

Hematopoeitic & Lymphoid Neoplasms

NAACCR 2018-2019 WEBINAR SERIES

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Q&A

Please submit all questions concerning the webinar content through the Q&A panel.

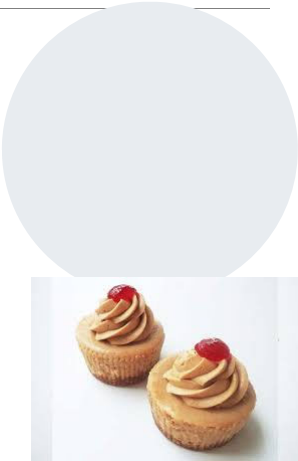
If you have participants watching this webinar at your site, please collect their names and emails

We will be distributing a Q&A document in about one week. This document will fully answer questions asked during the webinar and will contain any corrections that we may discover after the webinar.

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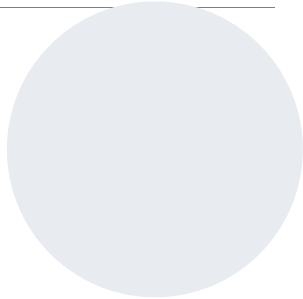
Fabulous Prizes



Guest Speaker

Jennifer Ruhl, CTR

- Public Health Analyst NIH/NCI SEER



Agenda

Review of Hematopoietic and Lymphoid Neoplasm Manual and Database

- Overview
- Updates

Review of Case Scenarios

- Primary Site/Histology
- Stage
- SSDI's
- Treatment

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Hematopoietic and Lymphoid Neoplasm Manual and Database

OVERVIEW

UPDATES

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Diagnostic Confirmation

No priority hierarchy

Use Code 1 ONLY when tissue, bone marrow, or peripheral blood smear used to diagnose specific histology

Originally confirmed by histology (Code 1) and then immunophenotyping, genetic testing or JAK2 confirms more specific with no evidence of transformation – Code 3

- *Hematopoietic and Lymphoid Neoplasm Coding Manual pg 13*

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Diagnostic Confirmation

Microscopically Confirmed

- Code 1 – Positive histology
 - Bone marrow specimens
 - Peripheral blood smear (9590/3-9992/3)
 - Flow cytometry
 - Leukemia only (9800/3 – 9948/3) – CBC, WBC
 - Microscopically confirmed AND
 - Immunophenotyping, genetic testing or JAK2 not done OR done but negative
- Code 2 – Positive cytology (rarely used)

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Diagnostic Confirmation

Microscopically Confirmed

- Code 3 – Positive histology PLUS
 - Positive immunophenotyping AND/OR
 - Positive genetic studies
- Code 4 – Positive microscopic confirmation, method not specified
 - Rarely used;

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Diagnostic Confirmation

Not Microscopically Confirmed

Code 5 – Positive Lab test/marker study; rarely used

Code 6 – Direct visualization w/o microscopic confirmation

Code 7 – Radiology and other imaging techniques w/o microscopic confirmation

Code 8 – Clinical diagnosis only

Confirmation Unknown

Code 9 – Unknown whether or not microscopically confirmed, DCO

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Transformation

- A chronic neoplasm is a neoplasm that can transform TO an acute/more severe neoplasm
 - CLL/SLL (9823/3)
 - Diffuse large B-cell lymphoma (9680/3)
- An acute neoplasm is a neoplasm that may have transformed FROM a chronic neoplasm
 - Acute myeloid leukemia (9861/3)
 - Myelodysplastic syndrome (9989/3)

Hematopoietic & Lymphoid Neoplasms

MANUAL
DATABASE

Four ~~Five~~ steps to using the Hematopoietic Database

1. Identify the working histology code(s)
2. Determine the number of primaries
3. Verify or revise the working histology code(s)
4. Determine primary site
- ~~5. Determine the grade~~
8 (not applicable for 2018 cases).

