
- 80 Colectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

RECTOSIGMOID

C19.9

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

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure of Other Site*.

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 ablation

No specimen sent to pathology from surgical events 10–14.

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

Combination of 20 or 26–27 WITH
[SEER Guideline: the following codes INCLUDE local tumor excision, polypectomy or excisional biopsy]

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

Specimen sent to pathology from surgical events 20–27.

- 30 Wedge or segmental resection; partial proctosigmoidectomy, NOS
 - 31 Plus resection of contiguous organs; example: small bowel, bladder

Procedures coded 30 include, but are not limited to:

Anterior resection
Hartmann operation
Low anterior resection (LAR)
Partial colectomy, NOS
Rectosigmoidectomy, NOS
Sigmoidectomy

- 40 Pull through WITH sphincter preservation (colo-anal anastomosis)
[SEER Guideline: Procedures coded 40 include but are not limited to: Altemeier's operation, Duhamel's operation, Soave's submucosal resection, Swenson's operation, Turnbull's operation.]
- 50 Total proctectomy
[SEER Guideline: Procedures coded 50 include but are not limited to: abdominoperineal resection (A & P resection), anterior/posterior resection (A/P resection)/Miles' operation, Rankin's operation]
- 51 Total colectomy [removal of the colon from cecum to rectosigmoid or portion of rectum]

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

RECTOSIGMOID, continued
C19.9

- 55 Total colectomy WITH ileostomy, NOS
- 56 Ileorectal reconstruction
- 57 Total colectomy WITH other pouch; example: Koch pouch

- 60 Total proctocolectomy, NOS [combination of 50 and 51]
- 65 Total proctocolectomy WITH ileostomy, NOS
- 66 Total proctocolectomy WITH ileostomy and pouch
- Removal of the colon from cecum to the rectosigmoid or a portion of the rectum.*

- 70 Colectomy or proctocolectomy resection in continuity with other organs; pelvic exenteration
[SEER Guideline: Procedures that may be part of an en bloc resection include, but are not limited to: an oophorectomy and a rectal mucosectomy. Code 70 includes any colectomy (partial, hemicolectomy or total) with an en bloc resection of any other organs. There may be partial or total removal of other organs in continuity with the primary.]
[SEER Guideline: 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]

- 80 Colectomy, NOS; Proctectomy, NOS

- 90 Surgery, NOS

- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

RECTUM

C20.9

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

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure of Other Site*.

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

27 Excisional biopsy

26 Polypectomy

Any combination of 20 or 26–27 WITH

[SEER Guideline: the following codes INCLUDE local tumor excision, polypectomy or excisional biopsy]

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

28 Curette and fulguration

Specimen sent to pathology from surgical events 20–28.

30 Wedge or segmental resection; partial proctectomy, NOS

Procedures coded 30 include, but are not limited to:

Anterior resection

Hartmann's operation

Low anterior resection (LAR)

Transsacral rectosigmoidectomy

40 Pull through WITH sphincter preservation (coloanal anastomosis)

[SEER Guideline: Procedures coded 40 include but are not limited to: Altemeier's operation, Duhamel's operation, Soave's submucosal resection, Swenson's operation, Turnbull's operation.]

50 Total proctectomy

Procedure coded 50 includes, but is not limited to:

Abdominoperineal resection (Miles Procedure)

[SEER Guideline: also called anterior/posterior (A/P) resection/Miles' operation, Rankin's operation]

60 Total proctocolectomy, NOS

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

RECTUM, continued
C20.9

- 70 Proctectomy or proctocolectomy with resection in continuity with other organs; pelvic exenteration
[SEER Guideline: 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]
- 80 Proctectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

ANUS

C21.0–C21.8

(Except for M-9750, 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
 - 15 Thermal Ablation

No specimen sent to pathology from surgical events 10–15.

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

Any combination of 20 or 26–27 WITH

[SEER Guideline: the following codes INCLUDE local tumor excision, polypectomy or excisional biopsy]

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

Specimen sent to pathology from surgical events 20–27.

[SEER Guideline: margins of resection may have microscopic involvement]

- 60 Abdominal perineal resection, NOS (APR; Miles procedure)
 - 61 APR and sentinel node excision
 - 62 APR and unilateral inguinal lymph node dissection
 - 63 APR and bilateral inguinal lymph node dissection

- 90 Surgery, NOS

- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

LIVER AND INTRAHEPATIC BILE DUCTS

C22.0–C22.1

(Except for M-9750, 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
 - 15 Alcohol (Percutaneous Ethanol Injection-PEI)
 - 16 Heat-Radio-frequency ablation (RFA)
 - 17 Other (ultrasound, acetic acid)

No specimen sent to pathology from surgical events 10–17.
- 20 Wedge or segmental resection, NOS
 - 21 Wedge resection
 - 22 Segmental resection, NOS
 - 23 One
 - 24 Two
 - 25 Three
 - 26 Segmental resection AND local tumor destruction

Specimen sent to pathology from surgical events 20–26.
- 30 Lobectomy, [simple or] NOS
 - 36 Right lobectomy
 - 37 Left lobectomy
 - 38 Lobectomy AND local tumor destruction
- 50 Extended lobectomy, NOS (extended: resection of a single lobe plus a segment of another lobe)
 - 51 Right lobectomy
 - 52 Left lobectomy
 - 59 Extended lobectomy AND local tumor destruction
- 60 Hepatectomy, NOS [formerly SEER code 80]
 - 61 Total hepatectomy and transplant [formerly SEER code 70]
- 65 Excision of a bile duct (for an intra-hepatic bile duct primary only) [formerly SEER code 40]
 - 66 Excision of a bile duct PLUS partial hepatectomy
- 75 Bile duct and hepatectomy WITH transplant
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

PANCREAS

C25.0–C25.9

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

Codes

- 00 None; no surgery of primary site; autopsy ONLY
- | 25 Local excision of tumor, NOS [formerly SEER code 10]
- | 30 Partial pancreatectomy, NOS; example: distal [formerly SEER code 20]
- | 35 Local or partial pancreatectomy and duodenectomy [formerly SEER code 50]
 - 36 WITHOUT distal/partial gastrectomy [formerly SEER code 51 “without subtotal gastrectomy”]
 - 37 WITH partial gastrectomy (Whipple) [formerly SEER code 52 “with subtotal gastrectomy (Whipple)”]
- 40 Total pancreatectomy
- 60 Total pancreatectomy and subtotal gastrectomy or duodenectomy
- 70 Extended pancreatoduodenectomy
- 80 Pancreatectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

LARYNX

C32.0–C32.9

(Except for M-9750, 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
 - 15 Stripping

No specimen sent to pathology from surgical events 10–15.
- 20 Local tumor excision, NOS
 - 26 Polypectomy
 - 27 Excisional biopsy

Any combination of 20 or 26–27 WITH
[SEER Guideline: the following codes INCLUDE local tumor excision,
polypectomy or excisional biopsy]

 - 21 Photodynamic therapy (PDT)
 - 22 Electrocautery
 - 23 Cryosurgery
 - 24 Laser ablation
 - 25 Laser excision
 - 28 Stripping

Specimen sent to pathology from surgical events 20–28.
- 30 Partial excision of the primary site, NOS; subtotal/partial laryngectomy NOS; hemilaryngectomy NOS
 - 31 Vertical laryngectomy
 - 32 Anterior commissure laryngectomy
 - 33 Supraglottic laryngectomy
- 40 Total or radical laryngectomy, NOS
 - 41 Total laryngectomy ONLY
 - 42 Radical laryngectomy ONLY
- 50 Pharyngolaryngectomy
- 80 Laryngectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

