

# Lung 2022 Case Scenario: Answer Sheet

## PTCASE 1

Tumor Description		Grade		Tumor Size	
Primary Site	C34.1	Clinical	3	Clinical	041
Laterality	2	Pathological	9	Pathological	999
Histology	8070	Post Therapy (yc)		Summary	041
Behavior	/3	Post Therapy (yp)			

AJCC Staging Items							
Clinical T	cT2b	Pathological T		Post-therapy cT		Post-therapy pT	
cT Suffix		pT Suffix		ypT Suffix		ypT Suffix	
Clinical N	cN0	Pathological N		Post-therapy cN		Post-therapy pN	
cN Suffix	(f)	pN Suffix		ypN Suffix		ypN Suffix	
Clinical M	cM0	Pathological M		Post-therapy M		Post-therapy M	
Stage Group	IIA	Stage Group	99	Stage Group		Stage Group	

SS2018/EOD					
Summary Stage 2018	1				
Extent of Disease					
EOD Primary Tumor	300	EOD Regional Nodes	000	EOD Mets	00

Regional Nodes Positive	00
Regional Nodes Examined	95

SSDIs			
Separate Tumor Nodules	0	ALK Rearrangement	9
Pleural Invasion	9	EGFR Mutation Analysis	9

Treatment			
Surgery Codes		Systemic Therapy Codes	
Diagnostic Staging Procedure	02	Chemotherapy	03
Surgical Procedure of Primary Site	00	Hormone Therapy	00
Scope of Regional Lymph Node Surgery	1	Immunotherapy	00
Radiation			
Primary Treatment Volume	30	Dose per FX	00750
Draining LN	00	Fractions	008
Modality (x06)	02	Total Dose	006000
EB Planning technique	10		

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## CASE 2

Tumor Description		Grade		Tumor Size	
Primary Site	C34.1	Clinical	9	Clinical	039
Laterality	2	Pathological	9	Pathological	999
Histology	8070	Post Therapy (yc)		Summary	039
Behavior	/3	Post Therapy (yp)			

### AJCC Staging Items

Clinical T	cT3	Pathological T		Post-therapy cT		Post-therapy pT	
cT Suffix		pT Suffix		ypT Suffix		ypT Suffix	
Clinical N	cN2	Pathological N		Post-therapy cN		Post-therapy pN	
cN Suffix		pN Suffix		ypN Suffix		ypN Suffix	
Clinical M	cM1a	Pathological M		Post-therapy M		Post-therapy M	
Stage Group	IVA	Stage Group	99	Stage Group		Stage Group	

### SS2018/EOD

Summary Stage 2018	7				
Extent of Disease					
EOD Primary Tumor	500	EOD Regional Nodes	400	EOD Mets	10

Regional Nodes Positive	98
Regional Nodes Examined	00

### SSDs

Separate Tumor Nodules	1	ALK Rearrangement	9
Pleural Invasion	9	EGFR Mutation Analysis	9

### Treatment

Surgery Codes		Systemic Therapy Codes	
Diagnostic Staging Procedure	02	Chemotherapy	00
Surgical Procedure of Primary Site	00	Hormone Therapy	00
Scope of Regional Lymph Node Surgery	00	Immunotherapy	01

### Radiation

Primary Treatment Volume	00	Dose per FX	00000
Draining LN	00	Fractions	000
Modality (x06)	00	Total Dose	000000
EB Planning technique	00		

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## JEOPARDY

*The answer is next to each number. Select the scenario that best reflects the answer.*

1. Pathologic grade 2
  - Patient with biopsy showing a moderately differentiated adenocarcinoma, resection showed poorly differentiated adenocarcinoma. Path grade 3
  - Patient with biopsy showing a moderately differentiated adenocarcinoma, resection showed no residual tumor.
  - Patient with biopsy showing a poorly differentiated adenocarcinoma, resection showed moderately differentiated adenocarcinoma Path grade 3
  - Patient with biopsy showing a moderately differentiated adenocarcinoma, patient proceeded with XRT Path grade 9
  
2. Pathologic Grade 3
  - Patient with lung biopsy revealing a poorly differentiated squamous cell carcinoma, patient with liver and bone metastasis seen on scans. Path grade 9
  - Patient with lung biopsy revealing a poorly differentiated squamous cell carcinoma, patient with suspected hilar node metastasis seen on scans, proceeded to treatment with Keytruda. Path grade 9
  - Patient with lung biopsy revealing a poorly differentiated squamous cell carcinoma, patient had resection of the primary tumor with anaplastic squamous cell carcinoma identified. Path grade 4
  - Patient with lung biopsy revealing a poorly differentiated squamous cell carcinoma, patient with liver and bone metastasis seen on scans, liver biopsy showed moderately differentiated squamous cell carcinoma.
  
