Surgery Codes

Breast
C500–C509

Codes

00   None; no surgery of primary site; autopsy ONLY

19   Local tumor destruction, NOS
No specimen was sent to pathology for surgical events coded 19 (principally for cases diagnosed prior to January 1, 2003)

20   Partial mastectomy, NOS; less than total mastectomy, NOS
    21   Partial mastectomy WITH nipple resection
    22   Lumpectomy or excisional biopsy
    23   Reexcision of the biopsy site for gross or microscopic residual disease
    24   Segmental mastectomy (including wedge resection, quadrantectomy, tylectomy)
    Procedures coded 20–24 remove the gross primary tumor and some of the breast tissue (breast-conserving or -preserving surgery). There may be microscopic residual tumor.

[***SEER Note:*** When a patient has a procedure coded to 20-24 (e.g., lumpectomy) with reconstruction, code only the procedure (e.g., lumpectomy, code 22) as the surgery.]

[***SEER Note:*** Assign code 22 when a patient has a lumpectomy and an additional margin excision during the same procedure.

According to the Commission on Cancer, re-excision of the margins intraoperatively during same surgical event does not require additional resources; it is still 22. Subsequent re-excision of lumpectomy margins during separate surgical event requires additional resources: anesthesia, op room, and surgical staff; it qualifies for code 23.]

30   Subcutaneous mastectomy
    A subcutaneous mastectomy, also called nipple sparing mastectomy, is the removal of breast tissue without the nipple and areolar complex or overlying skin. It is performed to facilitate immediate breast reconstruction. Cases coded 30 may be considered to have undergone breast reconstruction.

[***SEER Note:*** Code Goldilocks mastectomy in *Surgery of Primary Site* (NAACCR # 1290). Breast surgery code 30 seems to be the best available choice for "Goldilocks" mastectomy. It is essentially a skin-sparing mastectomy with breast reconstruction. The choice between code 30 and codes in the 40-49 range depends on the extent of the breast removal. Review the operative report carefully and assign the code that best reflects the extent of the breast removal.]

40   Total (simple) mastectomy, NOS
    41   WITHOUT removal of uninvolved contralateral breast
        43   Reconstruction, NOS
            44   Tissue
            45   Implant

    46 Combined (tissue and implant)
  42 WITH removal of uninvolved contralateral breast
    47 Reconstruction, NOS
      48 Tissue
      49 Implant
      75 Combined (tissue and implant)

[***SEER Note:*** "Tissue" for reconstruction is defined as human tissue such as muscle (latissimus dorsi or rectus abdominis) or skin in contrast to artificial prostheses (implants). Placement of a tissue expander at the time of original surgery indicates that reconstruction is planned as part of the first course of treatment.]

[***SEER Note:*** Assign code 43 for a simple mastectomy with tissue expanders and acellular dermal matrix/AlloDerm. The tissue expander indicates preparation for reconstruction. The acellular dermal matrix/AlloDerm is not coded because, while they often accompany an implant procedure, they are not the principle element of reconstructive procedures. The principle elements would be tissue from the patient and/or prosthetics (e.g., gel implants).]

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

For **single** primaries only, code removal of involved contralateral breast under the data item *Surgical Procedure of Other Site* (NAACCR Item # 1294).

[***SEER Note:*** Example of single primary with removal of involved contralateral breast--Inflammatory carcinoma involving both breasts. Bilateral simple mastectomies. Code *Surgery of Primary Site* (NAACCR # 1290) 41 and code *Surgical Procedure of Other Site* (NAACCR # 1294) 1.]

If **contralateral breast** reveals a **second primary**, each breast is abstracted separately. The surgical procedure is coded 41 for the first primary. The surgical code for the contralateral breast is coded to the procedure performed on that site.

[***SEER Note:*** Placement of a tissue expander at the time of original surgery means that reconstruction is planned as part of the first course of treatment. When an expander is placed, code the mastectomy and reconstruction.]

Reconstruction that is planned as part of first course treatment is coded 43-49 or 75, regardless of whether it is done at the time of mastectomy or later.

[***SEER Note:*** Reconstruction may be done at the same time as the mastectomy or may be done later. Code 43-49, or 75 if the operative report or medical record states reconstruction will be done later, or if a tissue expander is inserted during the mastectomy procedure. Tissue expander insertion precedes reconstruction.]

76 Bilateral mastectomy for a single tumor involving both breasts, as for bilateral inflammatory carcinoma.

[***SEER Note:*** Assign code 76 for a more extensive bilateral mastectomy. Assign code 0 in *Surgical Procedure of Other Site* (NAACCR # 1294).

For a simple bilateral mastectomy, assign code 41 with code 1 in *Surgical Procedure of Other Site* (NAACCR # 1294).]

50   Modified radical mastectomy
       51   WITHOUT removal of uninvolved contralateral breast
           53   Reconstruction, NOS
               54   Tissue
               55   Implant
               56   Combined (tissue and implant)
       52   WITH removal of uninvolved contralateral breast
           57   Reconstruction, NOS
               58   Tissue
               59   Implant
               63   Combined (tissue and implant)

Removal of all breast tissue, the nipple, the areolar complex, and variable amounts of breast skin in continuity with the axilla. The specimen may or may not include a portion of the pectoralis major muscle.

[**SEER Note:** "In continuity with" or "en bloc" means that all the tissues were removed during the same procedure, but not necessarily in a single specimen. "Tissue" for reconstruction is defined as human tissue such as muscle (latissimus dorsi or rectus abdominis) or skin in contrast to artificial prostheses (implants). Placement of a tissue expander at the time of original surgery indicates that reconstruction is planned as part of the first course of treatment.

Code the most invasive, extensive, or definitive surgery in *Surgery of Primary Site* (NAACCR # 1290).

Assign code 51 or 52 if a patient has an excisional biopsy and axillary dissection followed by a simple mastectomy during the first course of therapy. Code the cumulative result of the surgeries, which is a modified radical mastectomy in this case.]

If **contralateral breast** reveals a **second primary**, each breast is abstracted separately. The surgical procedure is coded 51 for the first primary. The surgical code for the contralateral breast is coded to the procedure performed on that site.

For **single** primaries only, code removal of involved contralateral breast under the data item *Surgical Procedure of Other Site* (NAACCR Item # 1294).

60   Radical mastectomy, NOS
       61   WITHOUT removal of uninvolved contralateral breast
           64   Reconstruction, NOS
               65   Tissue
               66   Implant
               67   Combined (tissue and implant)
       62   WITH removal of uninvolved contralateral breast
           68   Reconstruction, NOS
               69   Tissue
               73   Implant
               74   Combined (tissue and implant)

[**SEER Note:** Involves removal of breast tissue, nipple, areolar complex, variable amount of skin, pectoralis minor, and/or pectoralis major, as well as en bloc axillary dissection. "Tissue" for reconstruction is defined as human tissue such as muscle (latissimus dorsi or rectus abdominis) or skin in

contrast to artificial prostheses (implants). Placement of a tissue expander at the time of original surgery indicates that reconstruction is planned as part of the first course of treatment.]

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

[*SEER Note:* Involves removal of breast tissue, nipple, areolar complex, variable amounts of skin, pectoralis minor, and/or pectoralis major, as well as removal of internal mammary nodes and en bloc axillary dissection]

80   Mastectomy, NOS

Specimen sent to pathology for surgical events coded 20-80
90   Surgery, NOS

99   Unknown if surgery performed; death certificate ONLY