Kidney Histology Coding Rules – Text
C649
(Excludes lymphoma and leukemia M9590 – 9989 and Kaposi sarcoma M9140)

SINGLE TUMOR

Rule H1  Code the histology documented by the physician when there is **no pathology/cytology specimen** or the pathology/cytology report is not available.

*Note 1:* Priority for using documents to code the histology
- Documentation medical record that refers to pathologic or cytologic findings
- Physician’s reference to type of cancer (histology) in the medical record
- CT or MRI scans

*Note 2:* Code the specific histology when documented.
*Note 3:* Code the histology to 8000 (cancer/malignant neoplasm, NOS), or 8010 (carcinoma, NOS) as stated by the physician when nothing more specific is documented.

Rule H2  Code the histology from the metastatic site when there is **no pathology/cytology specimen from the primary site**.

*Note:* Code the behavior /3.

Rule H3  Code the **histology** when only one histologic type is identified.

Rule H4  Code the **invasive** histologic type when there are invasive and in situ components.

Rule H5  Code the **specific type** when the diagnosis is
- Cancer/malignant neoplasm, NOS (8000) and a more specific histology or
- Carcinoma, NOS (8010) and a more specific carcinoma or
- Adenocarcinoma, NOS (8140) and one specific adenocarcinoma type or
- Renal cell carcinoma, NOS (8312) and one specific renal cell type

*Note 1:* Use Table 1 to identify specific renal cell types.
*Note 2:* The specific histology for **in situ** tumors may be identified as pattern, architecture, type, subtype, predominantly, with features of, major, or with ____differentiation
*Note 3:* The specific histology for **invasive** tumors may be identified as type, subtype, predominantly, with features of, major, or with ____differentiation.

Rule H6  Code 8255 (adenocarcinoma with mixed subtypes) when there are **two or more specific** renal cell carcinoma types.

*Note:* Use Table 1 to identify specific renal cell types.
*Example:* Renal cell carcinoma, papillary and clear cell types. Assign code 8255.
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Rule H7 Code the histology with the **numerically higher** ICD-O-3 code.

This is the end of instructions for Single Tumor.
Code the histology according to the rule that fits the case.

MULTIPLE TUMORS ABSTRACTED AS A SINGLE PRIMARY

**Rule H8** Code the histology documented by the physician when there is **no pathology/cytology specimen** or the pathology/cytology report is not available.

*Note 1:* Priority for using documents to code the histology
- Documentation in the medical record that refers to pathologic or cytologic findings
- Physician’s reference to type of cancer (histology) in the medical record
- CT or MRI scans

*Note 2:* Code the specific histology when documented.

*Note 3:* Code the histology to 8000 (cancer/malignant neoplasm, NOS), or 8010 (carcinoma, NOS) as stated by the physician when no specific histology is documented.

**Rule H9** Code the histology from the metastatic site when there is **no pathology/cytology specimen from the primary site**.

*Note:* Code the behavior /3.

**Rule H10** Code the histology when only **one histologic type** is identified.

**Rule H11** Code the histology of the **most invasive** tumor.

*Note 1:* This rule should only be used when the first three digits of the histology codes are identical (This is a single primary).

*Note 2:* See the Kidney Equivalent Terms, Definitions, Tables and Illustrations for the definition of most invasive.

- If one tumor is in situ and one is invasive, code the histology from the invasive tumor.
- If both/all histologies are invasive, code the histology of the most invasive tumor.
Rule H12  Code the specific type when the diagnosis is  
- Cancer/malignant neoplasm, NOS (8000) and a more specific histology or  
- Carcinoma, NOS (8010) and a more specific carcinoma or  
- Adenocarcinoma, NOS (8140) and one specific adenocarcinoma type or  
- Renal cell carcinoma, NOS (8312) and one specific renal cell type  
  Note 1: Use Table 1 to identify specific renal cell types.  
  Note 2: The specific histology for in situ tumors may be identified as pattern, architecture, type, subtype, predominantly, with features of, major, or with ____differentiation  
  Note 3: The specific histology for invasive tumors may be identified as type, subtype, predominantly, with features of, major, or with ____differentiation.  

Rule H13  Code the histology with the numerically higher ICD-O-3 code.  

This is the end of instructions for Multiple Tumors Abstracted as a Single Primary.  
Code the histology according to the rule that fits the case.