

REPORTABLE CASES – MISSISSIPPI

For cases diagnosed 10/1/2013 and forward

The following lists are intended to assist you, as the reporter, in identifying the reportable neoplasms for your facility. Any reportable neoplasms diagnosed on or after January 1, 1996 should be reported to the Mississippi Cancer Registry.

REPORTABLE NEOPLASMS

- Malignant neoplasms (exclusions noted below)
- Benign and borderline neoplasms of the central nervous system (Cases diagnosed on or after January 1, 2004)
- Carcinoma in-situ (exclusions noted below)
- Carcinoid, NOS (excluding appendix, unless stated to be malignant)
- Pilocytic/juvenile astrocytoma is listed as 9421/1 in ICD-O-3, is reportable, and should be coded to 9421/3.
- Squamous intraepithelial neoplasia grade III of vulva [VIN], vagina [VAIN], and anus [AIN] beginning with 2001 cases.

NON-REPORTABLE NEOPLASMS

- Basal and squamous cell carcinomas of the skin (ICD-O-3 Histologies 8090-8110)
- Epithelial carcinomas of the skin (ICD-O-3 Histologies 8010-8046)
- Papillary and squamous cell carcinomas of the skin (ICD-O-3 Histologies 8050-8084)
- Malignant neoplasms, NOS of the skin (ICD-O-3 Histologies 8000-8005)
- Carcinoma in-situ of the cervix
- Intraepithelial neoplasms of the cervix (ICD-O-3 Histology 8077/2) or prostate (ICD-O-3 Histology 8148/2)
- Borderline cystadenomas (ICD-O-3 Histologies 8442, 8451, 8462, 8472, 8473), of the ovaries with behavior code “1” are **not** collected as of January 1, 2001
- Cyst, brain or CNS tumor that does not have an ICD-O-3 code as of January 1, 2004

AMBIGUOUS TERMINOLOGY

Terms That Constitute a Diagnosis	Terms That <i>Do Not</i> Constitute a Diagnosis
Apparent(ly)	Cannot be ruled out
Appears to	Equivocal
Comparable with	Possible
Compatible with	Potentially malignant
Consistent with	Questionable
Favor(s)	Rule out
Malignant appearing	Suggests
Most likely	Worrisome
Presumed	
Probable	
Suspect	
Suspicious	
Typical of	
Tumor (beginning with 2004 diagnosis and only for C70.0-C72.9, C75.1-C75.3)	
Neoplasm (beginning with 2004 diagnosis and only for C70.0-C72.9, C75.1-C75.3)	

Exceptions:

- If a cytology is reported using any ambiguous term, do not interpret it as a diagnosis of cancer. Abstract the case only if a positive biopsy or a physician's clinical impression of cancer supports the cytology findings.
- Genetic findings in the absence of pathologic or clinical evidence of reportable disease are indicative of risk only and do not constitute a diagnosis.

There are other ambiguous terms used by physicians that are related to staging. Some may indicate tumor involvement or extension, while others are not considered to be involvement. Refer to *Collaborative Staging Manual and Coding Instructions* for a listing of those terms.

