Coding Guidelines

BRAIN [AND OTHER PARTS OF CENTRAL NERVOUS SYSTEM]
MENINGES C700–C709, BRAIN C710–C719,
SPINAL CORD, CRANIAL NERVES AND
OTHER PARTS OF CENTRAL NERVOUS SYSTEM C720–C729
(Except for M9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9992)

Reportability
Juvenile astrocytoma, listed as 9421/1 in ICD-O-3, is reportable. Record as 9421/3 in the registry.

Grade

Note: These guidelines pertain to the data item Grade. Refer to the Collaborative Stage Data Collection Manual for instructions on coding site-specific factors.

Astrocytoma

Grade astrocytomas (M-9383, 9400, 9401, 9410-9412, 9420, 9421) according to ICD-O-3 rules.

<table>
<thead>
<tr>
<th>Term</th>
<th>Grade</th>
<th>SEER Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well differentiated</td>
<td>Grade I</td>
<td>1</td>
</tr>
<tr>
<td>Intermediate differentiation</td>
<td>Grade II</td>
<td>2</td>
</tr>
<tr>
<td>Poorly differentiated</td>
<td>Grade III</td>
<td>3</td>
</tr>
<tr>
<td>Anaplastic</td>
<td>Grade IV</td>
<td>4</td>
</tr>
</tbody>
</table>

Use the conversion table in the Grade, Differentiation, or Cell Indicator section (page 73) of the General Instructions to code low grade, intermediate grade, and high grade.

Do not record the WHO Grade, Anne/Mayo, or Kemohan grades in the grade field
  - Record the WHO grade in the data item CS Site-Specific Factor 1
  - The use of World Health Organization coding of aggressiveness is reserved for assignment of grade for staging.

Do not automatically code glioblastoma multiforme as grade IV
  - If no grade is given, code 9 (Cell type not determined, not stated or not applicable)

Always code the Grade, Differentiation field 4 (Grade IV) for anaplastic tumors
  - Anaplastic is synonymous with undifferentiated

Code the grade as documented.

Code the Grade, Differentiation field to 9 (Cell type not determined, not stated or not applicable) in the absence of a stated grade on the pathology report.

Laterality

Meningioma
Assign code 4 (Bilateral involvement, lateral origin unknown; stated to be single primary) when
  - one meningioma extends to both right and left sides
  - it is not possible to determine whether the meningioma originated on the left or the right