

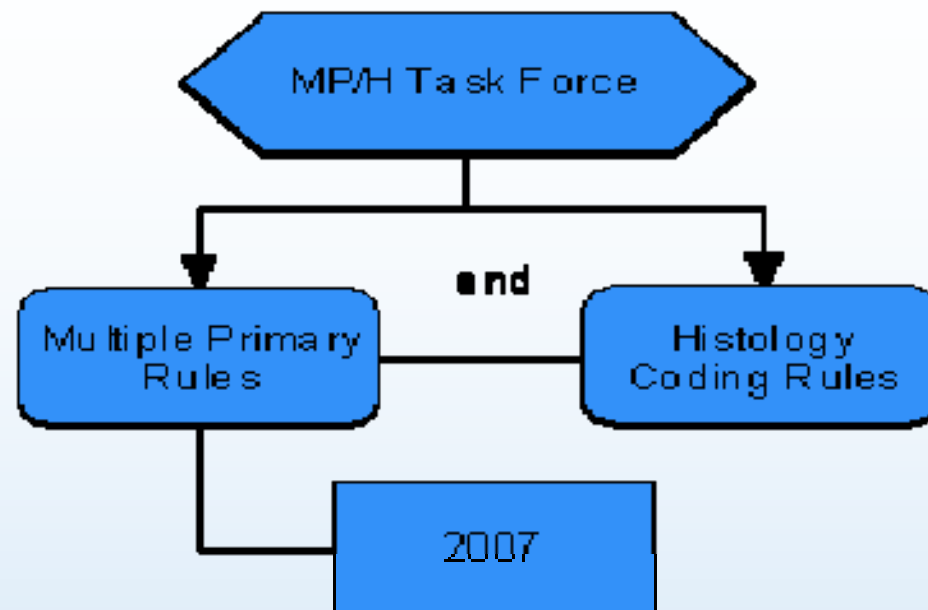
MP/H Coding Rules General Instructions

MP/H Instructions

- Apply to all rules unless otherwise noted
- Equivalent Terms
- Definitions
- General information

MP/H Instructions

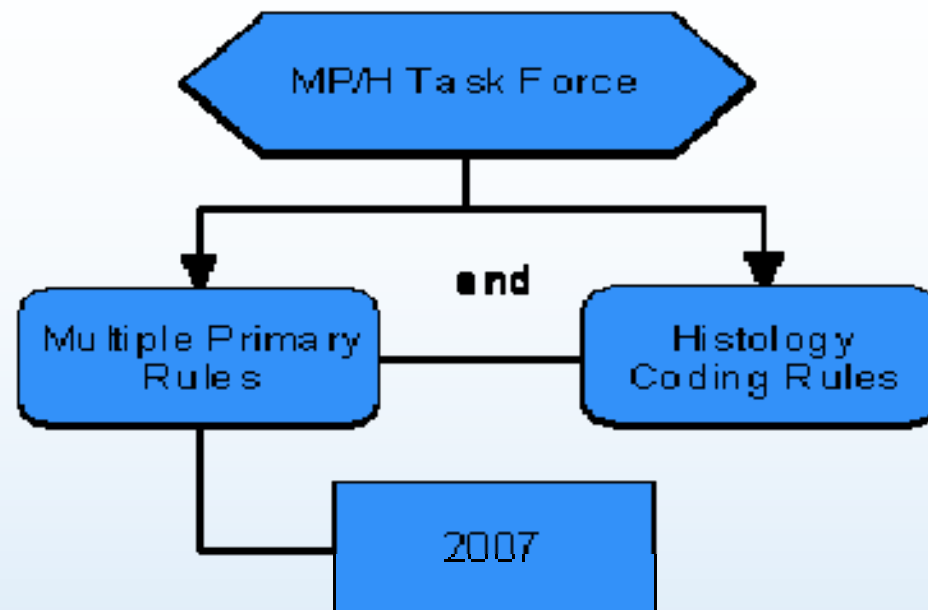
- How to use the rules
- Priority order for use of documents
- Ambiguous terms for coding histology



Equivalent or Equal Terms

Equivalent or Equal Terms

- Multicentric, multifocal
- Tumor, mass, lesion, neoplasm



Definitions

Definitions

- **Focal:** An adjective meaning limited to one specific area. A focal cancer is limited to one specific area or organ. The area may be microscopic or macroscopic.
- **Foci:** Plural of focus.

