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COMPREHENSIVE ICD-9-CM CASEFINDING CODE LIST FOR REPORTABLE TUMORS (EFFECTIVE DATE: 1/1/2011)^	
ICD-9-CM Code^	**Explanation of Code**
140.0 – 208.92	Malignant Neoplasms
209.00 – 209.29	Neuroendocrine tumors
209.30	Malignant poorly differentiated neuroendocrine carcinoma, any site *Reportable inclusion terms:* *High grade neuroendocrine carcinoma, any site* *Malignant poorly differentiated neuroendocrine tumor NOS*
209.31 – 209.36	Merkel cell carcinoma
209.70 – 209.79	Secondary neuroendocrine tumors *Reportable inclusion terms: Secondary carcinoid tumors* *Note: All neuroendocrine or carcinoid tumors specified as secondary are malignant*
225.0 – 225.9	Benign neoplasm of brain and spinal cord neoplasm
227.3	Benign neoplasm of pituitary gland and craniopharyngeal duct (pouch) *Reportable inclusion terms: Benign neoplasm of craniobuccal pouch, hypophysis, Rathke's pouch or sella turcica*
227.4	Benign neoplasm of pineal gland
228.02	Hemangioma; of intracranial structures *Reportable inclusion terms: Angioma NOS, Cavernous nevus, Glomus tumor, Hemangioma (benign)*
228.1	Lymphangioma, any site *Note: This code includes Lymphangiomas of Brain, Other parts of nervous system and endocrine glands, which are reportable.*
230.0 – 234.9	Carcinoma in situ
236.0	Endometrial stroma, low grade (8931/1) *Reportable inclusion terms:* *Stromal endometriosis (8931/3 per ICD-O-3)* *Stromal myosis (endolymphatic) (8931/3 per ICD-O-3)* *Stromatosis, endometrial (8931/3 per ICD-O-3)*
237.0-237.1	Neoplasm of uncertain behavior [borderline] of pituitary gland, craniopharyngeal duct and pineal gland
237.5-237.6	Neoplasm of uncertain behavior [borderline] of brain, spinal cord and meninges
237.72	Neurofibromatosis, type 2 [acoustic neurofibromatosis] *Note: Acoustic neuromas growing along the acoustic nerve.* See "supplementary" list for Neurofibromatosis, unspecified (237.70) and Neurofibromatosis, type 1 (237.71)
237.9	Neoplasm of other and unspecified parts of nervous system (cranial nerves)
238.4	Polycythemia vera (9950/3)

COMPREHENSIVE ICD-9-CM CASEFINDING CODE LIST FOR REPORTABLE TUMORS (EFFECTIVE DATE: 1/1/2011)^	
ICD-9-CM Code^	**Explanation of Code**
238.6	Neoplasm of uncertain behavior of other and unspecified sites and tissues, Plasma cells (Plasmacytoma, extramedullary, 9734/3) *Reportable inclusion terms:* *Plasmacytoma NOS (9731/3)* *Solitary myeloma (9731/3)*
238.7	Other lymphatic and hematopoietic tissues *Note: This code was expanded 10/2006. It is now a subcategory and is no longer valid for coding purposes. It should be included in extract programs for quality control purposes.*
238.71	Essential thrombocythemia (9962/3) *Reportable inclusion terms:* *Essential hemorrhagic thrombocythemia* *Idiopathic (hemorrhagic) thrombocythemia*
238.72	Low grade myelodysplastic syndrome lesions (includes 9980/3, 9982/3, 9983/3, 9985/3) *Reportable inclusion terms:* *Refractory anemia (RA) (9980/3)* *Refractory anemia with excess blasts-1 (RAEB-1) (9983/3)* *Refractory anemia with ringed sideroblasts (RARS) (9982/3)* *Refractory cytopenia with multilineage dysplasia (RCMD) (9985/3)* *Refractory cytopenia with multilineage dysplasia and ringed sideroblasts (RCMD-RS) (9985/3)*
238.73	High grade myelodysplastic syndrome lesions (includes 9983/3) *Reportable inclusion terms: Refractory anemia with excess blasts-2 (RAEB-2)*
238.74	Myelodysplastic syndrome with 5q deletion (9986/3) *Reportable inclusion terms: 5q minus syndrome NOS*
238.75	Myelodysplastic syndrome, unspecified (9985/3, 9987/3)
238.76	Myelofibrosis with myeloid metaplasia (9961/3) *Reportable inclusion terms:* *Agnogenic myeloid metaplasia* *Idiopathic myelofibrosis (chronic)* *Myelosclerosis with myeloid metaplasia*
238.77	Post transplant lymphoproliferative disorder (9987/3)
238.79	Other lymphatic and hematopoietic tissues (includes 9960/3, 9961/3, 9970/1, 9931/3) *Reportable inclusion terms:* *Lymphoproliferative disease (chronic) NOS (9970/1)* *Megakaryocytic myelosclerosis (9961/3)*