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Example

A patient is diagnosed at your facility in 2018 with acute myeloid leukemia.

Looking in your registry database you see that the patient was diagnosed and treated for refractory anemia with ring sideroblasts in 2010.

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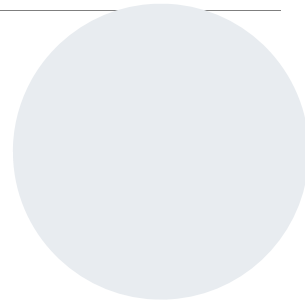
Step 1: Identify the working histology code(s)

Refractory anemia with ring sideroblasts

- 9982/3

Acute myeloid leukemia

- 9861/3



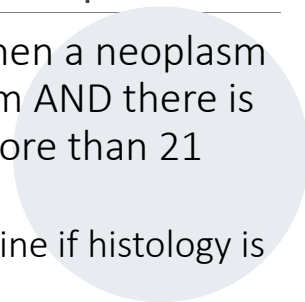
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Step 2: Determine the number of primaries

Rule M10: Abstract as **multiple primaries** when a neoplasm is originally diagnosed as a chronic neoplasm AND there is a second diagnosis of an acute neoplasm more than 21 days after the chronic diagnosis.

- Check the Hematopoietic Database to determine if histology is transformation to/from.



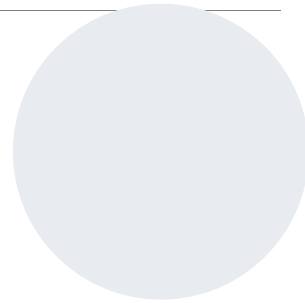
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Step 3: Verify or revise the working histology code(s)

2010 – 9982/3

2018 – 9861/3



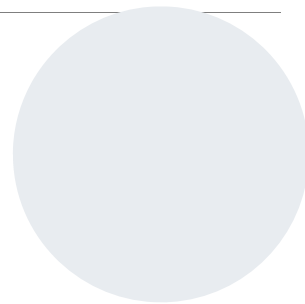
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Step 4: Determine primary site

2010 - C421

2018 - C421



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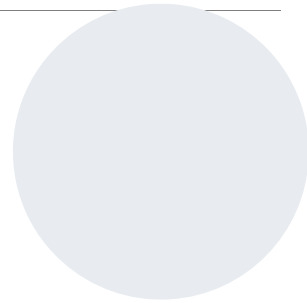
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Step 5: Determine the grade

2010 – Grade 9

2018

- Clinical Grade 8
- Pathological Grade 8
- Post Therapy Grade Blank

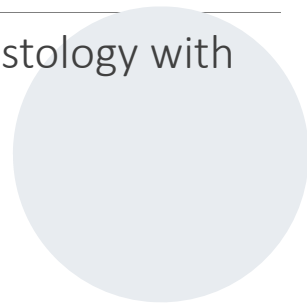


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Review of case scenarios

A this point we can work primary site/histology with our case scenarios.



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Case Scenario 1 Answers

	Primary 1	Primary 2
Number of primaries	1	
M Rule	M2	
Primary Site	C77.8	
Histology	9680/3	
PH Rule	PH21	

Case Scenario 2 Answers

	Primary 1	Primary 2
Number of primaries	1	
M Rule	M2	
Primary Site	C42.1	
Histology	9823/3	
PH Rule	PH5	

Case Scenario 3 Answers

	Primary 1	Primary 2
Number of primaries	1	
M Rule	M2	
Primary Site	C42.1	
Histology	9732/3	
PH Rule	PH30	

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2018 Updates

Grade no longer applicable for cases diagnosed 2018+

- Grade fields coded to 8 (exception: Follicular lymphomas in the Lymphoma Ocular Adnexa schema)

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2018 Updates

Plasmacytomas and Multiple Myeloma

- **EXCEPTION: For plasmacytoma (9731, 9734) and plasma cell myeloma (9732):** This rule would only apply if the initial workup was completed and a single plasmacytoma was diagnosed. If plasma cell myeloma is diagnosed after the initial workup and treatment, then this rule would be applicable and the multiple myeloma would be a second primary.

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Staging

AJCC

EOD

SUMMARY STAGE

SSDI

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Lymphoma (excluding CLL/SLL)

- AJCC Chapters 79 and 80
- Lugano Stage used for AJCC Stage
- Summary Stage 2018 Chapter: Lymphoma
- SSDI's
 - Schema Discriminator for 9591/3
 - B symptoms
 - HIV status
 - NCCN International Prognostic Index (IPI)

Lymphoma-CLL/SLL

- AJCC Chapters 79 and 80
- Histology 9823
- Lugano Stage used for AJCC Stage
- Summary Stage 2018 Chapter: Lymphoma
- SSDI's (in addition to SSDIs in Lymphoma): Used to determine RAI stage
 - Adenopathy
 - Anemia
 - Lymphocytosis
 - Organomegaly
 - Thrombocytopenia

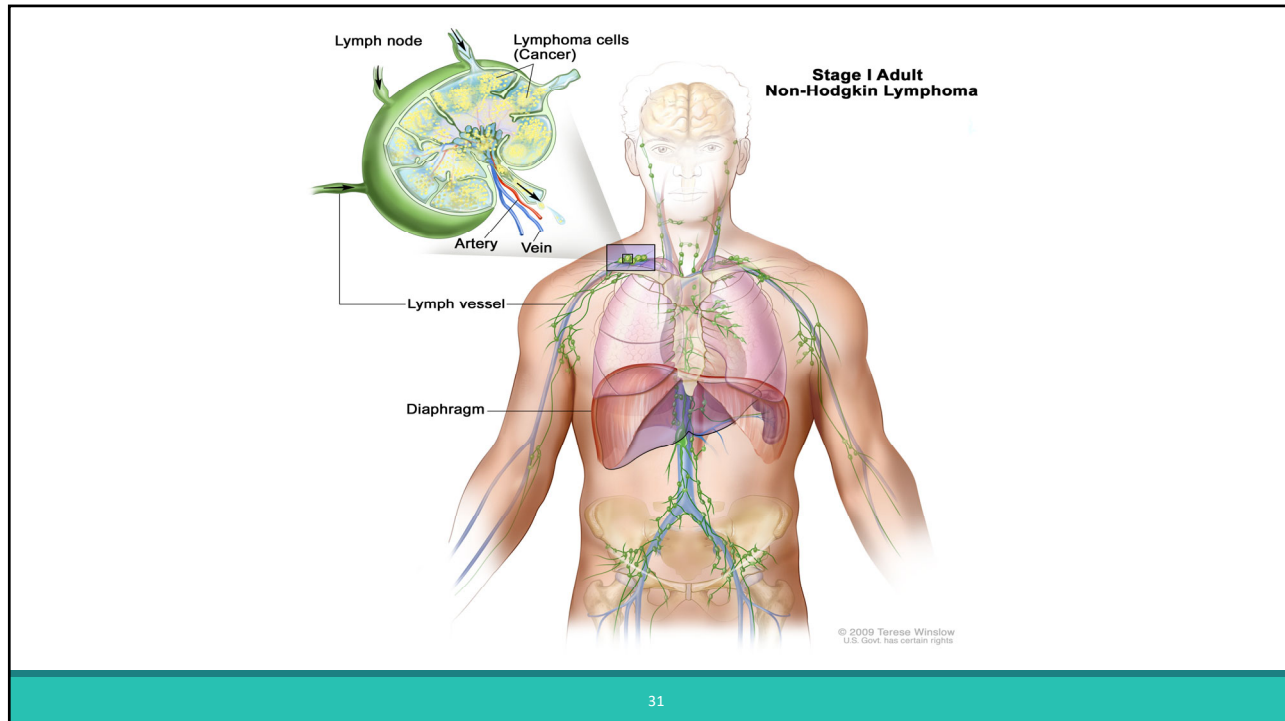
Plasma Cell Myeloma

- AJCC Chapter 82
- Histology: 9732
- Summary Stage 2018 Chapter: Myeloma and Plasma Cell Disorders
- SSDI's (needed for RISS stage):
 - Schema Discriminator 1
 - High-risk Cytogenetics
 - Serum Albumin Pretreatment Level
 - Serum Beta-2 Microglobulin Pretreatment Level
 - LDH (Lactate Dehydrogenase) Pretreatment Level

AJCC Stage Chapter Review

CHAPTER 79 HODGKIN AND NON-HODGKIN LYMPHOMAS

CHAPTER 82 PLASMA CELL MYELOMA AND PLASMA CELL DISORDER



Lugano Classification for Hodgkin and Non-Hodgkin lymphoma

- This is the stage that is recorded in the AJCC Stage Group data item.
- Used for all lymphomas eligible for staging in chapter 79 (including CLL/SLL).
- Similar to what was collected in 7th edition

Extranodal Disease (E)

Waldeyer's ring, thymus, spleen are considered nodal.

- Do not use E suffix

The (E) suffix is used for lymphomas that arise in extranodal sites or when lymphoma arising from a node extends into an extranodal site.

- Liver is an exception. Any liver involvement is Stage 4.
- The (E) suffix may only be used with Stage 1 or Stage 2 disease. It is no longer valid with Stage 3 disease.

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Bulky Disease

Indicates a clinically enlarged mass

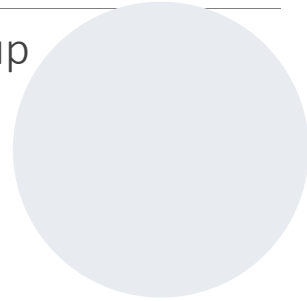
- Hodgkin Lymphoma (HL)
 - If mediastinal, "Bulky" is defined as greater than 1/3 the size of the cavity.
