



NAACCR


Bladder
2024



NAACCR 2024-2025 MONTHLY
WEBINAR SERIES

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NAACCR

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

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Guest
Presenter


- Denise Harrison, BS, ODS

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Agenda

- Overview
 - Anatomy
 - Stage
 - Treatment
 - Scenarios
- Solid Tumor Rules



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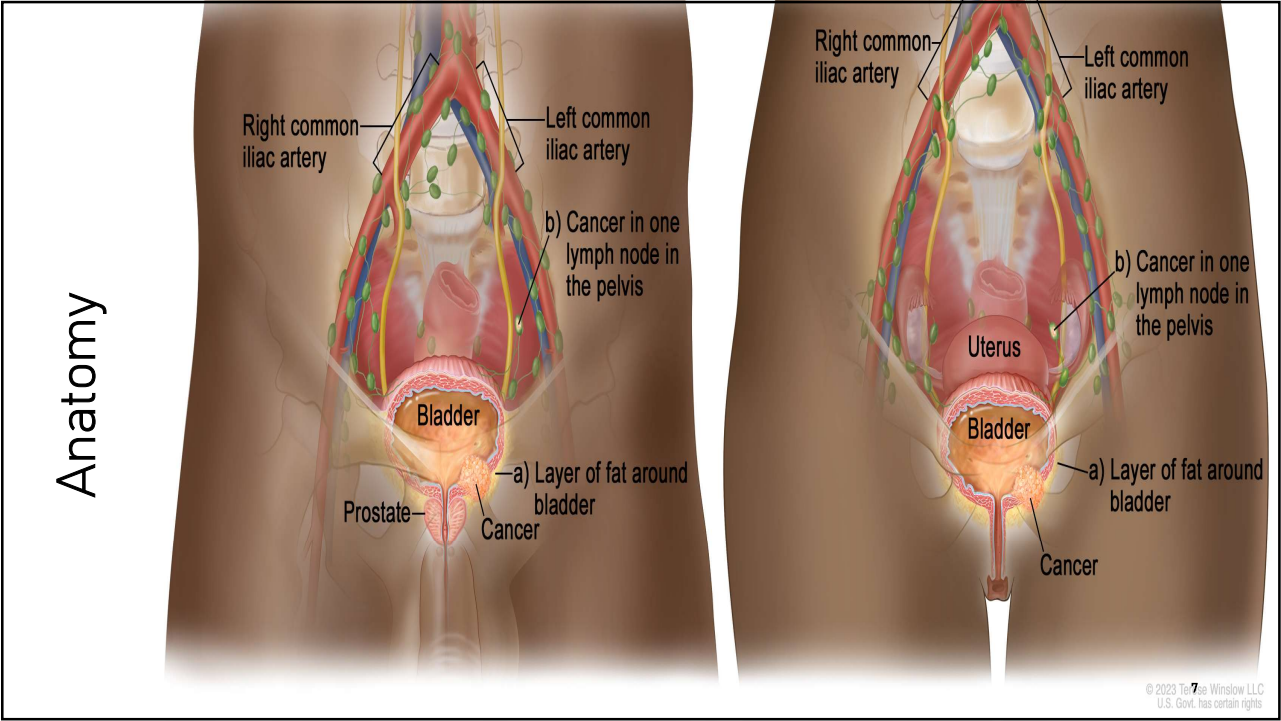
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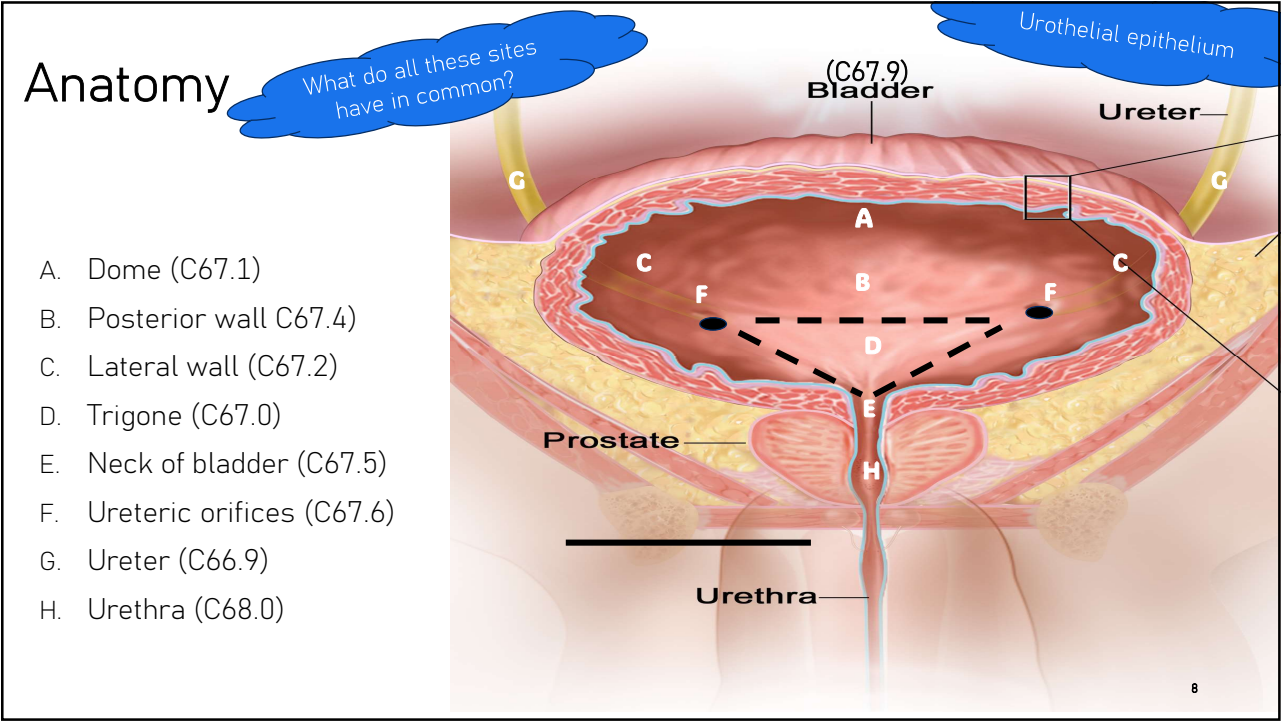
Overview

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Anatomy

A. Lumen (empty space in the bladder)

B. Urothelium

C. Subepithelial connective tissue/lamina propria

- Superficial (inner half)
- Deep (outer half)

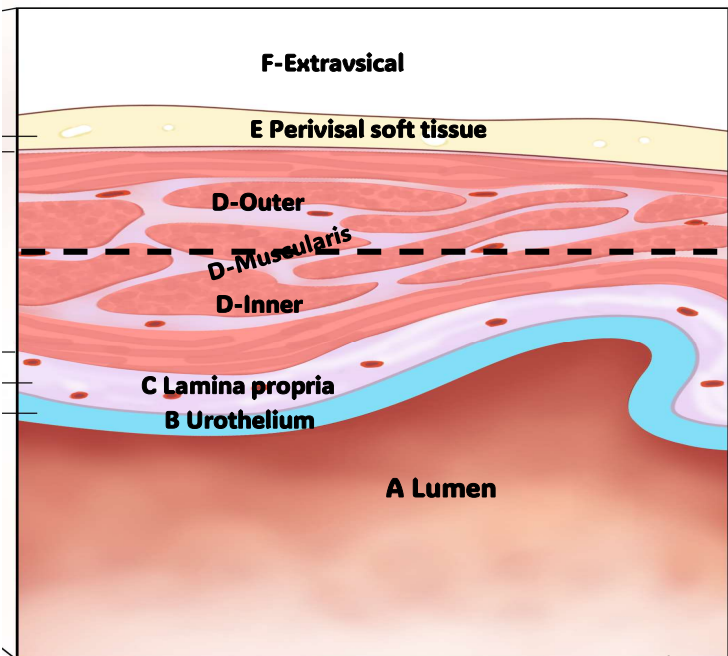
D. Muscularis Propria/Detrusor muscle

- Superficial (inner half)
- Deep (outer half)

