SEER Inquiry System - Report

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Question 20170041

References:

#1: 2007 MP/H Rules

#2: ICD-O-3

Question:

MP/H Rules/Histology--Thyroid: How should histology be coded for a thyroidectomy final diagnosis of papillary thyroid carcinoma, favor cribriform-morula variant? See Discussion.

Discussion:

This specific histology (cribriform-morula variant of papillary thyroid carcinoma) is not found in the ICD-O and is not mentioned in the 2007 MP/H Manual. However, per a web search it appears that this is a distinct type of papillary thyroid carcinoma (http://erc.endocrinology-journals.org/content/24/4/R109.full).

Example: Right lobectomy shows thyroid epithelial neoplasm, pending consultation.

Consultation: Thyroid gland, right lobe: papillary thyroid carcinoma, favor cribriform-morula variant.

Consultation Comment: IHC stains argue against medullary carcinoma. The histologic features of growth patterns and cytologic atypia (with rare grooves and pseudoinclusions) and the immunohistochemical profile support a diagnosis of papillary thyroid carcinoma, favoring the cribriform-morula variant. It is important to note that a significant number of patients with this variant of papillary thyroid carcinoma have been associated with familial adenomatous polyposis syndrome.

Answer:

Assign code 8260/3 for papillary carcinoma of thyroid. Cribriform-morula variant is not listed in ICD-O-3 for papillary carcinoma. Multiple Primaries/Histology Rule H14 states to code papillary carcinoma of the thyroid to papillary adenocarcinoma, NOS (8260).

Cancer Site Category: Thyroid
Data Item Category: Histology
Other Category: N/A
Year: