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ICD-O-3.2 Coding Guidelines

5th Ed Release since 2021:

- WHO Classification of Tumors of the Breast (2018)
- WHO Classification of Tumors of Digestive System (2018)
- WHO Classification of Tumors of the Female Reproductive Organs (2019)
- WHO Classification of Tumors of Soft Tissue and Bone (2019)

2022 ICD-O-3.2 update

- 12 new ICD-0 codes/terms
 - Two not reportable
 - Three have changed behavior
 - Two of these remain not-reportable
 - One becoming reportable
- 42 new preferred or related terms
- Use jointly with:
 - ICD-O-3.2
 - · Heme Lymph Database
 - Solid Tumor Rules



ICD-O-3.2

- Refer to appropriate program manual on reportable neoplasms [For lowa, SEER Program Coding and Staging Manual 2022]
 https://seer.cancer.gov/manuals/2022/SPCSM 2022 MainDoc.pdf
- Registry reportability rules based on behavior code still apply
- Exception of Primary CNS benign and borderline tumors, the addition of /0 or /1 does not imply these are now reportable
- Some /2 behaviors may not be reportable or are reportable based on a selected site or sites.



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Important Reminders**

- Check 2022 ICD-O-3 Update Table 1 or 2 to determine if histology is listed.
 - If histology not included in update, then review ICD-O-3.2 and/or Heme and Lymph Database and/or Solid Tumor Rules
- ICD-O-3.2 includes changes from all 4th Ed WHO Classification of Tumors books.
- ullet New editions released following publication of $4^{ ext{th}}$ Ed are not included in 3.2
- A new version of excel 3.2 will be released once all 5^{th} Ed Books have been published.



Remaining issues

GASTROINTESTINAL HIGH GRADE DYSPLASIA: UNDERSTANDING REPORTABILITY

- Most of the problematic terms include the words "high grade neoplasia" or "high grade dysplasia" or "severe dysplasia" in digestive system sites, primarily colorectal.
- It is important to note, the 2022 ICD-O update tables includes only three specific high grade dysplasia terms which are reportable for specific sites (stomach and small intestines) beginning 1/1/2022.



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For stomach and small intestines ONLY

8210/2	Adenomatous polyp, high grade dysplasia (C160 – C166, C168-C169, C170-C173, C178- C179)	Y See remarks	Y See remarks	N	Y See Remarks*	Term is reportable for stomach and small intestines ONLY beginning 1/1/2022 *CCCR required High Grade Dysplasia 2010+ for all GI sites; stopped for C18, C19, and C20 in 2018
8144/2	Intestinal-type adenoma, high grade (C160-C166, C168-C169, C170-C173, C178, C179)	Y See remarks	Y See remarks	Y See remarks	Y See Remarks*	Term is reportable for stomach and small intestines ONLY beginning 1/1/2022 *CCCR required High Grade Dysplasia 2010+ for all GI sites; stopped for C18, C19, and C20 in 2018
8213/2	Serrated dysplasia, high grade (C160 – C166, C168-C169, C170-C173, C178-C179)	Y See remarks	Y See remarks	Y See remarks	Y See Remarks*	Term is reportable for stomach and small intestines ONLY beginning 1/1/2022 *CCCR required High Grade Dysplasia 2010+ for all GI sites; stopped for C18, C19, and C20 in 2018



Updated Tables

- Table 1 Numeric (6 pages)
 - Codes listed numerically
 - Only NEW associated terms to existing codes are included
 - Update based on 5th Ed Breast, Digestive System, Female Genital, Soft Tissue & Bone
- Table 2 Alpha (6 pages)
 - Only NEW associated terms to existing codes are included
 - Updated based on 5th Ed Breast, Digestive System, Female Genital, and Soft Tissue & Bone
- Each have 7 columns
 - · Required columns by standard setters is new
 - Required SEER (Y/N): indicates if the histology is reportable or non-reportable to SEER
 - Required CoC (Y/N): indicates if the histology is reportable or non-reportable to CoC



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Table 1: 2022 ICD-O-3.2 Update (Numerical)

- · Codes/terms listed numerically
- Only new associated terminology to existing ICD-O-3.2 codes are included in the 2022 ICD-O Implementation guidelines and documentation. Terms are those listed in the blue books.
- Update based on the following 5th Ed classification of Tumors books: Breast, Digestive System, Female Genital, and Soft Tissue & Bone