E. Perivesical fat/tissue

- Adventitia
- Serosa (mesothelium)

F. Extravesical



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Tumor Progression/Staging

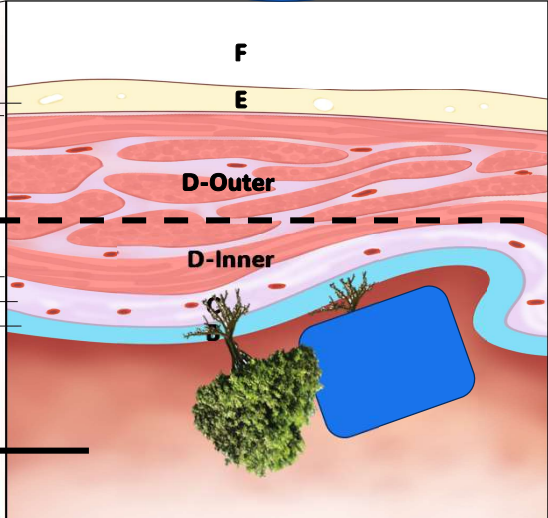
Code	Description
000	Papillary (8130/2, 8131/2, other histologies, see code 050) <ul style="list-style-type: none">Non-infiltrating or non-invasive papillary transitional cell carcinomaNon-infiltrating or non-invasive papillary urothelial carcinomaPapillary transitional cell carcinoma, with inferred description of non-invasionPapillary urothelial carcinoma, with inferred description of non-invasion
050	Nonpapillary <ul style="list-style-type: none">Carcinoma in situ, NOSSessile (flat) (solid) carcinoma in situTransitional cell carcinoma in situUrothelial carcinoma (in situ, non-infiltrating, non-invasive) Multifocal papillary and nonpapillary non-invasive tumors (see Note 4)
100	Confined to mucosa, NOS
130	Lamina propria <ul style="list-style-type: none">StromaSubepithelial connective tissueSubmucosaSubserosaTunica propria
150	Localized, NOS

Fat around the bladder

Muscle layers

Connective tissue

Inner lining



Follow along on page 771 of your AJCC Manual

Non-Muscle Invasive Bladder Carcinoma (NMIBC)

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Tumor Progression/Staging

200	PATHOLOGICAL assessment only (requires a cystectomy) Muscle (muscularis propria) of bladder only > Superficial muscle - inner half
250	PATHOLOGICAL assessment only (requires a cystectomy) Extension to distal ureter > Superficial muscle of bladder and/or distal ureter
300	PATHOLOGICAL assessment only (requires a cystectomy) Muscle (muscularis propria) of bladder only > Deep muscle--outer half Extension through full thickness of bladder wall BUT still contained within bladder wall
350	PATHOLOGICAL assessment only (requires a cystectomy) Extension to distal ureter > Deep muscle or extension through wall of bladder and/or distal ureter
370	Muscle (muscularis propria) invaded, NOS of bladder only
400	Extension to distal ureter > Muscle (muscularis propria) invaded, NOS of bladder and/or distal ureter

Follow along on page 771 of your AJCC Manual

Muscle Invasive Bladder Carcinoma (MIBC)

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Scenario 1

- 1/22/24 Patient presents with blood in their urine
- Cystoscopy and biopsy performed at urologist office
 - A single large papillary tumor is identified and bx confirms papillary urothelial carcinoma.

Cystoscopy

Cystoscope

Fluid

Urethra

Vagina

Anus

Rectum

Fluid filling the bladder

Uterus

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Scenario 1

- 2/12/24 TURB is performed at your facility.
 - Operative Report:
 - Bi-manual EUA
 - Using a 24-French cutting loop resectoscope a resection of the bladder tumor was performed.
 - Coagulation was performed around the periphery and at the base of the tumor.
 - Intravesical gemcitabine was given..
 - Pathology shows low grade papillary carcinoma with invasion into the lamina propria

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Scenario 1

- 3/1/24 Patient returns for a repeat TURB. No residual tumor.
- 3/21/24 Patient begins a weekly installation regimen of gemcitabine
- 5/7/24 patient concludes intravesical therapy.
- No further treatment. Surveillance only.

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Adjuvant Intravesical Tx for Early Stage Disease

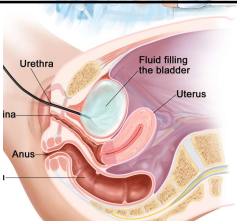
WHEN?

- Multifocal CIS
- CIS + Ta or T1
- Grade 3 tumors
- Multifocal tumors
- Rapid recurrence after TURBT

Adjuvant treatments

- Thiotepa
- Doxorubicin
- Gemzar
- Mitomycin-C
- BCG (w/ or w/o maintenance doses)

Could be done in doctors' offices




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Scenario 1

- 1/22/24-biopsy
- 2/12/24-TURB
 - Low grade urothelial carcinoma with invasion into lamina propria
 - Intravesical chemo
- 3/1/24-Repeat TURB
 - No residual
- 3/21/24 intravesical chemo



Data Item	Value
Summary Stage	1-Localized
EOD Primary Tumor	130-inv of lamina propria
cT	cT1
cN	cN0
cM	cM0
cStage	1

Data Item	Value
Dx Staging Procedure	02
Surgery Primary Site	A270
Chemotherapy	02

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Scenario 2

- 1/22/24 Patient presents with blood in their urine
- Cystoscopy and biopsy performed at urologist office
 - A single large papillary tumor is identified and bx confirms malignancy

Cystoscopy

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Scenario 2

- 2/12/24 TURB and Examination under anesthesia is performed at your facility.
- Operative Report:
 - Using a 24-French cutting loop resectoscope a resection of the bladder tumor was performed.
 - Coagulation was performed around the periphery and at the base of the tumor.
 - Intravesical gemcitabine was given.
 - Pathology shows papillary high-grade urothelial carcinoma with muscle invasion.

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Scenario 2

- 2/21/24 Patient began a 28-day cycles of neoadjuvant methotrexate, vinblastine, doxorubicin, and cisplatin (MVAC) followed by radical cystectomy
- 4/1/24 Patient had a radical cystectomy with neobladder reconstruction using a portion of the ileum.
 - No residual tumor
 - 32 lymph nodes negative

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Scenario 2

- 1/22/24-biopsy
 - Papillary high-grade urothelial carcinoma with superficial muscle invasion
 - Intravesical chemo
- 2/12/24-TURB
- 2/21/24-Neoadjuvant chemotherapy
- 4/1/24 Radical cystectomy with neobladder reconstruction.
 - No residual tumor
 - 32 neg nodes

Data Item				Value			
cT	cT2	pT		ycT		ypT	ypT0
cN	cN0	pN		ycN		ypN	ypN0
cM	cM0	pM		ycM		ypM	cM0
cStage	2	pStage	99			yp Stage	99
Summary Stage		1-Localized					
EOD Primary Tumor		370-Muscluaris invaded					

Data Item		Value
Dx Staging Procedure		02
Surgery Primary Site		A640 Radical cystectomy plus in situ pouch (orthotopic)
Chemotherapy		03

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Scenario 3

- Same initial dx and workup as case 2...
- 2/21/24 Patient began a bladder preservation treatment using a trimodal approach.
 - 2/21/24 Patient had a maximal TURBT (*visibly complete resection*).
 - 3/1/24-Concurrent cisplatin and radiotherapy.
 - 5/15/24-Follow-up cystoscopy shows no residual tumor.
 - No further treatment. Surveillance only.

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Scenario 3

- 1/22/24-biopsy
- 2/12/24-TURB
 - Papillary high-grade urothelial carcinoma with muscle invasion
 - Intravesical chemo
- 3/1/24-Concurrent cisplatin and radiotherapy.
- 5/15/24-Follow-up cystoscopy shows no residual tumor.
- No further treatment. Surveillance only.

