

# ***From ICD-9-CM to ICD-10-CM Coding for Neoplasms***

***Presented by:***

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## Case Studies

### Case Study #1

A 59 year old male is admitted with a diagnosis of bone metastasis originating from the right upper lobe on the lung. The pathology was consistent with oat cell carcinoma. This admission was for chemotherapy that was administered to both sites.

### Case Study #2

A female patient with a two month history of chronic cough and hoarseness is scheduled for an outpatient flexible fiberoptic laryngoscopy with biopsy of the cricoids. The patient was taken to the operating suite where topical anesthetic spray and IV sedation were administered. The laryngoscope was introduced and biopsies were taken from multiple sites of the affected areas. The pathology report states “metastatic carcinoma of the arytenoids cartilage and the posterior commissure and well differentiated carcinoma of the cricoids and extrinsic larynx.” The operative note states suspected involvement of the thyroid cartilage with primary malignancy of the esophagus.

### Case Study #3

The patient is a 78 year old male with a new diagnosis of disseminated metastatic colon carcinoma. The primary site was the liver and the patient underwent a partial lobectomy two months prior. There is no indication of recurrence at this site to this date.

### Case Study #4

#### Pathology Report

Liver Resection

Impression: Hepatocellular carcinoma, grade 2, arising in a cirrhotic liver.

Note: The tumor process shows multiple nodules of grade 2 hepatocellular carcinoma arising in a lower grade process (high-grade dysplastic nodule) No avascular space invasion is identified. The carcinoma does not appear to involve the cauterized surgical margin.

## Case Study #5

### Pathology Report

Stomach Biopsy

Impression: Fundic mucosa with focal infiltrate of atypical lymphoid cells consistent with residual post-transplant lymphoproliferative disorder. Extensive glandular apoptosis.

### Case Study – Prophylactic Management

A 37 y/o female patient presents today for the prophylactic removal of both breasts. The patient has a strong family history of breast cancer (mother and sister) and genetic testing confirms a strong susceptibility to the disease.

**Code(s):** Z40.01 – Admission for prophylactic removal of the breast.

Z15.01 – Genetic susceptibility to malignant neoplasm of the breast.

Z80.3 – Family history of malignant neoplasm of the breast.

Codes	ICD-9-CM	ICD-10-CM	ICD-O
Admission for Chemotherapy	V58.11	Z51.11	Not Reported
Oat Cell carcinoma - Secondary site (Bone)	198.5	C79.51	C41.3
Oat Cell carcinoma - Primary site RUL of lung	162.3	C34.11	Review documentation to determine if primary has been previously reported.

### Case Study #1

Codes	ICD-9-CM	ICD-10-CM	ICD-O
Cancer of the Esophagus - mixed adenocarcinoma and squamous cell Primary Site	150.0	C15.3	C15.0 M-8560/3
Mixed adenocarcinoma and squamous cell Secondary Site (Arytenoids cartilage)	197.3*	C78.39*	C32.3
Mixed adenocarcinoma and squamous cell Secondary Site (Posterior laryngeal commissure)	197.3*	C78.39*	C32.0
Mixed adenocarcinoma and squamous cell Secondary Site (Cricoids)	197.3*	C79.89	C13.0
Mixed adenocarcinoma and squamous cell Secondary Site (Extrinsic Larynx)	197.3*	C78.39*	C32.1

### Case Study #2

\* These codes would only be reported once per coding guidelines

Codes	ICD-9-CM	ICD-10-CM	ICD-O
Disseminated clear cell metastatic colon carcinoma at the hepatic flexure.	197.5	C78.5	C18.3
Personal history of Liver Malignancy	V10.07	Z85.05	Not reported

**Case Study #3**

Codes	ICD-9-CM	ICD-10-CM	ICD-O
Hepatocellular carcinoma, scirrhous,	155.0	C22.0	C22.0 M-8172/3
Cirrhosis of the liver	571.5	K74.60	Not reported

**Case Study #4**

Codes	ICD-9-CM	ICD-10-CM	ICD-O
Fundus of stomach, signet ring cell adenocarcinoma	151.3	C16.1	C16.1 M-8490/3

**Case Study #5**