

**SITE-SPECIFIC SURGERY CODES**

## GENERAL INSTRUCTIONS FOR CODING SITE-SPECIFIC SURGERY

The site-specific surgery schemes are composed of a one-digit code (0-9 in CP 97) for each of these major sites:

<u>IDC-0</u>	<u>Site</u>
151.0-151.6, 151.8-151.9	Stomach
153.0-153.9	Colon
154.0-154.1	Rectosigmoid, Rectum
162.2-162.5, 162.8-162.9	Bronchus and Lung
173.0-173.9	Malignant Melanoma of Skin
(Histology: 8720-8790)	
174.0-174.6, 174.8-174.9, 175.9	Breast
180.0-180.1, 180.8-180.9	Cervix Uteri
182.0-182.1, 182.8	Corpus Uteri
183.0	Ovary
185.9	Prostate
188.0-188.9	Bladder
189.0-189.2	Kidney, Renal Pelvis, and Ureter

It will apply to all cases diagnosed January 1, 1983 and later. Those registries which field-tested earlier years will have to review those sites for which changes are indicated at the bottom of each page and convert accordingly.

Once it is determined that cancer-directed surgery was performed (code 1 in CP 73), use the best information in the operative/path reports to determine the operative procedure. Do NOT depend on the title of the operative report since it may be incomplete.

If the operative procedure is unclear as to what was excised, or if there is a discrepancy between the operative and the path reports, use the path report unless there is reason to doubt its accuracy.

If a surgical procedure removes the remaining portion of an organ which had been partially resected previously for any condition, code as total removal of the organ. For example, 1) resection of a stomach which had been partially excised previously, 2) removal of a cervical stump, or 3) lobectomy of a lung with a previous wedge resection would be coded as total removal of the stomach, uterus, and lobe, respectively. If none of the primary organ remains, the code should indicate that this is the case.

Ignore diagnostic biopsies; ignore diagnostic lymph node dissection if that was the only surgery done unless the nodes were positive. Code "with dissection of lymph nodes" if nodes were removed at the time of the surgery to the primary site, or within four months of the date treatment began.

If an excisional biopsy is followed by "re-excision" or "wide excision" within the four-month time period, include that later information in coding site-specific surgery.

If multiple primaries are excised at the same time, code the appropriate surgery for each site. For example, 1) if a total abdominal hysterectomy was done for a patient with two primaries, one of the cervix and one of the endometrium, code each as having had a total abdominal hysterectomy. 2) If a total colectomy was done for a patient with multiple primaries in several segments of the colon, code total colectomy for each of the primary segments.

Definition of "First Course for All Malignancies" Except Leukemias

1. For all cases, the first course of therapy includes cancer-directed treatment received by the patient within the first four months of initiation of therapy. All modalities of treatment are included regardless of sequence or degree of completion of any component method.

2. EXCEPTION: Should there be a change in therapy due to apparent failure of the original planned and administered treatment, or because of progression of the disease, the new therapy should be EXCLUDED from the first course and considered part of a second course of therapy.

STOMACH  
151.0-151.6, 151.8-151.9

- 0 No surgery
- 1 Local excision (incl. polypectomy, excision of ulcer, other lesions, or stomach tissue with evidence of tumor)
- 2 Partial\*/subtotal/hemi- gastrectomy: Upper (proximal) portion (may include part of esophagus, i.e., esophagogastrectomy)
- 3 Partial\*/subtotal/hemi- gastrectomy: Lower (distal) portion (may include part of duodenum, i.e., gastropylorotomy), Billroth I (indicates anastomosis to duodenum--duodenostomy), Billroth II (indicates anastomosis to jejunum--jejunosomy), antrectomy (resection of pyloric antrum of stomach)
- 4 Partial\*/subtotal/hemi- gastrectomy, NOS or NEC (resection of the stomach); portion of stomach
- 5 Total/near total gastrectomy (incl. resection with pouch left for anastomosis, total gastrectomy following previous partial resection for another cause)
- 6 Gastrectomy, NOS
- 7 Gastrectomy (partial, total, radical) PLUS partial or total removal of other organs
- 8 Surgery of regional and/or distant site(s) ONLY
- 9 Surgery, NOS

\*Includes sleeve resection of stomach

Note: Codes 1-7 take priority over codes 8-9.  
Codes 1-7 may include removal of spleen, nodes and/or omentum, mesentery, or mesocolon.  
Ignore incidental removal of gallbladder and bile ducts, appendix, and/or vagus nerve.

