Kidney Multiple Primary Rules - Text
C649
(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 tumors.

**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**
Wilms tumors are a single primary. *

**Rule M4**
Tumors in sites with ICD-O-3 topography codes that are different at the second (Cxxx) and/or third characters (Cxxx) are multiple primaries **

**Rule M5**
Tumors in both the right kidney and in the left kidney are multiple primaries. **

*Note:* Abstract as a single primary when the tumors in one kidney are documented to be metastatic from the other kidney.

Kidney MP
Kidney Multiple Primary Rules - Text

Rule M6  Tumors diagnosed more than three (3) years apart are multiple primaries. **

Rule M7  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 M8  One tumor with a specific renal cell type and another tumor with a different specific renal cell type are multiple primaries (Table 1). **

Rule M9  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 the other is a specific carcinoma or
- Adenocarcinoma, NOS (8140) and another is a specific adenocarcinoma or
- Renal cell carcinoma, NOS (8312) and the other is a single renal cell type (Table 1)

Note 1: The specific histology for in situ tumors may be identified as pattern, architecture, type, subtype, predominantly, with features of, major, or with ____differentiation

Note 2: The specific histology for invasive tumors may be identified as type, subtype, predominantly, with features of, major, or with ____differentiation.

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: When an invasive tumor follows an in situ tumor within 60 days, abstract as a single primary.

* 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.

Rule M11 Examples: The following are examples of cases that use Rule M11. This is NOT intended to be an exhaustive set of examples; there are other cases that may be classified as a single primary. Warning: Using only these case examples to determine the number of primaries can result in major errors.

Example 1: Multiple tumors in one kidney with same histology

Example 2: An in situ and invasive tumor diagnosed within 60 days