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ICD-O	Term	Required	Required	Required	Required	Remarks
Code		SEER	NPCR	CoC	CCCR	
8033/3	Carcinoma with sarcomatoid component	Υ	Υ	Υ	Υ	New related term
8044/3	Small cell carcinoma, large cell variant (C56.9)	Υ	Υ	Υ	Υ	New related term: ovary only
8085/3	Squamous cell carcinoma, HPV-associated	Υ	Υ	Υ	Υ	New term for uterine cervix, vagina, vulva valid 1/1/2022
8086/3	Squamous cell carcinoma, HPV-independent	Υ	Υ	Υ	Υ	New term for uterine cervix, vagina, vulva valid 1/1/2022
8144/2	Intestinal-type adenoma, high grade (C160 – C166, C168- C169, C170-C173, C178-C179)	Y See remarks	Y See remarks	Y See remarks	Y See Remarks*	Term is reportable for stomach and small intestines ONLY beginning 1/1/2022 *CCCR required High Grade Dysplasia 2010+ for all GI sites; stopped for C18, C19, and C20 in 2018
8150/3	Oncocytic neuroendocrine tumor, non-functioning pancreatic	Υ	Υ	Υ	Y	New related term
8150/3	Pleomorphic neuroendocrine tumor, non-functioning pancreatic	Υ	Υ	Υ	Y	New related term



ICD-O-3.2 Update Effective January 1, 2022 Updated 9/21/2021

Table 2: 2022 ICD-O-3.2 Update (Alpha)

- Codes/terms listed alphabetically
- Only new associated terminology to existing ICD-O-3.2 codes are included in the 2022 ICD-O Implementation guidelines and documentation. Terms are those listed in the blue books.

 Update based on the following 5th Ed classification of Tumors books: Breast, Digestive System, Female Genital, and Soft Tissue & Bone

ICD-O	Term	Required	Required	Required	Required	Remarks
Code		SEER	NPCR	CoC	CCCR	
8483/2	Adenocarcinoma in situ, HPV-	N	N	N	N	New ICD-O code/term
	associated (C530-C531, C538-					Not reportable
	C539)					
8484/2	Adenocarcinoma in situ, HPV-	N	N	N	N	New ICD-O code/term
	independent, NOS C530-					Not reportable
	C531, C538-C539)					
8483/3	Adenocarcinoma, HPV-	Υ	Υ	Υ	Υ	New ICD-O code/term
	associated C530-C531, C538-					
	C539)					



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12 new ICD-O codes and terms

New ICD-O Code	Term	Reportable
8483/2	Adenocarcinoma in situ, HPV-associated (C530-C531, C538-C539)	N
8482/2	Adenocarcinoma in situ, HPV-independent, NOS (C530-C531, C538-C539)	N
8483/3	Adenocarcinoma, HPV-associated C530-C531, C538-C539)	Y
8484/3	Adenocarcinoma, HPV-independent, NOS C530-C531, C538-C539)	Υ
9367/3	CIC-rearranged sarcoma	Y
8976/3	Gastroblastoma (C16.0 – C16.9)	Υ
8455/3	Intraductal oncocytic papillary neoplasm with associated invasive carcinoma(C250-C254, C257-C259)	Y
8455/2	Intraductal oncocytic papillary neoplasm, NOS (C250-C254, C257-C259)	Υ
9111/3	Mesonephric-like adenocarcinoma	Y
8859/3	Myxoid pleomorphic liposarcoma	Υ
9366/3	Round cell sarcoma with EWSR1-non-ETS fusions	Y
9368/3	Sarcoma with BCOR genetic alterations	Υ

3 behavior changes

New ICD-O Code	Term	Reportable	Comment
9222/3	Chondrosarcoma, grade 1	Y	Behavior change. Reportable 1/1/2022 forward
8480/2	High grade appendiceal mucinous neoplasm (HAMN) (C181)	Y	New behavior/term
9261/1	Osteofibrous dysplasia-like adamantinoma	N	New behavior code/term. Non-reportable



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Other changes

New ICD-O Code	Term	Reportable	Comment
8210/2	Adenomatous polyp, high grade dysplasia (C160 – C166, C168-C169, C170-C173, C178- C179)	Y	Term is reportable for stomach and small intestines ONLY beginning 1/1/2022
8144/2	Intestinal-type adenoma, high grade (C160-C166, C168-C169, C170-C173, C178, C179)	Y	Term is reportable for stomach and small intestines ONLY beginning 1/1/2022
8213/2	Serrated dysplasia, high grade (C160 – C166, C168-C169, C170-C173, C178-C179)	Y	Term is reportable for stomach and small intestines ONLY beginning 1/1/2022
8480/2	Low grade appendiceal mucinous neoplasm (LAMN) (C181)	Y	ICD-O-3.2 currently lists LAMN as 8480/1. Beginning with cases diagnosed 1/1/2022 forward, LAMN should be assigned a behavior code of /2. LAMN diagnosed prior to 1/1/2022 is not reportable.

