APPENDIX C

SITE-SPECIFIC SURGERY CODES
ORAL CAVITY
Lip C00.0-C00.9, Base of Tongue C01.9, Other Parts of Tongue C02.0-C02.9,
Gum C03.0-C03.9, Floor of Mouth C04.0-C04.9, Palate C05.0-C05.9,
Other Parts of Mouth C06.0-C06.9

APPENDIX C
SITE-SPECIFIC SURGERY CODES

SURGERY OF PRIMARY SITE

Codes

00 None; no cancer-directed surgery of primary site
10 Local tumor destruction, NOS (WTHOUT PATHOLOGY SPECIMEN)
   11 Photodynamic therapy (PDT)
   12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13 Cryosurgery
   14 Laser
      No specimen sent to pathology from this surgical event.

Procedures in codes 20-27 include, but are not limited to:

   Shave
   Wedge resection

20 Local tumor excision, NOS (WITH PATHOLOGY SPECIMEN)
   21 Photodynamic therapy (PDT)
   22 Electrocautery
   23 Cryosurgery
   24 Laser ablation
   25 Laser excision
   26 Polypectomy
   27 Excisional biopsy
      Specimen sent to pathology from this surgical event.

Procedures in code 30 include, but are not limited to:

   Hemiglossectomy
   Partial glossectomy

30 Wide excision, NOS
APPENDIX C
SITE-SPECIFIC SURGERY CODES

ORAL CAVITY
Lip C00.0-C00.9, Base of Tongue C01.9, Other Parts of Tongue C02.0-C02.9,
Gum C03.0-C03.9, Floor of Mouth C04.0-C04.9, Palate C05.0-C05.9,
Other Parts of Mouth C06.0-C06.9

SURGERY OF PRIMARY SITE, continued

<table>
<thead>
<tr>
<th>Procedures in codes 40-43 include, but are not limited to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Radical glossectomy</td>
</tr>
</tbody>
</table>

40  Radical excision of tumor, NOS
41  Radical excision of tumor ONLY
42  Combination of 41 WITH en bloc mandibulectomy (marginal, segmental, hemi-, or
total)
43  Combination of 41 WITH en bloc maxillectomy (partial, subtotal, total)

90  Surgery, NOS

99  Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

<table>
<thead>
<tr>
<th>Regional cervical lymph nodes are:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caudal jugular (deep cervical)</td>
</tr>
<tr>
<td>Caudal jugular (deep cervical)</td>
</tr>
<tr>
<td>Dorsal cervical (superficial cervical)</td>
</tr>
<tr>
<td>Medial jugular (deep cervical)</td>
</tr>
<tr>
<td>Occipital</td>
</tr>
<tr>
<td>Paratracheal (anterior cervical)</td>
</tr>
<tr>
<td>Prelaryngeal (anterior cervical)</td>
</tr>
<tr>
<td>Retroauricular (mastoid, posterior</td>
</tr>
<tr>
<td>auricular)</td>
</tr>
<tr>
<td>Submandibular (submaxillary)</td>
</tr>
<tr>
<td>Submental</td>
</tr>
<tr>
<td>Supraclavicular</td>
</tr>
</tbody>
</table>

*codes continue on next page*
### APPENDIX C
SITE-SPECIFIC SURGERY CODES

**ORAL CAVITY**
Lip C00.0-C00.9, Base of Tongue C01.9, Other Parts of Tongue C02.0-C02.9,
Gum C03.0-C03.9, Floor of Mouth C04.0-C04.9, Palate C05.0-C05.9,
Other Parts of Mouth C06.0-C06.9

### SCOPE OF REGIONAL LYMPH NODE SURGERY, continued

**Codes**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No regional lymph nodes removed</td>
</tr>
<tr>
<td>1</td>
<td>Regional lymph node(s) removed, NOS</td>
</tr>
<tr>
<td>2</td>
<td>Neck dissection, NOS</td>
</tr>
<tr>
<td>3</td>
<td>Selective, limited; nodal sampling; “berry picking”</td>
</tr>
<tr>
<td>4</td>
<td>Modified/modified radical</td>
</tr>
<tr>
<td>5</td>
<td>Radical</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>

---

**Terminology of neck dissection (Robbins et al. 1991):**

A radical neck dissection includes the removal of all ipsilateral cervical lymph node groups, i.e., lymph nodes from levels I through V (submental, submandibular, cranial jugular, medial jugular, caudal jugular, dorsal cervical nodes along the accessory nerve, and supraclavicular), and removal of the spinal accessory nerve, internal jugular vein and sternocleidomastoid muscle.

In a modified radical neck dissection the same lymph nodes are removed as in a radical neck dissection; however, one or more non-lymphatic structures are preserved.

A selective neck dissection is a neck dissection with preservation of one or more lymph node groups routinely removed in radical neck dissection.
APPENDIX C
SITE-SPECIFIC SURGERY CODES

ORAL CAVITY
Lip C00.0-C00.9, Base of Tongue C01.9, Other Parts of Tongue C02.0-C02.9,
Gum C03.0-C03.9, Floor of Mouth C04.0-C04.9, Palate C05.0-C05.9,
Other Parts of Mouth C06.0-C06.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
..  Ninety or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes
     examined unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined
     unknown/not stated
98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not
     stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH
NODE(S)

Codes

0  None; no surgery to other regional or distant sites
1  Surgery to other site(s) or node(s), NOS; unknown if regional or distant
2  Other regional site(s)
   3  Mandibulectomy (marginal, segmental, hemi-, or total)
   4  Maxillectomy (partial, subtotal, or total)

Code a mandibulectomy or a maxillectomy in this field only if the procedure is NOT a part
of an en bloc resection of the primary tumor. If the mandibulectomy or maxillectomy IS a
part of an en bloc resection of the primary tumor, code under “Surgery of Primary Site.”

5  Distant lymph node(s)
6  Distant site(s)
7  Combination of 6 WITH 2, 3, 4, or 5
9  Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

PAROTID AND OTHER UNSPECIFIED GLANDS
Parotid Gland C07.9, Major Salivary Glands C08.0-C08.9

SURGERY OF PRIMARY SITE

Codes

00 None; no cancer-directed surgery of primary site

10 Local tumor destruction, NOS (WITHOUT PATHOLOGY SPECIMEN)
   11 Photodynamic therapy (PDT)
   12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13 Cryosurgery
   14 Laser

   No specimen sent to pathology from this surgical event.

20 Local tumor excision, NOS (WITH PATHOLOGY SPECIMEN)
   21 Photodynamic therapy (PDT)
   22 Electrocautery
   23 Cryosurgery
   24 Laser ablation
   25 Laser excision
   26 Polypectomy
   27 Excisional biopsy

   Specimen sent to pathology from this surgical event.

30 Less than total parotidectomy, NOS
   31 Facial nerve spared
   32 Facial nerve sacrificed
   33 Superficial lobe ONLY
   34 Facial nerve spared
   35 Facial nerve sacrificed

36 Deep lobe (WITH or WITHOUT superficial lobe)
   37 Facial nerve spared
   38 Facial nerve sacrificed

40 Total parotidectomy, NOS
   41 Facial nerve spared
   42 Facial nerve sacrificed

50 Radical parotidectomy, NOS
   51 WITHOUT removal of temporal bone
   52 WITH removal of temporal bone

80 Parotidectomy, NOS

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

PAROTID AND OTHER UNSPECIFIED GLANDS
Parotid Gland C07.9, Major Salivary Glands C08.0-C08.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

<table>
<thead>
<tr>
<th>Regional cervical lymph nodes are:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buccal (facial)</td>
</tr>
<tr>
<td>Caudal jugular (deep cervical)</td>
</tr>
<tr>
<td>Cranial jugular (deep cervical)</td>
</tr>
<tr>
<td>Dorsal cervical (superficial cervical)</td>
</tr>
<tr>
<td>Medial jugular (deep cervical)</td>
</tr>
<tr>
<td>Occipital</td>
</tr>
<tr>
<td>Paratracheal (anterior cervical)</td>
</tr>
<tr>
<td>Parotid</td>
</tr>
<tr>
<td>Prelaryngeal (anterior cervical)</td>
</tr>
<tr>
<td>Retroauricular (mastoid, posterior auricular)</td>
</tr>
<tr>
<td>Retropharyngeal</td>
</tr>
<tr>
<td>Submandibular (submaxillary)</td>
</tr>
<tr>
<td>Submental</td>
</tr>
<tr>
<td>Supraclavicular</td>
</tr>
</tbody>
</table>

Codes

0  No regional lymph nodes removed

1  Regional lymph node(s) removed, NOS

2  Neck dissection, NOS

3  Selective, limited; nodal sampling; “berry picking”

4  Modified/modified radical

5  Radical

9  Unknown; not stated; death certificate ONLY

Terminology of neck dissection (Robbins et al. 1991):

A radical neck dissection includes the removal of all ipsilateral cervical lymph node groups, i.e., lymph nodes from levels I through V (submental, submandibular, cranial jugular, medial jugular, caudal jugular, dorsal cervical nodes along the accessory nerve, and supraclavicular), and removal of the spinal accessory nerve, internal jugular vein and sternocleidomastoid muscle.

In a modified radical neck dissection, the same lymph nodes are removed as in a radical neck dissection; however, one or more non-lymphatic structures are preserved.

A selective neck dissection is a neck dissection with preservation of one or more lymph node groups routinely removed in radical neck dissection.
APPENDIX C
SITE-SPECIFIC SURGERY CODES

PAROTID AND OTHER UNSPECIFIED GLANDS
Parotid Gland C07.9, Major Salivary Glands C08.0-C08.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
..  
90  Ninety or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes 
    examined unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined 
    unknown/not stated
98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not 
    stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH
NODE(S)

Codes

0   None; no surgery to other regional or distant sites
1   Surgery to other site(s) or node(s), NOS; unknown if regional or distant
    2   Other regional sites
    3   Distant lymph node(s)
    4   Distant site(s)
    5   Combination of 4 WITH 2 or 3
9   Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

Page intentionally blank.
APPENDIX C
SITE-SPECIFIC SURGERY CODES

PHARYNX
Tonsil C09.0-C09.9, Oropharynx C10.0-C10.9, Nasopharynx C11.0-C11.9
Pyriform Sinus C12.9, Hypopharynx C13.0-C13.9, Pharynx C14.0

SURGERY OF PRIMARY SITE

Codes

00 None; no cancer-directed surgery of primary site

10 Local tumor destruction, NOS (WITHOUT PATHOLOGY SPECIMEN)
   11 Photodynamic therapy (PDT)
   12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13 Cryosurgery
   14 Laser
   15 Stripping
   
   **No specimen sent to pathology from this surgical event.**

20 Local tumor excision, NOS (WITH PATHOLOGY SPECIMEN)
   21 Photodynamic therapy (PDT)
   22 Electrocautery
   23 Cryosurgery
   24 Laser ablation
   25 Laser excision
   26 Polypectomy
   27 Excisional biopsy
   
   **Specimen sent to pathology from this surgical event.**

30 Pharyngectomy, NOS
   31 Limited/partial pharyngectomy
   32 Total pharyngectomy

40 Pharyngectomy WITH mandibulectomy (marginal, segmental, hemi-, and/or laryngectomy), NOS
   41 WITH laryngectomy (laryngopharyngectomy)
   42 WITH mandibulectomy
   43 WITH both 41 and 42

50 Radical pharyngectomy (includes total mandibular resection), NOS
   51 WITHOUT laryngectomy
   52 WITH laryngectomy

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

PHARYNX
Tonsil C09.0-C09.9, Oropharynx C10.0-C10.9, Nasopharynx C11.0-C11.9
Pyriform Sinus C12.9, Hypopharynx C13.0-C13.9, Pharynx C14.0

SCOPE OF REGIONAL LYMPH NODE SURGERY

<table>
<thead>
<tr>
<th>Regional cervical lymph nodes are:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buccal (facial)</td>
</tr>
<tr>
<td>Caudal jugular (deep cervical)</td>
</tr>
<tr>
<td>Cranial jugular (deep cervical)</td>
</tr>
<tr>
<td>Dorsal cervical (superficial cervical)</td>
</tr>
<tr>
<td>Medial jugular (deep cervical)</td>
</tr>
<tr>
<td>Occipital</td>
</tr>
<tr>
<td>Paratracheal (anterior cervical)</td>
</tr>
<tr>
<td>Parotid</td>
</tr>
<tr>
<td>Prelaryngeal (anterior cervical)</td>
</tr>
<tr>
<td>Retroauricular (mastoid, posterior auricular)</td>
</tr>
<tr>
<td>Retropharyngeal</td>
</tr>
<tr>
<td>Submandibular (submaxillary)</td>
</tr>
<tr>
<td>Submental</td>
</tr>
<tr>
<td>Supraclavicular</td>
</tr>
</tbody>
</table>

Codes

0  No regional lymph nodes removed
1  Regional lymph node(s) removed, NOS
2  Neck dissection, NOS
   3  Selective, limited; nodal sampling; “berry picking”
   4  Modified/modified radical
   5  Radical
9  Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

PHARYNX
Tonsil C09.0-C09.9, Oropharynx C10.0-C10.9, Nasopharynx C11.0-C11.9
Pyriform Sinus C12.9, Hypopharynx C13.0-C13.9, Pharynx C14.0

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
...
90  Ninety or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

0  None; no surgery to other regional or distant sites
1  Surgery to other site(s) or node(s), NOS; unknown if regional or distant
  2  Laryngectomy ONLY
  3  Mandibulectomy ONLY (marginal, segmental, or hemi-)
  4  Combination of 2 and 3
  5  Removal of other regional sites
  6  Combination of 5 with 2-4
  7  Removal of other distant site(s) or distant lymph node(s)
  8  Combination of 7 WITH any of 2-6
  9  Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

ESOPHAGUS
C15.0-C15.9

SURGERY OF PRIMARY SITE

Codes

00 None; no cancer-directed surgery of primary site

10 Local tumor destruction, NOS (WITHOUT PATHOLOGY SPECIMEN)
   11 Photodynamic therapy (PDT)
   12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13 Cryosurgery
   14 Laser

   No specimen sent to pathology from this surgical event.