 - If not mediastinal, "Bulky" is defined as greater than 10cm
- Non-Hodgkin Lymphoma (NHL)
 - Definition varies based on histology.
- Look for physician statement of "Bulky"
- Stage 2 Bulky is a new stage category for 8th edition

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A/B Classification

No longer included as part of stage group
Collected as an SSDI



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CLL/SLL

Lugano Classification for Hodgkin and Non-Hodgkin lymphoma

- This is the stage information collected in the *AJCC TNM Clin Stage Group* data item.
- Involvement of bone marrow or peripheral blood is stage 4.

Modified Rai staging system and Binet staging system

- **Not** collected in the *AJCC TNM Clin Stage Group* data item.
- Components of the Rai and Binet system collected in SSDI's.

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Chapter 82-Plasma Cell Myeloma

AJCC TNM Clin Stage Group data item is always coded to 88.

RISS Stage Group components are collected in the SSDI's.

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Pop Quiz 1

A patient is found to have a bilateral mediastinal lymphadenopathy.

- One of the enlarged lymph nodes extends into the left lung.

No additional abnormalities were identified.

A biopsy of the mass confirms non-Hodgkin lymphoma.

Data Item	Value
Clinical T	88
Clinical N	88
Clinical M	88
Clinical Stage Group	2E
Pathological T	88
Pathological N	88
Pathological M	88
Pathological Stage Group	99

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Pop Quiz 2

A CT of the chest and abdomen show mediastinal, axillary, and abdominal lymphadenopathy.

- One of the enlarged mediastinal lymph nodes extends into the left lung.
- No additional abnormalities were identified.
- A biopsy of the mass confirms non-Hodgkin lymphoma.

Data Item	Value
Clinical T	88
Clinical N	88
Clinical M	88
Clinical Stage Group	4
Pathological T	88
Pathological N	88
Pathological M	88
Pathological Stage Group	99

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Pop Quiz 3

A patient is found to have a large mediastinal mass.