LAMN Low grade appendiceal mucinous neoplasm

8480	1	TRUE	Low grade appendiceal mucinous neoplasm (LAMN) (C18.1) [2018-2021 NOT REPORTABLE; 2022+ USE 8480/2 PER STANDARD SETTERS SINCE TERM AND CORRESPONDING CODE NOT INCLUDED IN ICD-O-3.2; SEE STANDARD SETTER REQUIREMENTS FOR REPORTABILITY]
8480	1		Mucinous neoplasm, appendiceal, low-grade (C18.1) [2018-2021 NOT REPORTABLE; 2022+ USE 8480/2 PER STANDARD SETTERS SINCE TERM AND CORRESPONDING CODE NOT INCLUDED IN ICD-O-3.2; SEE STANDARD SETTER REQUIREMENTS FOR REPORTABILITY]
8480	1	FALSE	Neoplasm, appendiceal mucinous, low-grade (LAMN) (C18.1) [2018-2021 NOT REPORTABLE; 2022+ USE 8480/2 PER STANDARD SETTERS SINCE TERM AND CORRESPONDING CODE NOT INCLUDED IN ICD-O-3.2; SEE STANDARD SETTER REQUIREMENTS FOR REPORTABILITY]

SEER Manual, pg 6: Item 1.a.ii: Low-grade appendiceal mucinous neoplasm (LAMN) is reportable.

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LAMN & HAMN Low or High grade appendiceal mucinous neoplasm

8480	2	TRUE	High grade appendiceal mucinous neoplasm (HAMN) (C181) [2022+]
8480	2	FALSE	HAMN High grade appendiceal mucinous neoplasm (C181) [2022+]
8480	2	FALSE	Low grade appendiceal mucinous neoplasm (LAMN) (C18.1) [FOR 2018-2021, SEE 8480/1; 2022+ PER STANDARD SETTERS SINCE TERM AND CORRESPONDING CODE NOT INCLUDED IN ICD-O-3.2; SEE STANDARD SETTER REQUIREMENTS FOR REPORTABILITY]
8480	2	FALSE	Mucinous neoplasm, appendiceal, low-grade (C18.1) [FOR 2018-2021, SEE 8480/1; 2022+ PER STANDARD SETTERS SINCE TERM AND CORRESPONDING CODE NOT INCLUDED IN ICD-O-3.2; SEE STANDARD SETTER REQUIREMENTS FOR REPORTABILITY]
8480	2	FALSE	Neoplasm, appendiceal mucinous, high grade (HAMN) (C18.1) [2022+]
8480	2	FALSE	Neoplasm, appendiceal mucinous, low grade (LAMN) (C18.1) [FOR 2018-2021, SEE 8480/1; 2022+ PER STANDARD SETTERS SINCE TERM AND CORRESPONDING CODE NOT INCLUDED IN ICD-O-3.2; SEE STANDARD SETTER REQUIREMENTS FOR REPORTABILITY]

STR Manual: Colon Table 1: HAMN or LAMN high grade or low grade. Listed under the subtype/variant column for adenocarcinoma nos. ***See Note 3: Effective 1/1/2022, LAMN becomes reportable and is coded 8480/2, unless the pathologist indicates invasive behavior, which is coded 8480/3. HAMN can be either /2 or /3 depending on the pathologist statement of behavior.



8044/3	Small cell carcinoma, large cell variant (C56.9)	Y	Y	Y	Y	New related term: ovary only
8200/3	Solid-basaloid adenoid cystic carcinoma	Y	Y	Υ	Y	New related term
9687/3	Sporadic Burkitt lymphoma	Υ	Υ	Υ	Υ	New related term
8085/3	Squamous cell carcinoma, HPV-associated	Υ	Y	Y	Y	New term for uterine cervix, vagina, and vulva beginning 1/1/2022
8086/3	Squamous cell carcinoma, HPV-independent	Υ	Y	Υ	Y	New term for uterine cervix, vagina, and vulva beginning 1/1/2022
8509/3	Tall cell carcinoma with reversed polarity	Y	Y	Y	Y	New preferred term
8211/2	Tubular adenoma, high grade	N	N	N	Y See Remarks*	Term is NOT reportable *CCCR required High Grade Dysplasia 2010+ for all GI sites; stopped for C18, C19, and C20 in 2018
8263/2	Tubulovillous adenoma, high grade	N	N	N	Y See Remarks*	Term is NOT reportable *CCCR required High Grade Dysplasia 2010+ for all GI sites; stopped for C18, C19, and C20 in 2018
8590/1	Uterine tumor resembling ovarian sex cord tumor	N	N	N	N	Existing code with new behavior-not Reportable
8261/2	Villous adenoma, high grade	N	N	N	Y See remarks*	Term is NOT reportable *CCCR required High Grade Dysplasia 2010+ for all GI sites; stopped for C18, C19, and C20 in 2018