LUNG

C34.0–C34.9

(Except for M-9750, 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 [formerly SEER code 10]
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, NOS
 - 12 Laser ablation or cryosurgery [formerly SEER code 12 = laser ablation or excision]
 - 13 Electrocautery; fulguration (includes use of hot forceps for tumor destruction) [formerly SEER code 13 = cautery; fulguration]*No specimen sent to pathology from surgical events 12–13 and 15.*
- 20 Excision or resection of less than one lobe, NOS
 - 23 Excision, NOS [formerly SEER code 11 = Excision]
 - 24 Laser excision [formerly SEER code 12 = laser ablation or excision]
 - 25 Bronchial sleeve resection ONLY [formerly SEER code 14]
 - 21 Wedge resection
 - 22 Segmental resection, including lingulectomy*Specimen sent to pathology from surgical events 20–25.*
- 30 Resection of [at least one] lobe or lobectomy, but less than the whole lung (partial pneumonectomy, NOS)
 - 33 Lobectomy WITH mediastinal lymph node dissection
- 45 Lobe or lobectomy extended, NOS
 - 46 WITH chest wall
 - 47 WITH pericardium
 - 48 WITH diaphragm
- 55 Pneumonectomy, NOS [formerly SEER codes 40, 50, 51, 52, 53, 54]
 - 56 WITH mediastinal lymph node dissection (radical pneumonectomy)*The mediastinal lymph node dissection should also be coded under Scope of Regional Lymph Node Surgery.*
- 65 Extended pneumonectomy
 - 66 Extended pneumonectomy plus pleura or diaphragm
- 70 Extended radical pneumonectomy
 [SEER Guideline: an extended radical pneumonectomy is a radical pneumonectomy (including removal of mediastinal nodes) and the removal of other tissues or nodes]
The mediastinal lymph node dissection should also be coded under Scope of Regional Lymph Node Surgery.
- 80 Resection of lung, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

**HEMATOPOIETIC/RETICULOENDOTHELIAL/
IMMUNOPROLIFERATIVE/MYELOPROLIFERATIVE DISEASE**

**C42.0, C42.1, C42.3, C42.4 for all histologies;
M-9750, 9760–9764, 9800–9820, 9826, 9831–9920, 9931–9964,
9980–9989 for all sites**

Code

- 98 All hematopoietic/reticuloendothelial/immunoproliferative/myeloproliferative disease sites and/or histologies, WITH or WITHOUT surgical treatment.
- 99 Death certificate only
- Surgical procedures for hematopoietic/reticuloendothelial/immunoproliferative/ myeloproliferative primaries are to be recorded using the data item Surgical Procedure of Other Site.*

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

BONES, JOINTS, AND ARTICULAR CARTILAGE C40.0–C41.9
PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM C47.0–C47.9
CONNECTIVE, SUBCUTANEOUS, AND OTHER SOFT TISSUES C49.0–C49.9

(Except for M-9750, 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 [formerly SEER code 10 = local tumor destruction or excision—**requires review**]
- 15 Local tumor destruction [formerly SEER code 10 = local tumor destruction or excision—**requires review**]
No specimen sent to pathology from surgical event 15.
- 25 Local excision
- 26 Partial resection [formerly SEER code 20 = partial resection/internal hemipelvectomy (pelvis)—**requires review**]
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 [formerly SEER code 20 = partial resection/internal hemipelvectomy (pelvis)—**requires review**]
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

SPLEEN

C42.2

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

Note: Lymph Nodes surgery codes have been moved to a separate scheme

Codes

- 00 None; no surgery of primary site; autopsy ONLY
- 19 Local tumor destruction, NOS [formerly SEER code 10 = local excision, destruction, NOS]
No specimen was sent to pathology for surgical events coded 19 (principally for cases diagnosed prior to January 1, 2003).
- 21 Partial splenectomy
- 22 Total splenectomy
- 80 Splenectomy, NOS [formerly SEER code 20]
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

SKIN

C44.0–C44.9

(Except for M-9750, 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 ablation

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

[SEER Guideline: the following codes INCLUDE local tumor excision, polypectomy or excisional biopsy]

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

Specimen sent to pathology from surgical events 20–27.

30 Biopsy of primary tumor followed by a gross excision of the lesion (does not have to be done under the same anesthesia)

31 Shave biopsy followed by a gross excision of the lesion

32 Punch biopsy followed by a gross excision of the lesion

33 Incisional biopsy followed by a gross excision of the lesion

34 Mohs surgery, NOS

35 Mohs with 1-cm margin or less

36 Mohs with more than 1-cm margin

45 Wide excision or reexcision of lesion or minor (local) amputation with margins more than 1 cm, NOS. Margins MUST be microscopically negative. [formerly SEER code 40 or 50 = wide excision or re-excision of lesion or minor (local) amputation, NOS, margins of excision are 1 cm or more, margins may be microscopically involved.]

46 WITH margins more than 1 cm and less than 2 cm

47 WITH margins greater than 2 cm

60 Major amputation [NOS]

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

BREAST

C50.0–C50.9

(Except for M-9750, 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, NOS
No specimen was sent to pathology for surgical events coded 19 (principally for cases diagnosed prior to January 1, 2003).
- 20 Partial mastectomy, NOS; less than total mastectomy, NOS [formerly SEER code 10]
21 Partial mastectomy WITH nipple resection [formerly SEER code 11 = nipple resection]
22 Lumpectomy or excisional biopsy [formerly SEER code 12]
23 Reexcision of the biopsy site for gross or microscopic residual disease [formerly SEER code 13]
24 Segmental mastectomy (including wedge resection, quadrantectomy, tylectomy) [formerly SEER codes 16 = segmental mastectomy, 14 = wedge resection, 15 = quadrantectomy, 17 = tylectomy]
Procedures coded 20–24 remove the gross primary tumor and some of the breast tissue (breast-conserving or preserving). There may be microscopic residual tumor.
- 30 Subcutaneous mastectomy
A subcutaneous mastectomy is the removal of breast tissue without the nipple and areolar complex or overlying skin.
[SEER Guideline: this procedure is rarely used to treat malignancies]
- 40 Total (simple) mastectomy, NOS
41 WITHOUT removal of uninvolved contralateral breast
42 WITH removal of uninvolved contralateral breast
A simple mastectomy removes all breast tissue, the nipple, and areolar complex. An axillary dissection is not done.
For single primaries only, code removal of involved contralateral breast under the data item Surgical Procedure of Other Site.
If contralateral breast reveals a second primary, each breast is abstracted separately. The surgical procedure is coded 41 for the first primary. The surgical code for the contralateral breast is coded to the procedure performed on that site.
- 50 Modified radical mastectomy
51 WITHOUT removal of uninvolved contralateral breast
53 Reconstruction, NOS
54 Tissue
55 Implant
56 Combined (Tissue and Implant)
52 WITH removal of uninvolved contralateral breast
57 Reconstruction, NOS
58 Tissue
59 Implant
63 Combined (Tissue and Implant)

Removal of all breast tissue, the nipple, the areolar complex, and variable amounts of breast skin in continuity with the axilla. The specimen may or may not include a portion of the pectoralis major muscle.

