

described in the pathology report or the single tumor and you are instructed to code adenocarcinoma with mixed subtypes when you see this particular situation. And here is an example: renal cell carcinoma, papillary and clear cell types. You are instructed to code 8255. And, again, you use Table 1 to identify the specific renal cell types.

Our final rule for single tumors is the instruction to—if you haven't gotten an answer before you get to rule H7 and you're still struggling and you don't know how to code this histology yet for the single tumor, the fall out is code the higher ICD-O-3 histology code. We don't expect that you will frequently arrive or use this rule H7 but it is included in the rare case where you have a single tumor and you have not met one of the conditions to instruct you on the action before you got to this particular rule.

This is the end of the instructions for single tumors. You are instructed to code the histology according to the rule that fits the case. Are there any questions for the histology rules for single tumors?

SLIDE THIRTY-ONE

Okay. Let's go on to "Multiple Tumors Abstracted as a Single Primary" Module for the Histology Coding Rules.

SLIDE THIRTY-TWO

You will see in rule H8 the same rule that you saw as H1 for single tumors which asks the question: "Is there no pathology or cytology specimen or is the pathology or cytology report unavailable?" If that is the case you use the histology documented by the physician. And, again, here is the hierarchy for documents that you can use to code the histology.

SLIDE THIRTY-THREE

Rule H9 is identical to the single tumor rule but it's applied to multiple tumors abstracted as a single primary: If you have a specimen from a metastatic site only, you can code the histology from the metastatic site and code the behavior to /3.

SLIDE THIRTY-FOUR

H10 is a very simple rule: "Is only one histologic type identified?" You are instructed to code the histology when only one histologic type is identified.

SLIDE THIRTY-FIVE

Rule H11 is instructions for one tumor that is in situ and another tumor that is invasive or when both tumors are invasive. This is a new rule that is only for the multiple tumors abstracted as a single primary. You are instructed to code the histology of the most invasive tumor. This rule should only be used when the first three numbers of the histology codes are identical. And you are referenced to the Equivalent Terms and Definitions, Tables and Illustrations for the definition of

what “most invasive” includes. If both or all of the histologies are invasive you code the histology of the most invasive tumor. If one tumor is in situ and the other is invasive you code the histology from the invasive tumor.

[Are there] any questions on rule H11?

SLIDE THIRTY-SIX

Okay. We’re coming to the end here, folks. Rule H12 is identical to rule H5 for single tumors which instructs you to code the specific histologic type when you have a diagnosis of cancer or malignant neoplasm and a more specific histology for “Multiple Tumors Abstracted as a Single Primary”; carcinoma NOS and a more specific carcinoma; adenocarcinoma NOS and a more specific adenocarcinoma type; or renal cell carcinoma and one specific renal cell type. Now, again, first you apply the multiple primary rules and determine whether you are abstracting a single primary or multiple primaries. Then you determine whether or not the abstract you are completing is for a *single tumor* or *multiple tumors abstracted as a single primary* and then you follow the rule that fits the situation for your particular case.

Finally, we have the catch-all rule at the end: if you have not answered any of these questions before you get to rule H13 and you have multiple tumors abstracted as a single primary, you are instructed to code the higher ICD-O-3 code.

And that ends the instructions for “Multiple Tumors Abstracted as a Single Primary.” That’s all for the histology coding rules for kidney.

Any questions as we draw our session to a conclusion?

No questions? I told you this was a pretty easy set of rules.

Just once again, Antoinette will be sending out the information for the practicum cases and also you will be getting an announcement for the kidney case practicum sessions. That is still scheduled for Valentine’s Day. If there are no final questions, I will open the floor one more time for questions. Okay. I thank you all for joining us today and have fun doing this set of cases. They are pretty simple.

I appreciate your attention. See you next time. Thank you.