

Urinary Sites Abstracting 101 2025 Training

Solid Tumor Rules (STR)



Presented by Melissa Riddle, ODS-C
ICR Video Training Series: Iowa Cancer Registry
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2026 Solid Tumor Rules

- Download the 2026 STR manual
- 2026 STR Manual: <https://seer.cancer.gov/tools/solidtumor/>

2026 update (view [revision history](#))

Reporting Guidelines	
Casefinding Lists	
SEER Coding and Staging Manual	+
Hematopoietic Project	+
ICD-O-3 Coding Materials	
Solid Tumor Rules	-
2026 Update Revisions	
Revision Archive	
Histology Coding Clarifications	

Download the Solid Tumor Rules 2026 Update (PDF, 8.7 MB) (December 12, 2025)

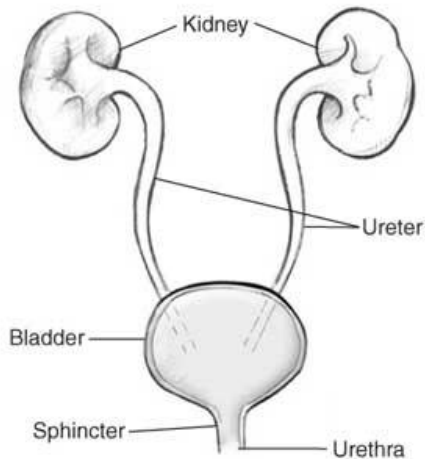
Purpose of Solid Tumor Rules

The purpose of the Solid Tumor Rules is to determine the number of primaries to abstract and the histology to code. **The most recent Solid Tumor Rules update should be used as soon as it is released** and can be applied to 2018+ cases (see General Instructions for start years for each Site-group). If a specific code or instruction has an effective year later than 2018, it will be noted in the text.

2026 Solid Tumor Rules Release Announcement

The Solid Tumor Rules have been updated for 2026. In addition to the standard annual updates, the Solid Tumor Manual underwent a substantial reformatting to improve clarity and usability.

Key updates include the following:



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Urinary Site-Group

- Renal Pelvis **C659**
- Ureter **C669**
- Bladder **C67_**
- Other Urinary Sites **C68_**

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Introduction

- Urothelial carcinoma originates in urothelial/transitional cells which line the urethra, bladder, ureters, and renal pelvis
 - Two major subdivisions:
 - **Papillary carcinoma**
 - Commonly seen in bladder, ureter or renal pelvis
 - Warty growth that projects from the wall on a stalk
 - **Non-papillary carcinoma**
 - Originates within the mucosa and doesn't project off the wall
 - Non-invasive carcinoma in situ (CIS) or Invasive urothelial carcinoma

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Multifocal/Multicentric Tumors

- Multifocality of urothelial carcinoma is common
 - This phenomenon of multiple tumors has been theorized as being a result of field effect
 - Genetic and epigenetic changes occur in the entire urothelial lining of the bladder not just in the area where the tumor is located
 - Flat/Urothelial carcinoma in situ can have widespread effect as a result of direct spread of neoplastic cells within the epithelium
 - The rules attempt to reconcile these observations in order to provide incidence data that are consistent and reproducible

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Coding Primary Site

1. Code overlapping lesion of urinary bladder **C678**
 - a) Single tumor overlaps subsites of the bladder
 - b) Single tumor or non-contiguous tumors which are:
 - Urothelial carcinoma in situ (8120/2) **AND**
 - Involves bladder and one or both ureters (no other sites involved)
2. Code bladder NOS **C679** when
 - Multiple non-contiguous tumors within bladder **AND** subsite/origin is unknown
3. Code overlapping lesion of urinary organs **C688** when
 - A single tumor overlaps 2 urinary sites, and origin is not known/unknown
 - Renal Pelvis and Ureter; Bladder and Urethra; Bladder and Ureter (*except #1b*)
4. Code urinary system NOS **C689** when
 - Multiple separate tumors in multiple organs

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Table 1: Primary Site Codes

Renal Pelvis, Ureter, Bladder, and Other Urinary Site-group Instructions
C659, C669, C670-C679, C680-C689
(Excludes lymphoma and leukemia M9590 – M9993 and Kaposi sarcoma M9140)