Data Item				Value		
cT	cT2	pT		ycT	ypT	
cN	cN0	pN		ycN	ypN	
cM	cM0	pM		ycM	ypM	
cStage	2	pStage	99		yp Stage	
Summary Stage		1-Localized				
EOD Primary Tumor			370-Muscluaris invaded			

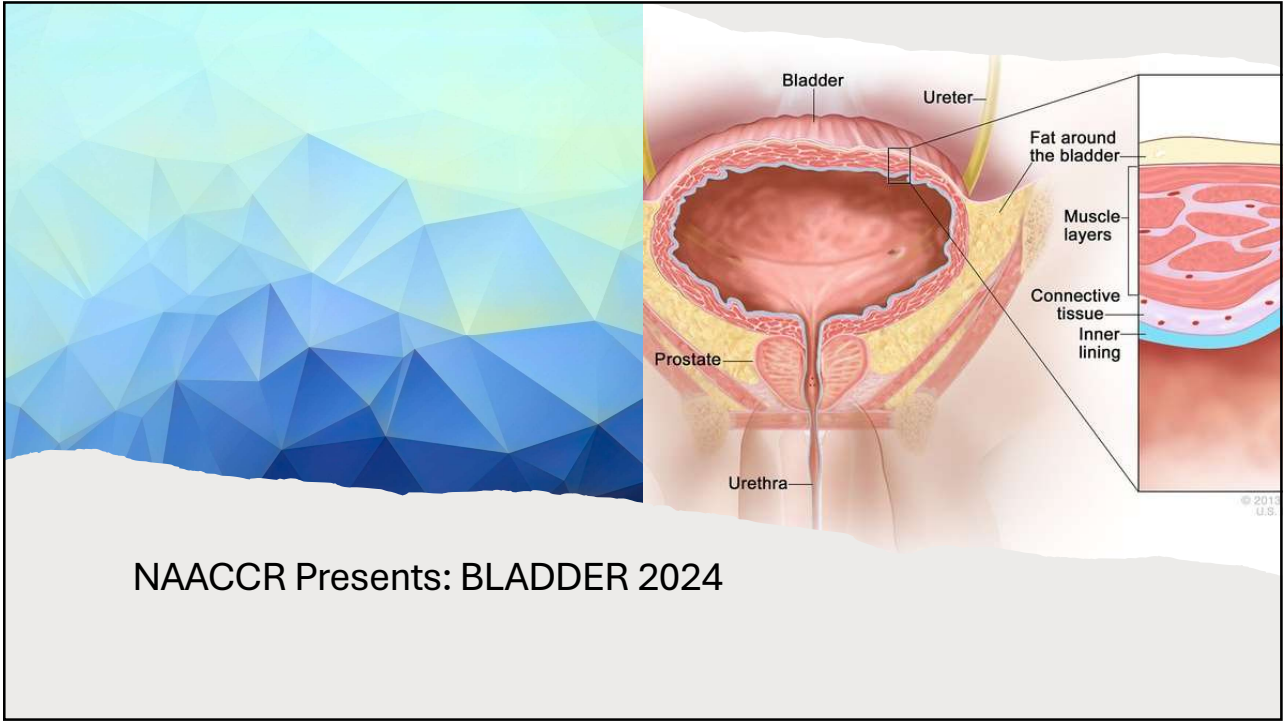
Data Item	Value
Dx Staging Procedure	02
Surgery Primary Site	A270
Chemotherapy	02

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Solid Tumor Rules (2024 Update)

Renal Pelvis, Ureter, **Bladder**, and other Urinary
(C659, C669, C670-C679, C680-C689)

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Poll #1


You are abstracting a 2020 bladder case in 2024. Which version of the Solid Tumor Rules should you use?

A. 2020 Update

B. 2024 Update

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The STR are Cumulative

- The STR are cumulative from the year in which the particular site-group module became effective JHO
- For bladder, the effective date for the urinary STRs was 1/1/2018
- Any urinary site covered by the urinary STR diagnosed 1/1/2018 and forward follows the most current version of the STR in effect at the time of abstraction
 - Example: 2018 bladder cancer abstracted in 2023 – use the most current version of the 2023 urinary STR to determine the # of primaries and histology
- Rules change – it is not necessary to go back and update cases based on more current STR once the case is completed

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Poll #2

In 2024, you are reviewing a bladder case you missed in 2019. The patient has a history of urothelial carcinoma diagnosed in 2017, and in 2019, he was diagnosed with a papillary urothelial carcinoma of the bladder. Which manual should you use to determine whether the 2019 tumor is a new primary or recurrence?

- A. Multiple Primary Rules
- B. 2019 Update of STR
- C. 2024 Update of STR**

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Solid Tumor Rules versus MP/H by Dx Year		
← Year of dx of current tumor →		
Site Group	Solid Tumor Rules	MP/H Rules
Head and Neck (2018+; 2019+ incl. C479, C754, C755 for paraganglioma)	2018-Current	2007-2017
Colon (2018+ incl. C199, C209)	2018-Current	2007-2017
Lung	2018-Current	2007-2017
Breast	2018-Current	2007-2017
Kidney	2018-Current	2007-2017
Urinary Sites	2018-Current	2007-2017
Non-Malignant CNS	2018-Current	2007-2017
Malignant CNS and Peripheral Nerves	2018-Current	2007-2017
Cutaneous Melanoma	2021-Current	2007-2020
Other Sites	2023-Current	2007-2022

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Equivalent Terms and Definitions

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Urothelial Carcinoma

Urothelial CA accounts for ~90% of **bladder** tumors in the U.S,

Papillary Urothelial Carcinoma (PUC)


- Warty growth projecting from the wall on a stalk
- Non-invasive PUC = /2
 - Sometimes called in situ
- Invasive PUC = /3

Non-papillary Urothelial Carcinoma (UC)

- Starts in mucosa (does not project from the wall)
- Non-invasive UC= /2
 - CIS
- Invasive UC = /3

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Equivalent or Equal Terms

- And; with (for ≥ 2 histo in 1 tumor)
- Flat TCC; flat urothelial CA; urothelial CIS; noninvasive flat CA; in situ TCC
- Multifocal; multicentric
- Non-invasive may describe both in situ papillary or flat urothelial CA
- Papillary CA; papillary TCC
- Papillary TCC; papillary urothelial CA
- Simultaneous; synchronous; existing at same time; concurrent; prior to FCOT
- Topography; site code
- Tumor; mass; tumor mass; lesion; neoplasm
- Type; subtype; variant
- Urothelial CA; TCC
- Urothelium; epithelium; transitional epithelium

Shaded terms are unique to the urinary sites

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Terms NOT Equivalent or Equal

- Carcinoma, NOS (8010) and adenocarcinoma, NOS (8140)
- Phenotype ≠ subtype/variant
- Noninvasive ≠ papillary UC ≠ flat UC
 - Noninvasive means the cancer has not invaded the subepithelial connective tissue (both AJCC Ta and Tis are noninvasive)
- Papillary growth pattern ≠ papillary urothelial carcinoma

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Table 1: ICD-O Primary Site Codes

Site Term and code	Synonyms
Bladder, anterior wall C673	-
Bladder, dome C671	Roof; Vault; Vertex
Bladder, lateral wall C672	Lateral to ureteral orifice; Left wall; Right wall; Sidewall
Bladder neck C675	Internal urethral orifice; Vesical neck
Bladder NOS C679	Lateral posterior wall (no hyphen)
Bladder, overlapping lesion C678	Fundus; Lateral-posterior wall (hyphen)
Bladder, posterior wall C674	-
Bladder, trigone C670	Base/Floor of bladder; Below interureteric crest/field/ridge
Bladder, urachus C677	Mid umbilical ligament; urachal remnant
Bladder, ureteric orifice C676	Just above ureteric orifice
Overlapping lesion of urinary organs C688	-
Paraurethral gland C681	-
Renal pelvis C659	Pelvis of kidney; Pelviureteric junction; Renal calyx/calices
Ureter C669	-
Urethra C680	Cowper gland; Littre glands; Prostatic utricle; Urethral gland
Urinary system NOS C689	-