- The mass measures 11cm's and the physician states the patient has Stage 2 Bulky disease

No additional abnormalities were identified.

A biopsy of the mass confirms non-Hodgkin lymphoma.

Data Item	Value
Clinical T	88
Clinical N	88
Clinical M	88
Clinical Stage Group	2 Bulky
Pathological T	88
Pathological N	88
Pathological M	88
Pathological Stage Group	99

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EOD

PRIMARY TUMOR
REGIONAL NODES
METASTASIS

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Lymphomas

EOD Primary Tumor

- Code 100: Nodal lymphoma confined to one LN chain
- Code 200: Extranodal lymphoma confined to site
- Code 300: Nodal lymphoma with two or more LN chains involved on SAME side of diaphragm
- Code 400: Extranodal lymphoma with involvement of regional lymph nodes

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Lymphomas

EOD Primary Tumor

- Blood/peripheral blood involvement is NOT involvement of extranodal site
- This is systemic involvement (see code 800)

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Lymphomas

EOD Primary Tumor

- Code 500: Codes 300 or 400 WITH bulky disease
- Code 600: Involvement of lymph nodes on both sides of the diaphragm
- Code 700: Diffuse or disseminated (multifocal) involvement of ONE OR MORE extralymphatic organ(s)/site(s)
 - WITH or WITHOUT lymph node involvement

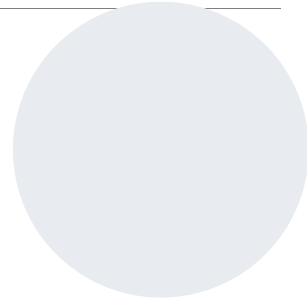
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Lymphomas

EOD Primary Tumor

- Code 800: Metastatic involvement
 - Blood/peripheral blood
 - Bone marrow
 - Cerebrospinal fluid (CSF)
 - CNS (if not CNS primary)
 - Lung (if not Lung primary)



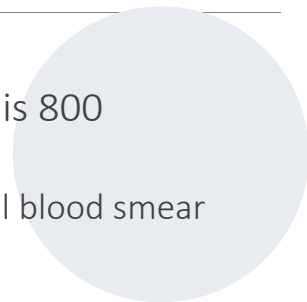
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Lymphomas

EOD Primary Tumor

- If primary site is C421, EOD Primary Tumor is 800
 - Commonly seen with CLL/SLL
 - Diagnosed via Bone marrow biopsy or Peripheral blood smear



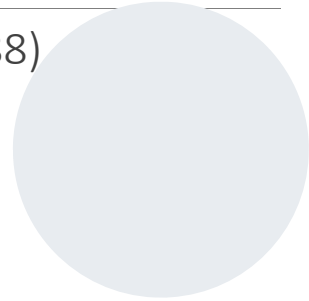
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Lymphomas

EOD Regional Nodes: Not applicable (888)

EOD Mets: Not applicable (88)



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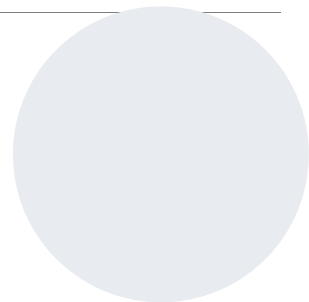
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HemeRetic

Schema includes mostly Leukemias

If Leukemia, primary site C421

- EOD Primary Tumor: 800
- EOD Regional Nodes: 888
- EOD Mets: 88



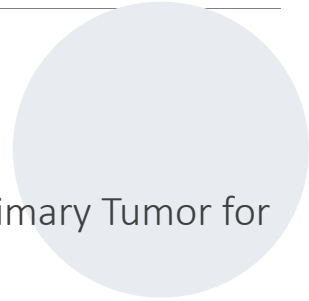
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HemeRetic