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

BREAST, continued
C50-C50.9

[SEER Guideline: 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]

[SEER Guideline: “tissue” for reconstruction is defined as human tissue such as muscle (latissimus dorsi or rectus abdominis) or skin in contrast to artificial prostheses (implants).]

If contralateral breast reveals a second primary, it is abstracted separately. The surgical procedure is coded 51 for the first primary. The surgical code for the contralateral breast is coded to the procedure performed on that site.

For single primaries only, code removal of involved contralateral breast under the data item Surgical Procedure of Other Site.

- 60 Radical mastectomy, NOS
 - 61 WITHOUT removal of uninvolved contralateral breast
 - 64 Reconstruction, NOS
 - 65 Tissue
 - 66 Implant
 - 67 Combined (Tissue and Implant)
 - 62 WITH removal of uninvolved contralateral breast
 - 68 Reconstruction, NOS
 - 69 Tissue
 - 73 Implant
 - 74 Combined (Tissue and Implant)

[SEER Guideline: Removal of breast tissue, nipple, areolar complex, variable amount of skin, pectoralis minor, pectoralis major. Includes en bloc axillary dissection. For single primaries only, code removal of involved contralateral breast under the data item “Surgery of other regional sites, distant sites, or distant lymph nodes.”]

- 70 Extended radical mastectomy
 - 71 WITHOUT removal of uninvolved contralateral breast
 - 72 WITH removal of uninvolved contralateral breast

[SEER Guideline: Removal of breast tissue, nipple, areolar complex, variable amount of skin, pectoralis minor, pectoralis major. Includes removal of internal mammary nodes and en bloc axillary dissection. For single primaries only, code removal of involved contralateral breast under the data item “Surgery of other regional sites, distant sites, or distant lymph nodes.”]

- 80 Mastectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

CERVIX UTERI

C53.0–C53.9

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

[SEER Guideline: **For invasive cancers**, dilation and curettage is NOT coded as Surgery of Primary Site.]

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
 - 15 Loop Electrocautery Excision Procedure (LEEP)
 - 16 Laser ablation
 - 17 Thermal ablation
- No specimen sent to pathology from surgical events 10–17.*
- 20 Local tumor excision, NOS
- 26 Excisional biopsy, NOS
 - 27 Cone biopsy
 - 24 Cone biopsy WITH gross excision of lesion
 - 29 Trachelectomy; removal of cervical stump; cervicectomy
- Any combination of 20, 24, 26, 27 or 29 WITH
- 21 Electrocautery
 - 22 Cryosurgery
 - 23 Laser ablation or excision
- 25 Dilatation and curettage; endocervical curettage (for in situ only)
- 28 Loop electrocautery excision procedure (LEEP)
- Specimen sent to pathology from surgical events 20–29.*
- 30 Total hysterectomy (simple, pan-) WITHOUT removal of tubes and ovaries
Total hysterectomy removes both the corpus and cervix uteri and may also include a portion of vaginal cuff.
- 40 Total hysterectomy (simple, pan-) WITH removal of tubes and/or ovary
Total hysterectomy removes both the corpus and cervix uteri and may also include a portion of vaginal cuff.
- 50 Modified radical or extended hysterectomy; radical hysterectomy; extended radical hysterectomy
- 51 Modified radical hysterectomy
 - 52 Extended hysterectomy
 - 53 Radical hysterectomy; Wertheim procedure
 - 54 Extended radical hysterectomy
- 60 Hysterectomy, NOS, WITH or WITHOUT removal of tubes and ovaries
- 61 WITHOUT removal of tubes and ovaries
 - 62 WITH removal of tubes and ovaries

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

CERVIX UTERI, continued
C53.0–C53.9

- 70 Pelvic exenteration
 - 71 Anterior exenteration
Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item Surgical Procedure of Other Site.
- 72 Posterior exenteration
Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item Surgical Procedure of Other Site.
- 73 Total exenteration
Includes removal of all pelvic contents and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item Surgical Procedure of Other Site.
- 74 Extended exenteration
Includes pelvic blood vessels or bony pelvis.
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

CORPUS UTERI

C54.0–C55.9

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

[SEER Guideline: **For invasive cancers**, dilation and curettage is NOT coded as Surgery of Primary Site.]

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).
- 10 Local tumor destruction, NOS
- 11 Photodynamic therapy (PDT)
 - 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
 - 13 Cryosurgery
 - 14 Laser
 - 15 Loop Electocautery Excision Procedure (LEEP)
 - 16 Thermal ablation
- No specimen sent to pathology from surgical events 10–16.*
- 20 Local tumor excision, NOS; simple excision, NOS
- 24 Excisional biopsy
 - 25 Polypectomy
 - 26 Myomectomy
- Any combination of 20 or 24–26 WITH
[SEER Guideline: the following codes INCLUDE local tumor excision, polypectomy or excisional biopsy]
- 21 Electrocautery
 - 22 Cryosurgery
 - 23 Laser ablation or excision
- Specimen sent to pathology from surgical events 20–26.*
[Margins of resection may have microscopic involvement]
[SEER Guideline: Procedures in code 20 include but are not limited to: cryosurgery, electrocautery, excisional biopsy, laser ablation, thermal ablation]
- 30 Subtotal hysterectomy/supracervical hysterectomy/fundectomy WITH or WITHOUT removal of tube(s) and ovary(ies).
- 31 WITHOUT tube(s) and ovary(ies)
 - 32 WITH tube(s) and ovary(ies)
- [SEER Guideline: for these procedures, the cervix is left in place.]
- 40 Total hysterectomy (simple, pan-) WITHOUT removal of tube(s) and ovary(ies)
Removes both the corpus and cervix uteri. It may also include a portion of the vaginal cuff.
- 50 Total hysterectomy (simple, pan-) WITH removal of tube(s) and/or ovary(ies)
Removes both the corpus and cervix uteri. It may also include a portion of the vaginal cuff.

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

CORPUS UTERI, continued

C54.0–C55.9

- 60 Modified radical or extended hysterectomy; radical hysterectomy; extended radical hysterectomy
 - 61 Modified radical hysterectomy
 - 62 Extended hysterectomy
 - 63 Radical hysterectomy; Wertheim procedure
 - 64 Extended radical hysterectomy

- 65 Hysterectomy, NOS, WITH or WITHOUT removal of tube(s) and ovary(ies) [formerly SEER code 70]
 - 66 WITHOUT removal of tube(s) and ovary(ies) [formerly SEER code 71]
 - 67 WITH removal of tube(s) and ovary(ies) [formerly SEER code 72]

- 75 Pelvic exenteration [formerly SEER code 80]
 - 76 Anterior exenteration [formerly SEER code 81]
Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item Surgical Procedure of Other Site.

- 77 Posterior exenteration [formerly SEER code 82]
Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item Surgical Procedure of Other Site.

- 78 Total exenteration [formerly SEER code 83]
Includes removal of all pelvic contents and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item Surgical Procedure of Other Site.

- 79 Extended exenteration [formerly SEER code 84]
Includes pelvic blood vessels or bony pelvis.