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Table 2: Specific & NOS, Synonyms, & Subtypes/Variants (excerpt)

	Specific and NOS Histology Codes	Synonyms	Subtypes/Variants
Row 1	Adenocarcinoma NOS 8140 <i>Note: Urachal carcinoma NOS is coded 8010/3. Urachal adenocarcinoma is coded 8140/3.</i>	Mixed adenocarcinoma Urachal adenocarcinoma	Clear cell carcinoma 8310 Endometrioid carcinoma 8380 Enteric adenocarcinoma 8144 Mucinous adenocarcinoma 8480
Row 2	Malignant melanoma 8720/3		
Row 3	Malignant perivascular epithelioid cell tumor 8714/3	Malignant PEComa	
Row 4	Neuroendocrine carcinoma, NOS 8246/3		Large cell neuroendocrine tumor/combined large cell neuroendocrine carcinoma 8013/3 Small cell neuroendocrine carcinoma 8041/3
Row 5	Neuroendocrine tumor, NOS 8240/3	Neuroendocrine tumor, grade 1 Well differentiated neuroendocrine carcinoma Neuroendocrine carcinoma, low grade	Neuroendocrine tumor, grade 2 8249/3

2024 Update: Row for small cell carcinoma **deleted** and now SmCC is a subtype/variant of NEC

Legend:

NOS Histology

Specific Histology

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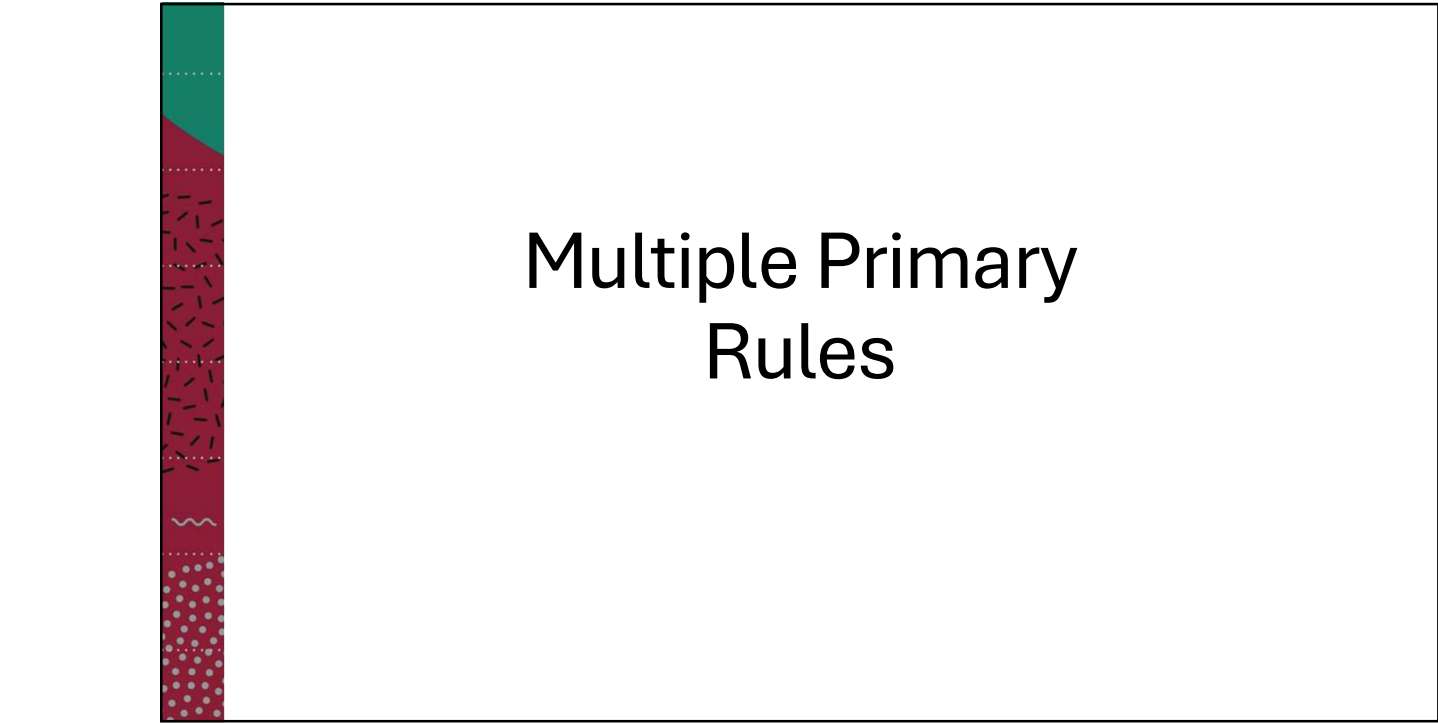
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Table 3: Non-Reportable Urinary Tumors

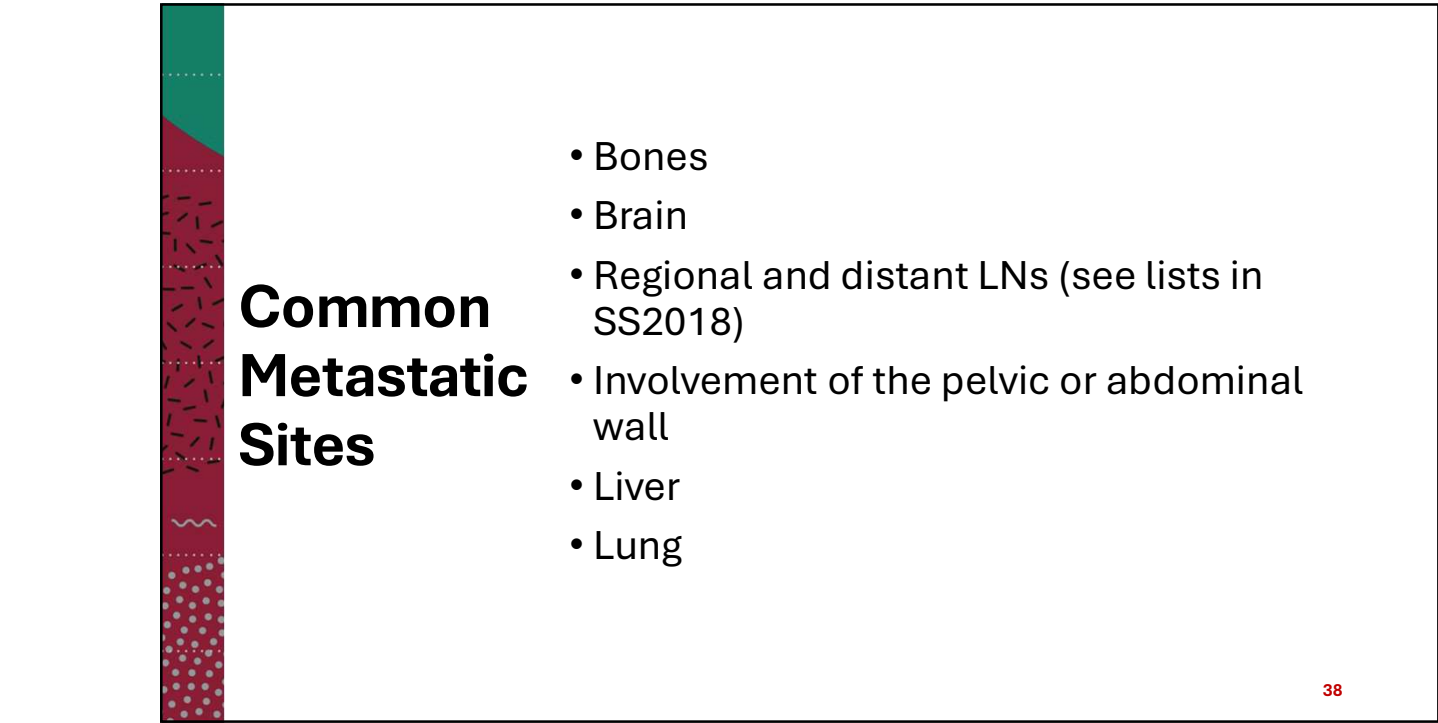
Histology Term and Code	Synonyms
Benign perivascular epithelioid cell tumor 8714/0	Benign PEComa
Granular cell tumor 9580/0	
Hemangioma 9120/0	
Inflammatory myofibroblastic tumor 8825/1	
Inverted urothelial papilloma 8121/0	
Leiomyoma 8890/0	
Melanosis No code	
Neurofibroma 9540/0	
Nevus 8720/0	
Papillary urothelial neoplasm of low-malignant potential 8130/1	
Paraganglioma 8693/1 <i>Cases diagnosed prior to 1/1/2021</i>	Extra-adrenal pheochromocytoma
Solitary fibrous tumor 8815/1	
Squamous cell papilloma 8052/0	Keratotic papilloma
Urothelial dysplasia No code	
Urothelial papilloma 8120/0	
Villous adenoma 8261/0	

