

**Ovary**

**C569**

(Except for M9727, 9733, 9741-9742, 9764-9809, 9832, 9840-9931, 9945-9946, 9950-9967, 9975-9992)

**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

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 in the operative report, pathology report, discharge summary, or consultation. (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 debulking or cytoreductive surgery based on: multiple biopsies alone, the mention of “multiple tissue fragments” or “removal of multiple implants.” Multiple biopsies and multiple specimens confirm the presence or absence of metastasis.]

## SEER Program Coding and Staging Manual 2012

- 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

### **Specimen sent to pathology from surgical events 25-80.**

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