

Cancer Registry of Greater California

LUNG

CS Extension

The following guidelines are the **minimal** criteria for using Lung CS Extension codes 100, 300, and 999:

Code 100

- Tumor size **and** subsite are documented in a chest xray, CT or PET scan report, or scope findings and extension criteria in codes 110 through 250 have been ruled out.
- There is no mention or documented involvement of any of the following:
 - The main stem bronchus in scans or by physician (Code 210)
 - Tumor confined to the hilus (Code 230)
 - Tumor confined to the carina (Code 250)
 - Direct tumor invasion into an adjacent ipsilateral lobe (Code 220)
 - Atelectasis/obstructive pneumonitis/lung collapse (Code 400)
- **Stage documentation has priority over a T category designation by an MD**
- Use CS Extension codes 115, 120 or 125 only if there is no other involvement documented, except a T1, T1a, or T1b code designation by an MD.

Code 300

- Description of the tumor is not specific as to tumor size and subsite
 - Chest xray, CT, or PET documents size but not location
 - Chest xray CT, or PET document location but not size
 - No mention of tumor invasion of adjacent ipsilateral lobe (code 220)
- CS Extension codes 110-250 **have not** been ruled out, but tumor appears confined to one lung.
 - See criteria under Code 100
- No statement indicating localization to the lung, no statement regarding involvement of the pleura or mediastinum but tumor appears clinically confined to one lung.

Code 999

- No chest xray, CT, PET, or scope documentation
- No physician statement of stage
- Multiple bilateral nodules, primary tumor has not been determined and there is no information on extension
- Chest xray, CT, or PET scan are available, however there is not enough documentation to assign CS Extension and there is no physician statement of any T code designation.

Reminder: According to the AJCC, “pleural based” means location, not involvement. If that is the only extension information in the medical record, do not code CS Ext 430, involvement of the pleura (CA Forum). Pleural thickening does not equate to pleural involvement. Use the criteria in Lung CS Extension codes 100/300.