Definitions

- **Focus:** A term used by pathologists to describe a group of cells that can be seen only by a microscope. The cells are noticeably different from the surrounding tissue either by their appearance, chemical stain, or other testing.

Definitions

- **Most representative specimen:** The pathologic specimen from the surgical procedure that removed the most **tumor** tissue.

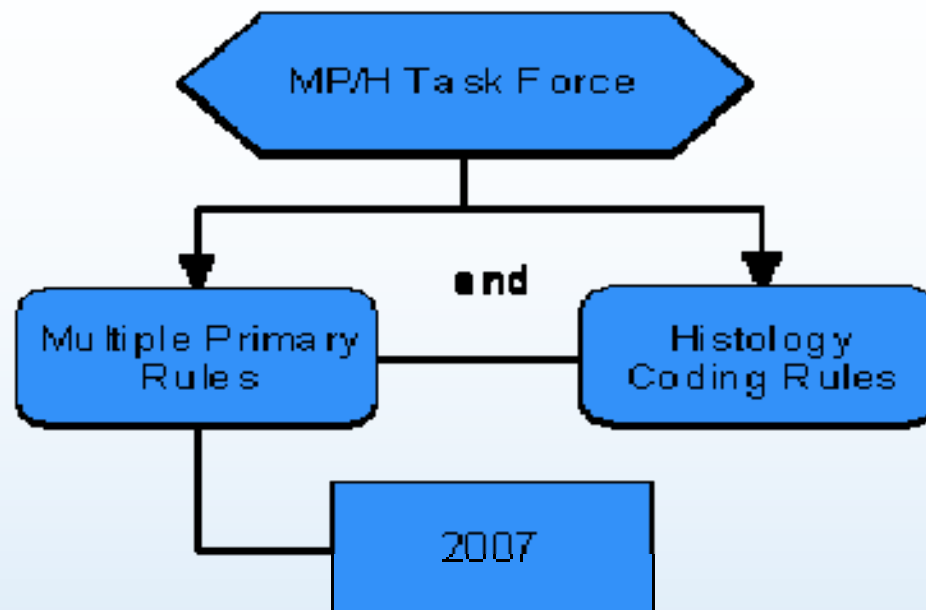
Definitions

Recurrence has two meanings:

1. The reappearance of disease that was thought to be cured or inactive (in remission). Recurrent cancer starts from cancer cells that were not removed or destroyed by the original therapy.

Definitions

2. A new occurrence of cancer arising from cells that have nothing to do with the earlier (first) cancer. A new or another occurrence, incidence, episode, or report of the same disease (cancer) in a general sense – a new occurrence of cancer.



Determining Multiple Primaries

General Information

- Use these rules to determine the number of reportable primaries
- Do not use rules to determine if a case is reportable, to stage or to assign grade
- 2007 rules replace all previous rules

General Information

- Three formats: flowchart, text, and matrix. The **rules are identical**, only the formats differ.
- Notes and examples highlight key points or add clarity to rules

General Information

- **Do not use** a physician's statement to decide whether the patient has a recurrence of a previous cancer or a new primary.
- Reportable solid malignant tumors only

Lymphoma and Leukemia

- Use the Determining Multiple Primaries: Hematopoietic Primaries (Lymphoma and Leukemia) rules
- Use the table “Definitions of Single and Subsequent Primaries for Hematologic Malignancies”

How to Use the MP Rules

- Use the **site-specific rules** for:
 - Brain, malignant (intracranial and CNS)
 - Breast
 - Colon
 - Head and neck

How to Use the MP Rules

- Use the **site-specific rules** for:
 - Kidney
 - Lung
 - Malignant melanoma of the skin
 - Renal pelvis, ureter, bladder, and other urinary

How to Use the MP Rules

- Use the **Other Sites rules** for solid malignant tumors that occur in primary sites not covered by the site-specific rules.