- 90 Surgery, NOS

- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

OVARY

C56.9

(Except for M-9750, 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 [formerly SEER code 14]
36 WITHOUT hysterectomy [formerly SEER code 15]
37 WITH hysterectomy [formerly SEER code 16]
- 50 Bilateral (salpingo-)oophorectomy; unknown if hysterectomy done [formerly SEER code 20]
51 WITHOUT hysterectomy [formerly SEER code 21]
52 WITH hysterectomy [formerly SEER code 22]
- 55 Unilateral or bilateral (salpingo-)oophorectomy WITH OMENTECTOMY, NOS; partial or total; unknown if hysterectomy done [formerly SEER code 30]
56 WITHOUT hysterectomy [formerly SEER code 31]
57 WITH hysterectomy [formerly SEER code 32]
- 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.
- 70 Pelvic exenteration, NOS
71 Anterior
Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item Surgical Procedure of Other Site.
- 72 Posterior
Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item Surgical Procedure of Other Site.

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

OVARY, continued
C56.9

- 73 Total
 Includes removal of all pelvic contents and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item Surgical Procedure of Other Site.
- 74 Extended
 Includes pelvic blood vessels or bony pelvis.
- 80 (Salpingo-)oophorectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

PROSTATE

C61.9

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

Do not code an orchiectomy in this field. For prostate primaries, orchiectomies are coded in the data item “Hematologic Transplant and Endocrine Procedures.”

[SEER note: review all former SEER code 10. Convert code 10 to 21 if Diagnostic Confirmation is code 1-4; otherwise convert code 10 to 19.]

Codes

- 00 None; no surgery of primary site; autopsy ONLY
- 18 Local tumor destruction or excision, NOS [formerly SEER code 10]
- 19 Transurethral resection (TURP), NOS [formerly SEER code 11]
Unknown whether a specimen was sent to pathology for surgical events coded 18 or 19 (principally for cases diagnosed prior to January 1, 2003).
- 10 Local tumor destruction, [or excision] NOS
14 Cryoprostectomy
15 Laser ablation
16 Hyperthermia
17 Other method of local tumor destruction
No specimen sent to pathology from surgical events 10–17.
- 20 Local tumor excision, NOS [formerly SEER code 10 = local tumor destruction or excision, NOS]
21 Transurethral resection (TURP), NOS [formerly SEER code 11 = transurethral resection (TURP) NOS]
22 TURP—cancer is incidental finding during surgery for benign disease [formerly SEER code 12]
23 TURP—patient has suspected/known cancer [SEER code 13]
Any combination of 21–23 WITH
24 Cryosurgery
25 Laser
26 Hyperthermia
Specimen sent to pathology from surgical events 20–26.
- 30 Subtotal, segmental, or simple prostatectomy, which may leave all or part of the capsule intact [formerly SEER code 30 or 40]
- 50 Radical prostatectomy, NOS; total prostatectomy, NOS
Excised prostate, prostatic capsule, ejaculatory ducts, seminal vesicle(s) and may include a narrow cuff of bladder neck.
- 70 Prostatectomy WITH resection in continuity with other organs; pelvic exenteration
Surgeries coded 70 are any prostatectomy WITH resection in continuity with any other organs. The other organs may be partially or totally removed. Procedures may include, but are not limited to, cystoprostatectomy, radical cystectomy, and prostatectomy.
[SEER Guideline: 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]

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

PROSTATE, continued
C61.9

- | 80 Prostatectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

TESTIS

C62.0–C62.9

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

Codes

- 00 None; no surgery of primary site; autopsy ONLY

- | 12 Local tumor destruction, NOS
 No specimen sent to pathology from surgical event 12.

- | 20 Local or partial excision of testicle [formerly SEER code 10]
 Specimen sent to pathology from surgical event 20.

- 30 Excision of testicle, NOS WITHOUT cord

- 40 Excision of testicle, NOS WITH cord/or cord not mentioned

- | 80 Orchiectomy, NOS (unspecified whether partial or total testicle removed)

- 90 Surgery, NOS

- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

KIDNEY, RENAL PELVIS, AND URETER

Kidney C64.9, Renal Pelvis C65.9, Ureter C66.9

(Except for M-9750, 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

15 Thermal ablation

No specimen sent to pathology from this surgical event 10–15.

20 Local tumor excision, NOS

26 Polypectomy

27 Excisional biopsy

Any combination of 20 or 26–27 WITH

[SEER Guideline: the following codes INCLUDE local tumor excision, polypectomy or excisional biopsy]

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

Specimen sent to pathology from surgical events 20–27.

30 Partial or subtotal nephrectomy (kidney or renal pelvis) or partial ureterectomy (ureter)

Procedures coded 30 include, but are not limited to:

Segmental resection

Wedge resection

40 Complete/total/simple nephrectomy—for kidney parenchyma

Nephroureterectomy

Includes bladder cuff for renal pelvis or ureter.

50 Radical nephrectomy

May include removal of a portion of vena cava, adrenal gland(s), Gerota's fascia, perinephric fat, or partial/total ureter.

70 Any nephrectomy (simple, subtotal, complete, partial, total, radical) in continuity with the resection of other organ(s) (colon, bladder)

The other organs, such as colon or bladder, may be partially or totally removed.

[SEER Guideline: 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]

80 Nephrectomy, NOS

Ureterectomy, NOS

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

BLADDER

C67.0–C67.9

(Except for M-9750, 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

15 Intravesical therapy

16 Bacillus Calmette-Guerin (BCG) or other immunotherapy

No specimen sent to pathology from surgical events 10–16.

20 Local tumor excision, NOS

26 Polypectomy

27 Excisional biopsy

Combination of 20 or 26–27 WITH

[SEER Guideline: the following codes INCLUDE local tumor excision, polypectomy or excisional biopsy]

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

Specimen sent to pathology from surgical events 20–27.

30 Partial cystectomy

50 Simple/total/complete cystectomy

60 Radical cystectomy (male only)

[SEER Guideline: This code is used only for men. It involves removal of bladder and prostate, with or without urethrectomy. The procedure is also called cystoprostatectomy. If a radical cystectomy is the procedure for a woman, use code 71.]

61 Radical cystectomy PLUS ileal conduit

62 Radical cystectomy PLUS continent reservoir or pouch, NOS

63 Radical cystectomy PLUS abdominal pouch (cutaneous)

64 Radical cystectomy PLUS in situ pouch (orthotopic)

70 Pelvic exenteration, NOS

71 Radical cystectomy (female only); anterior exenteration

A radical cystectomy in a female includes removal of bladder, uterus, ovaries, entire vaginal wall, and entire urethra.

72 Posterior exenteration

73 Total exenteration

Includes removal of all pelvic contents and pelvic lymph nodes.

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

BLADDER, continued
C67.0-C67.9

- 74 Extended exenteration
 Includes pelvic blood vessels or bony pelvis.
- 80 Cystectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

BRAIN [and other parts of central nervous system]
Meninges C70.0–C70.9, Brain C71.0–C71.9,
Spinal Cord, Cranial Nerves and Other Parts of Central Nervous System C72.0–C72.9
(Except for M-9750, 9760–9764, 9800–9820, 9826, 9831–9920, 9931–9964, 9980–9989)

Do not code laminectomies for spinal cord primaries.

[SEER Note: Review former codes 20, 21-23 and 30.]

Codes

- 00 None; no surgery of primary site; autopsy ONLY
- 10 [Local] Tumor destruction, NOS
No specimen sent to pathology from surgical event 10.
Do not record stereotactic radiosurgery as tumor destruction. It should be recorded in the radiation treatment item RX Summ--Radiation.
- 20 Biopsy [excision] of tumor, lesion, or mass
Specimen sent to pathology from surgical event 20.
- 40 Partial resection [NOS]
- 55 Gross total resection [formerly SEER codes 31, 32, 50, 60]
- 90 Surgery, NOS
- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

THYROID GLAND

C73.9

(Except for M-9750, 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 [formerly SEER code 10]
 - 26 Local surgical excision [formerly SEER code 11]
 - 27 Removal of a partial lobe ONLY [formerly SEER code 12]
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

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

LYMPH NODES

Lymph Nodes C77.0–C77.9

(Except for M-9750, 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 [formerly SEER code 10 under spleen and lymph nodes]
Unknown whether a specimen was sent to pathology for surgical events coded to 19 (principally for cases diagnosed prior to January 1, 2003).

- 15 Local tumor destruction, NOS
No specimen sent to pathology from surgical event 15.

- 25 Local tumor excision, NOS
Less than a full chain, includes a lymph node biopsy.

- 30 Lymph node dissection, NOS
 - 31 One chain
 - 32 Two or more chains

- 40 Lymph node dissection, NOS PLUS splenectomy
 - 41 One chain
 - 42 Two or more chains

- 50 Lymph node dissection, NOS and partial/total removal of adjacent organ(s)
 - 51 One chain
 - 52 Two or more chains

- 60 Lymph node dissection, NOS and partial/total removal of adjacent organ(s) PLUS splenectomy
(Includes staging laparotomy for lymphoma.)
 - 61 One chain
 - 62 Two or more chains

- 90 Surgery, NOS

- 99 Unknown if surgery performed; death certificate ONLY

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

ALL OTHER SITES

**C14.1–C14.8, C17.0–C17.9, C23.9, C24.0–C24.9, C26.0–C26.9, C30.0–C 30.1, C31.0–C31.9, C33.9,
C37.9, C38.0–C38.8, C39.0–C39.9, C48.0–C48.8, C51.0–C51.9, C52.9, C57.0–C57.9, C58.9,
C60.0–C 60.9, C63.0–C63.9, C68.0–C68.9, C69.0–C69.9, C74.0–C74.9, C75.0–C75.9**
(Except for M-9750, 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

[SEER Guideline: the following codes INCLUDE local tumor excision,
polypectomy or excisional biopsy]

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

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 Guideline: 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

APPENDIX F
SEER 2003+ Site-Specific Surgery of Primary Site Codes

UNKNOWN AND ILL-DEFINED PRIMARY SITES

C76.0–C76.8, C80.9

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

Code

- 98 All unknown and ill-defined disease sites, WITH or WITHOUT surgical treatment.
*Surgical procedures for unknown and ill-defined primaries are to be recorded using the data item
Surgical Procedure of Other Site.*
- [99 Death certificate only]

1983-1997

Site-Specific Surgery Codes

APPENDIX D

TWO-DIGIT SITE-SPECIFIC

SURGERY CODES (1983-1997)

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

ORAL CAVITY
C00.0-C14.8

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Cancer-Directed Surgery

- 10 Electrocautery, or cryosurgery; laser surgery WITHOUT pathology specimen
- 20 Laser surgery WITH pathology specimen; excisional biopsy
- 30 Local surgical excision
- 40 Radical excision
- 50 Local/radical excision WITH (radical) neck dissection
- 70 Radical neck dissection ONLY
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

NOTE: *Codes '10' - '90' have priority over codes '00' - '09.'*
 Codes '10' - '78' have priority over codes '80' - '90.'
 Surgery of primary not included in any category should be coded '90.'
 In the range '10' - '78,' the higher code has priority.
 Codes '01' - '07' have priority over code '09.'
 In the range '01' - '06,' the higher code has priority.
 Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
 Codes '01' - '06' have priority over code '07.'
 Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

STOMACH
C16.0-C16.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Local surgical excision (includes polypectomy, excision of ulcer, other lesions, or stomach tissue with evidence of cancer)
- 20 Partial*/subtotal/hemigastrectomy: Upper (proximal) portion (may include part of esophagus, i.e., esophagogastrrectomy)
- 30 Partial*/subtotal/hemigastrectomy: Lower (distal) portion (may include part of duodenum, i.e., gastropylorctomy); Billroth I (indicates anastomosis to duodenum); duodenostomy; Billroth II (indicates anastomosis to jejunum); jejunostomy; antrectomy (resection of pyloric antrum of stomach)
- 40 Partial*/subtotal/hemigastrectomy, NOS; resection of portion of stomach, NOS
- 50 Total/near total** gastrectomy (includes resection with pouch left for anastomosis; total gastrectomy following previous partial resection for another cause)
- 60 Gastrectomy, NOS
- 70 Gastrectomy (partial, total, radical) PLUS partial or total removal of other organs
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

* Partial gastrectomy includes sleeve resection of stomach.

** Near total gastrectomy means 80 percent or more.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

STOMACH (cont.)

*NOTE: Codes 10-70 may include removal of spleen, nodes, omentum, mesentery, or mesocolon.
Ignore incidental removal of gallbladder, bile ducts, appendix, or vagus nerve.
Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as
part of the planned first course of therapy.*

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

COLON (excludes rectosigmoid, rectum)
C18.0-C18.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Local cancer destruction WITHOUT pathology specimen (includes laser surgery, cryosurgery, electrocautery, or fulguration)
- 20 Local surgical excision WITH pathology specimen (includes polypectomy, snare, or laser surgery)
- 30 Partial/subtotal colectomy, but less than hemicolectomy (includes segmental resection, e.g., cecectomy, appendectomy, sigmoidectomy, partial resection of transverse colon and flexures, ileocollectomy, enterocollectomy, and partial/subtotal colectomy, NOS)
- 40 Hemicolectomy or greater (but less than total); right/left colectomy (all of right or left colon and a portion of transverse)
- 50 Total colectomy (beginning with cecum and ending with sigmoid/rectum or part of rectum)
- 60 Colectomy, NOS
- 70 Colectomy (subtotal, hemicolectomy or total) PLUS partial or total removal of other organs
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

COLON (excludes rectosigmoid, rectum) (cont.)

NOTE: Codes 30-70 may include removal of lymph nodes, mesentery, mesocolon, peritoneum, a portion of terminal ileum, or omentum.

Ignore incidental removal of appendix, gallbladder, bile ducts, or spleen.

Codes '10' - '90' have priority over codes '00' - '09.'

Codes '10' - '78' have priority over codes '80' - '90.'

Surgery of primary not included in any category should be coded '90.'

In the range '10' - '78,' the higher code has priority.

Codes '01' - '07' have priority over code '09.'

In the range '01' - '06,' the higher code has priority.

Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'

Codes '01' - '06' have priority over code '07.'

Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.

If not clear from either the operative or pathology report what was removed, but the title of the operative report is hemicolectomy, code as hemicolectomy.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

RECTOSIGMOID, RECTUM
C19.9, C20.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Local cancer destruction WITHOUT pathology specimen (includes laser surgery, cryosurgery, electrocautery, or fulguration)
- 20 Local surgical excision WITH pathology specimen (includes polypectomy, snare, or laser surgery)
- 30 Anterior/posterior resection, wedge or segmental resection, transsacral rectosigmoidectomy, Hartmann's operation, partial proctectomy, rectal resection, NOS
- 40 Pull-through resection WITH sphincter preservation (e.g., Turnbull's and Swenson's operations, Soave's submucosal resection, Altemeier's operation, and Duhamel's operation)
- 50 Abdominoperineal resection (e.g., Miles' and Rankin's operations), complete proctectomy
- 60 Any of codes 30-50 PLUS partial or total removal of other organs
- 70 Pelvic Exenteration (partial or total)
 - Posterior exenteration (includes rectum and rectosigmoid with ligamentous attachments and pelvic lymph nodes)
 - Total exenteration (includes removal of all pelvic contents and pelvic lymph nodes)
 - Extended exenteration (includes pelvic blood vessels or bony pelvis)
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

RECTOSIGMOID, RECTUM (cont.)