COMPREHENSIVE ICD-9-CM CASEFINDING CODE LIST FOR REPORTABLE TUMORS (EFFECTIVE DATE: 1/1/2011)^	
ICD-9-CM Code^	**Explanation of Code**
	Myeloproliferative disease (chronic) NOS (9960/3) *Panmyelosis (acute) (9931/3)*
239.6	Neoplasms of unspecified nature, brain
239.7	Neoplasms of unspecified nature; endocrine glands and other parts of nervous system
273.2	Other paraproteinemias *Reportable inclusion terms:* *Franklin's disease (heavy chain) (9762/3)* *Heavy chain disease (9762/3)* *Mu-chain disease (9762/3)*
273.3	Macroglobulinemia *Reportable inclusion terms:* *Waldenström's macroglobulinemia (9761/3)* *Waldenström's (macroglobulinemia) syndrome*
277.89	Other specified disorders of metabolism Hand-Schuller-Christian disease Histiocytosis (acute) (chronic) Histiocytosis X (chronic)
288.4	Hemophagocytic syndrome (9751/3, 9754/3) *Reportable inclusion terms: Histiocytic syndromes*
795.06	Papanicolaou smear of cervix with cytologic evidence of malignancy
795.16	Papanicolaou smear of vagina with cytologic evidence of malignancy
796.76	Papanicolaou smear of anus with cytologic evidence of malignancy
V10.0 – V10.89	Personal history of malignancy *Note: Screen for recurrences, subsequent primaries, and/or subsequent treatment*
V10.90	Personal history of unspecified malignant neoplasm *Note: Screen for recurrences, subsequent primaries, and/or subsequent treatment*
V10.91	Personal history of malignant neuroendocrine tumor, carcinoid tumor, Merkel cell carcinoma *Note: Screen for recurrences, subsequent primaries, and/or subsequent treatment*
V12.41	Personal history of benign neoplasm of the brain

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The following codes are not reportable per se, but they should alert registrars to look for the first malignant neoplasm associated with these codes.

SUPPLEMENTARY LIST #1-ICD-9-CM CODES THAT SHOULD BE FOLLOWED BY or ASSOCIATED WITH A NEOPLASM CODE^	
ICD-9-CM Code^	**Explanation of Code**
258.02 – 258.03	Multiple endocrine neoplasia (MEN) type IIA and IIB (rare familial cancer syndrome) *Note: Use additional codes to identify any malignancies and other conditions associated with the syndrome*
285.22	Anemia in neoplastic disease *Note: Assign also a code for the neoplasm causing the anemia* *Excludes: anemia due to antineoplastic chemotherapy, new code 285.3*
289.83	Myelofibrosis (NOS) (9961/3) *Note: Not every case of myelofibrosis is associated with a malignancy. Review terms included in ICD-O-3 to determine if case is reportable. See ICD-9-CM*
338.3	Neoplasm related pain (acute, chronic); Cancer associated pain; Pain due to malignancy (primary/secondary); Tumor associated pain
511.81	Malignant pleural effusion *Note: Code first malignant neoplasm if known. If the primary site is not known, code 199.0, disseminated carcinomatosis, or code 199.1, malignancy NOS, should be assigned*
789.51	Malignant ascites *Note: Code first malignant neoplasm if known. If the primary site is not known, code 199.0, disseminated carcinomatosis, or code 199.1, malignancy NOS, should be assigned*