Some histologies not Leukemias

- Langerhans
- Dendritic tumors
- Code 100 if localized (see Note 1 in EOD Primary Tumor for histologies that can be coded 100)
- Code 700 if metastatic
- Code 999 if unknown



Summary Stage 2018

Lymphoma

Code 1: Localized: single nodal chain involved or single organ involved

Code 2: Previously code 5 (SS2000)

- Bulky disease present
- Involvement of regional nodes on same side diaphragm

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Lymphoma

Code 7:

- Involvement of regional LNs on both sides of diaphragm
- Two or more extralymphatic sites involved
- Diffuse or disseminated involvement of extralymphatic sites
- Distant metastasis: Blood/peripheral blood, bone marrow, CSF, CNS, Lung

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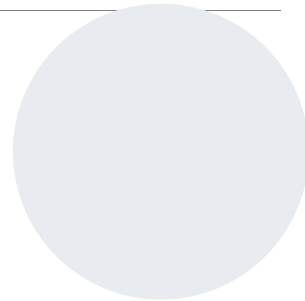
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HemeRetic

Schema includes mostly Leukemias

If Leukemia, primary site C421

- Summary Stage 7



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HemeRetic

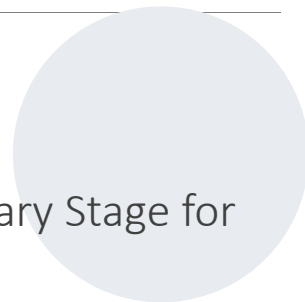
Some histologies not Leukemias

- Langerhans
- Dendritic tumors

Code 1 if localized (see Note 3 in Summary Stage for histologies that can be coded 1)

Code 7 if metastatic

Code 9 if unknown



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SSDI's

LYMPHOMA

CLL/SLL

MYELOMA

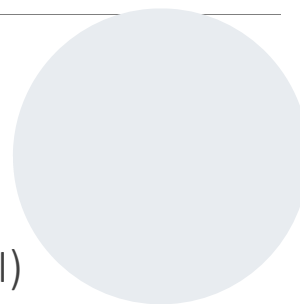
Lymphoma

Schema Discriminator for 9591/3

B symptoms

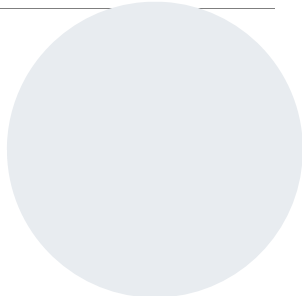
HIV status


NCCN International Prognostic Index (IPI)



CLL/SLL

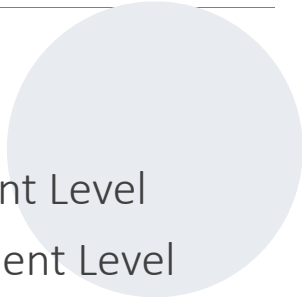
Adenopathy
Anemia
Lymphocytosis
Organomegaly
Thrombocytopenia




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Plasma Cell Myeloma

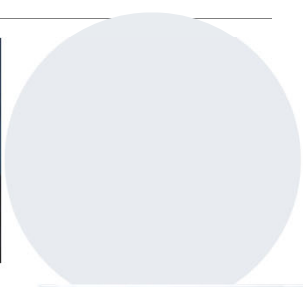
High-risk Cytogenetics
Serum Albumin Pretreatment Level
Serum Beta-2 Microglobulin Pretreatment Level
LDH (Lactate Dehydrogenase) Pretreatment Level



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Review of Case Scenarios

Fabulous Prize Winners



Coming UP...

Collecting Cancer Data: Neuroendocrine Tumors

- 05/02/2019

Collecting Cancer Data: Ovary

- 06/06/2019



CE Certificate Quiz/Survey

Phrase

Lugano

Link

<https://www.surveygizmo.com/s3/4929368/Heme-2019>