Table 1: ICD-O Primary Site Codes

Site Term and code	Synonyms
Bladder, trigone C670	Base of bladder Below interureteric crest Below interureteric field Below interureteric ridge Floor of bladder
Bladder, urachus C677	Mid umbilical ligament Urachal remnant
Bladder, ureteric orifice C676	Just above ureteric orifice
Overlapping lesion of urinary organs C688	-
Paraurethral gland C681	-
Renal pelvis C659	Pelvis of kidney Pelviureteric junction Renal calyces Renal calyx
Ureter C669	-
Urethra C680	Cowper gland Littre glands Prostatic utricle Urethral gland
Urinary system NOS C689	-

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Multiple Primary Rules

Unknown if Single or Multiple Tumors

- **M1** – Single primary
 - Not possible to determine if it is single or multiple
 - Use this rule after you have exhausted all information sources

Single Tumor

- **M2** – Single primary
 - Single tumor = single primary
 - May overlap onto other adjacent or contiguous sites/subsites
 - May have in situ and invasive components or 2+ histologic components

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Multiple Primary Rules

• Multiple Tumors

- **M3 – Multiple Primaries**
 - Separate/non-contiguous tumors in both **Right and Left Renal Pelvis AND**
 - No other urinary sites are involved
- **M4 – Multiple Primaries**
 - Separate/non-contiguous tumors in both **Right and Left Ureter AND**
 - No other urinary sites are involved
- **M5 – Single Primary**
 - Synchronous tumors are **non-invasive (/2) urothelial carcinoma (8120)** in
 - Bladder (C67_) **AND**
 - Ureter(s) (C669)
 - No other urinary sites involved

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Multiple Primary Rules – Multiple Tumors

- **M6 – Multiple Primaries**
 - Invasive tumor occurs **more than 60 days after** an in situ (/2) tumor
 - Abstract both invasive and in situ tumors
- **M7 – Single Primary**
 - Multiple occurrences of non-invasive (/2) urothelial carcinoma in the **bladder (C67_)**
 - Can be any combination or in situ urothelial carcinoma (8120) **OR** Papillary urothelial carcinoma (8130)
 - Does **NOT** include micropapillary subtype (8131)
 - **ONLY 1 per lifetime** – non-invasive urothelial carcinoma of the bladder (C67_)
- **M8 – Multiple Primaries**
 - Micropapillary urothelial carcinoma (8131) AND a urothelial carcinoma (8120 or 8130)
 - In the same urinary site **OR** any combination of urinary sites

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Multiple Primary Rules – Multiple Tumors

- **M9 – Single Primary**
 - Multiple invasive urothelial carcinomas in the **bladder** (C67_)
 - All tumors are multiple occurrences of urothelial or urothelial S/V (*except* micropapillary) **OR** All tumors are multiple occurrences of micropapillary
 - **Only 1 per lifetime**
- **M10 – Multiple Primary**
 - Subsequent tumor after being clinically disease-free for greater than 3 years
 - Does **NOT** apply to **urothelial carcinoma of the bladder** (C67_)
 - Clinically disease free – scans, urine cytology, and/or scopes are WNL

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Multiple Primary Rules – Multiple Tumors

- **M11 – Single Primary**
 - Urothelial carcinomas in **multiple urinary organs**
 - All tumors are urothelial or S/V (*except* micropapillary) **OR**
 - All tumors are micropapillary
- **M12 – Multiple Primaries**
 - Separate, non-contiguous tumors are 2+ different S/V
 - Same or different NOS histologies
- **M13 – Multiple Primaries**
 - Separate, non-contiguous tumors are on different rows on *Table 2* (each row is distinctly different histology)

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Multiple Primary Rules – Multiple Tumors

- **M14 – Multiple Primaries**
 - ICD-O site code differs at the second (C**X**xx) and/or third character (Cx**X**x)
- **M15 – Single Primary**
 - Synchronous, separate/non-contiguous tumors are on the **same** row (*Table 2*)
- **M16 – Single Primary**
 - In Situ/non-invasive (/2) diagnosed after an invasive tumor **AND** tumors occur in the **same urinary site**
- **M17 – Single Primary**
 - Invasive tumor diagnosed **less than or equal to 60 days after an in situ (/2) tumor AND** occurs in the **same urinary site**
- **M18 – Single Primary**
 - Doesn't meet any of the other rules – Rule of last resort

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Hands On Exercises



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Case Example 1

1/3/2025 TURB – area of abnormality lateral wall bladder

1/3/2025 TURB, lateral wall: urothelial carcinoma in situ

5/8/2025 TURB – area abnormality dome of bladder

5/8/25 TURB, dome bladder: non-invasive papillary urothelial carcinoma

How many tumors?