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Example of Mets

- Patient is s/p cystectomy in 2018 for **papillary urothelial carcinoma 8130/3**.
- Follow ups were all WNL until 6/24/2024, when the patient is found to have a 1.5 cm lung mass. Bx reveals **papillary urothelial carcinoma 8130/3** metastatic from the **bladder**.
- Do not apply the M rules. This is a distant recurrence of the bladder cancer, and recorded as such in the follow up fields. JHO

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Multiple Primary Rules M1 – M4

Rule	Description	# Abstracts
M1	Not possible to determine if single or multiple tumors	Single
M2	Single tumor	Single
Separate non-contiguous tumors in both:		
M3	Rt and Lt renal pelvis (no involvement of ureter(s), bladder, or urethra by separate non-contiguous tumors	Multiple*
M4	Rt and Lt ureter (no involvement of renal pelvis(es)), bladder, or urethra by separate non-contiguous tumors	Multiple*
IF pathology confirms tumor(s) in contralateral renal pelvis (M3) or ureter (M4) are metastatic		Single

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Multiple Primary Rules M5 – M9

Rule	Description	# Abstracts
M5	Synchronous noninvasive in situ urothelial carcinoma (flat tumor) 8120/2 in BLADDER C67_ AND 1 or both URETER(S) C669 AND no other urinary sites involved (code primary site to C67.8)	Single
M6	Invasive tumor > 60 days after in situ	Multiple
M7	Multiple occurrences of /2 urothelial carcinoma in the BLADDER (8120/2 and/or 8130/2)	Single
M8*	Micropapillary (8131/3) and urothelial 8120/3 (including papillary 8130/3) carcinoma of the BLADDER	Multiple
M9	Multiple occurrences of /3 urothelial carcinoma or urothelial subtypes (EXCEPT micropapillary) in the BLADDER OR Multiple occurrences of micropapillary urothelial carcinoma (8131/3)in the BLADDER	Single

*M8 will be updated in 2025 update and will no longer be limited to bladder

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Poll #3a How Many Primaries?

10/24/23: Cystoureteroscopy: abnormal areas in posterolateral bladder wall of bladder, Lt proximal ureter, and Rt mid ureter (bxs performed); remainder of exam WNL.

10/24/23 Bladder tumor, posterolateral bladder wall, bx: urothelial carcinoma in situ 8120/2; Lt proximal ureter mass, bx: urothelial carcinoma in situ 8120/2; Rt mid ureter mass, bx: urothelial carcinoma in situ 8120/2.


1 primary

2 primaries

3 primaries

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Poll #3b What Primary Site is Assigned?

- A. **C67.8 Overlapping lesion of bladder**
- B. C67.9 Bladder, NOS
- C. C68.8 Overlapping lesion of urinary system
- D. C68.9 Urinary system, NOS

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Urinary Rule M5

Single primary when:

- **SYNCHRONOUS** tumors
- With morphology **8120/2**
- Are in the **bladder and 1 or both ureters**
- **AND, no other urinary organs** are involved

- If **ALL** of the above apply, consult STR for primary site guidance
- If **ALL** of the above do NOT apply, continue through the rules!

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Instructions for Coding Primary Site

C67.8

- Single tumor (any histology) that overlaps subsites in bladder **OR**
- Single **or** discontinuous tumors which are urothelial CA in situ (8120/2) **AND ONLY** bladder and 1 or both ureters are involved

C67.9

- Multiple non-contiguous tumors within bladder and subsite not documented

C68.8

- Single tumor **overlaps** 2 urinary sites and site of origin unknown (Renal pelvis and ureter; bladder and urethra; bladder & ureter*)

C68.9

- Multiple discontinuous tumors in multiple organs within urinary system (Renal pelvis and ureter; bladder and urethra; bladder & ureter*)

* See C67.8 for 8120/2 when only bladder and ureter(s) are involved

JH0

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Poll #4 What Primary Site is Assigned?

- Pt has a bladder tumor extending to the left ureter. Bx of the tumor reveals high grade urothelial carcinoma involving the muscle layer.

A.

C67.8 Overlapping lesion of bladder

B.

C67.9 Bladder, NOS

C.

C68.8 Overlapping lesion of urinary system

D.

C68.9 Urinary system, NOS

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Reminders

- Assign the primary site to the site of origin - Bladder
- This tumor **originated** in the **bladder** and **extended** to the **Lt ureter**
- C68.8 and C68.9 are in the Urinary Other schema and are:
 - Linked to a different grade table (A, B, C, D, 9)
 - Ineligible for AJCC staging
- Before assigning C68.8 or C68.9, conduct a thorough review to determine if a more specific topography code can be used

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Poll #5 M6: MP When Invasive > 60 days after in situ

6/24/2024 **Cystoscopy**: Large area of tumor at **Rt ureteral orifice**, multiple bxs taken; Pt refused TURBT because she was going to The Netherlands. **Path**: **Low grade urothelial carcinoma** (per SEER Appendix C: assign behavior **/2** to low grade urothelial carcinoma with no further information on invasion)


8/27/2024 **TURBT**: Large area of papillary tumor at **Rt ureteral orifice** removed in piecemeal fashion and the tumor bed was fulgurated. **Path**: High grade urothelial carcinoma (per SEER Appendix C: assign behavior **/3** to high grade urothelial carcinoma with no further information on invasion)

1 primary

2 primaries

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Notes About M6

- M6 is in the **Multiple Tumors** module
 - To use M6, there must be **more than 1** tumor
- M6 does **not** apply to single tumors that have in situ and invasive components

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Next Steps

- IF the 06/24/2024 cystoscopy w/ biopsy has already been abstracted:
 - Update the behavior to /3
 - Update the Class of Case
 - Report the changes to your central cancer registry
- IF the 06/24/2024 cystoscopy has NOT been abstracted:
 - Abstract a single primary w/ behavior /3

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Poll #5 How Many Primaries?