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No changes were made in this code except the addition of other terms which would clarify or complete the description of each code.

COLON (excludes rectosigmoid, rectum)  
153.0-153.9

- 0 No surgery
- 1 Local tumor destruction (incl. cryosurgery, electrocautery, fulguration, laser surgery (vaporized - no path specimen))
- 2 Local excision (incl. polypectomy, snare, laser surgery (with path specimen))
- 3 Partial/subtotal colectomy, but less than hemicolectomy (incl. segmental resection, e.g., cecectomy, appendectomy, sigmoidectomy, transverse colon and flexures, ileocollectomy, enterocollectomy, and partial/subtotal colectomy, NOS)
- 4 Hemicolectomy or greater (but less than total), right/left colectomy (all of right or left colon beginning at mid-transverse)
- 5 Total colectomy (beginning with cecum and ending with sigmoid/rectum or part of rectum)
- 6 Colectomy, NOS
- 7 Colectomy (subtotal or total) PLUS partial or total removal of other organs
- 8 Surgery of regional and/or distant site(s) ONLY
- 9 Surgery, NOS

Note: Codes 1-7 take priority over codes 8-9.

Codes 3-7 may include removal of lymph nodes, a portion of terminal ileum, and/or omentum.

Ignore incidental removal of appendix, gallbladder and bile ducts, and/or spleen.

If not clear from either the operative or path report what was removed, but the title of the operative report is hemicolectomy, code as hemicolectomy.

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Changes from original code to this code:

Original codes 3, Segmental (limited) resection, and 4, Subtotal colectomy, were combined as one code which reads:

- 3 Partial/subtotal colectomy, but less than a hemicolectomy  
Partial/subtotal colectomy, NOS (added).

Original code 5, Hemicolectomy or greater, was moved to 4.

Original codes 6, Colectomy (partial) PLUS removal of other organs, and 7, Total colectomy WITH or WITHOUT removal of other organs, were combined as one code: Code 7, Colectomy (subtotal or total) PLUS removal of other organs.

Two new codes were added: 5, Total colectomy  
6, Colectomy, NOS.

RECTOSIGMOID, RECTUM  
154.0-154.1

- 0 No surgery
- 1 Local tumor destruction (incl. cryosurgery, electrocautery, fulguration, laser surgery (vaporized - no path specimen))
- 2 Local excision (incl. polypectomy, snare, laser surgery (with path specimen))
- 3 Anterior/posterior resection, wedge or segmental resection, transsacral rectosigmoidectomy, Hartmann resection, partial proctectomy, rectal resection, NOS
- 4 Pull-through resection WITH sphincter preservation (e.g., Turnbull and Swenson's operations, Soave submucosal resection, Altemeier operation, Duhamel resection)
- 5 Abdominal perineal resection (e.g., Miles and Rankin procedures), complete proctectomy, transsacral rectosigmoidectomy
- 6 Any of codes 3-5 PLUS partial or total removal of other organs
- 7 Pelvic Exenteration (partial or total)  
Anterior exenteration (incl. bladder, distal ureters, genital organs with their ligamentous attachments and pelvic lymph nodes)  
Posterior exenteration (incl. rectum and rectosigmoid with ligamentous attachments and pelvic lymph nodes)  
Total exenteration: all pelvic contents and pelvic lymph nodes  
Extended exenteration: includes pelvic blood vessels or bony pelvis
- 8 Surgery of regional and/or distant site(s) ONLY
- 9 Surgery, NOS

Note: Codes 1-7 take priority over codes 8-9.  
Codes 3-7 may include removal of lymph nodes  
and/or removal of section of colon.  
Ignore incidental removal of gallbladder and bile ducts  
and/or appendix.

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No changes were made in this code except the addition of other terms which would clarify or complete the description of each code.