20 Local tumor excision, NOS (WITH PATHOLOGY SPECIMEN)
   21 Photodynamic therapy (PDT)
   22 Electrocautery
   23 Cryosurgery
   24 Laser ablation
   25 Laser excision
   26 Polypectomy
   27 Excisional biopsy

   Specimen sent to pathology from this surgical event.

30 Partial esophagectomy

40 Total esophagectomy

50 Partial esophagectomy WITH laryngectomy and/or gastrectomy, NOS
   51 WITH laryngectomy
   52 WITH gastrectomy, NOS
      53 Partial gastrectomy
      54 Total gastrectomy
   55 Combination of 51 WITH any of 52-54

60 Total esophagectomy, NOS WITH laryngectomy and/or gastrectomy, NOS
   61 WITH laryngectomy
   62 WITH gastrectomy, NOS
      63 Partial gastrectomy
      64 Total gastrectomy
   65 Combination of 61 WITH any of 62-64

70 Esophagectomy, NOS WITH pharyngectomy and laryngectomy
APPENDIX C
SITE-SPECIFIC SURGERY CODES

ESOPHAGUS
C15.0-C15.9

SURGERY OF PRIMARY SITE, continued

80  Esophagectomy, NOS
90  Surgery, NOS
99  Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

Regional lymph nodes are different for each anatomical subsite. The following list identifies nodes classified as regional for each subsite:

| Cervical esophagus: | Cervical, NOS                  |
|                    | Internal jugular               |
|                    | Periesophageal                 |
|                    | Scalene                       |
|                    | Supraclavicular               |
|                    | Upper cervical                |
| Intrathoracic esophagus (upper, middle, lower): | Carinal                       |
|                    | Hilar (pulmonary roots)       |
|                    | Internal jugular              |
|                    | Mediastinal, NOS              |
|                    | Paracardial                   |
|                    | Periesophageal                |
|                    | Perigastric                   |
|                    | Peritracheal                  |
|                    | Superior mediastinal          |
|                    | Tracheobronchial              |

Codes

0  No regional lymph nodes removed
1  Regional lymph node(s) removed, NOS
9  Unknown; not stated; death certificate ONLY

Celiac nodes are distant for intrathoracic esophagus. Code removal of celiac nodes in the data item “Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”
### APPENDIX C
SITE-SPECIFIC SURGERY CODES

**ESOPHAGUS**  
C15.0-C15.9

#### NUMBER OF REGIONAL LYMPH NODES EXAMINED

<table>
<thead>
<tr>
<th>Codes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No regional lymph nodes examined</td>
</tr>
<tr>
<td>01</td>
<td>One regional lymph node examined</td>
</tr>
<tr>
<td>02</td>
<td>Two regional lymph nodes examined</td>
</tr>
<tr>
<td>..</td>
<td>Ninety or more regional lymph nodes examined</td>
</tr>
<tr>
<td>90</td>
<td>No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed</td>
</tr>
<tr>
<td>95</td>
<td>Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated</td>
</tr>
<tr>
<td>97</td>
<td>Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated</td>
</tr>
<tr>
<td>98</td>
<td>Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection</td>
</tr>
<tr>
<td>99</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>

#### SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

<table>
<thead>
<tr>
<th>Codes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None; no surgery to other regional or distant sites</td>
</tr>
<tr>
<td>1</td>
<td>Surgery to other site(s) or node(s), NOS; unknown if regional or distant</td>
</tr>
<tr>
<td>2</td>
<td>Other regional sites</td>
</tr>
<tr>
<td>3</td>
<td>Distant lymph node(s)</td>
</tr>
<tr>
<td>4</td>
<td>Distant site(s)</td>
</tr>
<tr>
<td>5</td>
<td>Combination of 4 WITH 2 or 3</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
SURGERY OF PRIMARY SITE

CODE

00  None; no cancer-directed surgery of primary site

10  Local tumor destruction, NOS (WITHOUT PATHOLOGY SPECIMEN)
   11  Photodynamic therapy (PDT)
   12  Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13  Cryosurgery
   14  Laser

   No specimen sent to pathology from this surgical event.

20  Local tumor excision, NOS (WITH PATHOLOGY SPECIMEN)
   21  Photodynamic therapy (PDT)
   22  Electrocautery
   23  Cryosurgery
   24  Laser ablation
   25  Laser excision
   26  Polypectomy
   27  Excisional biopsy

   Specimen sent to pathology from this surgical event.

Code 30, partial gastrectomy, includes a sleeve resection of the stomach
Billroth I: anastomosis to duodenum (duodenostomy)
Billroth II: anastomosis to jejunum (jejunostomy)

30  Gastrectomy, NOS (partial, subtotal, hemi-)
   31  Antrectomy, lower (distal)

   Resection of less than 40% of stomach

   32  Lower (distal) gastrectomy (partial, subtotal, hemi-)
   33  Upper (proximal) gastrectomy (partial, subtotal, hemi-)

40  Near-total or total gastrectomy

   A total gastrectomy may follow a previous partial resection of the stomach.

50  Gastrectomy, NOS WITH removal of a portion of esophagus
   51  Partial or subtotal gastrectomy
   52  Near total or total gastrectomy
APPENDIX C
SITE-SPECIFIC SURGERY CODES

STOMACH
C16.0-C16.9

SURGERY OF PRIMARY SITE, continued

60  Gastrectomy WITH en bloc resection of other organs, NOS
61  Partial or subtotal gastrectomy WITH en bloc resection
62  Near total or total gastrectomy WITH en bloc resection
63  Radical gastrectomy WITH en bloc resection

EN BLOC RESECTION is the removal of organs in one piece at one time and may include an omentectomy.

80  Gastrectomy, NOS
90  Surgery, NOS
99  Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

<table>
<thead>
<tr>
<th>The regional lymph nodes are:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greater Curvature of Stomach</td>
</tr>
<tr>
<td>Gastroduodenal</td>
</tr>
<tr>
<td>Gastroepiploic, left</td>
</tr>
<tr>
<td>Gastroepiploic, right or NOS</td>
</tr>
<tr>
<td>Greater omental</td>
</tr>
<tr>
<td>Greater curvature</td>
</tr>
<tr>
<td>Pancreatooduodenal (anteriorly along the first part of duodenum)</td>
</tr>
<tr>
<td>Pyloric, including subpyloric and infrapyloric</td>
</tr>
<tr>
<td>Pancreatic and Splenic Area:</td>
</tr>
<tr>
<td>Pancreatocolienal</td>
</tr>
<tr>
<td>Peripancreatic</td>
</tr>
<tr>
<td>Splenic hilum</td>
</tr>
<tr>
<td>Lesser Curvature of Stomach:</td>
</tr>
<tr>
<td>Cardiosophageal</td>
</tr>
<tr>
<td>Celiac</td>
</tr>
<tr>
<td>Common hepatic</td>
</tr>
<tr>
<td>Hepatoduodenal</td>
</tr>
<tr>
<td>Left gastric</td>
</tr>
<tr>
<td>Lesser omental</td>
</tr>
<tr>
<td>Lesser curvature</td>
</tr>
<tr>
<td>Paracardial; cardial</td>
</tr>
<tr>
<td>Perigastric, NOS</td>
</tr>
</tbody>
</table>
APPENDIX C
SITE-SPECIFIC SURGERY CODES

STOMACH
C16.0-C16.9

SCOPE OF REGIONAL LYMPH NODE SURGERY, continued

Codes

0  No regional lymph nodes removed

1  Regional lymph node(s) removed, NOS

9  Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00  No regional lymph nodes examined

01  One regional lymph node examined

02  Two regional lymph nodes examined

..  Ninety or more regional lymph nodes examined

95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed

96  Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated

97  Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated

98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection

99  Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

STOMACH
C16.0-C16.9

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH
NODE(S)

**DO NOT CODE** the incidental removal of gallbladder, bile ducts, appendix, or vagus nerve. Incidental removal is when an organ is removed for a reason unrelated to the malignancy (gallbladder removed for obvious cholelithiasis).

**Codes**

0  None; no surgery to other regional or distant sites

1  Surgery to other site(s) or node(s), NOS; unknown if regional or distant

2  Removal of other regional sites, ONLY

3  Removal of distant node(s)

4  Removal of distant site

5  Combination of 2 WITH 3 and/or 4

9  Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

COLON
C18.0 - C18.9

SURGERY OF PRIMARY SITE

**Code** removal/surgical ablation of single or multiple liver metastases under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

**Codes**

00 None; no cancer-directed surgery of primary site

10 Local tumor destruction, NOS (WITHOUT PATHOLOGY SPECIMEN)
   11 Photodynamic therapy (PDT)
   12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13 Cryosurgery
   14 Laser

   No specimen sent to pathology from this surgical event.

20 Local tumor excision, NOS  (WITH PATHOLOGY SPECIMEN)
   21 Photodynamic therapy (PDT)
   22 Electrocautery
   23 Cryosurgery
   24 Laser ablation
   25 Laser excision
   26 Polypectomy
   27 Excisional biopsy

   Specimen sent to pathology from this surgical event.

<table>
<thead>
<tr>
<th>Procedures coded 30-31 include, but are not limited to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendectomy (for an appendix primary only)</td>
</tr>
<tr>
<td>Enterocolectomy</td>
</tr>
<tr>
<td>Ileocolectomy</td>
</tr>
<tr>
<td>Partial colectomy, NOS</td>
</tr>
<tr>
<td>Partial resection of transverse colon and flexures</td>
</tr>
<tr>
<td>Segmental resection, e.g., cecectomy</td>
</tr>
<tr>
<td>Sigmoidectomy</td>
</tr>
</tbody>
</table>

30 Partial colectomy, but less than hemicolecotomy
31 Partial colectomy WITH permanent colostomy (Hartmann’s operation)
APPENDIX C
SITE-SPECIFIC SURGERY CODES

COLON
C18.0 - C18.9

SURGERY OF PRIMARY SITE, continued

40  Hemicolecction or greater (but less than total); right or left colectomy
A hemicolecction is the removal of total right or left colon and a portion of transverse colon

50  Total colectomy
Removal of colon from cecum to the rectosigmoid or a portion of the rectum

60  Total proctocolectomy
Commonly used for familial polyposis or polyposis coli.

70  Colectomy or coloproctectomy WITH an en bloc resection of other organs; pelvic exenteration
COD 70 includes any colectomy (partial, hemicolecction, or total) WITH an en bloc resection of any other organs. The other organs may be partially or totally removed. Procedures that may be a PART OF AN EN BLOC RÉSECTION include, but are not limited to: oophorectomy, partial proctectomy, rectal mucosectomy
EN BLOC resection is the removal of organs in one piece at one time.

80  Colectomy, NOS

90  Surgery, NOS

99  Unknown if cancer-directed surgery performed; death certificate ONLY
SCOPe OF REGIONAL LYMPH NODE SURGERY

The pathology report often describes regional lymph nodes by their anatomic location: colic nodes; mesenteric nodes; peri-epi-para-colic. Regional lymph nodes differ for each anatomical subsite. The following list identifies the regional lymph nodes for each subsite of the colon:

<table>
<thead>
<tr>
<th>Subsite</th>
<th>Regional Lymph Nodes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cecum and appendix</td>
<td>Anterior cecal</td>
</tr>
<tr>
<td></td>
<td>Ileocolic</td>
</tr>
<tr>
<td></td>
<td>Posterior cecal</td>
</tr>
<tr>
<td></td>
<td>Right colic</td>
</tr>
<tr>
<td>Ascending colon</td>
<td>Ileocolic</td>
</tr>
<tr>
<td></td>
<td>Middle colic</td>
</tr>
<tr>
<td></td>
<td>Right colic</td>
</tr>
<tr>
<td>Hepatic flexure</td>
<td>Middle colic</td>
</tr>
<tr>
<td></td>
<td>Right colic</td>
</tr>
<tr>
<td>Transverse colon</td>
<td>Middle colic</td>
</tr>
<tr>
<td>Splenic flexure</td>
<td>Inferior mesenteric</td>
</tr>
<tr>
<td></td>
<td>Middle colic</td>
</tr>
<tr>
<td></td>
<td>Left colic</td>
</tr>
<tr>
<td>Descending colon</td>
<td>Inferior mesenteric</td>
</tr>
<tr>
<td></td>
<td>Left colic</td>
</tr>
<tr>
<td></td>
<td>Sigmoid</td>
</tr>
<tr>
<td>Sigmoid colon</td>
<td>Inferior mesenteric</td>
</tr>
<tr>
<td></td>
<td>Sigmoid mesenteric</td>
</tr>
<tr>
<td></td>
<td>Sigmoidal</td>
</tr>
<tr>
<td></td>
<td>Superior rectal (hemorrhoidal)</td>
</tr>
</tbody>
</table>

Superior mesenteric, external iliac and common iliac nodes are distant lymph nodes. Code the removal of any of these nodes in the data item “Surgery of Other Regional Site(s), Distant Site(s), or Distant Lymph Node(s).”