3. Lung – separate tumor nodules 1
  - Patient presents for screening lung CT – 2 nodules are identified in the RUL, resection revealed synchronous primary tumors (lepidic adenocarcinoma and acinar adenocarcinoma) Code 0
  - Patient presents for screening lung CT – 1 nodule identified in the RUL and one in the RLL, biopsies revealed synchronous primary tumors (lepidic adenocarcinoma and acinar adenocarcinoma) Code 0
  - Patient presents for screening lung CT – 2 nodules are identified in the RUL, biopsy of the larger tumor revealed adenocarcinoma
  - Patient presents for screening lung CT – 1 nodule identified in the RUL and one in the RLL, biopsy of the RUL tumor revealed adenocarcinoma Code 2

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4. Visceral/Parietal Pleural Invasion coded as 0
  - Patient with new lung nodule noted in the peripheral LLL, patient with wedge resection – pathology report shows a 2.2 cm mucinous adenocarcinoma. At the postop visit, the MD states the tumor extended to the elastic layer.
  - Patient with new lung nodule noted in the peripheral LLL, scans were suspicious for parietal pleural invasion. Code 9
  - Patient with new lung nodule noted in the peripheral LLL, patient with FNA – pathology report shows a mucinous adenocarcinoma that appeared to invade the visceral pleura. Code 9
  - Patient with new lung nodule noted in the peripheral LLL, patient with wedge resection – pathology report shows a 2.2 cm mucinous adenocarcinoma that invaded the visceral pleura only. Code 4
  
5. Tumor Size Summary 008
  - Patient with new lung nodules seen on CT chest in the RUL, 3 nodules measured as 8 cm, 4 cm and 2 cm, patient placed on Keytruda 080
  - Patient with new lung nodules seen on CT chest in the RUL, 2 nodules 8 mm and 6 mm, wedge resection performed with both nodules removed, pathology states 7 mm and 5 mm. 007
  - Patient with new lung nodules seen on CT chest in the RUL, one nodule was between 7 and 9 mm; the other was between 6 and 8 mm, patient given radiation.
  - Patient with new lung nodules seen on CT chest in the RUL, patient taken to surgery and had a right upper lobectomy, tumor size 8 cm and 1.4 cm. 080
  
6. Clinical Staging cTX cN0 cM0 Stage group unknown
  - Patient presents with ongoing cough and congestion. Chest CT showed infiltrates but no discrete tumor, bronchoscopy did not identify any sites of concern, bronchial washings revealed malignant cells.
  - Patient presents with ongoing cough and congestion. Chest CT showed infiltrates and a 1 cm RUL nodule, bronchoscopy did not identify any sites of concern, bronchial washings revealed malignant cells. cT1a cN0 cM0 Stage group IAI
  - Patient presents with ongoing cough and congestion. Chest CT showed infiltrates but no discrete tumor, bronchoscopy with FNA of a level 10R node. Node was positive for adenocarcinoma. cT0 cN1(f) cM0 Stage group 99
  - Patient presents with ongoing cough and congestion. Chest CT showed infiltrates and a RUL nodule-1 cm, bronchoscopy with biopsy of the nodule was positive for adenocarcinoma. cT1a cN0 cM0 Stage group IAI

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7. Pathological Staging pT1b(m) pN0(f) cM0 Stage group IA2
- Patient with 2 RLL tumors, FNA of a level 10R node was negative, wedge resection performed along with dissection of 6 regional nodes and identified synchronous primary tumors. pT1b(m) pN0 cM0 Stage group IA2
  - Patient with 2 RLL tumors, FNA of a level 10R node was negative, wedge resection performed and identified one primary tumor and one intrapulmonary mets. pT3 pN0(f) cM0 Stage group IIB
  - Patient with 2 RLL tumors, FNA of a level 10R node was neg. Wedge resection and removal of 6 regional nodes; 1 RLL primary tumor, 1 intrapulmonary met, and 6 negative nodes. pT3 pN0 cM0 Stage group IIB
  - Patient with 2 RLL tumors, FNA of a level 10R node was negative, wedge resection performed and identified synchronous primary tumors.
8. Primary site: C34.1 (Lung, upper lobe)
- Patient with a chest CT scan that identified a Pancoast Tumor
  - Patient with a chest CT scan that identified a mass at the carina. C34.0
  - Patient with a chest CT scan that identified a mass extending up to the hilum C34.9
  - Patient with a chest CT scan that identified a suprahilar mass C34.9
9. Histology: 8257/3 (minimally invasive mucinous adenocarcinoma)
- Patient with a single tumor in the RUL: Biopsy report identifies a probable minimally invasive mucinous carcinoma, resection confirms mucinous carcinoma. 8253/3
  - Patient with a single tumor in the RUL: Pathology report identifies a mucinous carcinoma and minimally invasive mucinous carcinoma.
  - Patient with a single tumor in the RUL: Pathology report identifies a mucinous adenocarcinoma with a minimally invasive pattern 8253/3
  - Patient with a single tumor in the RUL: Pathology report identifies a minimally invasive adenocarcinoma and a mucinous adenocarcinoma. 8253/3 (min invasive adenocarcinoma column 2, mucinous column 3)
10. Summary Stage 2018 3(Regional lymph node(s) involved only)
- Patient presents with cough, Chest CT revealed a RUL mass and atelectasis extending to the hilar region. 2
  - Patient presents with cough, Chest CT revealed a RUL mass with invasion of the parietal pleura 2
  - Patient presents with cough, Chest CT revealed a RUL mass and superior vena cava syndrome.
  - Patient presents with cough, Chest CT revealed no evidence of tumor in the lungs, but malignant cells in the bronchial washings. 9