

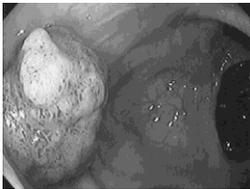
Equivalent Terms, Definitions, and Illustrations

- **98% adenocarcinoma**
 - 10-15% produce enough mucin to be mucinous
- **Mixed histologies**
 - Mucinous/colloid
 - Signet ring
 - Others are rare

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Equivalent Terms, Definitions, and Illustrations

- **Polypoid does NOT equal polyp**

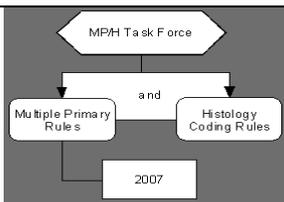


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Equivalent Terms, Definitions, and Illustrations

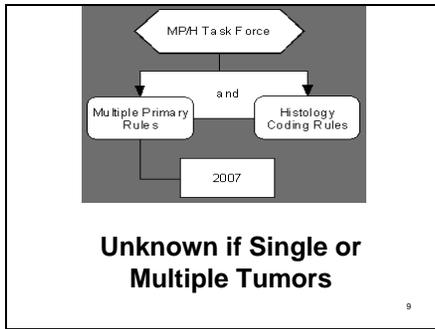
- Adenocarcinoma with mixed subtypes (8255): **Rarely used for colon primaries (see introduction).**
- Adenocarcinoma, intestinal type (8144) is a form of stomach cancer. **Do not use this code when the tumor arises in the colon.**

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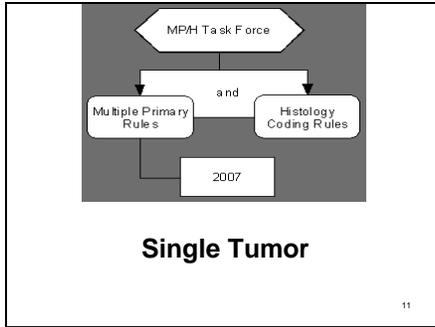


Multiple Primary Rules

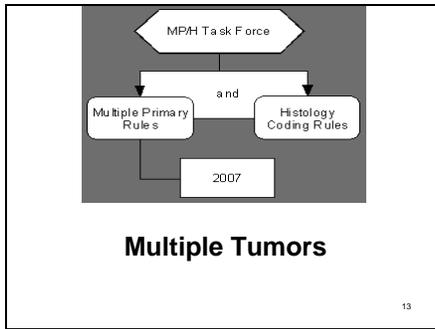
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Rule	Site	Histology	Timing	Behavior	Notes/Examples	Primary
UNKNOWN IF SINGLE OR MULTIPLE TUMORS					Tumor(s) not described as metastasis	
M1					Use this rule only after all information sources have been exhausted.	Single



Rule	Site		Notes/Examples	Primary
SINGLE TUMOR			1. Tumor not described as metastasis 2. Includes combinations of in situ and invasive	
M2	Single		Tumor may overlap onto or extend into adjacent/contiguous site or subsite	Single



Rule	Histology	Notes/Examples	Primary
MULTIPLE TUMORS Multiple tumors may be a single primary or multiple primaries		1. Tumors not described as metastases 2. Includes combinations of in situ and invasive	
M3	Adenocarcinoma in adenomatous polyposis (familial polyposis) with one or more malignant polyps	Tumors may be present in multiple segments of the colon or in a single segment of the colon.	Single

Rule	Site					Primary
M4	Sites with topography codes that are different at the second (Cx xx), third (Cx xx) or fourth (C18x) character					Multiple
Rule	Timing					Primary
M5	Diagnosed more than one (1) year apart					Multiple

Rule	Timing	Behavior	Notes/Examples	Primary
M6	More than 60 days after diagnosis	An invasive tumor following an in situ tumor	1: The purpose of this rule is to ensure that the case is counted as an incident (invasive) case when incidence data are analyzed. 2: Abstract as multiple primaries even if the medical record/physician states it is recurrence or progression of disease.	Multiple

- CONSULT 4/7/07: Scope revealed diverticulosis and right colon cancer was also seen. She had biopsies from the mass in the right colon positive for adenoca. Also polyp was removed from descending colon showing WD adenoca arising within a tubulovillous adenoma, exhibiting focal invasion of submucosa.
- OP FINDINGS: 1) Mid ascending colon carcinoma (apple core lesion, bleeding). 2) Hepatic flexure/distal ascending colon carcinoma. 3) Descending colon carcinoma.
- PATH: MD adenoca, 7 cm dimension exhibiting invasion of muscularis propria. 37 pericolic lymph nodes all negative. Margins free of tumor. Separate, (mid ascending lesion) WD adenoca, 2.1 cm dimension exhibiting submucosal invasion.
- **# Primaries? Histology Code(s)?**

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