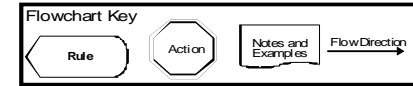# LUNG Histology Coding Rules - Flowchart

(C340 - C349)

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

SINGLE TUMOR
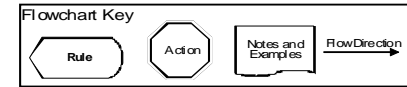
Rule	Action	Notes and Examples
H1 Is there **no pathology/cytology** specimen or is the **pathology/cytology** report unavailable? — YES →	Code the histology documented by the physician.	1. **Priority for using documents to code the histology** ○ **Documentation in the medical record that refers to pathologic or cytologic findings** ○ **Physician's reference to type of cancer (histology) in the medical record** ○ **CT, PET, or MRI scans** ○ **Chest x-rays** 2. **Code the specific histology when documented.** 3. **Code the histology to 8000 (cancer/malignant neoplasm, NOS) or 8010 (carcinoma, NOS) as stated by the physician when nothing more specific is documented.**
NO ↓		
H2 Is the specimen from a metastatic site? (there is no pathology/cytology specimen from the primary site) — YES →	Code the histology from a metastatic site.	**Code the behavior /3.**
NO ↓		
H3 Is only **one histologic type** identified? — YES →	Code the histology.	Do not code terms that do not appear in the histology description. **Example 1:** Do not code squamous cell carcinoma non-keratinizing unless the words "non-keratinizing" actually appear in the diagnosis. **Example 2:** Do not code bronchioalveolar non-mucinous unless the words "non-mucinous" actually appear in the diagnosis.
NO ↓		
Next Page		

LUNG Histology Coding Rules - - Flowchart

(C340 - C349)

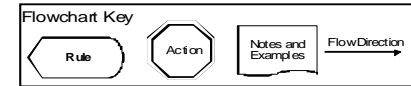(Excludes lymphoma and leukemia M9590-9989 and Kaposi sarcoma M9140)

SINGLE TUMOR

Rule	Action	Notes and Examples
H4 Does the tumor have **invasive and in situ** components? — YES →	Code the invasive histologic type.	
NO ↓		
H5 Are there multiple histologies within the same branch such as: • cancer/malignant neoplasm, NOS (8000) and a more specific histology? OR • carcinoma, NOS (8010) and a more specific carcinoma? OR • adenocarcinoma, NOS (8140) and a more specific adenocarcinoma? OR • squamous cell carcinoma, NOS (8070) and a more specific squamous cell carcinoma? OR • sarcoma, NOS (8800) and a more specific sarcoma? — YES →	Code the **most specific** histologic term using Chart 1	The specific histology may be identified as type, subtype, predominantly, with features of, major, or with _____ differentiation. ***Example 1:*** Adenocarcinoma, predominantly mucinous. Code mucinous adenocarcinoma 8480. ***Example 2:*** Non-small cell carcinoma, papillary squamous cell. Code papillary squamous cell carcinoma 8052.
NO ↓		
(Next Page)		

Lung Histo

LUNG Histology Coding Rules - Flowchart

(C340 - C349)

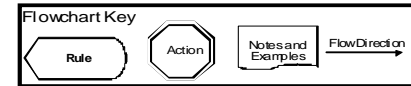(Excludes lymphoma and leukemia M9590-9989 and Kaposi sarcoma M9140)

SINGLE TUMOR

Rule	Action	Notes and Examples
H6 Are there **multiple specific histologies** or is there a non-specific **with multiple specific histologies**? — YES →	Code the appropriate combination/ mixed code (Table 1).	The specific histologies may be identified as type, subtype, predominantly, with features of, major or with _____ differentiation. *Example 1 (multiple specific histologies):* Solid and papillary adenocarcinoma. Code adenocarcinoma with mixed subtypes 8255. *Example 2 (multiple specific histologies):* Combined small cell and squamous cell carcinoma. Code combined small cell carcinoma 8045. *Example 3 (non-specific with multiple specific histologies):* Adenocarcinoma with papillary and clear cell features. Code adenocarcinoma with mixed subtypes 8255.
NO ↓		
H7	Code the **numerically higher** ICD-O-3 code.	

This is the end of instructions for Single Tumor.

Code the histology according to the rule that fits the case.