- 1/3/2018: **Bladder dome**, TURBT - **in situ urothelial carcinoma 8120/2**
- 5/8/2019: **Bladder lateral wall**, TURBT - **papillary urothelial carcinoma non-invasive 8130/2**
- 7/14/2022: **Bladder base**, TURBT – **urothelial carcinoma in situ 8120/2**

1 primary

2 primaries

3 primaries

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Urinary Rule M7

Single primary when /2 tumors are:

- ONLY in the **BLADDER**
- Any combination of 8120/2 and 8130/2 (not micropapillary subtype)
- Synchronous or metachronous (timing doesn't matter)

Abstract only **one /2 urothelial bladder primary **per the patient's lifetime!****


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Specific and NOS Histology Codes	Synonyms	Subtypes/Variants
Squamous cell carcinoma 8070	Pure squamous cell carcinoma SCC Pure squamous carcinoma of urothelial tract	Verrucous carcinoma 8051
Urothelial carcinoma 8120 Note 1: Previously called transitional cell carcinoma, a term that is no longer recommended. Note 2: Micropapillary 8131 is a subtype/variant of papillary urothelial carcinoma 8130 . It is an invasive /3 neoplasm with aggressive behavior. Note 3: The histology term is exactly Plasmacytoid/signet ring cell/diffuse variant. All three terms are used together to indicate a specific variant (coded 8082/3). + 6 more 8120/3 synonyms that did not fit on the slide	Clear cell (glycogen-rich) urothelial carcinoma 8120/3 Conventional urothelial carcinoma 8120/3 Infiltrating urothelial carcinoma 8120/3 Infiltrating urothelial carcinoma with divergent differentiation 8120/3 Infiltrating urothelial carcinoma with endodermal sinus lines 8120/3 Infiltrating urothelial carcinoma with glandular differentiation 8120/3 Infiltrating urothelial carcinoma with squamous differentiation 8120/3 Infiltrating urothelial carcinoma with trophoblastic differentiation 8120/3 Large nested urothelial carcinoma 8120/3	Giant cell urothelial carcinoma 8031/3 Lymphoepithelioma-like urothelial carcinoma 8082/3 Plasmacytoid/signet ring cell/diffuse variant (see Note 3) Papillary urothelial (transitional cell) carcinoma in situ 8130/2 invasive 8130/3 low-grade papillary urothelial carcinoma with inverted growth pattern 8130/2 non-invasive papillary urothelial carcinoma, high-grade 8130/2 non-invasive papillary urothelial carcinoma, low-grade 8130/2 Micropapillary urothelial carcinoma 8131/3 Plasmacytoid urothelial carcinoma (cases diagnosed 1/1/2024 forward) sarcomatoid urothelial carcinoma 8122/3 Poorly differentiated carcinoma/poorly differentiated urachal carcinoma 8020/3 M7: SP when multiple /2 urothelial tumors of the BLADDER (urothelial 8120/2 and papillary urothelial 8130/2; no other /2 subtypes of urothelial carcinomas)

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What to do in the original abstract			
Field	1/3/2018 Tumor	5/8/2019 Tumor	7/14/2022 Tumor
Primary Site	C671 (dome)	Do not update	Do not update
Histology	8120/2 (UC)	Do not update	Do not update
Date of First Recurrence	Leave blank at time of abstract	05/08/2019	Do not update
Type of First Recurrence	Leave blank at time of abstract	16 local recurrence of in situ tumor	Do not update

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Poll #6 How Many Primaries?


- 1/3/2018: **Bladder** dome mass, bx – micropapillary urothelial carcinoma 8131/3; **bladder** base mass, bx – papillary urothelial carcinoma 8130/3

1 primary

2 primaries

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Urinary Rule M8

Multiple primaries when tumors are:

- ONLY in the **bladder**
- Micropapillary urothelial carcinoma **8131/3** in 1 or more tumors and **either**
 - urothelial carcinoma **8120/3** OR
 - papillary **8130/3** urothelial carcinoma in 1 or more tumors
- Synchronous or metachronous (timing doesn't matter)

This rule will be expanded to other urinary sites with the 2025 updates.

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Specific and NOS Histology Codes	Synonyms	Subtypes/Variants
Squamous cell carcinoma 8070	Pure squamous cell carcinoma SCC Pure squamous carcinoma of urothelial tract	Verrucous carcinoma 8051
Urothelial carcinoma 8120 <i>Note 1:</i> Previously called transitional cell carcinoma , a term that is no longer recommended. <i>Note 2:</i> Micropapillary 8131 is a subtype/variant of papillary urothelial carcinoma 8130. It is an invasive /3 neoplasm with aggressive behavior. <i>Note 3:</i> The histology term is exactly Plasmacytoid/signet ring cell/diffuse variant. All three terms are used together to indicate a specific variant (coded 8082/3). + 6 more 8120/3 synonyms that did not fit on the slide	Clear cell (glycogen-rich) urothelial carcinoma 8120/3 Conventional urothelial carcinoma 8120/3 Infiltrating urothelial carcinoma 8120/3 Infiltrating urothelial carcinoma with divergent differentiation 8120/3 Infiltrating urothelial carcinoma with endodermal sinus lines 8120/3 Infiltrating urothelial carcinoma with glandular differentiation 8120/3 Infiltrating urothelial carcinoma with squamous differentiation 8120/3 Infiltrating urothelial carcinoma with trophoblastic differentiation 8120/3 Large nested urothelial carcinoma 8120/3	Giant cell urothelial carcinoma 8031/3 Lymphoepithelioma-like urothelial carcinoma 8082/3 Plasmacytoid/signet ring cell/diffuse variant (see Note 3) Papillary urothelial (transitional cell) carcinoma in situ 8130/2 invasive 8130/3 low-grade papillary urothelial carcinoma with inverted growth pattern 8130/2 non-invasive papillary urothelial carcinoma, high-grade 8130/2 non-invasive papillary urothelial carcinoma, low-grade 8130/2 Micropapillary urothelial carcinoma 8131/3 Plasmacytoid urothelial carcinoma (cases diagnosed 1/1/2024 forward)/ sarcomatoid urothelial carcinoma 8122/3 Poorly differentiated carcinoma/poorly differentiated urachal carcinoma 8020/3 <div>M8: MP when separate non-contiguous tumors of the BLADDER are MICROPAPILLARY (8131/3) and urothelial 8120/3 (including PAPILLARY 8130/3) carcinomas, for which micropapillary is a subtype/variant)</div>

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Urinary Rule M8 (2025 update)

Multiple primaries when tumors are:

- ~~ONLY in the bladder~~ (removed w/ 2025 update)
- Micropapillary urothelial carcinoma 8131/3 in 1 or more tumors and either
 - urothelial carcinoma 8120/3 OR
 - papillary 8130/3 urothelial carcinoma in 1 or more tumors
- Tumors may be in any urinary site(s)
- Synchronous or metachronous (timing doesn't matter)

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How Many Primaries?

- 5/2018 Bladder base mass, TURBT: papillary urothelial carcinoma 8131/3
- 7/2019 Renal pelvis mass bx: papillary urothelial carcinoma 8130/3
- 6/2022 Prostatic urethra, bx: micropapillary urothelial carcinoma 8130/3

1 primary

2 primaries

If abstracted after the 2025 STR update

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What to do in the...

Original abstract			New abstract
Field	5/2018 Tumor	7/2019 Tumor	6/2022 Tumor
Primary Site	C671 (dome)	Do not update	C680 (prostatic urethra)
Histology	8130/3 (Papillary UC)	Do not update	8131 (Micropapillary UC)
Date of First Recurrence	Leave blank at time of abstract	07/99/2019	Leave blank at time of abstract
Type of First Recurrence	Leave blank at time of abstract	13 local recurrence of invasive tumor	Leave blank at time of abstract

If abstracted after the 2025 STR update

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Poll #7 How Many Primaries?