COMPREHENSIVE ICD-9-CM CASEFINDING CODE LIST FOR REPORTABLE TUMORS

ICD-9-CM Codes	Diagnosis
Code Ranges	Explanation of Code
140._ - 172._, 174._-209.36, 209.7_	Malignant neoplasms (excluding category 173) stated or presumed to be primary (of specified sites) and certain specified histologies
173.00, 173.09	Unspecified/other malignant neoplasms of skin of lip
173.10, 173.19	Unspecified/other malignant neoplasm of eyelid, including canthus
173.20, 173.29	Unspecified/other malignant neoplasm of ear and external auricular canal
173.30, 173.39	Unspecified/other malignant neoplasm of skin of other/unspecified parts of face
173.40, 173.49	Unspecified/other malignant neoplasm of scalp and skin of neck
173.50, 173.59	Unspecified/other malignant neoplasm of skin of trunk, except scrotum
173.60, 173.69	Unspecified/other malignant neoplasm of skin of upper limb, including shoulder
173.70, 173.79	Unspecified/other malignant neoplasm of skin of lower limb, including hip
173.80-173.89	Unspecified/other malignant neoplasm of other specified sites of skin
173.90, 173.99	Unspecified/other malignant neoplasm of skin, site unspecified
225.0 - 225.9	Benign Neoplasms of brain and spinal cord
227.3, 227.4	Benign neoplasm of pituitary gland, craniopharyngeal duct (pouch) and pineal gland
228.02	Hemangioma; of intracranial structures
228.1	Lymphangioma, any site (Note: Only lymphangiomas of the brain, othr parts of nervous system and endocrine gland are reportable)
230.0 - 234.9	Carcinoma In Situ (Includes AIN III, VIN III and VAIN III)
237.0 - 237.1	Neoplasm of uncertain behavior of endocrine glands and nervous system: pituitary gland, craniopharyngeal duct and pineal gland
237.5, 237.6, 237.9	Neoplasm of uncertain behavior of endocrine glands & nervous system: brain & spinal cord, meninges, endocrine glands & other & unspec. parts of nervous system
238.4	Polycythemia vera
238.7_	Other lymphatic and hematopoietic diseases
239.6, 239.7	Neoplasms of unspecified nature, brain, endocrine glands and other parts of nervous system
273.3	Macroglobulinemia (Waldenstrom's macroglobulinemia)
277.89	Other specified disorders of metabolism (<i>Reportable includes terms: Hand-Schuller-Christian disease; histiocytosis (acute)(chronic); histiocytosis X (chronic)</i>)

SUPPLEMENTAL CASEFINDING LIST TO BE SCREENED FOR REPORTABLE CONDITIONS

Cases with the following codes should be screened as time allows. Experience has shown that use of this supplemental list increases casefinding for benign brain and CNS, hematopoietic neoplasms and other reportable diseases

Individual ICD-9-CM Codes	Explanation of Code
042	Acquired Immunodeficiency Syndrome (AIDS) <i>Note: Screen 042 for history of cancers with HIV/AIDS</i>
079.51 – 079.53	Retrovirus (HTLV, types I, II and 2)
173.01, 173.02	Basal and squamous cell carcinoma of skin of lip
173.11, 173.12	Basal and squamous cell carcinoma of eyelid, including canthus
173.21, 173.22	Basal and squamous cell carcinoma of ear and external auricular canal
173.31, 173.32	Basal and squamous cell carcinoma of skin of other and unspecified parts of face
173.41, 173.42	Basal and squamous cell carcinoma of scalp and skin of neck
173.51, 173.52	Basal and squamous cell carcinoma of skin of trunk, except scrotum
173.61, 173.62	Basal and squamous cell carcinoma of skin of upper limb, including shoulder
173.71, 173.72	Basal and squamous cell carcinoma of skin of lower limb, including hip
173.81, 173.82	Basal and squamous cell carcinoma of other specified sites of skin
173.91, 173.92	Basal and squamous cell carcinoma of skin, site unspecified
209.40 - 209.69	Benign carcinoid tumors
210.0 - 229.9	Benign neoplasms (except for 225.0-225.9, 227.3, 227.4, 228.02, 228.1, which are listed in the Reportable list) <i>Note: Screen for incorrectly coded malignancies</i>
235.0 – 236.99	Neoplasm of uncertain behavior of adrenal gland, paraganglia and other and unspecified endocrine glands <i>Note: screen for incorrectly coded malignancies</i>
237.2 – 237.4	Neoplasm of uncertain behavior of adrenal gland, paraganglia and other and unspecified endocrine glands <i>Note: screen for incorrectly coded malignancies</i>
237.7_	Neurofibromatosis and Schwannomatosis
238.0 – 239.9	Neoplasms of uncertain behavior (except for 238.4, 238.71-238.79, 239.6, 239.7, which are listed in the reportable list) <i>Note: Screen for incorrectly coded malignancies</i>
259.2	Carcinoid syndrome