BRONCHUS AND LUNG  
162.2-162.5, 162.8-162.9

- 0 No surgery
- 1 Local excision or destruction of lesion
- 2 Wedge resection(s), segmental resection(s), lingulectomy, partial lobectomy, sleeve resection (bronchus only)
- 3 Lobectomy (incl. lobectomy plus segmental/sleeve resection, bilobectomy, radical lobectomy, partial pneumonectomy) WITHOUT dissection of lymph nodes
- 4 Lobectomy WITH dissection of lymph nodes
- 5 Complete/total/standard pneumonectomy; pneumonectomy, NOS
- 6 Radical pneumonectomy (complete pneumonectomy plus dissection of mediastinal lymph nodes)
- 7 Extended radical pneumonectomy (incl. parietal pleura, pericardium and/or chest wall (incl. diaphragm) plus nodes)
- 8 Surgery of regional and/or distant site(s) ONLY (incl. removal of mediastinal mass ONLY)
- 9 Resection of lung, NOS; surgery, NOS

Note: Codes 1-7 apply to unilateral resection of primary tumor and take priority over codes 8-9.  
Ignore incidental removal of rib(s) (operative approach).

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Changes from original code to this code:

Original codes 3, Lobectomy, and 4, Bilobectomy, were combined as new code 3 + WITHOUT dissection of lymph nodes.

New code 4, WITH dissection of lymph nodes

MALIGNANT MELANOMA OF SKIN  
173.0-173.9  
Histology: 8720-8790

- 0 No surgery
- 1 Local tumor destruction (cryosurgery, fulguration, electrocauterization, laser surgery (vaporized - no path specimen))
- 2 Excisional biopsy, local excision, wedge resection, simple excision, laser surgery (with path specimen); excision, NOS
- 3 Shave/punch biopsy followed by excision of lesion (not a wide excision)
- 4 Wide/radical excision/re-excision or minor (local) amputation (incl. digits, ear, eyelid, lip, nose)
- 5 1-4 WITH dissection of lymph nodes
- 6 Amputation (other than in code 4) WITHOUT dissection of lymph nodes, amputation, NOS
- 7 Amputation (other than in code 4) WITH dissection of lymph nodes
- 8 Surgery of regional and/or distant site(s) ONLY
- 9 Surgery, NOS

Note: Codes 1-7 take priority over codes 8-9.

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Changes from original code to this code:

Code 3, is a new code.

Original code 3 was moved to code 4.

Original code 4 was collapsed to code 5 with no separation of nodes on the basis of continuous or discontinuous.

Lymph node dissection = Resection of a group of nodes recognized as standard lymph node surgery such as the inguinal, axillary, cervical, and periaortic lymph node chains.



BREAST  
174.0-174.6, 174.8-174.9 Female; 175.9 Male

- 0 No surgery
- 1 Partial/less than total mastectomy (incl. segmental mastectomy, lumpectomy, quadrantectomy, tylectomy, wedge resection, nipple resection, excisional biopsy, or partial mastectomy, NOS)  
WITHOUT dissection of axillary lymph nodes
- 2 Code 1 WITH dissection of axillary lymph nodes
- 3 Subcutaneous mastectomy WITH/WITHOUT dissection of axillary lymph nodes
- 4 Total (simple) mastectomy (breast only)  
WITHOUT dissection of axillary lymph nodes
- 5 Total (simple)/modified radical mastectomy  
(may include portion of pectoralis major)  
WITH dissection of axillary lymph nodes
- 6 Radical mastectomy  
WITH dissection of all of pectoralis major  
WITH dissection of axillary lymph nodes
- 7 Extended radical mastectomy (code 6 + internal mammary node dissection; may include chest wall and ribs)
- 8 Surgery of regional and/or distant site(s) ONLY
- 9 Mastectomy, NOS; Surgery, NOS

Note: Codes 1-7 apply to unilateral resection of primary tumor and take priority over codes 8-9.  
Ignore removal of fragments or tags of muscle.  
Ignore removal of pectoralis minor.  
Ignore resection between pectoral muscles.  
Ignore resection of fascia with no mention of muscle.  
Oophorectomy, adrenalectomy, and hypophysectomy will be coded as hormone therapy in col. 77.