**Codes**

- 0  No regional lymph nodes removed
- 1  Regional lymph node(s) removed, NOS
- 9  Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

COLON
C18.0 - C18.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

<table>
<thead>
<tr>
<th>Codes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No regional lymph nodes examined</td>
</tr>
<tr>
<td>01</td>
<td>One regional lymph node examined</td>
</tr>
<tr>
<td>02</td>
<td>Two regional lymph nodes examined</td>
</tr>
<tr>
<td>.</td>
<td>Ninety or more regional lymph nodes examined</td>
</tr>
<tr>
<td>95</td>
<td>Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated</td>
</tr>
<tr>
<td>96</td>
<td>Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated</td>
</tr>
<tr>
<td>97</td>
<td>Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection</td>
</tr>
<tr>
<td>98</td>
<td>Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection</td>
</tr>
<tr>
<td>99</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S), OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of appendix, gallbladder, bile ducts, or spleen. Incidental removal is when an organ is removed for a reason unrelated to the malignancy (gallbladder removed for obvious cholelithiasis).

<table>
<thead>
<tr>
<th>Codes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None; no surgery to other regional or distant sites</td>
</tr>
<tr>
<td>1</td>
<td>Surgery to other site(s) or node(s), NOS; unknown if regional or distant</td>
</tr>
<tr>
<td>2</td>
<td>Removal of other regional site(s), ONLY</td>
</tr>
<tr>
<td>3</td>
<td>Removal/surgical ablation of single liver metastasis</td>
</tr>
<tr>
<td>4</td>
<td>Removal/surgical ablation of multiple liver metastases</td>
</tr>
<tr>
<td>5</td>
<td>Combination of codes 2 WITH 3 or 4</td>
</tr>
<tr>
<td>6</td>
<td>Removal of other distant site(s) or distant lymph node(s), ONLY</td>
</tr>
<tr>
<td>7</td>
<td>Combination of code 6 WITH 3 or 5</td>
</tr>
<tr>
<td>8</td>
<td>Combination of code 6 WITH 4</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
SURGERY OF PRIMARY SITE

**CODE** removal/surgical ablation of single or multiple liver metastases under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Node(s)."

**Codes**

00 None; no cancer-directed surgery of primary site

10 Local tumor destruction, NOS *(WITHOUT PATHOLOGY SPECIMEN)*
   11 Photodynamic therapy (PDT)
   12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13 Cryosurgery
   14 Laser ablation

   **No specimen sent to pathology from this surgical event.**

20 Local tumor excision, NOS *(WITH PATHOLOGY SPECIMEN)*
   21 Photodynamic therapy (PDT)
   22 Electrocautery
   23 Cryosurgery
   24 Laser ablation
   25 Laser excision
   26 Polypectomy
   27 Excisional biopsy

   **Specimen sent to pathology from this surgical event.**

**Procedures coded 30 include, but are not limited to:**

- Anterior resection
- Hartmann’s operation
- Low anterior resection (LAR)
- Partial colectomy, NOS
- Rectosigmoidectomy, NOS
- Sigmoidectomy

30 Wedge or segmental resection; partial proctosigmoidectomy, NOS
SURGERY OF PRIMARY SITE, continued

<table>
<thead>
<tr>
<th>Procedures coded 40 include but are not limited to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Altemeier’s operation</td>
</tr>
<tr>
<td>Duhamel’s operation</td>
</tr>
<tr>
<td>Soave’s submucosal resection</td>
</tr>
<tr>
<td>Swenson’s operation</td>
</tr>
<tr>
<td>Turnbull’s operation</td>
</tr>
</tbody>
</table>

40  Pull through WITH sphincter preservation (colo-anal anastomosis)

<table>
<thead>
<tr>
<th>Procedures coded 50 include but are not limited to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abdominoperineal resection (A &amp; P resection)</td>
</tr>
<tr>
<td>Anterior/posterior resection (A/P resection)/Miles’ operation</td>
</tr>
<tr>
<td>Rankin’s operation</td>
</tr>
</tbody>
</table>

50  Total proctectomy  
51  Total colectomy

Removal of the colon from cecum to the rectosigmoid or a portion of the rectum

60  Combination of 50 and 51

70  Colectomy or proctocolectomy WITH an en bloc resection of other organs; pelvic exenteration

**EN BLOC RESECTION** is the removal of organs in one piece at one time. Procedures that may be a part of an en bloc resection include, but are not limited to: an oophorectomy and a rectal mucosectomy.

Code 70 includes any colectomy (partial, hemicolectomy, or total) WITH an en bloc resection of any other organs. There may be partial or total removal of other organs in continuity with the primary.

80  Colectomy, NOS; Proctectomy, NOS

90  Surgery, NOS

99  Unknown if cancer-directed surgery performed; death certificate ONLY
SCOPE OF REGIONAL LYMPH NODE SURGERY

The pathology report often identifies regional lymph nodes by their anatomic location: colic; mesenteric; peri-/para-/ colic; perirectal; rectal.

**The specific regional lymph nodes are:**

<table>
<thead>
<tr>
<th>Node Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inferior mesenteric</td>
</tr>
<tr>
<td>Left colic</td>
</tr>
<tr>
<td>Middle rectal (hemorrhoidal)</td>
</tr>
<tr>
<td>Perirectal</td>
</tr>
<tr>
<td>Sigmoid mesenteric</td>
</tr>
<tr>
<td>Sigmoidal</td>
</tr>
<tr>
<td>Superior rectal (superior hemorrhoidal)</td>
</tr>
</tbody>
</table>

Superior mesenteric, external iliac and common iliac nodes are distant nodes. Code removal of these nodes under the data item “Surgery of Other Regional Site(s), Distant Site(s), or Distant Lymph Node(s).”

**Codes**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No regional lymph nodes removed</td>
</tr>
<tr>
<td>1</td>
<td>Regional lymph node(s) removed, NOS</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
APPENDIX C
SITE-SPECIFIC SURGERY CODES

RECTOSIGMOID
C19.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
...
90  Ninety or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S), OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of appendix, gallbladder, or bile ducts. Incidental removal is when an organ is removed for a reason unrelated to the malignancy (gallbladder removed for obvious cholelithiasis).

Codes

0  None; no surgery to other regional or distant sites
1  Surgery to other site(s) or node(s), NOS; unknown if regional or distant
2  Removal of other regional site(s), ONLY
3  Removal/surgical ablation of single liver metastasis
4  Removal/surgical ablation of multiple liver metastases
5  Combination of codes 2 and 3 or 4
6  Removal of other distant site(s) or distant lymph node(s), ONLY
7  Combination of code 6 WITH 3, 4 or 5
8  Combination of code 6 WITH 3 or 5
9  Unknown; death certificate ONLY
SURGERY OF PRIMARY SITE

**CODE** removal/surgical ablation of single or multiple liver metastases under the data item "Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s)."

**Codes**

00 None; no cancer-directed surgery of primary site

10 Local tumor destruction, NOS *(WITHOUT PATHOLOGY SPECIMEN)*
   11 Photodynamic therapy (PDT)
   12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13 Cryosurgery
   14 Laser
   
   **No specimen sent to pathology from this surgical event.**

20 Local tumor excision, NOS *(WITH PATHOLOGY SPECIMEN)*
   21 Photodynamic therapy (PDT)
   22 Electrocautery
   23 Cryosurgery
   24 Laser ablation
   25 Laser excision
   26 Polypectomy
   27 Excisional biopsy
   28 Curette and fulguration
   
   **Specimen sent to pathology from this surgical event.**

<table>
<thead>
<tr>
<th>Procedures coded 30 include, but are not limited to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anterior resection</td>
</tr>
<tr>
<td>Hartmann’s operation</td>
</tr>
<tr>
<td>Low anterior resection (LAR)</td>
</tr>
<tr>
<td>Trans-sacral rectosigmoidectomy</td>
</tr>
</tbody>
</table>

30 Wedge or segmental resection; partial proctectomy, NOS
### SURGERY OF PRIMARY SITE, continued

<table>
<thead>
<tr>
<th>Procedures coded 40 include but are not limited to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Altemeier’s operation</td>
</tr>
<tr>
<td>Duhamel’s operation</td>
</tr>
<tr>
<td>Soave’s submucosal resection</td>
</tr>
<tr>
<td>Swenson’s operation</td>
</tr>
<tr>
<td>Turnbull’s operation</td>
</tr>
</tbody>
</table>

40 Pull through WITH sphincter preservation (colo-anal anastomosis)

<table>
<thead>
<tr>
<th>Procedures coded 50 include but are not limited to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abdominoperineal resection (A &amp; P resection)</td>
</tr>
<tr>
<td>Anterior/Posterior (A/P) resection/Miles’ operation</td>
</tr>
<tr>
<td>Rankin’s operation</td>
</tr>
</tbody>
</table>

50 Total proctectomy

60 Total proctocolectomy, NOS

70 Proctectomy or proctocolectomy WITH an en bloc resection of other organs; pelvic exenteration

**EN BLOC RESECTION** is the removal of organs in one piece at one time.

80 Proctectomy, NOS

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY
SCOPE OF REGIONAL LYMPH NODE SURGERY

The pathology report often identifies regional lymph nodes by their anatomic location: mesenteric nodes; perirectal nodes; rectal nodes.

The specific regional lymph nodes are:

- Inferior rectal (hemorrhoidal)
- Inferior mesenteric
- Internal iliac
- Lateral sacral
- Middle rectal (hemorrhoidal)
- Perirectal
- Presacral
- Sacral promontory (Gerota’s)
- Sigmoid mesenteric
- Superior rectal (hemorrhoidal)

Superior mesenteric, external iliac and common iliac nodes are classified as distant lymph nodes. Code removal of these nodes under the data item “Surgery of Other Regional Site(s), Distant Site(s), or Distant Lymph Node(s).”

Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No regional lymph nodes removed</td>
</tr>
<tr>
<td>1</td>
<td>Regional lymph node(s) removed, NOS</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
APPENDIX C
SITE-SPECIFIC SURGERY CODES

RECTUM
C20.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No regional lymph nodes examined</td>
</tr>
<tr>
<td>01</td>
<td>One regional lymph node examined</td>
</tr>
<tr>
<td>02</td>
<td>Two regional lymph nodes examined</td>
</tr>
<tr>
<td>...</td>
<td>Ninety or more regional lymph nodes examined</td>
</tr>
<tr>
<td>95</td>
<td>No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed</td>
</tr>
<tr>
<td>96</td>
<td>Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated</td>
</tr>
<tr>
<td>97</td>
<td>Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated</td>
</tr>
<tr>
<td>98</td>
<td>Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection</td>
</tr>
<tr>
<td>99</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S), OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of appendix, gallbladder, bile ducts, or spleen. Incidental removal is when an organ is removed for a reason unrelated to the malignancy (gallbladder removed for obvious cholelithiasis).

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None; no surgery to other regional or distant sites</td>
</tr>
<tr>
<td>1</td>
<td>Surgery to other site(s) or node(s), NOS; unknown if regional or distant</td>
</tr>
<tr>
<td>2</td>
<td>Removal of other regional site(s), ONLY</td>
</tr>
<tr>
<td>3</td>
<td>Removal/surgical ablation of single liver metastasis</td>
</tr>
<tr>
<td>4</td>
<td>Removal/surgical ablation of multiple liver metastases</td>
</tr>
<tr>
<td>5</td>
<td>Combination of codes 2 with 3 or 4</td>
</tr>
<tr>
<td>6</td>
<td>Removal of other distant site(s) or distant lymph node(s), ONLY</td>
</tr>
<tr>
<td>7</td>
<td>Combination of code 6 WITH 3, 4 or 5</td>
</tr>
<tr>
<td>8</td>
<td>Combination of code 6 WITH 3 or 5</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; death certificate ONLY</td>
</tr>
</tbody>
</table>
SURGERY OF PRIMARY SITE

Codes

00 None; no cancer-directed surgery of primary site

<table>
<thead>
<tr>
<th>Procedures for codes 10-14 include, but are not limited to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cryosurgery</td>
</tr>
<tr>
<td>Electrocautery</td>
</tr>
<tr>
<td>Excisional biopsy</td>
</tr>
<tr>
<td>Laser</td>
</tr>
<tr>
<td>Thermal ablation</td>
</tr>
</tbody>
</table>

10 Local tumor destruction, NOS (WITHOUT PATHOLOGY SPECIMEN)
11 Photodynamic therapy (PDT)
12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
13 Cryosurgery
14 Laser

No specimen sent to pathology from this surgical event.