LUNG Histology Coding Rules - Flowchart

(C340 - C349)

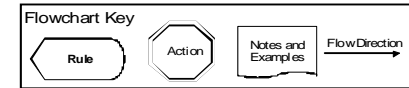(Excludes lymphoma and leukemia M9590-9989 and Kaposi sarcoma M9140)

MULTIPLE TUMORS ABSTRACTED AS A SINGLE PRIMARY

Rule	Action	Notes and Examples
H8 Is there **no** **pathology/cytology** specimen or is the **pathology/cytology** report unavailable? — YES →	Code the histology documented by the physician.	1. **Priority for using documents to code the histology** ○ **Documentation in the medical record that refers to pathologic or cytologic findings** ○ **Physician's reference to type of cancer (histology) in the medical record** ○ **CT, PET, or MRI scans** ○ **Chest x-rays** 2. **Code the specific histology when documented.** 3. **Code the histology to 8000 (cancer/malignant neoplasm, NOS) or 8010 (carcinoma, NOS) as stated by the physician when nothing more specific is documented.**
NO ↓		
H9 Is the specimen from a metastatic site? (there is no pathology/cytology specimen from the primary site) — YES →	Code the histology from a metastatic site.	**Code the behavior /3.**
NO ↓		
Next Page		

Lung Histo

LUNG Histology Coding Rules - - Flowchart

(C340 - C349)
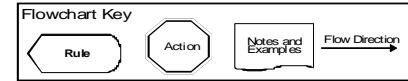(Excludes lymphoma and leukemia M9590-9989 and Kaposi sarcoma M9140)

Flowchart Key

| Rule | Action | Notes and Examples | Flow Direction |

MULTIPLE TUMORS ABSTRACTED AS A SINGLE PRIMARY

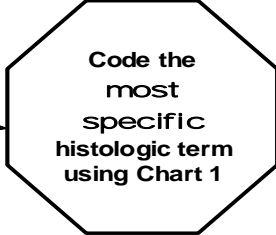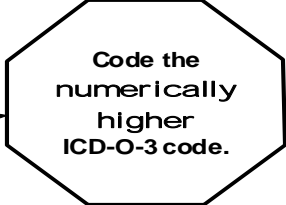| Rule	Action	Notes and Examples
H10 Is only **one histologic type** identified? — YES →	Code the histology.	Do not code terms that do not appear in the histology description. **Example 1:** Do not code squamous cell carcinoma non-keratinizing unless the words "non-keratinizing" actually appear in the diagnosis. **Example 2:** Do not code bronchioalveolar non-mucinous unless the words "non-mucinous" actually appear in the diagnosis.
NO ↓		
H11 Is one tumor in situ and the other invasive or are both tumors invasive? — YES →	Code the histology of the **most invasive** tumor.	1. This rule should only be used when the first three numbers of the histology codes are identical. (This is a single primary.) 2. See the Lung Equivalent Terms, Definitions, Charts, Tables and Illustrations for the definition of most invasive. ○ If one tumor is in situ and one is invasive, code the histology from the invasive tumor. ○ If both/all histologies are invasive, code the histology of the most invasive tumor.
NO ↓ Next Page		

LUNG Histology Coding Rules - Flowchart

(C340 - C349)

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

SINGLE TUMOR

Rule	Action	Notes and Examples
H12 Are there multiple histologies within the same branch such as: ● cancer/malignant neoplasm, NOS (8000) and a more specific histology? OR ● carcinoma, NOS (8010) and a more specific carcinoma? OR ● adenocarcinoma, NOS (8140) and a more specific adenocarcinoma? OR ● squamous cell carcinoma, NOS (8070) and a more specific squamous cell carcinoma? OR ● sarcoma, NOS (8800) and a more specific sarcoma?	YES → Code the **most specific** histologic term using Chart 1 NO ↓	The specific histology may be identified as type, subtype, predominantly, with features of, major, or with _____ differentiation. **Example 1:** Adenocarcinoma, predominantly mucinous. Code mucinous adenocarcinoma 8480. **Example 2:** Non-small cell carcinoma, papillary squamous cell. Code papillary squamous cell carcinoma 8052.
H13	Code the **numerically higher** ICD-O-3 code.	

This is the end of instructions for Multiple Tumors Abstracted as a Single Primary.
Code the histology according to the rule that fits the case.

Lung Histo

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