

SEER Inquiry System - Report

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Question 20100043

References:

Heme & Lymph Manual & DB

Question:

Primary site--Heme & Lymphoid Neoplasms: When only pathology reports are available, how should the primary site be coded when a both a bone marrow biopsy and colon biopsy demonstrate "mantle cell lymphoma"?

Discussion:

Answer:

For cases diagnosed 2010 and forward, access the Hematopoietic Database at <http://seer.cancer.gov/seertools/hemelymph>.

For this case, code primary site to C189 [colon, NOS] per Rule PH24.

Mantle cell lymphoma usually begins with lymph node involvement and spreads to other tissue. However, it can begin in a lymphocyte such as those in the GI tract. Per the Abstractor Notes section in the Heme DB, patients usually present with advanced disease. About half will have some combination of B symptoms. Swelling of lymph nodes and spleen are usually present. Bone marrow, liver and GI tract involvement occurs in a very high percentage

SEER*Educate provides training on how to use the Heme Manual and DB. If you are unsure how to arrive at the answer in this SINC question, refer to SEER*Educate to practice coding hematopoietic and lymphoid neoplasms. Review the step-by-step instructions provided for each case scenario to learn how to use the application and manual to arrive at the answer provided. <https://educate.fhcrc.org/LandingPage.aspx> (<https://educate.fhcrc.org/LandingPage.aspx>).

History:

This SINC question has been updated to the Hematopoietic & Lymphoid Neoplasm Manual & Database published January 2014.

The original answer below was written based on the rules in 2010

For the case you cite, code the primary site to colon. Mantle cell lymphoma usually begins with lymph node involvement and spreads to other tissue. However, it can begin in a lymphocyte such as those in the GI tract.

Use the 2010 heme database as follows:

Enter "mantle" (quote mantle quote) into the search mechanism of the 2010 Hemato DB.

Mantle cell lymphoma appears in the results box. Click on Mantle cell lymphoma.

Click on the button on the bottom mid-screen that says "Display Abstractor Notes."

The abstractor notes say typical patients present with advanced disease. Swelling of lymph nodes and spleen are usually present. Bone marrow, liver, and GI tract involvement occurs in a very high percentage.

The answers for SINC questions with 2010 ID numbers were written using the 2010 Heme & Lymph Manual & DB. The instructions for using the 2010 Hematopoietic Database were written for the version of the software in use as of 5/24/2011. The user interface of the web-based 2010 Hematopoietic Database available from the SEER website varies slightly from the 5/24/2011 version in that the web-based version provides all the disease information in one scrollable window.

For cases diagnosed 2010-2011, access the 2010 Hematopoietic Database at <http://seer.cancer.gov/tools/heme/>. Click on Hematopoietic Project. Click on Hematopoietic and Lymphoid Database. For 2010-2011 diagnoses, click on the "use the 2010 database" label in the upper right corner of the screen. The 2010 Hematopoietic Coding Manual (PDF) button will appear to indicate the correct version of the program is available now for query.

Cancer Site Category:

Heme & Lymphoid Neoplasms

Data Item Category:

Primary site

Other Category:

N/A

Year:

2010