20 Local tumor excision, NOS (WITH PATHOLOGY SPECIMEN)
21 Photodynamic therapy (PDT)
22 Electrocautery
23 Cryosurgery
24 Laser ablation
25 Laser excision
26 Polypectomy
27 Excisional biopsy

Specimen sent to pathology from this surgical event.

Margins of resection may have microscopic involvement.

60 Abdominal perineal resection, NOS

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

ANUS
C21.0-C21.8

SCOPE OF REGIONAL LYMPH NODE SURGERY

Codes

0  No regional lymph nodes removed
1  Regional lymph node(s) removed, NOS
   2  Perirectal, anorectal lymph nodes
   3  Internal iliac lymph nodes (hypogastric), unilateral
   4  Inguinal lymph nodes, unilateral
   5  Combination of 2 and 4
   6  Bilateral internal iliac and/or bilateral inguinal lymph nodes
9  Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
   ...
90  90 or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY
## SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

**Codes**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None; no surgery to other regional or distant sites</td>
</tr>
<tr>
<td>1</td>
<td>Surgery to other site(s) or node(s), NOS; unknown if regional or distant</td>
</tr>
<tr>
<td>2</td>
<td>Other regional sites</td>
</tr>
<tr>
<td>3</td>
<td>Distant lymph node(s)</td>
</tr>
<tr>
<td>4</td>
<td>Distant site(s)</td>
</tr>
<tr>
<td>5</td>
<td>Combination of 4 WITH 2 or 3</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
APPENDIX C
SITE-SPECIFIC SURGERY CODES

Page intentionally blank.
APPENDIX C
SITE-SPECIFIC SURGERY CODES

LIVER AND INTRAHEPATIC BILE DUCTS
C22.0-C22.1

SURGERY OF PRIMARY SITE

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>None; no cancer-directed surgery of primary site</td>
</tr>
<tr>
<td>10</td>
<td>Local tumor destruction, NOS</td>
</tr>
<tr>
<td>11</td>
<td>Photodynamic therapy (PDT)</td>
</tr>
<tr>
<td>12</td>
<td>Electrocautery; fulguration (includes use of hot forceps for tumor destruction)</td>
</tr>
<tr>
<td>13</td>
<td>Cryosurgery</td>
</tr>
<tr>
<td>14</td>
<td>Laser</td>
</tr>
<tr>
<td>15</td>
<td>Alcohol (PEI)</td>
</tr>
<tr>
<td>16</td>
<td>Heat</td>
</tr>
<tr>
<td>17</td>
<td>Other (ultrasound, acetic acid)</td>
</tr>
<tr>
<td>20</td>
<td>Wedge resection, NOS; segmental resection</td>
</tr>
<tr>
<td>30</td>
<td>Lobectomy, NOS</td>
</tr>
<tr>
<td>31</td>
<td>Simple</td>
</tr>
<tr>
<td>32</td>
<td>Extended</td>
</tr>
<tr>
<td></td>
<td><strong>Extended lobectomy:</strong> resection of a single lobe plus a segment of another lobe.</td>
</tr>
<tr>
<td>40</td>
<td>Excision of a bile duct (for an intrahepatic bile duct primary only)</td>
</tr>
<tr>
<td>70</td>
<td>Total hepatectomy with transplant</td>
</tr>
<tr>
<td></td>
<td><strong>Liver transplant must also be coded under the data item</strong></td>
</tr>
<tr>
<td></td>
<td><strong>“Reconstruction/Restoration.”</strong></td>
</tr>
<tr>
<td>80</td>
<td>Hepatectomy, NOS</td>
</tr>
<tr>
<td>90</td>
<td>Surgery, NOS</td>
</tr>
<tr>
<td>99</td>
<td>Unknown if cancer-directed surgery performed; death certificate ONLY</td>
</tr>
</tbody>
</table>
LIVER AND INTRAHEPATIC BILE DUCTS
C22.0-C22.1

APPENDIX C
SITE-SPECIFIC SURGERY CODES

SCOPE OF REGIONAL LYMPH NODE SURGERY

Regional lymph nodes are the hilar nodes:

<table>
<thead>
<tr>
<th>沿</th>
<th>Portal vein</th>
<th>Inferior vena cava</th>
<th>Proper hepatic artery</th>
<th>Hepatic pedicle</th>
</tr>
</thead>
</table>

Codes

0  No regional lymph nodes removed
1  Regional lymph node(s) removed, NOS
9  Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
..  Ninety or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

LIVER AND INTRAHEPATIC BILE DUCTS
C22.0-C22.1

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

0 None; no surgery to other regional or distant sites

1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant

2 Other regional sites

3 Distant lymph node(s) (includes inferior phrenic lymph nodes)

4 Distant site(s)

5 Combination of 4 WITH 2 or 3

9 Unknown; not stated; death certificate ONLY
Page intentionally blank.
## APPENDIX C

### SITE-SPECIFIC SURGERY CODES

#### PANCREAS

C25.0-C25.9

### SURGERY OF PRIMARY SITE

**Codes**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>None; no cancer-directed surgery of primary site</td>
</tr>
<tr>
<td>10</td>
<td>Local excision of tumor, NOS</td>
</tr>
<tr>
<td>20</td>
<td>Partial pancreatectomy, NOS</td>
</tr>
<tr>
<td>40</td>
<td>Total pancreatectomy</td>
</tr>
<tr>
<td>50</td>
<td>Local or partial pancreatectomy and duodenectomy</td>
</tr>
<tr>
<td>51</td>
<td>Without subtotal gastrectomy</td>
</tr>
<tr>
<td>52</td>
<td>With subtotal gastrectomy (Whipple)</td>
</tr>
<tr>
<td>60</td>
<td>Total pancreatectomy and subtotal gastrectomy or duodenectomy</td>
</tr>
<tr>
<td>70</td>
<td>Extended pancreatoduodenectomy</td>
</tr>
<tr>
<td>80</td>
<td>Pancreatectomy, NOS</td>
</tr>
<tr>
<td>90</td>
<td>Surgery, NOS</td>
</tr>
<tr>
<td>99</td>
<td>Unknown if cancer-directed surgery performed; death certificate ONLY</td>
</tr>
</tbody>
</table>
SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are:

- Celiac (head only)
- Hepatic artery
- Infrapyloric (head only)
- Lateral aortic
- Pancreaticocolenal (body and tail only)
- Peripancreatic (superior, inferior, anterior, posterior splenic)
- Retroperitoneal
- Splenic (body and tail only)
- Subpyloric (head only)
- Superior mesenteric

Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No regional lymph nodes removed</td>
</tr>
<tr>
<td>1</td>
<td>Regional lymph node(s) removed, NOS</td>
</tr>
<tr>
<td>2</td>
<td>Extended lymphadenectomy</td>
</tr>
<tr>
<td></td>
<td>An extended pancreaticoduodenectomy incorporates selected aspects of the Whipple procedure and regional pancreatectomy. A wide Kocher maneuver removes all lymphatic tissue over the medial aspect of the right kidney, inferior vena cava, and left renal vein.</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>


APPENDIX C
SITE-SPECIFIC SURGERY CODES

PANCREAS
C25.0-C25.9

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00 No regional lymph nodes examined
01 One regional lymph node examined
02 Two regional lymph nodes examined
..
90 Ninety or more regional lymph nodes examined
95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

0 None; no surgery to other regional or distant sites
1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
  2 Removal of other regional sites, ONLY
  3 Removal of distant node(s)
  4 Removal of distant site
  5 Combination of 2 WITH 3 and/or 4
9 Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

LARYNX
C32.0-C32.9

SURGERY OF PRIMARY SITE

Codes

00 None; no cancer-directed surgery of primary site

10 Local tumor destruction, NOS (WITHOUT PATHOLOGY SPECIMEN)
   11 Photodynamic therapy (PDT)
   12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13 Cryosurgery
   14 Laser
   15 Stripping

[No specimen sent to pathology from this surgical event.]

20 Local tumor excision, NOS (WITH PATHOLOGY SPECIMEN)
   21 Photodynamic therapy (PDT)
   22 Electrocautery
   23 Cryosurgery
   24 Laser ablation
   25 Laser excision
   26 Polypectomy
   27 Excisional biopsy
   28 Stripping

[Specimen sent to pathology from this surgical event.]

30 Partial excision of the primary site, NOS; subtotal/partial laryngectomy NOS; hemilaryngectomy NOS
   31 Vertical laryngectomy
   32 Anterior commissure laryngectomy
   33 Supraglottic laryngectomy

40 Total or radical laryngectomy, NOS
   41 Total laryngectomy ONLY
   42 Radical laryngectomy ONLY

50 Pharyngolaryngectomy

80 Laryngectomy, NOS

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY
SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional cervical lymph nodes are:

<table>
<thead>
<tr>
<th>The regional cervical lymph nodes are:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buccal (facial)</td>
</tr>
<tr>
<td>Caudal jugular (deep cervical)</td>
</tr>
<tr>
<td>Cranial jugular (deep cervical)</td>
</tr>
<tr>
<td>Dorsal cervical (superficial cervical)</td>
</tr>
<tr>
<td>Medial jugular (deep cervical)</td>
</tr>
<tr>
<td>Occipital</td>
</tr>
<tr>
<td>Paratracheal (anterior cervical)</td>
</tr>
<tr>
<td>Parotid</td>
</tr>
<tr>
<td>Preparotid (anterior cervical)</td>
</tr>
<tr>
<td>Retroauricular (mastoid, posterior auricular)</td>
</tr>
<tr>
<td>Retropharyngeal</td>
</tr>
<tr>
<td>Submandibular (submaxillary)</td>
</tr>
<tr>
<td>Submental</td>
</tr>
<tr>
<td>Supraclavicular</td>
</tr>
</tbody>
</table>

Codes

0  No regional lymph nodes removed
1  Regional lymph node(s) removed, NOS
2  Neck dissection, NOS
   3  Selective, limited; nodal sampling; “berry picking”
   4  Modified/modified radical
   5  Radical
9  Unknown; not stated; death certificate ONLY

Terminology of neck dissection (Robbins et al. 1991):

A radical neck dissection includes the removal of all ipsilateral cervical lymph node groups, i.e., lymph nodes from levels I through V (submental, submandibular, cranial jugular, medial jugular, caudal jugular, dorsal cervical nodes along the accessory nerve, and supraclavicular), and removal of the spinal accessory nerve, internal jugular vein and sternocleidomastoid muscle.

In a modified radical neck dissection the same lymph nodes are removed as in a radical neck dissection; however, one or more non-lymphatic structures are preserved.

A selective neck dissection is a neck dissection with preservation of one or more lymph node groups routinely removed in radical neck dissection.
### NUMBER OF REGIONAL LYMPH NODES EXAMINED

**Codes**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No regional lymph nodes examined</td>
</tr>
<tr>
<td>01</td>
<td>One regional lymph node examined</td>
</tr>
<tr>
<td>02</td>
<td>Two regional lymph nodes examined</td>
</tr>
<tr>
<td>...</td>
<td>Ninety or more regional lymph nodes examined</td>
</tr>
<tr>
<td>95</td>
<td>No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed</td>
</tr>
<tr>
<td>96</td>
<td>Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated</td>
</tr>
<tr>
<td>97</td>
<td>Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated</td>
</tr>
<tr>
<td>98</td>
<td>Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection</td>
</tr>
<tr>
<td>99</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>

### SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

**Codes**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None; no surgery to other regional or distant sites</td>
</tr>
<tr>
<td>1</td>
<td>Surgery to other site(s) or node(s), NOS; unknown if regional or distant</td>
</tr>
<tr>
<td>2</td>
<td>Other regional sites</td>
</tr>
<tr>
<td>3</td>
<td>Distant lymph node(s)</td>
</tr>
<tr>
<td>4</td>
<td>Distant site(s)</td>
</tr>
<tr>
<td>5</td>
<td>Combination of 4 WITH 2 or 3</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
SURGERY OF PRIMARY SITE

Codes

00  None; no cancer-directed surgery of primary site
10  Local tumor destruction or excision, NOS
   11  Excision
   12  Laser ablation or excision
   13  Cautery; fulguration
   14  Bronchial sleeve resection ONLY
20  Resection of less than one lobe
   21  Wedge resection
   22  Segmental resection, including lingulectomy
30  Resection of at least one lobe, but less than the whole lung (partial pneumonectomy, NOS)
   31  Lobectomy
   32  Bilobectomy

Procedures coded 40 include, but are not limited to:

<table>
<thead>
<tr>
<th>Complete pneumonectomy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pneumonectomy, NOS</td>
</tr>
<tr>
<td>Sleeve pneumonectomy</td>
</tr>
<tr>
<td>Standard pneumonectomy</td>
</tr>
<tr>
<td>Total pneumonectomy</td>
</tr>
</tbody>
</table>

40  Resection of whole lung

50  Resection of lung WITH an en bloc resection of other organs
   51  Wedge resection
   52  Lobectomy
   53  Bilobectomy
   54  Pneumonectomy (less than a radical or extended pneumonectomy)

**EN BLOC** resection is the removal of organs in one piece at one time.

60  Radical pneumonectomy

Radical pneumonectomy is a complete pneumonectomy WITH removal of mediastinal lymph nodes. Removal of mediastinal nodes is also coded in the data fields “Scope of Regional Lymph Node Surgery” and “Number of Regional Nodes Examined.”
APPENDIX C
SITE-SPECIFIC SURGERY CODES
LUNG
C34.0 - C34.9

SURGERY OF PRIMARY SITE, continued

70 Extended radical pneumonectomy

An extended radical pneumonectomy is a radical pneumonectomy (including removal of mediastinal nodes) and the removal of other tissues or nodes. Removal of mediastinal nodes is also coded in the data fields “Scope of Regional Lymph Node Surgery” and “Number of Regional Nodes Examined.”

80 Resection of lung, NOS
90 Surgery, NOS
99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

<table>
<thead>
<tr>
<th>Mediastinal nodes are:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aortic (includes subaortic, aorticopulmonary window, periaortic, including ascending aorta or including azygos)</td>
</tr>
<tr>
<td>Periesophageal</td>
</tr>
<tr>
<td>Peritracheal (including those that may be designated tracheobronchial, i.e., lower peritracheal, phrenic)</td>
</tr>
<tr>
<td>Pre- and retrotracheal (includes precarinal)</td>
</tr>
<tr>
<td>Pulmonary ligament</td>
</tr>
<tr>
<td>Subcarinal</td>
</tr>
</tbody>
</table>

CODE

0 No regional lymph nodes removed
1 Regional lymph node(s) removed, NOS
2 Intrapulmonary (includes interlobar, lobar, segmental), ipsilateral hilar and/or ipsilateral peribronchial nodes
3 Ipsilateral mediastinal and/or subcarinal nodes
4 Combination of 2 and 3
5 Contralateral mediastinal, contralateral hilar, ipsilateral or contralateral scalene and/or supraclavicular nodes
6 Combination of 5 WITH 2 or 3
9 Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

LUNG
C34.0 - C34.9

NUMBER OF REGIONAL NODES EXAMINED

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
..  Ninety or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY
LUNG
C34.0 - C34.9

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S), OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of ribs. Ribs are removed to provide access to the lung.

Codes

0  None; no surgery to other regional sites, distant sites or distant lymph nodes

1  Surgery to other site(s) or node(s), NOS; unknown if regional or distant

2  Surgery to a regional site ONLY

   3  Removal of a solitary lesion in the same lung (primary site), different (non-primary) lobe

      There is one primary. Patient has two tumors with the same histology in different lobes of the same lung.

4  Resection of metastasis in a distant site(s) or resection of distant lymph nodes(s), NOS

5  Removal of a solitary lesion in the contralateral lung

     Patient has one primary. There is a primary tumor or tumor(s) in one lung and a solitary metastatic lesion in the contralateral lung.

6  Removal of a solitary lesion in a distant site or a distant lymph node, NOS

     This includes, but is not limited to the removal of a solitary metastatic brain lesion.

7  Removal of multiple lesions in distant site(s)

9  Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

BONES, JOINTS, AND ARTICULAR CARTILAGE C40.0 - C41.9
PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM C47.0 - C47.9
CONNECTIVE, SUBCUTANEOUS AND OTHER SOFT TISSUES C49.0 - C49.9

SURGERY OF PRIMARY SITE

Codes

10 Local tumor destruction or excision
20 Partial resection/internal hemipelvectomy (pelvis)
30 Radical excision or resection of lesion with limb salvage
40 Amputation of limb
   41 Partial amputation of limb
   42 Total amputation of limb
50 Major amputation, NOS
   51 Forequarter, including scapula
   52 Hindquarter, including ilium/hip bone
   53 Hemipelvectomy
90 Surgery, NOS
99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

Codes

0 No regional lymph nodes removed
1 Regional lymph node(s) removed, NOS
9 Unknown; not stated; death certificate ONLY
NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
...
90  Ninety or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

0  None; no surgery to other regional or distant sites
1  Surgery to other site(s) or node(s), NOS; unknown if regional or distant
   2  Other regional site(s)
   5  Distant lymph node(s)
   6  Distant site(s)
   7  Combination of 6 WITH 2 or 5
9  Unknown; not stated; death certificate ONLY
SPLEEN AND LYMPH NODES
Spleen C42.2, Lymph Nodes C77.0 - C77.9

**SURGERY OF PRIMARY SITE**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>None; no cancer-directed surgery of primary site</td>
</tr>
<tr>
<td>10</td>
<td>Local excision, destruction, NOS</td>
</tr>
<tr>
<td>20</td>
<td>Splenectomy, NOS</td>
</tr>
<tr>
<td>21</td>
<td>Partial splenectomy</td>
</tr>
<tr>
<td>22</td>
<td>Total splenectomy</td>
</tr>
<tr>
<td>30</td>
<td>Lymph node dissection, NOS</td>
</tr>
<tr>
<td>31</td>
<td>One chain</td>
</tr>
<tr>
<td>32</td>
<td>Two or more chains</td>
</tr>
<tr>
<td>40</td>
<td>Lymph node dissection, NOS plus splenectomy</td>
</tr>
<tr>
<td>41</td>
<td>One chain</td>
</tr>
<tr>
<td>42</td>
<td>Two or more chains</td>
</tr>
<tr>
<td>50</td>
<td>Lymph node dissection, NOS and partial/total removal of adjacent organ(s)</td>
</tr>
<tr>
<td>51</td>
<td>One chain</td>
</tr>
<tr>
<td>52</td>
<td>Two or more chains</td>
</tr>
<tr>
<td>60</td>
<td>Lymph node dissection, NOS and partial/total removal of adjacent organ(s) PLUS splenectomy</td>
</tr>
<tr>
<td>61</td>
<td>One chain</td>
</tr>
<tr>
<td>62</td>
<td>Two or more chains</td>
</tr>
<tr>
<td>90</td>
<td>Surgery, NOS</td>
</tr>
<tr>
<td>99</td>
<td>Unknown if cancer-directed surgery performed; death certificate ONLY</td>
</tr>
</tbody>
</table>

**SCOPE OF REGIONAL LYMPH NODE SURGERY (SPLEEN ONLY)**

Note: For a lymph node primary, code this field as 9.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No regional lymph nodes removed</td>
</tr>
<tr>
<td>1</td>
<td>Regional lymph node(s) removed, NOS</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
NUMBER OF REGIONAL LYMPH NODES EXAMINED (SPLEEN ONLY)

Note: For a lymph node primary, code this field as ‘99.’

Codes

00 No regional lymph nodes examined
01 One regional lymph node examined
02 Two regional lymph nodes examined
03 Three regional lymph nodes examined
.. 
90 Ninety or more regional lymph nodes examined
95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

0 None; no surgery to other regional or distant sites
1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant

2 Other regional site(s)

5 Distant lymph node(s)

6 Distant site(s)

7 Combination of 6 WITH 2 or 5

9 Unknown; not stated; death certificate ONLY
SUDDER OF PRIMARY SITE

Codes

00  None; no cancer-directed surgery of primary site

10  Local tumor destruction, NOS (WITHOUT PATHOLOGY SPECIMEN)
    11  Photodynamic therapy (PDT)
    12  Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
    13  Cryosurgery
    14  Laser ablation
    No specimen sent to pathology from this surgical event.

20  Local tumor excision, NOS (WITH PATHOLOGY SPECIMEN)
    21  Photodynamic therapy (PDT)
    22  Electrocautery
    23  Cryosurgery
    24  Laser ablation
    25  Laser excision
    26  Polypectomy
    27  Excisional biopsy
    Specimen sent to pathology from this surgical event.

30  Biopsy of primary tumor followed by a gross excision of the lesion
    31  Shave biopsy followed by a gross excision of the lesion
    32  Punch biopsy followed by a gross excision of the lesion
    33  Incisional biopsy followed by a gross excision of the lesion
    Less than a wide excision, less than 1 cm margin.

40  Wide excision or re-excision of lesion or minor (local) amputation, NOS
    Margins of excision are 1 cm or more. Margins may be microscopically involved.
    Local amputation is the surgical resection of digits, ear, eyelid, lip, or nose.

50  Radical excision of a lesion, NOS
    Margins of excision are greater than 1 cm and grossly tumor-free. The margins may be microscopically involved.
SKIN
C44.0 - C44.9

SURGERY OF PRIMARY SITE, continued

60  Major amputation, NOS
90  Surgery, NOS
99  Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

Regional lymph nodes are different for each anatomical subsite.

<table>
<thead>
<tr>
<th>Head, neck</th>
<th>Cervical, ipsilateral preauricular, submandibular, and supraclavicular</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thorax</td>
<td>Ipsilateral axillary</td>
</tr>
<tr>
<td>Arm</td>
<td>Ipsilateral epitrochlear and axillary</td>
</tr>
<tr>
<td>Abdomen, loins, and buttocks</td>
<td>Ipsilateral inguinal</td>
</tr>
<tr>
<td>Anal margin and perianal skin</td>
<td>Ipsilateral inguinal</td>
</tr>
<tr>
<td>Leg</td>
<td>Ipsilateral inguinal and popliteal</td>
</tr>
</tbody>
</table>

There are boundary zones between the subsites (i.e., between the thorax and arm, the boundary zone is the shoulder and axilla). The boundary zones do not belong to either subsite. If a tumor originates in one of these 4 cm boundary zones, the nodes on either side of the bands are regional.

<table>
<thead>
<tr>
<th>BETWEEN THE SUBSITES</th>
<th>THE BOUNDARY ZONE IS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head and neck AND</td>
<td>Thorax Clavicle-acromion-upper shoulder blade edge</td>
</tr>
<tr>
<td>Thorax AND Arm</td>
<td>1. Thorax Arm Shoulder-axilla-shoulder</td>
</tr>
<tr>
<td>Thorax AND Abdomen</td>
<td>2. Thorax Abdomen Front: Middle between navel and costal arch</td>
</tr>
<tr>
<td>Thorax AND Abdomen</td>
<td>Back: Lower border of thoracic vertebrae (midtransverse axis)</td>
</tr>
<tr>
<td>Abdomen, loins, and</td>
<td>Leg Groin-trochanter-gluteal sulcus</td>
</tr>
<tr>
<td>buttocx AND Leg</td>
<td>3. Abdomen, loins, and buttocks</td>
</tr>
<tr>
<td>Right AND Left</td>
<td>4. Right and Left Midline</td>
</tr>
</tbody>
</table>
SCOPE OF REGIONAL LYMPH NODE SURGERY, continued

Iliac, other pelvic, abdominal or intrathoracic lymph nodes are distant. Code the removal of these nodes under the data item “Surgery of Other Regional Site(s), Distant Site(s), or Distant Node(s).”

Codes

0  No regional lymph nodes removed
1  Sentinel node, NOS
   A sentinel node is the first node to receive drainage from a primary tumor. It is identified by an injection of a dye or radio label at the site of the primary tumor
2  Regional lymph nodes removed, NOS
9  Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL NODES EXAMINED

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
...  Ninety or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY
## APPENDIX C
### SITE-SPECIFIC SURGERY CODES

**SKIN**
**C44.0 - C44.9**

**SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None; no surgery to other regional or distant sites</td>
</tr>
<tr>
<td>1</td>
<td>Surgery to other site(s) or node(s), NOS; unknown if regional or distant</td>
</tr>
<tr>
<td>2</td>
<td>Other regional sites</td>
</tr>
<tr>
<td>3</td>
<td>Distant lymph node(s)</td>
</tr>
<tr>
<td>4</td>
<td>Distant site(s)</td>
</tr>
<tr>
<td>5</td>
<td>Combination of 4 WITH 2 or 3</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
SURGERY OF PRIMARY SITE

CODE

00 None; no cancer-directed surgery of primary site

10 Partial mastectomy, NOS; less than total mastectomy, NOS
   11 Nipple resection
   12 Lumpectomy or excisional biopsy
   13 Re-excision of the biopsy site for gross or microscopic residual disease.
   14 Wedge resection
   15 Quadrantectomy
   16 Segmental mastectomy
   17 Tylectomy

30 Subcutaneous mastectomy

A subcutaneous mastectomy is the removal of breast tissue without the nipple and areolar complex or overlying skin. **THIS PROCEDURE IS RARELY PERFORMED TO TREAT MALIGNANCIES.**

40 Total (simple) mastectomy, NOS
   41 WITHOUT removal of uninvolved contralateral breast
   42 WITH removal of uninvolved contralateral breast

   A simple mastectomy removes all breast tissue, the nipple, and areolar complex. An axillary dissection is not done.

   For single primaries only, code removal of involved contralateral breast under the data item “Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”

SURGERY OF PRIMARY SITE, continued

50 Modified radical mastectomy
   51 WITHOUT removal of uninvolved contralateral breast
   52 WITH removal of uninvolved contralateral breast

   Removes all breast tissue, the nipple, the areolar complex, and variable amounts of breast skin. The procedure involves an en bloc resection of the axilla. The specimen may or may not include a portion of the pectoralis major muscle. Includes an en bloc axillary dissection.