NOTE: Cases with these codes should be screened as registry time allows. These are neoplasm-related secondary conditions for which there should also be a primary diagnosis of a reportable neoplasm. Experience in the SEER registries has shown that using the supplementary list increases casefinding for benign brain and CNS, hematopoietic, and other reportable neoplasms.

SUPPLEMENTARY LIST #2-ICD-9-CM CODE LIST TO SCREEN FOR CANCER CASES NOT IDENTIFIED BY OTHER CODES (EFFECTIVE DATE: 1/1/2011)^	
ICD-9-CM Code^	**Explanation of Code**
042	Acquired Immunodeficiency Syndrome (AIDS) *Note: This is not a malignancy. Medical coders are instructed to add codes for AIDS-associated malignancies. Screen 042 for history of cancers that might not be coded.*
079.4	Human papillomavirus
079.50 – 079.59	Retrovirus (HTLV, types I, II and 2)

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SUPPLEMENTARY LIST #2-ICD-9-CM CODE LIST TO SCREEN FOR CANCER CASES NOT IDENTIFIED BY OTHER CODES (EFFECTIVE DATE: 1/1/2011)^	
ICD-9-CM Code^	**Explanation of Code**
209.40-209.69	Benign carcinoid tumors
210.0 – 229.9	Benign neoplasms (except for 225.0-225.9, 227.3, 227.4, 228.02, and 228.1, which are listed in the Reportable list) *Note: Screen for incorrectly coded malignancies or reportable by agreement tumors.*
235.0 – 236.7, 236.90 - 236.99	Neoplasms of uncertain behavior (except for 236.0, which is listed in the Reportable list) *Note: Screen for incorrectly coded malignancies or reportable by agreement tumors*
237.2-237.4	Neoplasm of uncertain behavior of adrenal gland, paraganglia and other and unspecified endocrine glands *Note: Screen for incorrectly coded malignancies or reportable by agreement tumors*
237.70-237.71	Neurofibromatosis, unspecified and Type 1 *Note: An inherited condition with developmental changes in the nervous system, muscles, bones and skin; multiple soft tumors (neurofibromas) distributed over the whole body. (See "must report" for Neurofibromatosis, type 2, 237.72)*
237.73	Schwannomatosis *Note: Effective date 10/1/2010. Screen for incorrectly coded malignancies or reportable by agreement tumors*
237.79	Other neurofibromatosis *Note: Effective date 10/1/2010 Screen for incorrectly coded malignancies or reportable by agreement tumors*
238.0 – 239.9	Neoplasms of uncertain behavior (except for 238.4, 238.6, 238.71-238.79, 239.6, 239.7, which are listed in the Reportable list) *Note: Screen for incorrectly coded malignancies or reportable by agreement tumors*
253.6	Syndrome of inappropriate secretion of antidiuretic hormone *Note: Part of the paraneoplastic syndrome. See note of explanation in the "notes" section.*
259.2	Carcinoid Syndrome
259.8	Other specified endocrine disorders
273.0	Polyclonal hypergammaglobulinemia (Waldenstrom) *Note: Review for miscodes*
273.1	Monoclonal gammopathy of undetermined significance (9765/1) *Note: Screen for incorrectly coded Waldenstrom macroglobulinemia or progression*
273.8	Other disorders of plasma protein metabolism
273.9	Unspecified disorder of plasma protein metabolism