2 tumors
C672 8120/2
C671 8130/2

How many primaries? Rule?

M7 – Single Primary
Multiple occurrences of in-situ
urothelial carcinoma in the bladder

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Case Example 2

3/4/25 TURB – abnormal area tissue near L ureteric orifice

3/4/25 TURB, bladder: invasive high grade papillary urothelial carcinoma

4/10/26 TURB – erythema and abnormal tissue on the posterior wall of the bladder

4/10/26 TURB, posterior wall bladder: invasive micropapillary urothelial carcinoma

How many tumors?

How many primaries? Rule?

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Case Example 3

4/5/25 Patient has a history of multifocal invasive urothelial carcinoma in the L ureter and L renal pelvis in March 2019 and is status post L nephroureterectomy; Presents with a tumor in the R ureter and appears to be a recurrence from the original tumor from 2019

4/15/25 R ureter, biopsy: invasive urothelial carcinoma, papillary type

How many tumors?

How many primaries? Rule?

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Case Example 4

10/24/25 Patient with gross hematuria, work up with US and cystoscopy showed a lesion in L Renal Pelvis and lesion in L wall bladder

10/25/25 L Renal Pelvis, mass, excision: Invasive high grade urothelial carcinoma with squamous differentiation; L wall bladder, exc biopsy: invasive high grade urothelial carcinoma with squamous differentiation

How many tumors?

What is the primary site code?

How many primaries? Rule?

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Histology Rules

Single Tumor Module

Multiple Tumors Abstracted as a Single Primary

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Histology Rules

Description	Notes	Single	MTAS
Code the histology	Only one histology present in a single tumor or same histology in multiple tumors	H1	H7
Code invasive histology	When in situ and invasive histologies present in one tumor or separate tumors	H2	H8
Code S/V	NOS histology and a single S/V of that NOS	H3	H9
Code mixed small cell carcinoma (8045)	Final diagnosis small cell NEC mixed with any other type of carcinoma	H4	H10
Code combined large cell carcinoma (8013)	Final diagnosis is large cell NEC and any other type of carcinoma	H5	H11
Code mixed urothelial carcinomas	8120 – Urothelial mixed w/ adenocarcinoma or SCC; 8130 – Papillary urothelial mixed w/ adenocarcinoma or SCC; 8131 – Micropapillary urothelial mixed w/ adenocarcinoma or SCC	H6	

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Hands On Exercises



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Case Example 5

10/24/25 Patient with gross hematuria, work up with US and cystoscopy showed a lesion in L Renal Pelvis and lesion in L wall bladder

10/25/25 L Renal Pelvis, mass, excision: Invasive high grade urothelial carcinoma with squamous differentiation; L wall bladder, exc biopsy: invasive high grade urothelial carcinoma with squamous differentiation

Based on rule **M11 – Single Primary**

What is the histology code? Rule?

H7 – 8120/3
Single histology in both tumors

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Case Example 6

4/5/25 Patient has a history of multifocal invasive urothelial carcinoma in the L ureter and L renal pelvis in March 2019 and is status post L nephroureterectomy; Presents with a tumor in the R ureter and appears to be a recurrence from the original tumor from 2019

4/15/25 R ureter, biopsy: invasive urothelial carcinoma, papillary type

Based on **M10 – Multiple Primaries**

What is the histology for each tumor? Rule?

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Case Example 7

3/4/2025 TURB – abnormal area tissue near L ureteric orifice

3/4/25 TURB, bladder: invasive papillary urothelial carcinoma

4/10/26 TURB – erythema and abnormal tissue on the posterior wall of the bladder

4/10/26 TURB, posterior wall bladder: invasive micropapillary urothelial carcinoma

Based on rule **M8 – Multiple Primaries**

What is the histology for each tumor? Rule?

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Quiz Phrase



After viewing this training video complete the associated quiz.



Quiz Phrase:

Urothelial Carcinoma

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Questions? Contact Me.

Melissa Riddle, ODS-C

Education & Training

Iowa Cancer Registry

melissa-riddle@uiowa.edu



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