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Changes from original code to this code:

Original codes 1, Local excision, and 2, Partial resection, were combined as new code 1.

Code 2, is now code 1 + WITH dissection of axillary lymph nodes.

Code 4, Mastectomy, NOS added to code 9.

CERVIX AND CORPUS UTERI  
180.0-180.1, 180.8-180.9, 182.0-182.1, 182.8

- 0 No surgery
- 1 Cryosurgery, laser surgery (vaporized - no path specimen): cervix  
D & C (in-situ ONLY), polypectomy, myomectomy, simple excision: corpus
- 2 Local excision and/or conization, excisional biopsy, trachel-  
ectomy, amputation of cervix, laser (with path specimen),  
endocervical curettage (in situ only): cervix uteri  
Subtotal hysterectomy, supracervical hysterectomy, fundectomy  
(cervix left in place with/without removal of tubes and  
ovaries): corpus uteri
- 3 Total/simple hysterectomy (incl. both corpus and cervix uteri  
without removal of tubes and ovaries)  
WITHOUT dissection of lymph nodes
- 4 Total/simple/pan- hysterectomy (with removal of tubes and ovaries)  
WITHOUT dissection of lymph nodes
- 5 Modified radical/extended hysterectomy (incl. uterus, tubes and  
ovaries, and (upper) vaginal cuff and para-aortic/pelvic nodes)  
Radical hysterectomy (incl. uterus, tubes and ovaries, vagina,  
and all parametrial and paravaginal tissue and para-aortic  
and pelvic lymph nodes)  
Wertheim operation
- 6 Hysterectomy, NOS (abdominal or vaginal)
- 7 Pelvic Exenteration (partial or total)  
Anterior exenteration (incl. bladder, distal ureters,  
genital organs with their ligamentous attachments and  
pelvic lymph nodes)  
Posterior exenteration (incl. rectum and rectosigmoid with  
ligamentous attachments and pelvic lymph nodes)  
Total exenteration: all pelvic contents and pelvic lymph nodes  
Extended exenteration: incl. pelvic bl. vessels/bony pelvis
- 8 Surgery of regional and/or distant site(s) ONLY
- 9 Surgery, NOS

Note: Codes 1-7 take priority over codes 8-9.  
Codes 3 and 4 may include a portion of "vaginal cuff."  
Ignore incidental removal of appendix.

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Changes from original code to this code:

Original codes 4, Extended hysterectomy, and 5, Radical  
hysterectomy, were combined as new code 5.

Original code 3, Total hysterectomy, was subdivided as follows:  
Code 3, without removal of tubes and ovaries  
Code 4, with removal of tubes and ovaries.

OVARY  
183.0

- 0 No surgery
- 1 Subtotal/partial or unilateral (salpingo)-oophorectomy  
WITHOUT hysterectomy
- 2 Subtotal/partial or unilateral (salpingo)-oophorectomy  
WITH hysterectomy
- 3 Bilateral (salpingo)-oophorectomy WITHOUT hysterectomy
- 4 Bilateral (salpingo)-oophorectomy WITH hysterectomy
- 5 Debulking of ovarian tumor mass (may include ovarian tissue)
- 6 Salpingo-oophorectomy, NOS WITH/WITHOUT hysterectomy
- 7 Pelvic Exenteration (partial or total)  
Anterior exenteration (incl. bladder, distal ureters,  
genital organs with their ligamentous attachments and  
pelvic lymph nodes)  
Posterior exenteration (incl. rectum and rectosigmoid with  
ligamentous attachments and pelvic lymph nodes)  
Total exenteration: all pelvic contents and pelvic lymph nodes  
Extended exenteration: includes pelvic blood vessels or  
bony pelvis
- 8 Surgery of regional and/or distant site(s) ONLY
- 9 Surgery, NOS

Note: Codes 1-7 take priority over codes 8-9.  
Ignore omentectomy and incidental removal of appendix.

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Changes from original code to this code:

Original codes 1, Subtotal (salpingo)-oophorectomy, and 2, Unilateral (salpingo)-oophorectomy, are combined as new code 1.

New code 1 + "WITH hysterectomy" is now new code 2.

