

Surgery Codes

Skin C440–C449

Codes

- 00 None; no surgery of primary site; autopsy ONLY
- 10 Local tumor destruction, NOS
 - 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 surgical events 10–14

- 20 Local tumor excision, NOS
 - 26 Polypectomy
 - 27 Excisional biopsy

Any combination of 20 or 26–27 WITH

- 21 Photodynamic therapy (PDT)
- 22 Electrocautery
- 23 Cryosurgery
- 24 Laser ablation
- 25 Laser excision

[**SEER Note:** For Photodynamic therapy (PDT): Assign code 11 if there is no pathology specimen. Assign code 21 if there is a pathology specimen. Codes 20-27 include shave and wedge resection.]

- 30 Biopsy of primary tumor followed by a gross excision of the lesion (does not have to be done under the same anesthesia)
 - 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
 - 34 Mohs surgery, NOS
 - [**SEER Note:** Assign code 34 for shave biopsy followed by Mohs surgery for melanoma of the skin.
 - Assign code 34 for Mohs surgery with unknown margins.]
 - 35 Mohs with 1-cm margin or less
 - 36 Mohs with more than 1-cm margin
- [**SEER Note:** Assign code 35 for shave biopsy followed by Mohs with 1 cm margin or less. Assign code 36 for shave biopsy followed by Mohs with more than 1 cm margin.]

[**SEER Note:** Codes 30 to 35 include less than a wide excision and less than or equal to 1 cm margin, or status of margin is unknown. If it is stated to be a **wide excision** or **reexcision**, but the **margins are unknown**, code to 30.

Assign a surgery code from the 30-35 range when any margin is less than 1 cm.

Example: Melanoma with surgical margins greater than 1 cm for length and width but less than 1 cm for depth. Assign a surgery code in the 30-35 range. Since tumor thickness is an important prognostic factor for cutaneous melanoma, the deep margin is of particular importance.

Use code 45 when there is a wide excision AND it is known that the margins of excision are greater than 1 cm.]

[**SEER Note:** You may take margin information from the operative report if it is missing from the pathology report when assigning the surgery codes for skin. This applies to any skin malignancy for which the skin surgery codes apply.

Exception: Do not apply this to surgery codes 45-47 where specific instructions about microscopic confirmation are included.]

45 Wide excision or reexcision of lesion or minor (local) amputation with margins more than 1 cm, NOS. Margins **MUST** be microscopically negative.

46 WITH margins more than 1 cm and less than or equal to 2 cm

47 WITH margins greater than 2 cm

If the excision or reexcision has microscopically negative margins less than 1 cm OR the margins are more than 1 cm but are not microscopically confirmed, use the appropriate code, 20-36.

[**SEER Note:** Assign code 47 for amputation of finger.

Example: Amputation of finger for subungual melanoma]

60 Major amputation

Specimen sent to pathology from surgical events 20-60

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY