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This month's focus is on understanding the ICD-10-CM draft guidelines for neoplasm coding.

### Guideline 2.1 Neoplasm Table

ICD-10-CM Chapter 2 contains codes for most benign and malignant neoplasms.

To properly code neoplasms, the documentation in the medical record must indicate the neoplasm is benign, in situ, malignant, or of uncertain histologic behavior. If there is a malignancy, the secondary (metastatic) site should also be reported as it is currently the rule under ICD-9-CM guidelines.

As in ICD-9-CM there is a separate "Table of Neoplasms." The codes should be selected from the table. The guidelines in ICD-10-CM state: "If the histology (cell type) of the neoplasm is documented, that term should be referenced first, in the main section of the Index to Diseases, rather than going immediately to the Neoplasm Table, in order to determine which column in the Neoplasm Table is appropriate."

Example:

A physician diagnoses a 54-year-old female patient with adenocarcinoma of the right breast, lower outer quadrant of the left side. The physician's documentation indicates it as the primary site. The Index to Diseases should be reviewed prior to referencing the Neoplasm Table.

The first step is to reference the Index to Diseases.

Adenocarcinoma (M8140/3)—see also Neoplasm, malignant

The Index to Diseases identifies adenocarcinoma as a malignancy reported by site. The coder will reference the Neoplasm Table for selection of the correct code.

Chapter 2 (Neoplasms) will be coded from the Neoplasm Table and begin with the character C and D. Review an excerpt of the May 2002 draft Neoplasm Table.

Excerpt of Neoplasm Table ICD-10-CM Draft

	Malignant Primary	Malignant Secondary	Malignant Ca in situ	Benign	Uncertain Behavior	Unspecified
Breast central portion (unspecified side)	C50.10	C79.81	D05.90	D24.00	D48.60	D49.3
left side	C50.12	C79.81	D05.92	D24.02	D48.62	D49.3
right side	C50.11	C79.81	D05.91	D24.01	D48.61	D49.3
ectopic sites (unspecified side)	C50.80	C79.81	D05.90	D24.00	D48.60	D49.3
left side	C50.82	C79.81	D05.92	D24.02	D48.62	D49.3
right side	C50.81	C79.81	D05.91	D24.01	D48.61	D49.3
inner (unspecified side)	C50.80	C79.81	D05.90	D24.00	D48.60	D49.3

left side	C50.82	C79.81	D05.92	D24.02	D48.62	D49.3
right side	C50.81	C79.81	D05.91	D24.01	D48.61	D49.3
lower (unspecified side)	C50.80	C79.81	D05.90	D24.00	D48.60	D49.3
left side	C50.82	C79.81	D05.92	D24.02	D48.62	D49.3
right side	C50.81	C79.81	D05.91	D24.01	D48.61	D49.3
lower-inner quadrant (unspecified side)	C50.30	C79.81	D05.90	D24.00	D48.60	D49.3
left side	C50.32	C79.81	D05.92	D24.02	D48.62	D49.3
right side	C50.31	C79.81	D05.91	D24.01	D48.61	D49.3
lower-outer quadrant (unspecified side)	C50.50	C79.81	D05.90	D24.00	D48.60	D49.3
left side	C50.52	C79.81	D05.92	D24.02	D48.62	D49.3
right side	C50.51	C79.81	D05.91	D24.01	D48.61	D49.3

The correct diagnosis code for this example is C50.52, Adenocarcinoma of the left side, lower outer quadrant, malignant, primary site, which is found in the first column.

The Neoplasm Table provides proper coding based on the histology of the neoplasm by site. The Tabular List should be referenced to verify that the correct code has been selected and a more specific code does not exist.

Review the Tabular List Example:

- C50.50** Malignant neoplasm of lower-outer quadrant of female breast, unspecified side
- C50.51** Malignant neoplasm of lower-outer quadrant of right female breast
- C50.52** Malignant neoplasm of lower-outer quadrant of left female breast

### Guideline 2.2 Use of Pathology Report

The guidelines for ICD-10-CM indicate that a confirmed malignancy diagnosis is not reported without a pathology report on the record to confirm the histologic type of neoplasm. If the pathology report is not in the medical record, the attending physician must confirm the diagnosis in the medical record documentation. The pathology report is not required for encounters such as chemotherapy or radiation therapy.

### Guideline 2.3 Morphology Codes

The type of histologic tumor is identified with a morphology code. The Neoplasm Table only distinguishes between malignant, benign, in situ, and uncertain behavior. The morphology code should be included in the medical record, when possible. The morphology code can be referenced in the Index to Diseases under the

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term for the histology of the neoplasm. This is especially important when coding for the cancer registry.

### Guidelines 2.4 Neoplasms of Uncertain Behavior vs Unspecified Behavior

A neoplasm of unspecified behavior is coded in category D49 and is only used when documentation does not exist in the medical record to indicate the nature of the neoplasm. If a histologic examination of the specimen was performed, the unspecified behavior code should not be used.

#### Example

D49 Neoplasms of unspecified behavior

Note: Category D49 classifies by site neoplasms of unspecified morphology and behavior. The term “mass,” unless otherwise stated, is not to be regarded as a neoplastic growth.

Includes: "growth" NOS neoplasm NOS new growth NOS tumor NOS Excludes1: neoplasms of uncertain behavior (D37–D48)

D49.3 Neoplasm of unspecified behavior of breast

Excludes1: neoplasm of unspecified behavior of skin of breast (D49.2)

Code Categories D37–D48 include neoplasms of uncertain behavior, which is after histologic examination and the pathologist is unable to classify the specimen as benign or malignant or the cell type cannot be determined.

#### Example

Neoplasms of uncertain behavior (D37–D48)

Note: Categories D37–D48 classify by site neoplasms of uncertain behavior (eg, histologic confirmation whether the neoplasm is malignant or benign cannot be made). Such neoplasms are assigned behavior code /1 in the classification of the morphology of neoplasms.

Excludes1: neoplasms of unspecified behavior

D48.6 Neoplasm of uncertain behavior of breast

Neoplasm of uncertain behavior of connective tissue of breast, cystosarcoma phyllodes

Excludes1: neoplasm of uncertain behavior of skin of breast (D48.5)

D48.60 Neoplasm of uncertain behavior of female breast, unspecified side

D48.61 Neoplasm of uncertain behavior of right female breast

D48.62 Neoplasm of uncertain behavior of left female breast

D48.63 Neoplasm of uncertain behavior of right male breast

D48.64 Neoplasm of uncertain behavior of left male breast

D48.65 Neoplasm of uncertain behavior of male breast, unspecified side

#### Oncology Example


The patient underwent a left partial mastectomy for adenocarcinoma in the upper outer quadrant. Pathology report revealed three of five axillary lymph nodes positive for metastasis. The surgical incisions healed nicely and chemotherapy was begun; she is currently in week three, see chemo flow chart. She returned to the

clinic today for recheck of blood counts in preparation for the next round of chemo scheduled for tomorrow. Patient notes increasing fatigue and hair loss. She has some nausea, but no vomiting today. The patient is tolerating chemo fairly well. White blood count is low. Stage 2 adenocarcinoma. Agranulocytosis secondary to chemo. Neupogen given. Delay chemo until at least Friday, pending recheck WBC.

ICD-9-CM	ICD-10-CM
174.4 Malignant neoplasm of female breast, upper-outer quadrant	C50.42 Malignant neoplasm of upper-outer quadrant of left female breast
196.3 Secondary and unspecified malignant neoplasm of lymph nodes of axilla and upper limb	C77.3 Secondary and unspecified malignant neoplasm of axilla and upper limb lymph nodes
288.0 Agranulocytosis	T45.1x5a Adverse effect of antineoplastic and immunosuppressive drug, initial encounter
E933.1 Adverse effects in therapeutic use, primarily systemic agents, antineoplastic and immunosuppressive drug	D70.1 Agranulocytosis secondary to cancer chemotherapy

It is expected ICD-10-CM will be implemented in 2010. It is now time to begin your preparations toward this transition.

#### Where to begin

1. Begin by obtaining the draft ICD-10-CM guidelines from the National Center for Health Statistics: (<http://www.cdc.gov/nchs/about/otheract/icd9/icd10/cm.html>).
2. Create a crosswalk from ICD-9-CM to the ICD-10-CM codes most commonly used in your office.
3. Educate your providers on the specificity of the new codes and review documentation to make sure.
4. Continue to review the ICD-10-CM Draft Guidelines.
5. Review encounter forms, superbills, and/or charge tickets for revision.
6. Contact software vendors to make sure your vendor can accommodate your needs.
7. If training is provided internally, designate a person to provide the training.
8. If a person is not available to provide training, contact a training consultant or your local medical society for help with ICD-10-CM training.
9. Read articles, newsletters, and professional journals.
10. Monitor the Internet and the *Federal Register* to receive updated information.
11. Keep everyone updated on the pending changes, delay, final implementation
12. Anticipate problems prior to implementation.
13. Remember, it is not too early to begin preparations. 

#### WEB SITES RELATED TO ICD-10-CM

- National Center for Vital and Health Statistics  
<http://www.cdc.gov/nchs/about/otheract/icd9/abctcd10.htm>
- World Health Organization (WHO)  
<http://www.who.int/aboutwho/en/mission.html>
- Centers for Medicare and Medicaid  
<http://www.cms.hhs.gov/>
- Hospital Connect  
<http://www.hospitalconnect.com/DesktopServlet>
- Health and Human Services  
<http://www.hhs.gov/agencies/>