Individual ICD-9-CM Codes	Explanation of Code
273.0	Polyclonal hypergammaglobulinemia (<i>Note: screen for blood disorders due to neoplasm</i>)
273.1	Monoclonal gammopathy of undetermined significance (9765/1) <i>Note: Screen for incorrectly coded Waldenstrom macroglobulinemia or progression</i>
273.2	Other paraproteinemias
273.8, 273.9	Other and unspecified disorders of plasma protein metabolism <i>Note: includes plasma disorders due to neoplastic disease</i>
275.42	Hypercalcemia (<i>Note: Includes hypercalcium due to neoplastic disease</i>)
277.88	Tumor lysis syndrome (following neoplastic chemotherapy)
284.1_	Pancytopenia (<i>Note: screen for anemia disorder related to neoplasm</i>)
285.22	Anemia in neoplastic disease
285.3	Anemia due to antineoplastic chemotherapy
287.39, 287.49, 287.5	Secondary, other primary and unspecified thrombocytopenia <i>Note: Screen for incorrectly coded thrombocytopenia</i>
288.03	Drug induced neutropenia (<i>note: screen for anemia disorder related to neoplasm</i>)
288.3	Eosinophilia (<i>Note: Code for eosinophilia (9964/3). Not every case of eosinophilia is with a malignancy. Diagnosis must be "Hypereosonophilic syndrome" to be reportable.</i>)
288.4	Hemophagocytic syndrome
338.3	Neoplasm related pain (acute)(chronic)
528.01	Mucositis due to antineoplastic therapy
530.85	Barrett's esophagus (High grade dysplasia of esophagus)
569.44	Dysplasia of anus (Anal intraepithelial neoplasia [AIN I and II])
602.3	Dysplasia of prostate (Prostatic intraepithelial neoplasia [PIN I and II])
622.10 – 622.12	Dysplasia of cervix, unspecified and CIN I, CIN II
623.0	Dysplasia of vagina (Vaginal intraepithelial neoplasia [VAIN I and II])
624.01, 624.02	Vulvar intraepithelial neoplasia: unspecified, VIN I and VIN II
630	Hydatidiform mole (<i>Note: benign tumor that can become malignant. If malignant, it should be reported as Choriocarcinoma (9100/3) with malignancy code in 140-209 range</i>)
785.6	Enlargement of lymph nodes
780.79	Neoplastic (malignant) related fatigue
789.51	Malignant ascites
790.93	Elevated prostate specific antigen (PSA)
793.8_	Nonspecific (abnormal) findings on radiological & examination of body structure (breast)

Individual ICD-9-CM Codes	Explanation of Code
795.0_ - 795.1_	Papanicolaou smear of cervix and vagina with cytologic evidence of malignancy
796.7_	Abnormal cytologic smear of anus and anal HPV
795.8_	Abnormal tumor markers; Elevated tumor associated antigens [TAA]
963.1	Poisoning by primarily systemic agents: antineoplastic and immunosuppressive drugs
990	Effects of radiation, unspecified (radiation sickness)
999.3_	Complications due to central venous catheter
E858.0	Accidental poisoning by other drugs: Hormones and synthetic substitutes
E858.1	Accidental poisoning by other drugs: Primary systemic agents
E858.2	Agents primarily affecting blood constituents
E873.2	Failure in dosage, overdose of radiation in therapy (radiation sickness)
E879.2	Overdose of radiation given during therapy (radiation sickness)
E930.7	Adverse reaction of antineoplastic therapy-Antineoplastic antibiotics
E932.1	Adverse reaction to antineoplastic therapy-Androgens and anabolic congeners
E933.1	Adverse effect (poisoning) of immunosuppressive drugs
V10.0_ – V10.9_	Personal history of malignancy Note: Screen for recurrences, subsequent primaries, and/or subsequent treatment
V12.41	Personal history of benign neoplasm of the brain
V13.89	Personal history of unspecified. malignant neoplasm, history of in-situ neoplasm of other site
V15.3	Other personal history presenting hazards to health or (therapeutic) radiation
V42.81, V42.82	Organ or tissue replaced by transplant: Bone marrow, peripheral stem cells
V51.0	Encounter for breast reconstruction following mastectomy
V58.0, V58.1_	Encounter for radiotherapy, chemotherapy, immunotherapy
V66.1, V66.2	Convalescence and palliative care following radiotherapy, chemotherapy
V66.7	Encounter for palliative care
V67.1, V67.2	Follow up examination: following radiotherapy or chemotherapy
V71.1	Observation for suspected malignant neoplasm
V76._	Special screening for malignant neoplasms
V86._	Estrogen receptor positive status [ER+], negative status [ER-]
V87.41	Personal history of antineoplastic chemotherapy
V87.43	Personal history of estrogen therapy
V87.46	Personal history of immunosuppression therapy