How to Use the MP Rules

- Each module is an independent, complete set of coding rules.
- Use the primary site documented by the physician on the medical record
- Do not count metastatic lesions

How to Use the MP Rules

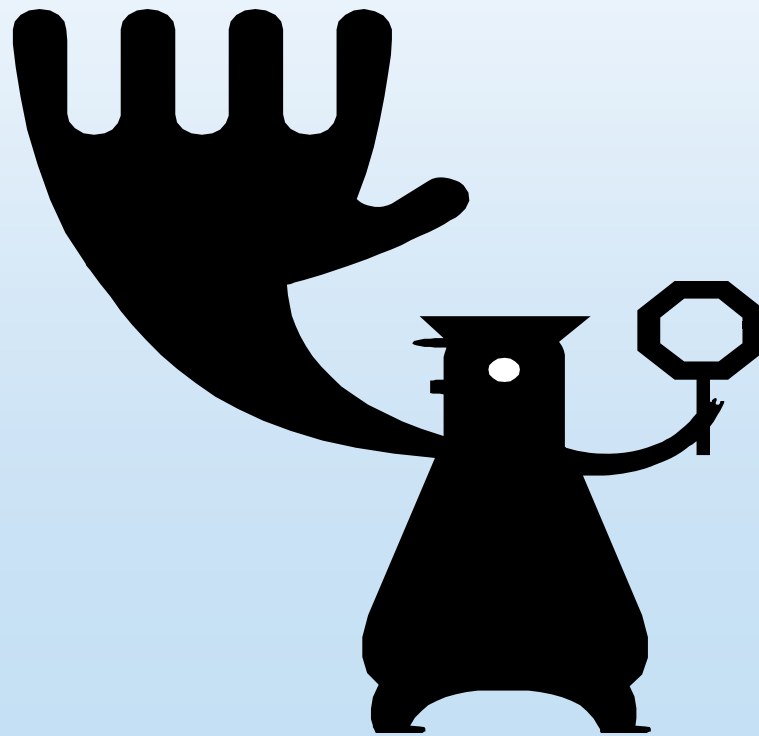
- Multicentric or multifocal, if the number of tumors is unknown, use the “Unknown if Single or Multiple Tumors” module
- Single tumor, use the “Single Tumor” module.
- Multiple tumors, use the “Multiple Tumor” module.

How to Use the MP Rules

- Separate microscopic foci, ignore the separate microscopic foci and use the “SingleTumor” or “Multiple Tumor” modules as appropriate