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SUPPLEMENTARY LIST #2-ICD-9-CM CODE LIST TO SCREEN FOR CANCER CASES NOT IDENTIFIED BY OTHER CODES (EFFECTIVE DATE: 1/1/2011)^	
ICD-9-CM Code^	**Explanation of Code**
	Note: Screen for incorrectly coded Waldenstrom's macroglobulinemia
275.42	Hypercalcemia *Note: Part of the paraneoplastic syndrome. See note of explanation in the "notes" section.*
277.88	Tumor lysis syndrome/Tumor lysis syndrome following antineoplastic drug therapy
279.00	Hypogammaglobulinemia *Note: Predisposed to lymphoma or stomach cancer*
279.02 – 279.06	Selective IgM immunodeficiency *Note: Associated with lymphoproliferative disorders*
279.10	Immunodeficiency with predominant T-cell defect, NOS
279.12	Wiskott-Aldrich Syndrome
279.13	Nezelof's Syndrome
279.2 – 279.9	Combined immunity deficiency – Unspecified disorder of immune mechanism
284.81	Red cell aplasia (acquired, adult, with thymoma)
284.89	Other specified aplastic anemias due to drugs (chemotherapy or immunotherapy), infection, radiation
284.9	Aplastic anemia, unspecified *Note: Review for miscodes*
285.0	Sideroblastic anemia
285.3	Antineoplastic chemotherapy induced anemia (Anemia due to antineoplastic chemotherapy)
288.03	Drug induced neutropenia
288.3	Eosinophilia *Note: This is the code for eosinophilia (9964/3). Not every case of eosinophilia is associated with a malignancy. Diagnosis must be "Hypereosonophilic syndrome" to be reportable.*
289.6	Familial polycythemia *Note: This is a symptom of polycythemia vera*
289.89	Other specified diseases of blood and blood-forming organs *Note: Review for miscodes*
289.9	Other specified diseases of blood and blood-forming organs
323.81	Encephalomyelitis; specified cause NEC *Note: Part of the paraneoplastic syndrome. See note of explanation in the "notes" section.*
379.59	Opsoclonia *Note: Part of the paraneoplastic syndrome. See note of explanation in the "notes" section.*
528.01	Mucositis due to antineoplastic therapy

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SUPPLEMENTARY LIST #2-ICD-9-CM CODE LIST TO SCREEN FOR CANCER CASES NOT IDENTIFIED BY OTHER CODES (EFFECTIVE DATE: 1/1/2011)^	
ICD-9-CM Code^	**Explanation of Code**
630	Hydatidiform Mole (9100/0) *Note: This is a benign tumor that can become malignant. If malignant, it should be reported as Choriocarcinoma (9100/3) and will have a malignancy code in the 140-209 range.*
686.01	Pyoderma gangrenosum *Note: Part of the paraneoplastic syndrome. See note of explanation in the "notes" section.*
695.89	Sweet's syndrome *Note: Part of the paraneoplastic syndrome. See note of explanation in the "notes" section.*
701.2	Acanthosis nigricans *Note: Part of the paraneoplastic syndrome. See note of explanation in the "notes" section.*
710.3	Dermatomyositis *Note: Part of the paraneoplastic syndrome. See note of explanation in the "notes" section.*
710.4	Polymyositis *Note: Part of the paraneoplastic syndrome. See note of explanation in the "notes" section.*
733.10-733.16	Pathologic fracture *Note: pathologic fractures can be due to bone structure weakening by pathological processess (e.g. osteopororis, neoplasms and osteomalacial)*
758.0	Down's Syndrome *Note: Screen for myeloid leukemia associated with Down's Syndrome (9898/3)*
785.6	Enlargement of lymph nodes *Note: Screen for large B-cell lymphoma arising in HHV8-associated multicentric Castleman disease (9738/3)*
790.93	Elevated prostate specific antigen [PSA]
795.8_	Abnormal tumor markers; Elevated tumor associated antigens [TAA]; Elevated tumor specific antigens [TSA]; *Excludes: Elevated prostate specific antigen [PSA] (790.93)*
795.81	Elevated carcinoembryonic antigen [CEA]
795.82	Elevated cancer antigen 125 [CA 125]
795.89	Other abnormal tumor markers
999.31	Infection due to central venous catheter (porta-cath)
999.81	Extravasation of vesicant chemotherapy
E879.2	Adverse effect of radiation therapy
E930.7	Adverse effect of antineoplastic therapy
E933.1	Adverse effect of immunosuppressive drugs