*NOTE: Codes 30-70 may include removal of lymph nodes and/or removal of section of colon.
Ignore incidental removal of gallbladder, bile ducts, or appendix.
Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority. `
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as
part of the planned first course of therapy.*

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

PANCREAS
C25.0-C25.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Local or partial surgical excision of pancreas
- 20 Total pancreatectomy WITH/WITHOUT splenectomy
- 30 Subtotal gastrectomy, duodenectomy with complete or partial pancreatectomy WITH/WITHOUT splenectomy (Whipple's operation)
- 40 Radical regional (partial) pancreatectomy with lymph node dissection and adjacent soft tissue resection
- 50 Pancreatectomy, NOS
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

NOTE: Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

LARYNX
C32.0-C32.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Laser surgery WITHOUT pathology specimen
- 20 Local surgical excision or destruction of lesion; laser surgery WITH pathology specimen; stripping
- 30 Partial laryngectomy WITH/WITHOUT node dissection
- 40 Total laryngectomy WITHOUT dissection of lymph nodes; total laryngectomy, NOS
- 50 Total laryngectomy WITH dissection of lymph nodes; radical laryngectomy
- 60 Laryngectomy, NOS
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

NOTE: Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

BRONCHUS AND LUNG
C34.0-C34.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Local surgical excision or destruction of lesion
- 20 Partial/wedge/segmental resection, lingulectomy, partial lobectomy, sleeve resection (bronchus only)
- 30 Lobectomy/bilobectomy (includes lobectomy plus segmental/sleeve resection, radical lobectomy, partial pneumonectomy) WITHOUT dissection of lymph nodes
- 40 Lobectomy/bilobectomy (includes lobectomy plus segmental/sleeve resection, radical lobectomy, partial pneumonectomy) WITH dissection of lymph nodes
- 50 Complete/total/standard pneumonectomy (includes hilar and parabrachial lymph nodes); pneumonectomy, NOS
- 60 Radical pneumonectomy (complete pneumonectomy PLUS dissection of mediastinal lymph nodes)
- 70 Extended radical pneumonectomy (includes parietal pleura, pericardium and/or chest wall (with diaphragm) plus lymph nodes)
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY (includes removal of mediastinal mass ONLY)
- 90 Resection of lung, NOS; surgery, NOS

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

BRONCHUS AND LUNG (cont.)

*NOTE: Ignore incidental removal of rib(s) (operative approach).
Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as
part of the planned first course of therapy.*

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

**BONE, PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM,
CONNECTIVE AND OTHER SOFT TISSUE**

C40.0-C41.9, C47.0-C47.9, C49.0-C49.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Local or wide excision of lesion
- 20 Resection, partial
Internal hemipelvectomy (pelvis)
- 30 Radical excision/resection
Limb salvage (arm or leg)
- 40 Amputation, partial/total of limb
- 50 Amputation, forequarter (incl. scapula)
Amputation, hindquarter (incl. ilium/hip bone)
Hemipelvectomy
- 60 Excision/resection, NOS
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

**BONE, PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM,
CONNECTIVE AND OTHER SOFT TISSUE (cont.)**

NOTE: Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

SKIN
C44.0-C44.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Local cancer destruction WITHOUT pathology specimen (includes laser surgery, cryosurgery, fulguration, or electrocauterization)
- 20 Simple excision/excisional biopsy; shave/punch biopsy; local surgical excision; wedge resection; laser surgery WITH pathology specimen; excision, NOS
- 30 Shave/punch biopsy/biopsy, NOS followed by excision of lesion (not a wide excision)
- 40 Wide/re-excision or minor (local) amputation (includes digits, ear, eyelid, lip, nose) WITHOUT lymph node dissection
- 45 Radical excision WITHOUT lymph node dissection
- 50 Codes 10-45 WITH lymph node dissection
- 60 Amputation (other than code 40) WITHOUT lymph node dissection; amputation, NOS
- 70 Amputation (other than in code 40) WITH lymph node dissection
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

SKIN (cont.)

NOTE: Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

BREAST
C50.0-C50.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Partial/less than total mastectomy (includes segmental mastectomy, lumpectomy, quadrantectomy, tylectomy, wedge resection, nipple resection, excisional biopsy, or partial mastectomy, NOS) WITHOUT dissection of axillary lymph nodes
- 20 Partial/less than total mastectomy WITH dissection of axillary lymph nodes
- 30 Subcutaneous mastectomy WITH/WITHOUT dissection of axillary nodes
- 40 Total (simple) mastectomy (breast only) WITHOUT dissection of axillary lymph nodes
- 50 Modified radical/total (simple) mastectomy (may include portion of pectoralis major) WITH dissection of axillary lymph nodes
- 60 Radical mastectomy WITH dissection of majority of pectoralis major WITH dissection of axillary lymph nodes
- 70 Extended radical mastectomy (code 60 PLUS internal mammary node dissection; may include chest wall and ribs)
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Mastectomy, NOS; Surgery, NOS

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

BREAST (cont.)

NOTE: Codes '10' - '78' apply to unilateral resection of primary cancer.
Ignore removal of fragments or tags of muscle; removal of pectoralis minor; resection of pectoralis muscles, NOS; and resection of fascia with no mention of muscle.
Oophorectomy, adrenalectomy, and hypophysectomy will be coded as Endocrine (Hormone/Steroid) Therapy.
Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

CERVIX UTERI
C53.0-C53.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Cryosurgery; laser surgery WITHOUT pathology specimen
- 15 Dilatation and curettage (in situ ONLY); endocervical curettage (in situ ONLY)
- 17¹ 10 + 15 (in situ ONLY)
- 20 Local surgical excision; excisional biopsy; trachelectomy; amputation of cervix or cervical stump; laser surgery WITH pathology specimen; conization
- 30 Total/pan/simple hysterectomy (includes both corpus and cervix uteri) WITHOUT removal of tubes and ovaries WITHOUT dissection of lymph nodes
- 35² Total/pan/simple hysterectomy (includes both corpus and cervix uteri) WITHOUT removal of tubes and ovaries WITH dissection of lymph nodes
- 40 Total/pan/simple hysterectomy WITH removal of tube(s) and ovary(ies) WITHOUT dissection of lymph nodes
- 50 Modified radical/extended hysterectomy (includes uterus, tube(s), ovary(ies), and para-aortic and pelvic lymph nodes, and may include vaginal cuff); radical hysterectomy (includes uterus, tube(s), ovary(ies), vagina, all parametrial and paravaginal tissue, and para-aortic and pelvic lymph nodes); Wertheim's operation
- 60 Hysterectomy, NOS

¹ Effective date January 1, 1991 diagnoses

² Effective date January 1, 1990 diagnoses

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

CERVIX UTERI (cont.)