Code 4, (Salpingo-)oophorectomy, NOS, was moved to new code 6 to be consistent with other "NOS" codes.

"WITHOUT hysterectomy" was added to original code 3.

Original code 3 + "WITH hysterectomy" is now new code 4.

New code 5, "Debulking of ovarian tumor mass."

PROSTATE  
185.9

- 0 No surgery
- 1 Cryoprostatectomy  
Transurethral resection, local excision of lesion  
WITHOUT lymph node dissection
- 2 Code 1 WITH dissection of lymph nodes
- 3 Subtotal/simple prostatectomy (segmental resection or  
enucleation leaving capsule intact)  
WITHOUT dissection of lymph nodes
- 4 Subtotal/simple prostatectomy (segmental resection or  
enucleation) WITH dissection of lymph nodes
- 5 Radical/total prostatectomy (excised prostate with capsule,  
ejaculatory ducts (ductus deferens), and seminal vesicles)  
WITHOUT dissection of lymph nodes
- 6 Radical/total prostatectomy (excised prostate, ejaculatory  
ducts (ductus deferens), and seminal vesicles)  
WITH dissection of lymph nodes
- 7 Cystoprostatectomy, radical cystectomy, pelvic exenteration  
WITH or WITHOUT dissection of lymph nodes
- 8 Surgery of regional and/or distant site(s) ONLY
- 9 Prostatectomy, NOS; Surgery, NOS

Note: Codes 1-7 take priority over codes 8-9.  
Orchiectomy will be coded as hormone therapy in col. 77.  
Ignore surgical approach.

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Changes from original code to this code:

Original codes 1, Cryoprostatectomy, and 2, TUR, were combined  
as code 1 + WITHOUT dissection of lymph nodes.

New code 2 is now code 1 + WITH dissection of lymph nodes.

Original code 3, Subtotal prostatectomy, was subdivided into  
two codes as follows:

Code 3, WITHOUT dissection of lymph nodes  
Code 4, WITH dissection of lymph nodes.

Original code 4, Total prostatectomy WITHOUT lymph node dissection,  
code 5, WITH lymph node dissection, have been moved to new codes 5 and  
6, respectively.

Original code 6, Prostatectomy, NOS, was moved to new code 9.

BLADDER  
188.0-188.6, 188.8-188.9

- 0 No surgery
- 1 Local transurethral destruction (electrocoagulation, fulguration, cryosurgery), transurethral resection (excisional biopsy)
- 2 Partial/subtotal cystectomy (incl. segmental resection) WITHOUT dissection of pelvic lymph nodes
- 3 Partial/subtotal cystectomy (incl. segmental resection) WITH dissection of pelvic lymph nodes
- 4 Complete/total/simple cystectomy WITHOUT dissection of lymph nodes
- 5 Complete/total/simple cystectomy WITH dissection of lymph nodes
- 6 Cystectomy, NOS
- 7 Radical cystectomy (removal of bladder, prostate, seminal vesicles and surrounding perivesical tissues and distal ureters in men, removal of bladder, uterus, ovaries, fallopian tubes and surrounding peritoneum and sometimes urethra and vaginal wall in women)  
  
Pelvic Exenteration (partial, total, or extended)  
Anterior exenteration (incl. bladder, distal ureters, genital organs with their ligamentous attachments and pelvic lymph nodes)  
Posterior exenteration (incl. rectum and rectosigmoid with ligamentous attachments and pelvic lymph nodes)  
Total exenteration: all pelvic contents and pelvic lymph nodes  
Extended exenteration: includes pelvic blood vessels or bony pelvis
- 8 Surgery of regional and/or distant site(s) ONLY
- 9 Surgery, NOS

Note: Codes 1-7 take priority over codes 8-9.  
Ignore partial removal of ureter in coding cystectomy.  
Ignore surgical approach.

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Changes from original code to this code:

Original codes 6, Radical cystectomy, and 7, Pelvic exenteration, are combined in code 7.

New code 6, Cystectomy, NOS, was added.