   For single primaries only, code removal of involved contralateral breast under the data item “Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”

60 Radical mastectomy, NOS
APPENDIX C
SITE-SPECIFIC SURGERY CODES

BREAST
C50.0 - C50.9

61 WITHOUT removal of uninvolved contralateral breast
62 WITH removal of uninvolved contralateral breast

Removal of breast tissue, nipple, areolar complex, a variable amount of skin, pectoralis minor,
and pectoralis major. Includes an en bloc axillary dissection.

For single primaries only, code removal of involved contralateral breast under the data item
“Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”

70 Extended radical mastectomy
71 WITHOUT removal of uninvolved contralateral breast
72 WITH removal of uninvolved contralateral breast

Removal of breast tissue, nipple, areolar complex, variable amounts of skin, pectoralis minor,
and pectoralis major. Includes removal of internal mammary nodes and an en bloc axillary
dissection.

For single primaries only, code removal of involved contralateral breast under the data item
“Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”

80 Mastectomy, NOS
90 Surgery, NOS
99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

0 No regional lymph nodes removed
1 Sentinel lymph node(s) removed

A sentinel node is the first node to receive drainage from a primary tumor. It is identified by an
injection of a dye or radio label at the site of the primary tumor

2 Regional lymph node(s) removed, NOS; axillary, NOS (Levels I, II, or III lymph nodes)
Intramammary, NOS
3 Combination of 1 and 2
4 Internal mammary
5 Combination of 4 WITH any of 1-3
9 Unknown; not stated; death certificate ONLY
NUMBER OF REGIONAL LYMPH NODES EXAMINED

00 No regional lymph nodes examined
01 One regional lymph node examined
02 Two regional lymph nodes examined
.. 
90 Ninety or more regional lymph nodes examined
95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

DO NOT CODE removal of fragments or tags of muscles; removal of the pectoralis minor; the resection of pectoralis muscles, NOS; or the resection of fascia with no mention of muscle.

Codes

0 None; no surgery to other regional or distant sites
1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
   2 Other regional site(s)
   3 Distant lymph node(s)
   4 Distant site(s)
   5 Removal of involved contralateral breast (single primary only)
   6 Combination of 4 or 5 WITH 2 or 3
9 Unknown; not stated; death certificate ONLY

RECONSTRUCTION - FIRST COURSE

The insertion of a tissue expander is often the beginning of the reconstructive procedure.

Codes
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No reconstruction/restoration</td>
</tr>
<tr>
<td>1</td>
<td>Reconstruction, NOS (unknown if flap)</td>
</tr>
<tr>
<td>2</td>
<td>Implant; reconstruction WITHOUT flap</td>
</tr>
<tr>
<td>3</td>
<td>Reconstruction WITH flap, NOS</td>
</tr>
<tr>
<td>4</td>
<td>Latissimus dorsi flap</td>
</tr>
<tr>
<td>5</td>
<td>Abdominis recti flap</td>
</tr>
<tr>
<td>6</td>
<td>Flap, NOS + implant</td>
</tr>
<tr>
<td>7</td>
<td>Latissimus dorsi flap + implant</td>
</tr>
<tr>
<td>8</td>
<td>Abdominis recti + implant</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
# SURGERY OF PRIMARY SITE

**FOR INVASIVE CANCERS**, dilatation and curettage is considered an incisional biopsy and is not coded as site-specific surgery.

## Codes

00  None; no cancer-directed surgery of primary site

10  Local tumor destruction, NOS *(WITHOUT PATHOLOGY SPECIMEN)*
   11  Photodynamic therapy (PDT)
   12  Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13  Cryosurgery
   14  Laser
   15  LEEP

   **No specimen sent to pathology from this surgical event.**

20  Local tumor destruction or excision, NOS *(WITH PATHOLOGY SPECIMEN)*
   21  Electrocautery
   22  Cryosurgery
   23  Laser
   24  Cone biopsy WITH gross excision of lesion
   25  Dilatation and curettage; endocervical curettage (cancer-directed for in situ only)
   26  Excisional biopsy, NOS
   27  Cone biopsy
   28  LEEP
   29  Trachelectomy; removal of cervical stump; cervicectomy

   **Specimen sent to pathology from this surgical event.**

30  Total hysterectomy (simple, pan-) WITHOUT removal of tubes and ovaries

   **Total hysterectomy removes both the corpus and cervix uteri and may also include a portion of vaginal cuff.**

40  Total hysterectomy (simple, pan-) WITH removal of tubes or ovary

   **Total hysterectomy removes both the corpus and cervix uteri and may also include a portion of vaginal cuff.**
SURGERY OF PRIMARY SITE, continued

50 Modified radical or extended hysterectomy; radical hysterectomy; extended radical hysterectomy
   51 Modified radical hysterectomy
   52 Extended hysterectomy
   53 Radical hysterectomy; Wertheim’s procedure
   54 Extended radical hysterectomy

60 Hysterectomy, NOS, WITH or WITHOUT removal of tubes and ovaries
   61 WITHOUT removal of tubes and ovaries
   62 WITH removal of tubes and ovaries

70 Pelvic exenteration
   71 Anterior exenteration
      Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item “Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”

   72 Posterior exenteration
      Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item “Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”

   73 Total exenteration
      Includes removal of all pelvic contents and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item “Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”

   74 Extended exenteration
      Includes pelvic blood vessels or bony pelvis

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY
SCOPE OF REGIONAL LYMPH NODE SURGERY

<table>
<thead>
<tr>
<th>The regional lymph nodes are:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common iliac</td>
</tr>
<tr>
<td>External iliac</td>
</tr>
<tr>
<td>Hypogastric (obturator)</td>
</tr>
<tr>
<td>Internal iliac</td>
</tr>
<tr>
<td>Paracervical</td>
</tr>
<tr>
<td>Parametrial</td>
</tr>
<tr>
<td>Presacral</td>
</tr>
<tr>
<td>Sacral</td>
</tr>
</tbody>
</table>

Codes

0  No regional lymph nodes removed
1  Regional lymph node(s) removed, NOS
9  Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
..  Ninety or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY
SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of an appendix. DO NOT CODE an omentectomy IF it was the only surgery performed in addition to hysterectomy. Incidental removal is when an organ is removed for a reason unrelated to the malignancy.

**Codes**

0 None; no surgery to other regional or distant sites

1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant

2 Other regional site(s)

3 Distant lymph node(s), NOS

4 Periaortic lymph nodes

5 Distant site(s)

6 Combinations of 5 with 4

7 Combination of 5 WITH 2 or 3

9 Unknown; not stated; death certificate ONLY
SURGERY OF PRIMARY SITE

Codes

00 None; no cancer-directed surgery of primary site

10 Local tumor destruction, NOS (WITHOUT PATHOLOGY SPECIMEN)
   11 Photodynamic therapy (PDT)
   12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13 Cryosurgery
   14 Laser
   15 LEEP

   No specimen sent to pathology from this surgical event.

Procedures in code 20 include but are not limited to:

<table>
<thead>
<tr>
<th>Procedure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cryosurgery</td>
</tr>
<tr>
<td>Electrocautery</td>
</tr>
<tr>
<td>Excisional biopsy</td>
</tr>
<tr>
<td>Laser ablation</td>
</tr>
<tr>
<td>Thermal ablation</td>
</tr>
</tbody>
</table>

20 Local tumor destruction or excision, NOS; simple excision, NOS (WITH PATHOLOGY SPECIMEN)

   21 Electrocautery
   22 Cryosurgery
   23 Laser
   24 Excisional biopsy
   25 Polypectomy
   26 Myomectomy

   Specimen sent to pathology from this surgical event.

   Margins of resection may have microscopic involvement.
### SURGERY OF PRIMARY SITE, continued

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>Subtotal hysterectomy/supracervical hysterectomy/fundectomy WITH or WITHOUT removal of tube(s) and ovary(ies).</td>
</tr>
<tr>
<td>31</td>
<td>WITHOUT tube(s) and ovary (ies)</td>
</tr>
<tr>
<td>32</td>
<td>WITH tube(s) and ovary (ies)</td>
</tr>
<tr>
<td></td>
<td>Cervix left in place</td>
</tr>
<tr>
<td>40</td>
<td>Total hysterectomy (simple, pan-) WITHOUT removal of tube(s) and ovary (ies)</td>
</tr>
<tr>
<td></td>
<td>Removes both the corpus and cervix uteri. It may also include a portion of the vaginal cuff.</td>
</tr>
<tr>
<td>50</td>
<td>Total hysterectomy (simple, pan-) WITH removal of tube(s) or ovary (ies)</td>
</tr>
<tr>
<td></td>
<td>Removes both the corpus and cervix uteri. It may also include a portion of the vaginal cuff.</td>
</tr>
<tr>
<td>60</td>
<td>Modified radical or extended hysterectomy; radical hysterectomy; extended radical hysterectomy</td>
</tr>
<tr>
<td>61</td>
<td>Modified radical hysterectomy</td>
</tr>
<tr>
<td>62</td>
<td>Extended hysterectomy</td>
</tr>
<tr>
<td>63</td>
<td>Radical hysterectomy; Wertheim’s procedure</td>
</tr>
<tr>
<td>64</td>
<td>Extended radical hysterectomy</td>
</tr>
<tr>
<td>70</td>
<td>Hysterectomy, NOS, WITH or WITHOUT removal of tube(s) and ovary(ies)</td>
</tr>
<tr>
<td>71</td>
<td>WITHOUT removal of tube(s) and ovary(ies)</td>
</tr>
<tr>
<td>72</td>
<td>WITH removal of tube(s) and ovary(ies)</td>
</tr>
<tr>
<td>80</td>
<td>Pelvic exenteration</td>
</tr>
<tr>
<td>81</td>
<td>Anterior exenteration</td>
</tr>
<tr>
<td></td>
<td>Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item “Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”</td>
</tr>
<tr>
<td>82</td>
<td>Posterior exenteration</td>
</tr>
<tr>
<td></td>
<td>Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item “Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”</td>
</tr>
</tbody>
</table>
SURGERY OF PRIMARY SITE, continued

83 Total exenteration

Includes removal of all pelvic contents and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item “Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”

84 Extended exenteration

Includes pelvic blood vessels or bony pelvis

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

<table>
<thead>
<tr>
<th>The regional lymph nodes are:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common iliac and external iliac</td>
</tr>
<tr>
<td>Hypogastric (obturator)</td>
</tr>
<tr>
<td>Para aortic</td>
</tr>
<tr>
<td>Parametrial</td>
</tr>
<tr>
<td>Sacral</td>
</tr>
</tbody>
</table>

Codes

0 No regional lymph nodes removed

1 Regional lymph node(s) removed, NOS

2 Paraaortic with or without other regional lymph nodes

9 Unknown; not stated; death certificate ONLY
### NUMBER OF REGIONAL LYMPH NODES EXAMINED

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No regional lymph nodes examined</td>
</tr>
<tr>
<td>01</td>
<td>One regional lymph node examined</td>
</tr>
<tr>
<td>02</td>
<td>Two regional lymph nodes examined</td>
</tr>
<tr>
<td>...</td>
<td>Ninety or more regional lymph nodes examined</td>
</tr>
<tr>
<td>95</td>
<td>No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed</td>
</tr>
<tr>
<td>96</td>
<td>Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated</td>
</tr>
<tr>
<td>97</td>
<td>Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated</td>
</tr>
<tr>
<td>98</td>
<td>Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection</td>
</tr>
<tr>
<td>99</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>

### SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

**DO NOT CODE** the incidental removal of the appendix or an omentectomy **IF** it was the only surgery performed in addition to hysterectomy. Incidental removal is when an organ is removed for a reason unrelated to the malignancy.

**Codes**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None; no surgery to other regional or distant sites</td>
</tr>
<tr>
<td>1</td>
<td>Surgery to other site(s) or node(s), NOS; unknown if regional or distant</td>
</tr>
<tr>
<td>2</td>
<td>Other regional site(s)</td>
</tr>
<tr>
<td>3</td>
<td>Distant lymph node(s)</td>
</tr>
<tr>
<td>4</td>
<td>Distant site(s)</td>
</tr>
<tr>
<td>5</td>
<td>Combination of 4 WITH 2 or 3</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
APPENDIX C
SITE-SPECIFIC SURGERY CODES

OVARY
C56.9

SURGERY OF PRIMARY SITE

00  None; no cancer-directed surgery of primary site

10  Total removal of tumor or (single) ovary. NOS
   11  Resection of ovary (wedge, subtotal, or partial) ONLY, NOS; unknown if
        hysterectomy done
   12  WITHOUT hysterectomy
   13  WITH hysterectomy

14  Unilateral (salpingo-) oophorectomy; unknown if hysterectomy done
   15  WITHOUT hysterectomy
   16  WITH hysterectomy

20  Bilateral (salpingo-) oophorectomy; unknown if hysterectomy done
   21  WITHOUT hysterectomy
   22  WITH hysterectomy

30  Unilateral or bilateral (salpingo-) oophorectomy WITH OMENTECTOMY, NOS; partial or
    total; unknown if hysterectomy done
   31  WITHOUT hysterectomy
   32  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 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.