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SUPPLEMENTARY LIST #2-ICD-9-CM CODE LIST TO SCREEN FOR CANCER CASES NOT IDENTIFIED BY OTHER CODES (EFFECTIVE DATE: 1/1/2011)^	
ICD-9-CM Code^	**Explanation of Code**
V07.31, V07.39	Other prophylactic chemotherapy
V07.8	Other specified prophylactic measure
V12.72	Colonic polyps (history of)
V15.3	Irradiation: previous exposure to therapeutic or ionizing radiation
V42.81	Organ or tissue replaced by transplant, Bone marrow transplant
V42.82	Transplant; Peripheral stem cells
V51.0	Encounter for breast reconstruction following mastectomy
V52.4	Breast prosthesis and implant
V54.2_	Aftercare for healing pathologic fracture
V58.0	Encounter for radiation therapy
V58.1	Encounter for antineoplastic chemotherapy and immunotherapy *Note: This code was discontinued as of 10/2006 but should be included in extract programs for quality control purposes*
V58.11	Encounter for antineoplastic chemotherapy
V58.12	Encounter for antineoplastic immunotherapy
V58.42	Aftercare following surgery for neoplasm
V58.9	Unspecified aftercare
V66.1	Convalescence following radiotherapy
V66.2	Convalescence following chemotherapy
V66.7	Encounter for palliative care
V67.01	Follow-up vaginal pap smear Vaginal pap smear, status-post hysterectomy for malignant condition
V67.1	Radiation therapy follow up
V67.2	Chemotherapy follow up
V71.1	Observation for suspected malignant neoplasm
V76.0 – V76.9	Special screening for malignant neoplasm
V78.0 – V78.9	Special screening for disorders of blood and blood-forming organs
V82.71	Screening for genetic disease carrier status
V82.79	Other genetic screening
V82.89	Genetic screening for other specified conditions
V82.9	Genetic screening for unspecified condition
V84.01 – V84.09	Genetic susceptibility to malignant neoplasm
V84.81	Genetic susceptibility to multiple endocrine neoplasia [MEN]
V86.0	Estrogen receptor positive status [ER+]
V86.1	Estrogen receptor negative status [ER-]
V87.41	Personal history of antineoplastic chemotherapy

NOTES:

- Prostatic Intraepithelial Neoplasia (PIN III) M-8148/2 is not required by SEER.

- Pilocytic/juvenile astrocytoma M-9421 moved from behavior /3 (malignant) to /1 (borderline malignancy) in ICD-O-3. However, SEER registries will CONTINUE to report these cases and code behavior a /3 (malignant).
- Borderline cystadenomas M-8442, 8451, 8462, 8472, 8473, of the ovaries moved from behavior /3 (malignant) to /1 (borderline malignancy) in ICD-O-3. SEER registries are not required to collect these cases for diagnoses made 1/1/2001 and after. However, cases diagnosed prior to 1/1/2001 should still be abstracted and reported to SEER.
- Codes 253.6, 686.01, 695.89, 701.2, 710.3 and 710.4 are part of the paraneoplastic syndrome. “Paraneoplastic syndrome isn’t cancer. It’s a disease or symptom that is the consequence of cancer but is not due to the local presence of cancer cells. A paraneoplastic syndrome may be the first sign of cancer.”

^ International Classification of Diseases, Ninth Revision, Clinical Modification, 2011.