

SEER Inquiry System - Report

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Question 20120012

References:

Heme & Lymph Manual & DB

Question:

Histology--Heme & Lymphoid Neoplasms: How is histology coded if the pathology report shows diffuse large B-cell lymphoma arising in a small cell lymphoma - Richter's transformation, also compatible with chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma (SLL)?

Discussion:

Answer:

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

Code the histology to 9680/3 [diffuse large B-cell lymphoma (DLBCL)].

For CLL (and CLL/SLL), Richter's transformation represents when CLL changes into DLBCL. In this case, there was a biopsy that demonstrated a diagnosis of the chronic disease (CLL/SLL) transforming (Richter's transformation) into an acute disease DLBCL.

Per Rule M8, one is instructed to abstract the acute neoplasm as a single primary when both a chronic (CLL/SLL) and an acute neoplasm (diffuse large B-cell lymphoma (DLBCL)) are diagnosed simultaneously there is documentation of only one positive bone marrow biopsy, lymph node biopsy or tissue biopsy.

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 SINQ 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:

For cases diagnosed 2012 and later, access the Hematopoietic Database at

<http://seer.cancer.gov/tools/heme/>.

Click on Hematopoietic Project. Click on Hematopoietic and Lymphoid Database. The 2012 Hematopoietic Coding Manual (PDF) will appear which indicates the correct version of the program is available now for query.

Code the histology as diffuse large B-cell lymphoma (DLBCL) [9680/3]. The steps used to arrive at this decision are as follows:

Enter in the Heme DB to find the histology. Click on the SEARCH button. Ensure that the term "Chronic lymphocytic leukemia/small lymphocytic lymphoma" [9823/3] is highlighted on the screen. Scroll down to the TRANSFORMATIONS section. Note that CLL/SLL transforms to diffuse large B-cell lymphoma and this is called "Richter syndrome."

Enter in the Heme DB to find the histology. Click on the SEARCH button. Ensure that the term "Diffuse large B-cell lymphoma (DLBCL)" [9680/3] is highlighted on the screen. Scroll down to the ABTRACTOR NOTE section. Note that Richter syndrome is term that is used to describe the transformation from CLL/SLL. This patient has a simultaneous diagnosis of the chronic neoplasm (CLL/SLL) and the acute neoplasm (DLBCL).

Click on the 2012 HEMATOPOIETIC CODING MANUAL (PDF). Once in the manual, select the link to check the Multiple Primary Rules. The rules are intended to be reviewed in consecutive order from Rule M1 to Rule M16 within the applicable Module. Stop at the first rule that applies to the case you are processing. Abstract the acute neoplasm as a single primary when both a chronic and an acute neoplasm are diagnosed simultaneously there is documentation of only one positive bone marrow biopsy, lymph node biopsy or tissue biopsy.

Code the histology to the acute neoplasm, DLBCL [9680/3].

This case is explained by defining Richter's transformation. For CLL (and CLL/SLL), Richter's transformation represents when CLL changes into DLBCL. In this case, there was a biopsy that demonstrated a diagnosis of the chronic disease (CLL/SLL) transforming (Richter's transformation) into an acute disease DLBCL.

Cancer Site Category:

CLL/SLL, Heme & Lymphoid Neoplasms

Data Item Category:

Histology

Other Category:

N/A

Year:

2012