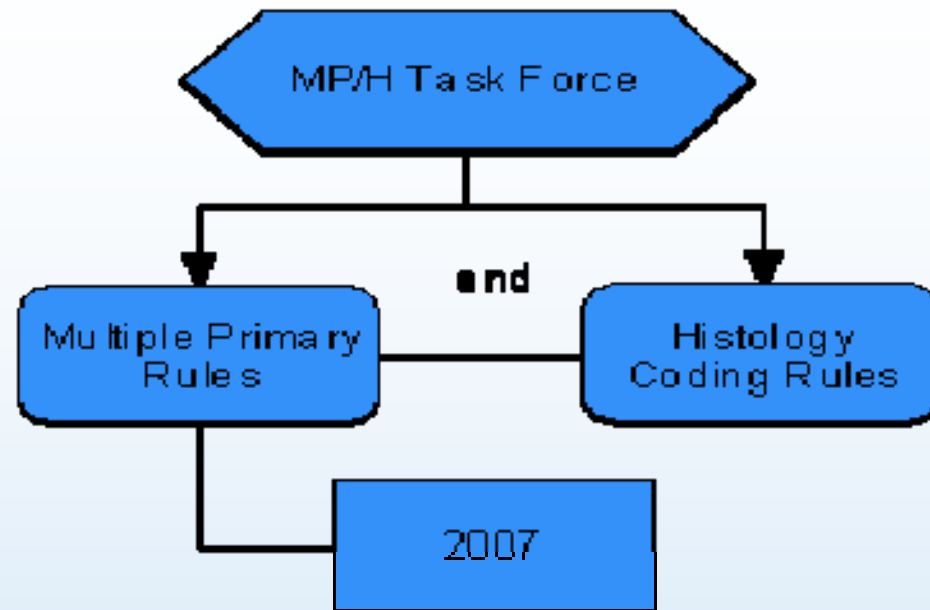
How to Use the MP Rules

- Rules are in hierarchical order
- Use the first rule that applies and **STOP**



How to Use the MP Rules

- Single primary, prepare one abstract
- Multiple primaries, prepare two or more abstracts



Histologic Type ICD-O-3

General Information

- Histology describes the microscopic composition of cells and/or tissue for a specific primary.
 - Basis for staging
 - Basis for determining treatment options
 - Prognosis and disease course

General Information

- *International Classification of Diseases for Oncology, Third Edition (ICD-O-3)* is the standard reference for histology codes

How to Use the Histology Rules

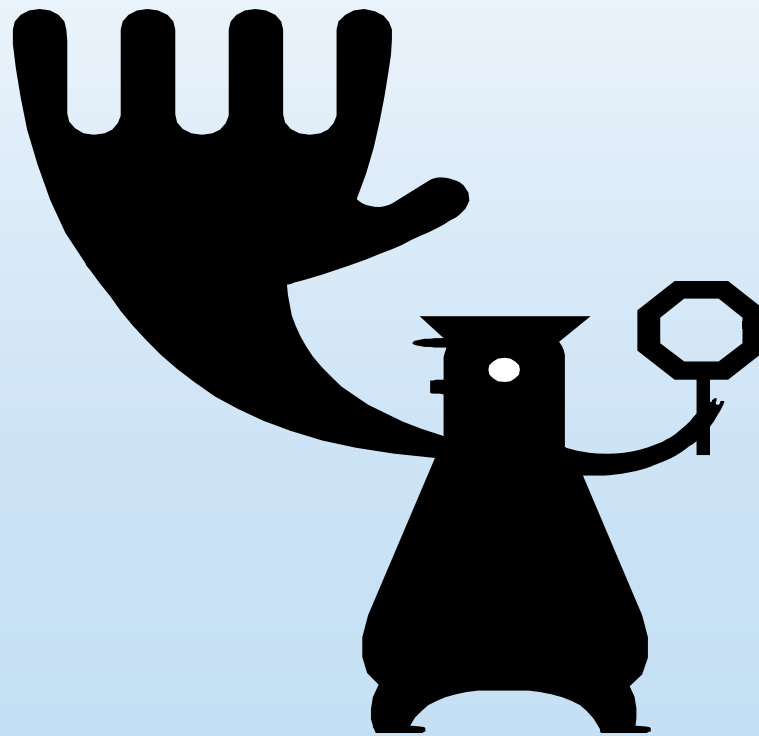
- Use the format easiest for you to follow
- Notes and examples highlight key points or add clarity
- Rules are in hierarchical order within each section