Code

- 70 Pelvic Exenteration (partial or total)
Anterior exenteration (includes bladder, distal ureters, and genital organs with their ligamentous attachments and pelvic lymph nodes)
Posterior exenteration (includes rectum and rectosigmoid with ligamentous attachments and pelvic lymph nodes)
Total exenteration (includes removal of all pelvic contents and pelvic lymph nodes)
Extended exenteration (includes pelvic blood vessels or bony pelvis)
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

*NOTE: Codes 30, 35 and 40 may include a portion of vaginal cuff.
Ignore incidental removal of appendix.
Ignore omentectomy if it was the only surgery performed in addition to hysterectomy.
Ignore surgical approach, i.e., abdominal or vaginal.
For invasive cancers only, dilatation and curettage is to be coded as an incisional biopsy.
Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.*

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

CORPUS UTERI
C54.0-C54.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Polypectomy; myomectomy (simple excision); simple excision, NOS
- 20 Subtotal hysterectomy; supracervical hysterectomy; fundectomy (cervix left in place WITH/WITHOUT removal of tubes and ovaries)
- 30 Total/pan/simple hysterectomy (includes both corpus and cervix uteri) WITHOUT removal of tubes and ovaries WITHOUT dissection of lymph nodes
- 35¹ Total/pan/simple hysterectomy (includes both corpus and cervix uteri) WITHOUT removal of tubes and ovaries WITH dissection of lymph nodes
- 40 Total/pan/simple hysterectomy WITH removal of tube(s) and ovary(ies) WITHOUT dissection of lymph nodes
- 50 Modified radical/extended hysterectomy (includes uterus, tube(s), ovary(ies), and para-aortic and pelvic lymph nodes, and may include vaginal cuff); radical hysterectomy (includes uterus, tube(s), ovary(ies), vagina, and all parametrial and paravaginal tissue, and para-aortic and pelvic lymph nodes); Wertheim's operation
- 60 Hysterectomy, NOS
- 70 Pelvic Exenteration (partial or total)
 - Anterior exenteration (includes bladder, distal ureters, and genital organs with their ligamentous attachments and pelvic lymph nodes)
 - Posterior exenteration (includes rectum and rectosigmoid with ligamentous attachments and pelvic lymph nodes)
 - Total exenteration (includes removal of all pelvic contents and pelvic lymph nodes)
 - Extended exenteration (includes pelvic blood vessels or bony pelvis)

¹ Effective date January 1, 1990 diagnoses

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

CORPUS UTERI (cont.)

Code

80 Surgery of regional and/or distant site(s)/node(s) ONLY

90 Surgery, NOS

*NOTE: Codes 30, 35 and 40 may include a portion of vaginal cuff.
Ignore incidental removal of appendix.
Ignore omentectomy if it is the only surgery performed in addition to hysterectomy.
Ignore surgical approach, i.e., abdominal or vaginal.
For invasive and in situ cancers, dilatation and curettage is to be coded as an incisional biopsy.
Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.*

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

OVARY
C56.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Subtotal/partial or unilateral (salpingo)-oophorectomy; wedge resection WITHOUT hysterectomy
- 20 Subtotal/partial or unilateral (salpingo)-oophorectomy WITH hysterectomy
- 30 Bilateral (salpingo)-oophorectomy WITHOUT hysterectomy; (salpingo)-oophorectomy, NOS
- 40 Bilateral (salpingo)-oophorectomy WITH hysterectomy
- 50 Omentectomy (partial, total, or NOS) with unilateral or bilateral (salpingo)-oophorectomy, unknown if hysterectomy done
- 51 Omentectomy (partial, total, or NOS) with unilateral or bilateral (salpingo)-oophorectomy, WITHOUT hysterectomy
- 52 Omentectomy (partial, total, or NOS) with unilateral or bilateral (salpingo)-oophorectomy, WITH hysterectomy
- 60 Debulking* of ovarian cancer mass (may include ovarian tissue)
- 70 Pelvic Exenteration (partial or total)
 - Anterior exenteration (includes bladder, distal ureters, and genital organs with their ligamentous attachments and pelvic lymph nodes)
 - Posterior exenteration (includes rectum and rectosigmoid with ligamentous attachments and pelvic lymph nodes)
 - Total exenteration (includes removal of all pelvic contents and pelvic lymph nodes)
 - Extended exenteration (includes pelvic blood vessels or bony pelvis)

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

OVARY (cont.)

Code

80 Surgery of regional and/or distant site(s)/node(s) ONLY

90 Surgery, NOS

* Debulking: Partial removal of cancer to reduce cancer volume to levels that can be handled by the host's immune system and is usually followed by other treatment modalities

NOTE: Ignore incidental removal of appendix.

Codes '10' - '90' have priority over codes '00' - '09.'

Codes '10' - '78' have priority over codes '80' - '90.'

Surgery of primary not included in any category should be coded '90.'

In the range '10' - '78,' the higher code has priority.

Codes '01' - '07' have priority over code '09.'

In the range '01' - '06,' the higher code has priority.

Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'

Codes '01' - '06' have priority over code '07.'

Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

PROSTATE
C61.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Transurethral resection of prostate (TURP); cryoprostatectomy; local surgical excision of lesion WITHOUT lymph node dissection
- 20 Transurethral resection of prostate (TURP); cryoprostatectomy; local surgical excision of lesion WITH lymph node dissection
- 30 Subtotal/simple prostatectomy (segmental resection or enucleation leaving capsule intact) WITHOUT dissection of lymph nodes
- 40 Subtotal/simple prostatectomy (segmental resection or enucleation) WITH dissection of lymph nodes
- 50 Radical/total prostatectomy (excised prostate, ejaculatory ducts (ductus deferens), and seminal vesicles) WITHOUT dissection of lymph nodes
- 60 Radical/total prostatectomy (excised prostate, ejaculatory ducts (ductus deferens), and seminal vesicles) WITH dissection of lymph nodes
- 70 Cystoprostatectomy, radical cystectomy, pelvic exenteration WITH/WITHOUT dissection of lymph nodes
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Prostatectomy, NOS; Surgery, NOS

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

PROSTATE (cont.)

*NOTE: Orchiectomy will be coded as Endocrine (Hormone/Steroid) Therapy.
Ignore surgical approach, i.e., suprapubic, retropubic, or perineal.
Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as
part of the planned first course of therapy.*

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

TESTIS
C62.0-C62.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Local surgical excision or partial resection of testicle
- 20 Excision of testicle WITHOUT cord
- 30 Excision of testicle WITH cord (or cord not mentioned)
- 40 Excision of testicle WITH unilateral lymph node dissection
- 50 Excision of testicle WITH bilateral lymph node dissection, or lymph node dissection, NOS
- 60 Orchiectomy, NOS
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

NOTE: Codes '10' - '59' take priority over codes '60' - '99.'
Codes '10' - '99' take priority over codes '00' - '09.'
In the range '10' - '58,' the higher code has priority.
Codes '01' - '07' take priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Surgery of primary not included in any category should be coded '90.'
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

KIDNEY, RENAL PELVIS, AND URETER
C64.9, C65.9, C66.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Partial/subtotal nephrectomy (includes local excision, wedge resection, and segmental resection);
Partial ureterectomy
- 20 Complete/total/simple nephrectomy – for kidney parenchyma
Nephroureterectomy (includes bladder cuff) – for renal pelvis or ureter
WITHOUT dissection of lymph nodes
- 30 Complete/total/simple nephrectomy – for kidney parenchyma
Nephroureterectomy (includes bladder cuff) – for renal pelvis or ureter
WITH dissection of lymph nodes
- 40 Radical nephrectomy (includes removal of vena cava, adrenal gland(s), Gerota's fascia, perinephric fat, or partial ureter) WITHOUT dissection of lymph nodes
- 50 Radical nephrectomy (includes removal of vena cava, adrenal gland(s), Gerota's fascia, perinephric fat, or partial ureter) WITH dissection of lymph nodes
- 60 Nephrectomy, NOS
Ureterectomy, NOS
- 70 Codes 20-60 PLUS other organs (e.g., bladder, colon)
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

KIDNEY, RENAL PELVIS, AND URETER (cont.)

