

Breast Multiple Primary Rules – Matrix C500 – C509

(Excludes lymphoma and leukemia M9590 – 9989 and Kaposi sarcoma M9140)

* Prepare one abstract. Use the histology coding rules to assign the appropriate histology code.

** Prepare two or more abstracts. Use the histology coding rules to assign the appropriate histology code to each case abstracted.

Rule	Site	Histology	Timing	Behavior	Notes/Examples	Primary
UNKNOWN IF SINGLE OR MULTIPLE TUMORS					Tumor(s) not described as metastasis	
M1					Use this rule only after all information sources have been exhausted.	Single*
SINGLE TUMOR					<i>1:</i> Tumor not described as metastasis <i>2:</i> Includes combinations of in situ and invasive	
M2	One or both breasts	Inflammatory carcinoma				Single*
M3	Single				The tumor may overlap onto or extend into adjacent/contiguous site or subsite	Single*
MULTIPLE TUMORS Multiple tumors may be a single primary or multiple primaries					<i>1:</i> Tumors not described as metastases <i>2:</i> Includes combinations of in situ and invasive	
M4	Topography codes different at the second (C <u>x</u> xx) and/or third (Cxx <u>x</u>) character					Multiple**
M5			Diagnosed more than five (5) years apart			Multiple**
M6	One or both breasts	Inflammatory carcinoma				Single*
M7	Both breasts				Lobular carcinoma in both breasts (“mirror image”) is a multiple primary	Multiple**
M8			More than 60 days after diagnosis	An invasive tumor following an in situ tumor	<i>1:</i> The purpose of this rule is to ensure that the case is counted as an incident (invasive) case when incidence data are analyzed. <i>2:</i> Abstract as multiple primaries even if the medical record/physician states it is recurrence or progression of disease.	Multiple**

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Rule	Site	Histology	Timing	Behavior	Notes/Examples	Primary
M9		Intraductal and/or duct and Paget Disease			Use Table 1 and Table 2 to identify intraductal and duct carcinomas	Single*
M10		Lobular (8520) and intraductal or duct			Use Table 1 and Table 2 to identify intraductal and duct carcinomas	Single*
M11		Multiple intraductal and/or duct carcinomas			Use Table 1 and Table 2 to identify intraductal and duct carcinomas	Single*
M12		Histology codes are different at the first (<u>x</u> xxx), second (x <u>x</u> xx), or third (xx <u>x</u> x) number				Multiple**
M13	Does not meet any of the above criteria				<p>1: When an invasive tumor follows an in situ tumor within 60 days, abstract as a single primary.</p> <p>2: All cases covered by Rule M13 have the same first 3 numbers in ICD-O-3 histology code</p> <p>Rule M13 Examples</p> <p>The following are examples of the types of cases that use Rule M13. This is NOT intended to be an exhaustive set of examples; there are other cases that may be classified as a single primary.</p> <p>Warning: <i>Using only these case examples to determine the number of primaries can result in major errors.</i></p> <p>Example 1: Invasive duct and intraductal carcinoma in the same breast</p> <p>Example 2: Multi-centric lobular carcinoma, left breast</p>	Single*