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Excel Coding Table 3.2

- Use as a reference
- \bullet Searchable {ctrl-F} by code or term
- No pdf at this time
- Not color-coded or alphabetical option
- Use this WITH Table 1 or 2 for 2022dx changes



Annotated Histology List

Updated 7/29/2021

- Excel File is searchable, sorted by histology codes
- Comprehensive: Includes changes over time for vendors
- Annotated: Descriptions and preferred terms
- Red text: v22 changes from the 2021 version
 - Entire row in red: New terms added to the table or new code assigned to existing term
 - Bracketed red text only indicates terms previously included; however reportability/behavior has changed indicated by year
- Green Text: Previously approved and now added
- Blue Text: Changes c/w SEER Heme database



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8144	2	TRUES	ntestinal-type adenoma, high grade (C16, C17) [REPORTABLE 2022+ FOR STOMACH AND SMALL INTESTINE ONLY; SEE STANDARD SETTER REQUIREMENTS FOR REPORTABILITY.]	
8144	2	FALSES	Adenoma, intestinal-type, high grade (C16, C17) [REPORTABLE 2022+ FOR STOMACH AND SMALL INTESTINE ONLY; SEE STANDARD SETTER REQUIREMENTS FOR REPORTABILITY.]	
8144	2	FALSE	High grade intestinal-type adenoma (C16, C17) [REPORTABLE 2022+ FOR STOMACH AND SMALL INTESTINE ONLY; SEE STANDARD SETTER REQUIREMENTS FOR REPORTABILITY.]	
8100	3	TRUE	Trichoblastic carcinoma (C44) [2022+]	Annotated Histology List as of
8100	3	FALSE	Carcinoma, trichoblastic (C44) [2022+]	7/29/2021
8100	3	FALSE	Carcinosarcoma, trichoblastic (C44) [2022+]	
8100	3	FALSE	Trichoblastic carcinosarcoma (C44) [2022+]	https://www.naaccr.org/icdo
9766	1	FALSE	Lymphomatoid papulosis (C44) [FOR 2021+ NOT REPORTABLE; USE CODE 9718/1 FOR 2010-2020; USE CODE 9718/3 FOR PRE-2010. SEE HEMATOPOIETIC DATABASE FOR REPORTING]	
9766	1	FALSE I	Papulosis, lymphomatoid (C44) [FOR 2021+ NOT REPORTABLE; USE CODE 9718/1 FOR 2010-2020; USE CODE 9718/3 FOR PRE-2010. SEE HEMATOPOIETIC DATABASE FOR REPORTING]	
9766	3		Lymphomatoid granulomatosis, grade 3 [2021+; FOR PRE-2021 USE CODE 9680/3; SEE HEMATOPOIETIC DATABASE FOR REPORTING]	
9766	3	3	Granulomatosis, lymphomatoid, grade 3 [2021+; FOR PRE-2021 USE CODE 9680/3; SEE HEMATOPOIETIC DATABASE FOR REPORTING]	
9766	3		Lymphomatoid Papulosis, Grade 3 [2021+; FOR PRE 2021 USE CODE 9680/3; SEE HEMATOPOIETIC DATABASE FOR REPORTING]	
9766	3	FALSE	Papulosis Lymphomatoid, Grade 3 [2021+; FOR PRE 2021 USE CODE 9680/3; SEE HEMATOPOIETIC DATABASE FOR REPORTING]	



Where to start

Steps for assigning histology for solid tumors:

- 1. Solid Tumor Rules (H) Rules
- Start Here!
- H Rules/Tables may not include all of the synonyms (or no chapter for primary site)
- 'Other sites' section does not have histology tables; but still start here. For Heme-Lymph go to database.
- 2. ICDO 3.2 plus Tables

Nex

3. Search SINQ; Ask a SEER Registrar

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Questions?

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