KIDNEY AND URETER  
189.0-189.2

- 0 No surgery
- 1 Partial/subtotal nephrectomy (incl. local excision, wedge resection, and segmental resection)  
Partial ureterectomy
- 2 Complete/total nephrectomy--for kidney parenchyma  
Nephroureterectomy (incl. bladder cuff)--for renal pelvis and ureter  
WITHOUT dissection of lymph nodes
- 3 Complete/total nephrectomy--for kidney parenchyma  
Nephroureterectomy (incl. bladder cuff)--for renal pelvis and ureter  
WITH dissection of lymph nodes
- 4 Radical nephrectomy (incl. removal of vena cava or adrenal gland(s), or Gerota's fascia, perinephric fat, partial ureter)  
WITHOUT dissection of lymph nodes
- 5 Radical nephrectomy (incl. removal of vena cava or adrenal gland(s) or Gerota's fascia, perinephric fat, partial ureter)  
WITH dissection of lymph nodes
- 6 Nephrectomy, NOS  
Ureterectomy, NOS
- 7 2-6 PLUS other organs (e.g., bladder, colon)
- 8 Surgery of regional and/or distant site(s) ONLY
- 9 Surgery, NOS

Note: Codes 1-7 apply to unilateral resection of primary tumor and take priority over codes 8-9.  
Ignore incidental removal of rib(s).

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Changes from original code to this code:

Original codes 2, Complete/total nephrectomy, and 3, Nephroureterectomy, were combined as new code 2 and subdivided as follows:

Code 2, WITHOUT dissection of lymph nodes  
Code 3, WITH dissection of lymph nodes.

Code 4, Nephrectomy, NOS, was moved to code 6 for consistency with the other "NOS" codes.

Code 5, Radical nephrectomy, was subdivided into two codes:

Code 4, WITHOUT dissection of lymph nodes  
Code 5, WITH dissection of lymph nodes.

## DEFINITIONS OF SURGICAL PROCEDURES

### STOMACH

Billroth I: Partial resection of the stomach with anastomosis of the stomach to the duodenum.

Billroth II: Partial removal of the stomach with anastomosis of the stomach to the jejunum.

### COLON-RECTUM

Bacon: Proctosigmoidectomy by combined method

Duhamel operation: Modification of a pull-through procedure and establishment of a longitudinal anastomosis between the proximal ganglionated segment of the colon and the rectum, leaving the latter in situ.

Hartmann: Resection of primary rectal cancer with permanent colostomy. It is a one-stage procedure in which the lower part of the sigmoid or the upper part of the rectum is resected distal to the neoplasm. The bowel is then divided in the region of the descending colon. After the intervening segment of bowel has been removed, the proximal end of the descending colon is brought to the surface, as in the performance of a single-barreled colostomy. The proximal end of the distal segment is over sewn and left in place leaving a blind rectal pouch.

Miles operation: Abdominoperineal resection for cancer of the lower sigmoid and rectum which includes permanent colostomy, removal of the pelvic colon, mesocolon, and adjacent lymph nodes and wide perineal excision of the rectum and anus

Pull-through operation: Permits removal of desired portion of bowel (may include rectum, sigmoid, and when indicated, descending colon and part of transverse colon) in one-stage with retained sphincters, and end-to-end anastomosis. This operation is performed largely through the abdomen and does not require resection or removal of any part of the bony pelvis.

Rankin: Abdominoperineal resection of rectum

Swenson: Pull-through resection with sphincter preservation

Swenson procedure: Abdomino-anal pull-through with partial internal sphincterectomy

Turnbull: Pull-through resection with sphincter preservation

DEFINITIONS OF SURGICAL PROCEDURES (cont'd)

CERVIX AND CORPUS UTERI

Wertheim's operation: Radical abdominal hysterectomy, an operation for cancer of the uterus in which there is removed with the uterus as much of the parametrial tissue as possible and a wide margin of the vagina.

BREAST

Halsted: Developed the radical mastectomy, that is, en bloc dissection of entire breast and skin together with pectoralis major and minor muscles and contents of axilla.

Patey and Dyson: Modified radical mastectomy, that is, removal of breast, pectoralis minor and axillary contents, but leaving pectoralis major intact.

Urban: Extended radical mastectomy, that is, radical mastectomy plus excision of internal mammary nodes