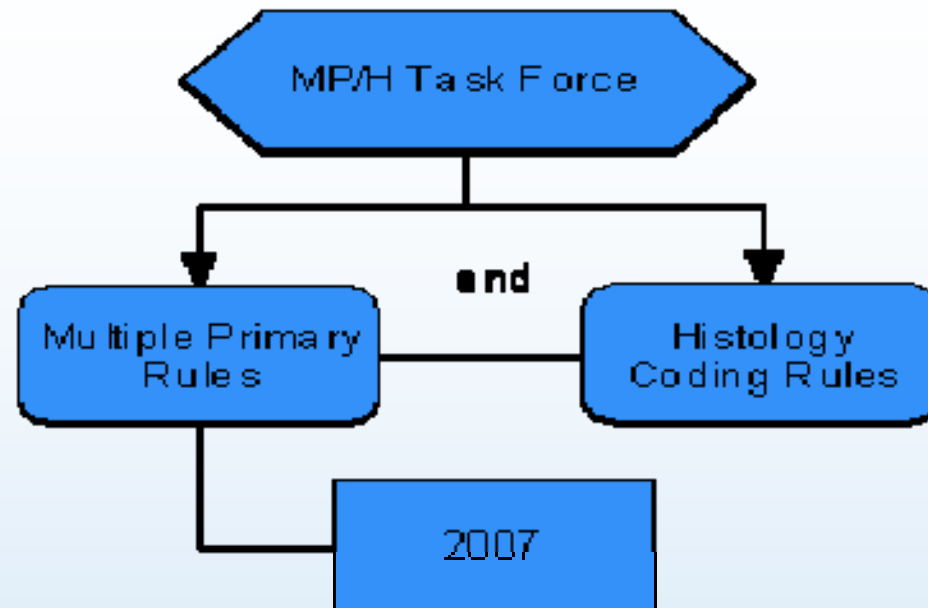
How to Use the Histology Rules

- Read General Instructions.
- Read Equivalent Terms and Definitions.
- Follow the rules to make a decision on coding the histology

How to Use the Histology Rules

- Rules are in hierarchical order
- Use the first rule that applies and **STOP**





Priority Order for Documents

Priority Order for Using Documents

1. Pathology report:

- a. From **most representative** specimen
- b. From **final diagnosis**

Note 1: Use information from **addenda** and **comments** associated with the final diagnosis

Note 2: A **revised/amended diagnosis** replaces the original final diagnosis.

Priority Order for Using Documents

1. Pathology report (continued)

Note 3: New rules **limit** information **to the final diagnosis**.

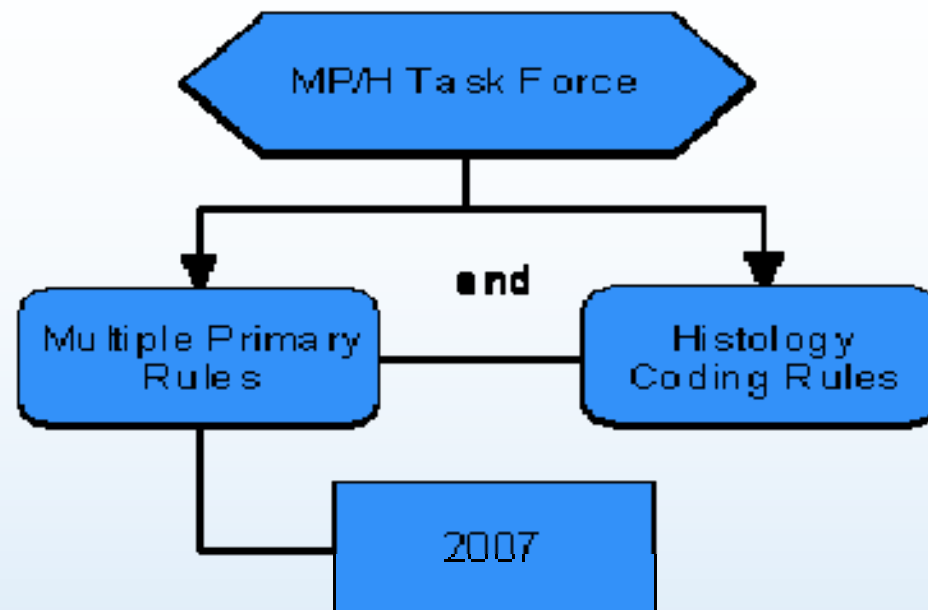
Only use information from the **microscopic** portion of the pathology report **when instructed** to do so in the site-specific rules.

Priority Order for Using Documents

2. Cytology report

3. No pathology or cytology report:

- a. References to pathology or cytology findings
- b. Other mention of type of cancer (histology) in the medical record



Ambiguous Terms for Histology

Ambiguous Terms Used to Code Histology

- Apparent(ly)
- Appears
- Comparable with
- Compatible with
- Consistent with
- Favor(s)

Ambiguous Terms Used to Code Histology

- Most likely
- Presumed
- Probable
- Suspect(ed)
- Suspicious (for)
- Typical (of)

MP/H Task Force



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