

# SEER Inquiry System - Report

Produced: 05/06/2024 3:14 PM

## Question 20021180

### References:

#1: SEER PCM, 3rd Ed, Rev 1, F-39. January 2003

#2: 2004 SEER Manual, C-315

### Question:

Surgery of Primary Site/Other Cancer-Directed Therapy--Head & Neck (Nasal cavity): Should a small fragment of bone removed during a maxillectomy following a turbinectomy for a nasal turbinate primary be "partial or total removal with other organ" for coding this field? See discussion.

### Discussion:

Excision of a turbinate mass and partial turbinectomy revealed melanoma of the rt nasal turbinate. A subsequent rt medial maxillectomy was performed and a small fragment of bone was included in the resection and identified in the pathology report. Would the removed bone be "connective or supportive tissue" only for a Surgery of Primary Site code of 40 or is it another organ for a code of 60?

### Answer:

The piece of bone was likely removed to access the maxillary sinus and would not be a separate organ. Use the "All Other Sites" surgery coding schemes to code this primary. For cases diagnosed 1/1/2003 and after: Code the Surgery of Primary Site field to 40 [Total surgical removal of primary site]. Code the Surgical Procedure of Other Site field to 2 [Non-primary surgical procedure to other regional sites]. The maxillectomy was not performed in continuity to the turbinectomy and should be coded in this field rather than the Surgery of Primary Site field.

### History:

For cases diagnosed 1998-2002: Code Surgery of Primary Site to 40, and code Surgery of Other Regional Site(s), Distant Site(s), or Distant Lymph Nodes to %2

### Cancer Site Category:

Head & Neck

### Data Item Category:

Surgery of Primary Site, Other therapy

### Other Category:

N/A

### Year:

2002