70  Pelvic exenteration, NOS
   71  Anterior

Includes bladder, distal ureters, and genital organs WITH their ligamentous attachments and
pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item
“Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”

72  Posterior

Includes rectum and rectosigmoid WITH ligamentous attachments and pelvic lymph nodes. The
removal of pelvic lymph nodes is also coded under the data item “Surgery of Other Regional
Site(s), Distant Site(s) or Distant Lymph Node(s).”
OVARY
C56.9

SURGERY OF PRIMARY SITE, continued

73 Total
Includes removal of all pelvic contents and pelvic lymph nodes. The removal of pelvic lymph nodes is also coded under the data item “Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Node(s).”

74 Extended
Includes pelvic blood vessels or bony pelvis.

80 (Salpingo-) oophorectomy, NOS
90 Surgery, NOS
99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are:
- Common iliac
- External iliac
- Hypogastric (obturator)
- Inguinal
- Lateral sacral
- Para-aortic
- Pelvic, NOS
- Retroperitoneal, NOS

Codes
- 0 No regional lymph nodes removed
- 1 Regional lymph node(s) removed, NOS
- 9 Unknown; not stated; death certificate ONLY
NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00 No regional lymph nodes examined
01 One regional lymph node examined
02 Two regional lymph nodes examined
..  Ninety or more regional lymph nodes examined
95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

DO NOT CODE an incidental removal of the appendix. Incidental removal is when an organ is removed for a reason unrelated to the malignancy.

Codes

0 None; no surgery to other regional or distant sites
1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
   2 Other regional site(s)
   3 Distant lymph node(s)
   4 Distant site(s)
   5 Combination of 4 WITH 2 or 3
9 Unknown; not stated; death certificate ONLY
SURGERY OF PRIMARY SITE

Do not code an orchiectomy in this field. For prostate primaries, orchiectomies are coded in the field “Hormone Therapy.”

Codes

00 None; no cancer-directed surgery of primary site
10 Local tumor destruction or excision, NOS
   11 Transurethral resection (TURP), NOS
   12 TURP - cancer is incidental finding during surgery for benign disease
   13 TURP - patient has suspected/known cancer
14 Cryoprostatectomy
15 Laser
16 Hyperthermia
17 Other method of local resection or destruction
30 Subtotal or simple prostatectomy, NOS
   A segmental resection or enucleation leaving the capsule intact.
40 Less than total prostatectomy, NOS
   An enucleation using an instrument such as a Vapotrode which may leave all or part of the capsule intact.
50 Radical prostatectomy, NOS; total prostatectomy, NOS
   Excised prostate, prostatic capsule, ejaculatory ducts, seminal vesicle(s) and may include a narrow cuff of bladder neck.
70 Prostatectomy WITH en bloc resection of other organs; pelvic exenteration
   Surgeries coded 70 are any prostatectomy WITH an en bloc resection of any other organs. The other organs may be partially or totally removed in continuity with the primary.
   **EN BLOC RESECTION** is the removal of organs in one piece at one time. Procedures that may involve an en bloc resection include, but are not limited to: cystoprostatectomy, radical cystectomy and prostatectomy.
80 Prostatectomy, NOS
90 Surgery, NOS
99 Unknown if cancer-directed surgery performed; death certificate ONLY
SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are:

<table>
<thead>
<tr>
<th>Hypogastric</th>
</tr>
</thead>
<tbody>
<tr>
<td>Iliac, NOS (internal and external)</td>
</tr>
<tr>
<td>Obturator</td>
</tr>
<tr>
<td>Pelvic, NOS</td>
</tr>
<tr>
<td>Periprostatic</td>
</tr>
<tr>
<td>Sacral, NOS (lateral presacral, promontory [Gerota's] or NOS)</td>
</tr>
</tbody>
</table>

Codes

0   No regional lymph nodes removed
1   Regional lymph node(s) removed, NOS
9   Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
..  Ninety or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98  Regional lymph nodes surgically removed but number of nodes unknown /not stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY
SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S), OR DISTANT LYMPH NODE(S)

**DO NOT CODE** orchiectomy. For prostate primaries, code orchiectomies under “Hormone Therapy.”

The most commonly removed distant lymph nodes are: aortic (para-aortic, peri-aortic, lumbar), common iliac, inguinal, superficial inguinal (femoral), supraclavicular, cervical, and scalene.

**Codes**

0 None; no surgery to other regional or distant sites

1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant

2 Other regional site(s)

3 Distal lymph node(s)

4 Distal site(s)

5 Combination of 4 WITH 2 or 3

9 Unknown; not stated; death certificate ONLY
SURGERY OF PRIMARY SITE

Codes

00 None; no cancer-directed surgery of primary site
10 Local or partial excision of testicle
30 Excision of testicle, NOS WITHOUT cord
40 Excision of testicle, NOS WITH cord/or cord not mentioned
80 Orchiectomy, NOS
90 Surgery, NOS
99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are:

<table>
<thead>
<tr>
<th>Interaortocaval</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paraaortic (Periaortic)</td>
</tr>
<tr>
<td>Paracaval</td>
</tr>
<tr>
<td>Preaortic</td>
</tr>
<tr>
<td>Precaval</td>
</tr>
<tr>
<td>Retroaortic</td>
</tr>
<tr>
<td>Retrocaval</td>
</tr>
</tbody>
</table>

Codes

0 No regional lymph nodes removed
1 Regional lymph node(s) removed, NOS; not stated if bilateral or unilateral
   2 Unilateral regional lymph nodes
   3 Bilateral regional lymph nodes
9 Unknown; not stated; death certificate ONLY
## NUMBER OF REGIONAL NODES EXAMINED

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No regional lymph nodes examined</td>
</tr>
<tr>
<td>01</td>
<td>One regional lymph node examined</td>
</tr>
<tr>
<td>02</td>
<td>Two regional lymph nodes examined</td>
</tr>
<tr>
<td>...</td>
<td>Ninety or more regional lymph nodes examined</td>
</tr>
<tr>
<td>95</td>
<td>No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed</td>
</tr>
<tr>
<td>96</td>
<td>Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated</td>
</tr>
<tr>
<td>97</td>
<td>Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated</td>
</tr>
<tr>
<td>98</td>
<td>Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection</td>
</tr>
<tr>
<td>99</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>

## SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None; no surgery to other regional or distant sites</td>
</tr>
<tr>
<td>1</td>
<td>Surgery to other site(s) or node(s), NOS; unknown if regional or distant</td>
</tr>
<tr>
<td>2</td>
<td>Other regional sites</td>
</tr>
<tr>
<td>3</td>
<td>Distant lymph node(s)</td>
</tr>
<tr>
<td>4</td>
<td>Distant site(s)</td>
</tr>
<tr>
<td>5</td>
<td>Combination of 4 WITH 2 or 3</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
APPENDIX C
SITE-SPECIFIC SURGERY CODES

KIDNEY, RENAL PELVIS, AND URETER
Kidney C64.9, Renal Pelvis C65.9, Ureter C66.9

SURGERY OF PRIMARY SITE

Codes

00 None; no cancer-directed surgery of primary site

10 Local tumor destruction, NOS (WITHOUT PATHOLOGY SPECIMEN)
   11 Photodynamic therapy (PDT)
   12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13 Cryosurgery
   14 Laser

   No specimen sent to pathology from this surgical event.

20 Local tumor excision, NOS (WITH PATHOLOGY SPECIMEN)
   21 Photodynamic therapy (PDT)
   22 Electrocautery
   23 Cryosurgery
   24 Laser ablation
   25 Laser excision
   26 Polypectomy
   27 Excisional biopsy

   Specimen sent to pathology from this surgical event.

Procedures coded 30 include, but are not limited to:

- Cryosurgery
- Electrocautery
- Excisional biopsy
- Laser
- Segmental resection
- Thermal ablation
- Wedge resection

30 Partial or subtotal nephrectomy (kidney or renal pelvis) or partial ureterectomy (ureter)

  Margins of resection are grossly negative. There may be microscopic involvement.
SURGERY OF PRIMARY SITE, continued

40 Complete/total/simple nephrectomy - for kidney parenchyma
   Nephroureterectomy
   
   Includes bladder cuff for renal pelvis or ureter

50 Radical nephrectomy
   
   May include removal of a portion of vena cava, adrenal gland(s), Gerota’s fascia, perinephric fat, or
   partial/total ureter

70 Any nephrectomy (simple, subtotal, complete, partial, total, radical) **PLUS** an en bloc
   resection of other organ(s) (colon, bladder)
   
   The other organs, such as colon or bladder, may be partially or totally removed.

80 Nephrectomy, NOS
   Ureterectomy, NOS

90 Surgery, NOS

99 Unknown if cancer-directed surgery performed; death certificate ONLY
SCOPE OF REGIONAL LYMPH NODE SURGERY

<table>
<thead>
<tr>
<th>The regional lymph nodes are</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Kidney</strong></td>
<td>Aortic (para-aortic, periaortic, lateral aortic)</td>
</tr>
<tr>
<td></td>
<td>Paracaval</td>
</tr>
<tr>
<td></td>
<td>Renal hilar</td>
</tr>
<tr>
<td></td>
<td>Retroperitoneal, NOS</td>
</tr>
<tr>
<td><strong>Renal pelvis</strong></td>
<td>Aortic</td>
</tr>
<tr>
<td></td>
<td>Paracaval</td>
</tr>
<tr>
<td></td>
<td>Renal hilar</td>
</tr>
<tr>
<td></td>
<td>Retroperitoneal, NOS</td>
</tr>
<tr>
<td><strong>Ureter</strong></td>
<td>Iliac (common, internal [hypogastric], external)</td>
</tr>
<tr>
<td></td>
<td>Paracaval</td>
</tr>
<tr>
<td></td>
<td>Pelvic, NOS</td>
</tr>
<tr>
<td></td>
<td>Periureteral</td>
</tr>
<tr>
<td></td>
<td>Renal hilar</td>
</tr>
</tbody>
</table>

Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No regional lymph nodes removed</td>
</tr>
<tr>
<td>1</td>
<td>Regional lymph node(s) removed, NOS; not stated if bilateral or unilateral</td>
</tr>
<tr>
<td>2</td>
<td>Unilateral regional lymph nodes</td>
</tr>
<tr>
<td>3</td>
<td>Bilateral regional lymph nodes</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
APPENDIX C
SITE-SPECIFIC SURGERY CODES

KIDNEY, RENAL PELVIS, AND URETER
Kidney C64.9, Renal Pelvis C65.9, Ureter C66.9

NUMBER OF REGIONAL NODES EXAMINED

Codes

00 No regional lymph nodes examined
01 One regional lymph node examined
02 Two regional lymph nodes examined
...
90 Ninety or more regional lymph nodes examined
95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98 Regional lymph nodes surgically removed but number of nodes unknown/not stated and not documented as sampling or dissection
99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

DO NOT CODE the incidental removal of ribs during the operative approach.

Codes

0 None; no surgery to other regional or distant sites
1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
2 Other regional site(s)
3 Distant lymph node(s)
4 Distant site(s)
5 Combination of 4 WITH 2 or 3
9 Unknown; not stated; death certificate ONLY
SURGERY OF PRIMARY SITE

Codes

00 None; no cancer-directed surgery of primary site

10 Local tumor destruction, NOS (WITHOUT PATHOLOGY SPECIMEN)
   11 Photodynamic therapy (PDT)
   12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
   13 Cryosurgery
   14 Laser

   No specimen sent to pathology from this surgical event.

20 Local tumor excision, NOS (WITH PATHOLOGY SPECIMEN)
   21 Photodynamic therapy (PDT)
   22 Electrocautery
   23 Cryosurgery
   24 Laser ablation
   25 Laser excision
   26 Polypectomy
   27 Excisional biopsy (TURB)

   Specimen sent to pathology from this surgical event.

30 Partial cystectomy

50 Simple/total/complete cystectomy

60 Radical cystectomy (male only)

This code is used only for men. It involves the removal of bladder and prostate, with or without urethrectomy. The procedure is also called cystoprostatectomy.

If a radical cystectomy is the procedure name for a woman, use code 71.
BLADDER
C67.0-C67.9

APPENDIX C
SITE-SPECIFIC SURGERY CODES

70 Pelvic exenteration, NOS
71 Radical cystectomy (female only); anterior exenteration

A radical cystectomy in a female includes removal of bladder, uterus, ovaries, entire vaginal wall and entire urethra.

72 Posterior exenteration
73 Total exenteration

Includes removal of all pelvic contents and pelvic lymph nodes.

74 Extended exenteration

Includes pelvic blood vessels or bony pelvis.

80 Cystectomy, NOS
90 Surgery, NOS
99 Unknown if cancer-directed surgery performed; death certificate ONLY

SCOPE OF REGIONAL LYMPH NODE SURGERY

<table>
<thead>
<tr>
<th>The regional lymph nodes are:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hypogastric</td>
</tr>
<tr>
<td>Iliac (internal, external, NOS)</td>
</tr>
<tr>
<td>Obturator</td>
</tr>
<tr>
<td>Pelvic, NOS</td>
</tr>
<tr>
<td>Perivesical, Pericystic</td>
</tr>
<tr>
<td>Presacral</td>
</tr>
<tr>
<td>Sacral (lateral, sacral promontory [Gerota's])</td>
</tr>
</tbody>
</table>

Codes

0 No regional lymph nodes removed
1 Regional lymph node(s) removed, NOS; not stated if bilateral or unilateral
2 Unilateral regional lymph nodes
3 Bilateral regional lymph nodes
9 Unknown; not stated; death certificate ONLY
NUMBER OF REGIONAL NODES EXAMINED

Codes

00 No regional lymph nodes examined
01 One regional lymph node examined
02 Two regional lymph nodes examined
..  Ninety or more regional lymph nodes examined
95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99 Unknown; not stated; death certificate ONLY

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

DO NOT CODE the partial or total removal of a ureter during a cystectomy.

Codes

0 None; no surgery to other regional or distant sites
1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
   2 Other regional site(s)
   3 Distant lymph node(s)
   4 Distant site(s)
   5 Combination of 4 WITH 2 or 3
9 Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

Page intentionally blank.
APPENDIX C
SITE-SPECIFIC SURGERY CODES

BRAIN AND OTHER PARTS OF CENTRAL NERVOUS SYSTEM
Meninges C70.0 - C70.9, Brain C71.0 - C71.9
Other Parts of Central Nervous System C72.0 - C72.9

SURGERY OF PRIMARY SITE

DO NOT CODE laminectomies for spinal cord primaries.

Codes

00 None; no cancer-directed surgery of primary site
10 Local tumor destruction
20 Excision of tumor, lesion, or mass
   21 Subtotal resection, NOS
   22 Partial resection
   23 Debulking
30 Excision of tumor, lesion, or mass, NOS
   31 Total resection
   32 Gross resection
40 Partial resection, NOS
   41 Partial lobe
   42 Partial meninges
   43 Partial nerve(s)
50 Total resection (lobectomy of brain)
60 Radical resection
   Resection of primary site plus partial or total removal of surrounding organs/tissue
90 Surgery, NOS
99 Unknown if cancer-directed surgery performed; death certificate ONLY
SCOPE OF REGIONAL LYMPH NODE SURGERY

There are no regional lymph nodes for brain. Code no regional lymph nodes removed (0). Central nervous system sites, however, have regional lymph nodes.

Codes

0  No regional lymph nodes removed
1  Regional lymph node(s) removed, NOS
9  Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

There are no regional lymph nodes for brain. Code no regional lymph nodes examined (00). Central nervous system tumors, however, have regional lymph nodes.

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
...  Ninety or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY
### SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None; no surgery to other regional or distant sites</td>
</tr>
<tr>
<td>1</td>
<td>Surgery to other site(s) or node(s), NOS; unknown if regional or distant</td>
</tr>
<tr>
<td>2</td>
<td>Other regional site(s)</td>
</tr>
<tr>
<td>5</td>
<td>Distant lymph node(s)</td>
</tr>
<tr>
<td>6</td>
<td>Distant site(s)</td>
</tr>
<tr>
<td>7</td>
<td>Combination of 6 WITH 2 or 5</td>
</tr>
<tr>
<td>9</td>
<td>Unknown; not stated; death certificate ONLY</td>
</tr>
</tbody>
</table>
SURGERY OF PRIMARY SITE

Codes

00  None; no cancer-directed surgery of primary site
10  Removal of less than a lobe, NOS
11  Local surgical excision
12  Removal of a partial lobe ONLY
20  Lobectomy and/or isthmectomy
21  Lobectomy ONLY
22  Isthmectomy ONLY
23  Lobectomy WITH isthmus
30  Removal of a lobe and partial removal of the contralateral lobe
40  Subtotal or near total thyroidectomy
50  Total thyroidectomy
80  Thyroidectomy, NOS
90  Surgery, NOS
99  Unknown if cancer-directed surgery performed; death certificate ONLY
SCOPE OF REGIONAL LYMPH NODE SURGERY

The regional lymph nodes are the cervical and upper mediastinal lymph nodes.

Terminology of neck dissection (Robbins et al. 1991):

A radical neck dissection includes the removal of all ipsilateral cervical lymph node groups, i.e., lymph nodes from levels I through V (submental, submandibular, cranial jugular, medial jugular, caudal jugular, dorsal cervical nodes along the accessory nerve, and supraclavicular), and removal of the spinal accessory nerve, internal jugular vein and sternocleidomastoid muscle.

In a modified radical neck dissection the same lymph nodes are removed as in a radical neck dissection; however, one or more non-lymphatic structures are preserved.

A selective neck dissection is a neck dissection with preservation of one or more lymph node groups routinely removed in radical neck dissection.

Codes

0  No regional lymph nodes removed
1  Regional lymph node(s) removed, NOS
   2  Neck dissection, NOS
      3  Selective, limited; nodal sampling; “berry picking”
      4  Modified/modified radical
      5  Radical

9  Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00 No regional lymph nodes examined
01 One regional lymph node examined
02 Two regional lymph nodes examined
.. Ninety or more regional lymph nodes examined
95 No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96 Regional lymph node removal documented as a sampling and number of lymph nodes examined unknown/not stated
97 Regional lymph node removal documented as dissection and number of lymph nodes examined unknown/not stated
98 Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not stated and not documented as sampling or dissection
99 Unknown; not stated; death certificate ONLY
THYROID GLAND
C73.9

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

0  None; no surgery to other regional or distant sites
1  Surgery to other site(s) or node(s), NOS; unknown if regional or distant

  2  Other regional site(s)
  3  Distant lymph node(s)
  4  Distant site(s)
  5  Combination of 4 WITH 2 or 3

9  Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

ALL OTHER SITES
C14.1 - C14.8, C17.0 - C17.9, C23.9, C24.0 - C24.9, C26.0 - C26.9, C30.0 - C30.1, C31.0 - C31.9,
C33.9, C37.9, C38.0 - C38.8, C39.0 - C39.9, C42.0 - C42.1, C42.3 - C42.4, C48.0 - C48.8,
C51.0 - C51.9, C52.9, C57.0 - C57.9, C58.9, C60.0 - C60.9, C63.0 - C63.9, C68.0 - C68.9,
C69.0 - C69.9, C74.0 - C76.8, C80.9

The following codes apply to these sites:

C14.1 - C14.8  Other and Ill-defined Sites in Lip, Oral Cavity and Pharynx
C17.0 - C17.9  Small Intestine
C23.9         Gallbladder
C24.0 - C24.8  Extrahepatic Bile Duct, Ampulla of Vater, Overlapping lesion of Biliary Tract, Biliary Tract, NOS
C26.0 - C26.9  Intestinal Tract, NOS, Overlapping Lesion of Digestive System, Gastrointestinal Tract, NOS
C30.0 - C30.1  Nasal Cavity, Middle Ear
C31.0 - C31.9  Accessory (paranasal) Sinuses
C33.9         Trachea
C37.9         Thymus
C38.0 - C38.8  Heart, Mediastinum, Pleura
C39.0 - C39.9  Other and Ill-defined Sites within Respiratory System and Intrathoracic Organs
C42.0 - C42.1  Blood, Bone Marrow
C42.3 - C42.4  Reticuloendothelial System, NOS, Hematopoietic System, NOS
C48.0 - C48.8  Retroperitoneum and Peritoneum
C51.0 - C51.9  Vulva
C52.9         Vagina
C57.0 - C57.9  Other and Unspecified Female Genital Organs
C58.9         Placenta
C60.0 - C60.9  Penis
C63.0 - C63.9  Other and Unspecified Male Genital Organs
C68.0 - C68.9  Other and Unspecified Urinary Organs
C69.0 - C69.9  Eye and Adnexa
C74.0 - C75.9  Adrenal Gland, Other Endocrine Glands and Related Structures
C76.0 - C76.8  Other and Ill-defined Sites
C80.9         Unknown Primary Site
APPENDIX C
SITE-SPECIFIC SURGERY CODES

ALL OTHER SITES
C14.1 - C14.8, C17.0 - C17.9, C23.9, C24.0 - C24.9, C26.0 - C26.9, C30.0 - C30.1, C31.0 - C31.9,
C33.9, C37.9, C38.0 - C38.8, C39.0 - C39.9, C42.0 - C42.1, C42.3 - C42.4, C48.0 - C48.8,
C51.0 - C51.9, C52.9, C57.0 - C57.9, C58.9, C60.0 - C60.9, C63.0 - C63.9, C68.0 - C68.9,
C69.0 - C69.9, C74.0 - C76.8, C80.9

SURGERY OF PRIMARY SITE

Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>None; no cancer-directed surgery of primary site</td>
</tr>
<tr>
<td>10</td>
<td>Local tumor destruction, NOS (WITHOUT PATHOLOGY SPECIMEN)</td>
</tr>
<tr>
<td>11</td>
<td>Photodynamic therapy (PDT)</td>
</tr>
<tr>
<td>12</td>
<td>Electrocautery; fulguration</td>
</tr>
<tr>
<td>13</td>
<td>Cryosurgery</td>
</tr>
<tr>
<td>14</td>
<td>Laser</td>
</tr>
<tr>
<td></td>
<td><strong>No specimen sent to pathology from this surgical event.</strong></td>
</tr>
<tr>
<td>20</td>
<td>Local tumor excision, NOS (WITH PATHOLOGY SPECIMEN)</td>
</tr>
<tr>
<td>21</td>
<td>Photodynamic therapy (PDT)</td>
</tr>
<tr>
<td>22</td>
<td>Electrocautery</td>
</tr>
<tr>
<td>23</td>
<td>Cryosurgery</td>
</tr>
<tr>
<td>24</td>
<td>Laser ablation</td>
</tr>
<tr>
<td>25</td>
<td>Laser excision</td>
</tr>
<tr>
<td>26</td>
<td>Polypectomy</td>
</tr>
<tr>
<td>27</td>
<td>Excisional biopsy</td>
</tr>
<tr>
<td></td>
<td><strong>Specimen sent to pathology from this surgical event.</strong></td>
</tr>
<tr>
<td>30</td>
<td>Simple/partial surgical removal of primary site</td>
</tr>
<tr>
<td>40</td>
<td>Total surgical removal of primary site</td>
</tr>
<tr>
<td>50</td>
<td>Surgery stated to be &quot;debulking&quot;</td>
</tr>
<tr>
<td>60</td>
<td>Radical surgery</td>
</tr>
<tr>
<td></td>
<td><strong>Partial or total removal of the primary site WITH an en bloc resection (partial or total removal) of other organs.</strong></td>
</tr>
<tr>
<td>90</td>
<td>Surgery, NOS</td>
</tr>
<tr>
<td>99</td>
<td>Unknown if cancer-directed surgery performed; death certificate ONLY</td>
</tr>
</tbody>
</table>
APPENDIX C
SITE-SPECIFIC SURGERY CODES

ALL OTHER SITES
C14.1 - C14.8, C17.0 - C17.9, C23.9, C24.0 - C24.9, C26.0 - C26.9, C30.0 - C30.1, C31.0 - C31.9,
C33.9, C37.9, C38.0 - C38.8, C39.0 - C39.9, C42.0 - C42.1, C42.3 - C42.4, C48.0 - C48.8,
C51.0 - C51.9, C52.9, C57.0 - C57.9, C58.9, C60.0 - C60.9, C63.0 - C63.9, C68.0 - C68.9,
C69.0 - C69.9, C74.0 - C76.8, C80.9

SCOPE OF REGIONAL LYMPH NODE SURGERY

Codes

0  No regional lymph nodes removed
1  Regional lymph node(s) removed, NOS
9  Unknown; not stated; death certificate ONLY

NUMBER OF REGIONAL LYMPH NODES EXAMINED

Codes

00  No regional lymph nodes examined
01  One regional lymph node examined
02  Two regional lymph nodes examined
..  Ninety or more regional lymph nodes examined
95  No regional lymph node(s) removed but aspiration of regional lymph node(s) was performed
96  Regional lymph node removal documented as a sampling and number of lymph nodes examined
    unknown/not stated
97  Regional lymph node removal documented as dissection and number of lymph nodes examined
    unknown/not stated
98  Regional lymph nodes surgically removed but number of lymph nodes examined unknown/not
    stated and not documented as sampling or dissection
99  Unknown; not stated; death certificate ONLY
APPENDIX C
SITE-SPECIFIC SURGERY CODES

ALL OTHER SITES
C14.1 - C14.8, C17.0 - C17.9, C23.9, C24.0 - C24.9, C26.0 - C26.9, C30.0 - C30.1, C31.0 - C31.9, C33.9, C37.9, C38.0 - C38.8, C39.0 - C39.9, C42.0 - C42.1, C42.3 - C42.4, C48.0 - C48.8, C51.0 - C51.9, C52.9, C57.0 - C57.9, C58.9, C60.0 - C60.9, C63.0 - C63.9, C68.0 - C68.9, C69.0 - C69.9, C74.0 - C76.8, C80.9

SURGERY OF OTHER REGIONAL SITE(S), DISTANT SITE(S) OR DISTANT LYMPH NODE(S)

Codes

0 None; no surgery to other regional or distant sites
1 Surgery to other site(s) or node(s), NOS; unknown if regional or distant
   2 Other regional sites
   3 Distant lymph node(s)
   4 Distant site(s)
   5 Combination of 4 WITH 2 or 3
9 Unknown; not stated; death certificate ONLY