*NOTE: Ignore incidental removal of rib(s).
Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.*

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

BLADDER
C67.0-C67.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Transurethral resection of bladder (TURB); local destruction (electrocoagulation, fulguration, cryosurgery); excisional biopsy
- 20 Partial/subtotal cystectomy (includes segmental resection) WITHOUT dissection of pelvic lymph nodes
- 30 Partial/subtotal cystectomy (includes segmental resection) WITH dissection of pelvic lymph nodes
- 40 Complete/total/simple cystectomy WITHOUT dissection of lymph nodes
- 50 Complete/total/simple cystectomy WITH dissection of lymph nodes
- 60 Cystectomy, NOS
- 70 Radical cystectomy (in men: removal of bladder, prostate, seminal vesicles, surrounding perivesical tissues and distal ureters; in women: removal of bladder, uterus, ovaries, fallopian tubes, surrounding peritoneum, and sometimes urethra and vaginal wall)
Pelvic Exenteration (partial, total, or extended)
Anterior exenteration (includes bladder, distal ureters, and genital organs with their ligamentous attachments and pelvic lymph nodes)
Posterior exenteration (includes rectum and rectosigmoid with ligamentous attachments and pelvic lymph nodes)
Total exenteration (includes removal of all pelvic contents and pelvic lymph nodes)
Extended exenteration (includes pelvic blood vessels or bony pelvis)
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

BLADDER (cont.)

*NOTE: Ignore partial removal of ureter in coding cystectomy.
Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as
part of the planned first course of therapy.*

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

BRAIN AND OTHER PARTS OF CENTRAL NERVOUS SYSTEM¹

C70.0-C70.9, C71.0-C71.9, C72.0-C72.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Local tumor destruction
- 20 Subtotal/partial resection/excision of tumor/lesion/mass (including debulking of tumor)
- 30 (Gross) total resection/excision of tumor/lesion/mass (or resection/excision, NOS); removal of tumor, NOS; excisional biopsy
- 40 Partial resection of primary site (part of lobe, meninges, or nerves)
- 50 (Gross) total resection of primary site (lobectomy of brain)
- 60 Radical resection (primary site plus partial or total removal of surrounding organs/tissue)
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

¹ Effective date January 1, 1992 diagnoses

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

BRAIN AND OTHER PARTS OF CENTRAL NERVOUS SYSTEM¹ (cont.)
C70.0-C70.9, C71.0-C71.9, C72.0-C72.9

NOTE: Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.
If there is a tissue diagnosis and the only surgery is craniotomy, NOS, or laminectomy, NOS, code as a biopsy of primary site ('02').
For spinal cord primaries, ignore laminectomy; code only the surgery done to the spinal cord.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

THYROID

C73.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Local surgical excision or partial removal of lobe
- 20 Lobectomy WITH/WITHOUT isthmectomy, WITH/WITHOUT dissection of lymph nodes
- 30 Lobectomy, isthmectomy and partial removal of contralateral lobe (near total thyroidectomy) WITH/WITHOUT dissection of lymph nodes
- 40 Total thyroidectomy WITHOUT dissection of lymph nodes
- 50 Total thyroidectomy WITH limited lymph node dissection (nodal sampling or "berry picking") or lymph node dissection, NOS
- 60 Total thyroidectomy WITH radical/modified lymph node dissection
- 70 Thyroidectomy, NOS
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

THYROID (cont.)

NOTE: Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

LYMPH NODES AND SPLEEN

C42.2, C77.0-C77.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Excision of localized tumor mass
- 20 Splenectomy (partial, total, or NOS)
- 30 Lymph node dissection, one chain
- 31 Lymph node dissection, one chain PLUS splenectomy
- 40 Lymph node dissection, 2+ chains and/or adjacent organ(s)
- 41 Lymph node dissection, 2+ chains and/or adjacent organ(s) PLUS splenectomy
- 50 Lymph node dissection, NOS
- 51 Lymph node dissection, NOS PLUS splenectomy
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

LYMPH NODES AND SPLEEN (cont.)

NOTE: Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

ALL OTHER SITES¹

C15.0-C15.9, C17.0-C17.9, C21.0-C24.9, C26.0-C26.9, C30.0-C31.9, C33.9,
C37.9-C39.9, C42.0-C42.1, C42.3-C42.4, C48.0-C48.8, C51.0-C52.9, C55.9,
C57.0-C57.9, C58.9, C60.0-C60.9, C63.0-C63.9, C68.0-C69.9, C74.0-C76.8, C80.9

No Cancer-Directed Surgery/Unknown

Code

- 00 No surgical procedure
- 01 Incisional, needle, or aspiration biopsy of other than primary site
- 02 Incisional, needle, or aspiration biopsy of primary site
- 03 Exploratory ONLY (no biopsy)
- 04 Bypass surgery, -ostomy ONLY (no biopsy)
- 05 Exploratory ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 06 Bypass surgery, -ostomy ONLY AND incisional, needle or aspiration biopsy of primary site or other sites
- 07 Non-cancer directed surgery, NOS
- 09 Unknown if surgery done

Type of Cancer-Directed Surgery

- 10 Cryosurgery
- 20 Cautery, fulguration, laser surgery WITHOUT pathology specimen
- 30 Laser surgery WITH pathology specimen
- 35 Excisional biopsy; polypectomy; excision of lesion
- 40 Partial/simple removal of primary site WITHOUT dissection of lymph nodes
- 50 Partial/simple removal of primary site WITH dissection of lymph nodes
- 55 Stated as "Debulking" WITH or WITHOUT dissection of lymph nodes
- 60 Radical surgery (partial/total removal of primary site plus partial or total removal of other organs)
- 80 Surgery of regional and/or distant site(s)/node(s) ONLY
- 90 Surgery, NOS

¹ For cases diagnosed prior to January 1, 1992, this scheme is also used for brain and other parts of central nervous system (C70.__, C71.__, C72.__).

APPENDIX D
2-DIGIT SITE-SPECIFIC SURGERY CODES (1983-1997)

ALL OTHER SITES (cont.)

NOTE: Codes '10' - '90' have priority over codes '00' - '09.'
Codes '10' - '78' have priority over codes '80' - '90.'
Surgery of primary not included in any category should be coded '90.'
In the range '10' - '78,' the higher code has priority.
Codes '01' - '07' have priority over code '09.'
In the range '01' - '06,' the higher code has priority.
Codes '01' - '07' and '09' cannot be used in combination with codes '10' - '90.'
Codes '01' - '06' have priority over code '07.'
Second digit is to be coded '8' when reconstructive surgery of the primary site is done as part of the planned first course of therapy.
Tumor excisions involving primary sites such as the mediastinal area or the retroperitoneal space should be coded '35' unless debulking is mentioned. If any organ is removed with the tumor mass, code '60.'

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