Question 20170030

References:

2016 SEER Manual, 1 & 2. Appendix C: Surgical Codes for Melanoma/Skin

Question:

Surgery Primary Site--Melanoma: How should Surgery of Primary Site be coded for a melanoma diagnosed on punch or shave biopsy followed by a wide excision that shows no residual disease and the gross wide excision specimen size showing no residual is greater than 1 cm in all dimensions (length, width and depth)? See Discussion.

Discussion:

Discussion: Example: Shave biopsy with superficial spreading melanoma, Breslow 0.25 mm, Clark level II. Excision with no residual melanoma and gross description of specimen size is 4.0 x 1.6 cm skin ellipse excised to a depth of 1.8 cm.

We have differing opinions in our registry.

Opinion 1: We can assume margins are greater than 1 cm based on the excision specimen size when there is no residual tumor on excision and all dimensions of the excision specimen are more than 1 cm. Surgery would be coded in 40s range.

Opinion 2: We should assume the melanoma defect was in the middle of the excision specimen, so for a skin ellipse that is 4.0 x 1.6 cm, there would be a 2 cm and 0.8 cm margin (respectively) from the middle of the specimen, thus margins are not > 1 cm. Surgery would be coded in 30s range.

Answer:

Assign code 30: Biopsy of primary tumor followed by a gross excision of the lesion. The margins are unknown. The registrar should not try to determine the margins when they are not specified. See the SEER Note at the top of page 2 in the Skin Surgery Codes section of Appendix C of the SEER manual "If it is stated to be a **wide excision** or **reexcision**, but the **margins are unknown**, code to 30."
https://seer.cancer.gov/manuals/2016/AppendixC/Surgery_Codes_Skin_2016.pdf
(https://seer.cancer.gov/manuals/2016/AppendixC/Surgery_Codes_Skin_2016.pdf)

Cancer Site Category:

Melanoma

Data Item Category:

Surgery of Primary Site

Other Category:

N/A

Year:

2017