

**Colon Multiple Primary Rules – Text**  
**C180 - C189**  
**(Excludes lymphoma and leukemia M9590-9989 and Kaposi sarcoma M9140)**

**UNKNOWN IF SINGLE OR MULTIPLE TUMORS**

*Note:* Tumor(s) not described as metastasis

**Rule M1** When it is not possible to determine if there is a **single** tumor **or multiple** tumors, opt for a single tumor and abstract as a single primary.\*

*Note:* Use this rule only after all information sources have been exhausted.

**\* Prepare one abstract. Use the histology coding rules to assign the appropriate histology code.**  
**This is the end of instructions for Unknown if Single or Multiple Tumors.**

**SINGLE TUMOR**

*Note 1:* Tumor not described as metastasis

*Note 2:* Includes combinations of in situ and invasive

**Rule M2** A **single tumor** is always a single primary. \*

*Note:* The tumor may overlap onto or extend into adjacent/contiguous site or subsite.

**\* Prepare one abstract. Use the histology coding rules to assign the appropriate histology code.**  
**This is the end of instructions for Single Tumor.**

**MULTIPLE TUMORS**

Multiple tumors may be a single primary or multiple primaries.

*Note 1:* Tumors not described as metastases

*Note 2:* Includes combinations of in situ and invasive

**Rule M3** Adenocarcinoma in adenomatous polyposis coli (**familial polyposis**) with one or more malignant polyps is a single primary.\*

*Note:* Tumors may be present in multiple segments of the colon or in a single segment of the colon.

**Rule M4** Tumors in sites with **ICD-O-3 topography** codes that are different at the second (Cxxx), third, (Cxxx) or fourth (C18x) character are multiple primaries. \*\*

**Rule M5** Tumors diagnosed **more than one (1) year** apart are multiple primaries. \*\*

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- Rule M6** An **invasive** tumor **following** an **in situ** tumor more than 60 days after diagnosis are multiple primaries. \*\*  
*Note 1:* The purpose of this rule is to ensure that the case is counted as an incident (invasive) case when incidence data are analyzed.  
*Note 2:* Abstract as multiple primaries even if the medical record/physician states it is recurrence or progression of disease.
- Rule M7** A **frank** malignant or in situ **adenocarcinoma** and an in situ or **malignant** tumor in a **polyp** are a single primary.\*
- Rule M8** Abstract as a single primary\* when one tumor is:
- **Cancer/malignant neoplasm, NOS (8000) and** another is a **specific histology** or
  - **Carcinoma, NOS (8010) and** another is a **specific carcinoma** or
  - **Adenocarcinoma, NOS (8140) and** another is a **specific adenocarcinoma** or
  - **Sarcoma, NOS (8800) and** another is a **specific sarcoma**
- Rule M9** **Multiple** in situ and/or malignant **polyps** are a single primary.\*  
*Note:* Includes all combinations of adenomatous, tubular, villous, and tubulovillous adenomas or polyps.
- Rule M10** Tumors with **ICD-O-3 histology** codes that are **different** at the first (xxxx), second (xxxx) or third (xxxx) number are multiple primaries. \*\*
- Rule M11** Tumors that **do not meet any** of the above **criteria** are a single primary.\*  
*Note 1:* When an invasive tumor follows an in situ tumor within 60 days, abstract as a single primary.  
*Note 2:* All cases covered by Rule M11 are in the same segment of the colon.

\* Prepare one abstract. Use the histology coding rules to assign the appropriate histology code.

\*\* Prepare two or more abstracts. Use the histology coding rules to assign the appropriate histology code to each case abstracted.

This is the end of instructions for Multiple Tumors.

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