- 1/3/2018: **Bladder dome**, TURBT - **urothelial carcinoma 8120/3**
- 5/8/2019: **Bladder lateral wall**, TURBT - **papillary urothelial carcinoma 8130/3**
- 7/14/2022: **Bladder base**, TURBT – **giant cell urothelial carcinoma 8031/3**

1 primary

2 primaries

3 primaries

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Urinary Rule M9

Single primary when tumors are:

- ONLY in the **BLADDER** and are
 - Any combination of 8120/3 and 8130/3 (not micropapillary subtype) **OR**
 - Micropapillary urothelial carcinoma 8131/3
- Synchronous or metachronous (timing doesn't matter)
- Abstract **only one /3 urothelial carcinoma bladder primary** and **only one micropapillary urothelial carcinoma bladder primary per the patient's lifetime!**

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Specific and NOS Histology Codes	Synonyms	Subtypes/Variants
Squamous cell carcinoma 8070	Pure squamous cell carcinoma SCC Pure squamous carcinoma of urothelial tract	Verrucous carcinoma 8051
Urothelial carcinoma 8120 <i>Note 1:</i> Previously called transitional cell carcinoma , a term that is no longer recommended. <i>Note 2:</i> Micropapillary 8131 is a subtype/variant of papillary urothelial carcinoma 8130. It is an invasive /3 neoplasm with aggressive behavior. <i>Note 3:</i> The histology term is exactly Plasmacytoid/signet ring cell/diffuse variant. All three terms are used together to indicate a specific variant (coded 8082/3). + 6 more 8120/3 synonyms that did not fit on the slide	Clear cell (glycogen-rich) urothelial carcinoma 8120/3 Conventional urothelial carcinoma 8120/3 Infiltrating urothelial carcinoma 8120/3 Infiltrating urothelial carcinoma with divergent differentiation 8120/3 Infiltrating urothelial carcinoma with endodermal sinus lines 8120/3 Infiltrating urothelial carcinoma with glandular differentiation 8120/3 Infiltrating urothelial carcinoma with squamous differentiation 8120/3 Infiltrating urothelial carcinoma with trophoblastic differentiation 8120/3 Large nested urothelial carcinoma 8120/3	Giant cell urothelial carcinoma 8031/3 Lymphoepithelioma-like urothelial carcinoma 8082/3 Plasmacytoid/signet ring cell/diffuse variant (see Note 3) Papillary urothelial (transitional cell) carcinoma in situ 8130/2 invasive 8130/3 low-grade papillary urothelial carcinoma with inverted growth pattern 8130/2 non-invasive papillary urothelial carcinoma, high-grade 8130/2 non-invasive papillary urothelial carcinoma, low-grade 8130/2 Micropapillary urothelial carcinoma 8131/3 Plasmacytoid urothelial carcinoma (cases diagnosed 1/1/2024 forward)/ sarcomatoid urothelial carcinoma 8122/3 Poorly differentiated carcinoma/poorly differentiated urachal carcinoma 8020/3 M9: SP when multiple invasive urothelial carcinomas of the BLADDER Multiple occurrences of urothelial or urothelial subtypes expect MICROPAPPILLARY (8131/3) OR Multiple occurrences of MICROPAPILLARY

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What to do in the original abstract

Field	1/3/2018 Tumor	5/8/2019 Tumor	7/14/2022 Tumor
Primary Site	C671 (dome)	Do not update	Do not update
Histology	8120/3 (UC, NOS)	Do not update	Do not update
Date of First Recurrence	Leave blank at time of abstract	05/08/2019	Do not update
Type of First Recurrence	Leave blank at time of abstract	13 local recurrence of invasive tumor	Do not update

Even though Giant cell urothelial carcinoma and Papillary urothelial carcinoma are different subtypes/variants of urothelial carcinoma, we have not gotten to the different subtypes/variants rule yet. They are both urothelial carcinoma and we only abstract a single UC and a single micropapillary UC per a patient's lifetime

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Poll #8 How Many Primaries?

- 1/3/2018: **Bladder dome**, TURBT – micropapillary urothelial carcinoma 8131/3
- 5/8/2019: **Bladder lateral wall**, TURBT - micropapillary urothelial carcinoma 8131/3
- 7/14/2022: **Bladder base**, TURBT – micropapillary urothelial carcinoma 8131/3

1 primary

2 primaries

3 primaries

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Urinary Rule M9

Single primary when tumors are:

- ONLY in the **BLADDER** and are
 - Any combination of 8120/3 and 8130/3 (not micropapillary subtype) **OR**
 - Micropapillary urothelial carcinoma 8131/3
- Synchronous or metachronous (timing doesn't matter)
- Abstract **only one /3 urothelial carcinoma bladder primary** and **only one micropapillary urothelial carcinoma bladder primary per the patient's lifetime!**

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What to do in the original abstract

Field	1/3/2018 Tumor	5/8/2019 Tumor	7/14/2022 Tumor
Primary Site	C671 (dome)	Do not update	Do not update
Histology	8131/3 (Micropapillary UC)	Do not update	Do not update
Date of First Recurrence	Leave blank at time of abstract	05/08/2019	Do not update
Type of First Recurrence	Leave blank at time of abstract	13 local recurrence of invasive tumor	Do not update

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Specific and NOS Histology Codes	Synonyms	Subtypes/Variants
Squamous cell carcinoma 8070	Pure squamous cell carcinoma SCC Pure squamous carcinoma of urothelial tract	Verrucous carcinoma 8051
Urothelial carcinoma 8120 <i>Note 1:</i> Previously called transitional cell carcinoma , a term that is no longer recommended. <i>Note 2:</i> Micropapillary 8131 is a subtype/variant of papillary urothelial carcinoma 8130. It is an invasive /3 neoplasm with aggressive behavior. <i>Note 3:</i> The histology term is exactly Plasmacytoid/signet ring cell/diffuse variant. All three terms are used together to indicate a specific variant (coded 8082/3). + 6 more 8120/3 synonyms that did not fit on the slide	Clear cell (glycogen-rich) urothelial carcinoma 8120/3 Conventional urothelial carcinoma 8120/3 Infiltrating urothelial carcinoma 8120/3 Infiltrating urothelial carcinoma with divergent differentiation 8120/3 Infiltrating urothelial carcinoma with endodermal sinus lines 8120/3 Infiltrating urothelial carcinoma with glandular differentiation 8120/3 Infiltrating urothelial carcinoma with squamous differentiation 8120/3 Infiltrating urothelial carcinoma with trophoblastic differentiation 8120/3 Large nested urothelial carcinoma 8120/3	Giant cell urothelial carcinoma 8031/3 Lymphoepithelioma-like urothelial carcinoma 8082/3 Plasmacytoid/signet ring cell/diffuse variant (see Note 3) Papillary urothelial (transitional cell) carcinoma in situ 8130/2 invasive 8130/3 low-grade papillary urothelial carcinoma with inverted growth pattern 8130/2 non-invasive papillary urothelial carcinoma, high-grade 8130/2 non-invasive papillary urothelial carcinoma, low-grade 8130/2 Micropapillary urothelial carcinoma 8131/3 Plasmacytoid urothelial carcinoma (cases diagnosed 1/1/2024 forward)/ sarcomatoid urothelial carcinoma 8122/3 Poorly differentiated carcinoma/poorly differentiated urachal carcinoma 8020/3 M9: SP when multiple invasive urothelial carcinomas of the BLADDER Multiple occurrences of urothelial or urothelial subtypes expect MICROPAPILLARY (8131/3) OR Multiple occurrences of MICROPAPILLARY

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Multiple Primary Rules M10 – M15

Rule	Description	# Abstracts
M10	Subsequent tumor after being clinically dz-free > 3 years after dx/last recurrence (See M7 and M9 for UC in the BLADDER!)	Multiple
M11	Urothelial carcinomas (8120 and all subtypes/variants*) in multiple urinary organs (renal pelvis, ureter(s), bladder, urethra)	Single
Separate non-contiguous (S/N-C) tumors that are:		
M12	2 or more different subtypes/variants in column 3 of Table 2	Multiple
M13	Different rows in Table 2	Multiple
M14	ICD-O topography code differs at 2nd CXxx or 3rd CxXx character (Different primary sites); (See M5 for 8120/2 in C67_ and C669 ONLY)	Multiple
M15	Synchronous, S/N-C on the same row in Table 3	Single

* Micropapillary excluded from M11 (per M8) once the 2025 updates are released.

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Poll #9 How Many Primaries?

- 1/2018: Multicentric urothelial carcinoma in **Rt ureter** and **Rt renal pelvis**
- 2/2018: **Rt** neprhoureterectomy
- 6/2022 **Lt ureter** mass, bx: urothelial carcinoma

1 primary

2 primaries

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A young child with light brown hair and a headband is sitting on a wooden staircase. The child is wearing a blue and white striped t-shirt and pink shorts. They are holding a tablet computer in their hands and looking down at the screen. The staircase has wooden treads and risers, with the risers painted in alternating colors of yellow and light blue. The walls on either side of the stairs are white. The child is sitting on the third step from the bottom.

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Poll #10 How Many Primaries?

- 1/2018: Multicentric urothelial carcinoma 8120/3 in Rt ureter and Rt renal pelvis
- 2/2018: Rt nephroureterectomy - urothelial carcinoma 8120/3
- 6/2020 Bladder neck, bx: papillary urothelial carcinoma 8130/3

1 primary

2 primaries

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Urinary Rule M11

- Single primary when tumors are in multiple urinary organs (renal pelvis, ureter, bladder, urethra) AND are urothelial carcinoma 8120 and all subtypes/variants* of urothelial carcinoma (see Table 2)
- Behavior doesn't matter
- Timing doesn't matter (as long as M10 does not apply... i.e., the tumors are not more than 3 years apart)

*Micropapillary UC will be excluded from this rule once the 2025 update is issued

Remember the most current update of the STR applies to all cases diagnosed 2018 and forward – No requirement to update cases already completed.

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Specific and NOS Histology Codes	Synonyms	Subtypes/Variants
Squamous cell carcinoma 8070	Pure squamous cell carcinoma SCC Pure squamous carcinoma of urothelial tract	Verrucous carcinoma 8051
Urothelial carcinoma 8120 <i>Note 1:</i> Previously called transitional cell carcinoma , a term that is no longer recommended. <i>Note 2:</i> Micropapillary 8131 is a subtype/variant of papillary urothelial carcinoma 8130. It is an invasive /3 neoplasm with aggressive behavior. <i>Note 3:</i> The histology term is exactly Plasmacytoid/signet ring cell/diffuse variant. All three terms are used together to indicate a specific variant (coded 8082/3). 6 more synonyms (Col. 2) did not fit on the slide	Clear cell (glycogen-rich) urothelial carcinoma 8120/3 Conventional urothelial carcinoma 8120/3 Infiltrating urothelial carcinoma 8120/3 Infiltrating urothelial carcinoma with divergent differentiation 8120/3 Infiltrating urothelial carcinoma with endodermal sinus lines 8120/3 Infiltrating urothelial carcinoma with glandular differentiation 8120/3 Infiltrating urothelial carcinoma with squamous differentiation 8120/3 Infiltrating urothelial carcinoma with trophoblastic differentiation 8120/3 Large nested urothelial carcinoma 8120/3	Giant cell urothelial carcinoma 8031/3 Lymphoepithelioma-like urothelial carcinoma 8082/3 Plasmacytoid/signet ring cell/diffuse variant (see Note 3) Papillary urothelial (transitional cell) carcinoma in situ 8130/2 invasive 8130/3 low-grade papillary urothelial carcinoma with inverted growth pattern 8130/2 non-invasive papillary urothelial carcinoma, high-grade 8130/2 non-invasive papillary urothelial carcinoma, low-grade 8130/2 Micropapillary urothelial carcinoma 8131/3 Plasmacytoid urothelial carcinoma (cases diagnosed 1/1/2024 forward) sarcomatoid urothelial carcinoma 8122/3 Poorly differentiated carcinoma/poorly differentiated urachal carcinoma 8020/3 M11: SP when there are urothelial carcinomas in multiple urinary sites; behavior doesn't matter Applies to urothelial carcinoma 8120 and all subtypes/variants of urothelial carcinoma

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What to do in the original abstract

Field	1/2018 Tumor	6/2020 Tumor
Primary Site	C689 (Renal pelvis and ureter)	Do not update
Histology	8120/3 (Urothelial carcinoma)	Do not update
Date of First Recurrence	Leave blank at time of abstract	06/99/2020
Type of First Recurrence	Leave blank at time of abstract	21 recurrence of invasive tumor in adjacent tissue or organs only

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Poll #11 How Many Primaries?

- 5/2018 Bladder base mass, TURBT: papillary urothelial carcinoma
8131/3
- 7/2019 Renal pelvis mass bx: papillary urothelial carcinoma
8130/3
- 6/2022 Prostatic urethra, bx: micropapillary urothelial carcinoma
8130/3

1 primary

2 primaries

If abstracted prior to 2025 STR update

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What to do in the original abstract

If abstracted prior to 2025 STR update

Field	5/2018 Tumor	7/2019 Tumor	6/2022 Tumor
Primary Site	C671 (dome)	Do not update	Do not update
Histology	8130/3 (Papillary UC)	Do not update	Do not update
Date of First Recurrence	Leave blank at time of abstract	07/99/2019	Do not update
Type of First Recurrence	Leave blank at time of abstract	13 local recurrence of invasive tumor	Do not update

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Table 2: Specific & NOS, Synonyms, & Subtypes/Variants and Rules M12 &13		
Specific and NOS Histology Codes	Synonyms	Subtypes/Variants
Adenocarcinoma NOS 8140 <i>Note:</i> Urachal carcinoma NOS is coded 8010/3. Urachal adenocarcinoma is coded 8140/3.	Mixed adenocarcinoma Urachal adenocarcinoma	Clear cell carcinoma 8310 Endometrioid carcinoma 8380 Enteric adenocarcinoma 8144 Mucinous adenocarcinoma 8480 M12: MP when different sybtypes
Malignant melanoma 8720/3		
Malignant perivascular epithelioid cell tumor 8714/3	Malignant PEComa	
Neuroendocrine carcinoma, NOS 8246/3		Large cell neuroendocrine tumor/combined large cell neuroendocrine carcinoma 8013/3 Small cell neuroendocrine carcinoma 8041/3
Neuroendocrine tumor, NOS 8240/3	Neuroendocrine tumor, grade 1 Well differentiated neuroendocrine carcinoma Neuroendocrine carcinoma, low grade	Neuroendocrine tumor, grade 2 8249/3 M13: MP when different rows, any column

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Multiple Primary Rules M15 – M18		
Rule	Description	# Abstracts
Rules M15-M18: Tumors must be in the SAME primary site		
M16	In situ after invasive in same urinary site (can be NOS and subtype/variant)	Single
M17	Invasive tumor ≤ 60 days after in situ in same urinary site	Single
M18	Tumors do not meet any of the previous rules	Single

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Table 2: Specific & NOS, Synonyms, & Subtypes/Variants and Rule M15

Specific and NOS Histology Codes	Synonyms	Subtypes/Variants
Adenocarcinoma NOS 8140 <i>Note:</i> Urachal carcinoma NOS is coded 8010/3. Urachal adenocarcinoma is coded 8140/3.	Mixed adenocarcinoma Urachal adenocarcinoma	Clear cell carcinoma 8310 Endometrioid carcinoma 8380 Enteric adenocarcinoma 8144 Mucinous adenocarcinoma 8480
Malignant melanoma 8720/3		
Malignant perivascular epithelioid cell tumor 8714/3	Malignant PEComa	
Neuroendocrine carcinoma, NOS 8246/3		Large cell neuroendocrine tumor/combined large cell neuroendocrine carcinoma 8013/3 Small cell neuroendocrine carcinoma 8041/3
Neuroendocrine tumor, NOS 8240/3	Neuroendocrine tumor, grade 1 Well differentiated neuroendocrine carcinoma Neuroendocrine carcinoma, low grade	Neuroendocrine tumor, grade 2 8249/3 <div>M15: SP when synchronous tumors in same row Same histo or Col 1 or 2 + 1 sub/var Col 3; or Col 3 NOS + 1 indented sub/var Col 3</div>

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What is included in the Definition of the Same Row?

- Residing on the same row of the table **AND**
 - NOS (column 1) in one or more tumors and a synonym of that NOS (column 2) in one or more tumors **OR**
 - NOS (column 1) or a Synonym of that NOS (column 2) and a SINGLE subtype/variant (column 3) **OR**
 - NOS (column 3) and a SINGLE indented subtype/variant ((column 3)

What is **not** included in the Definition of the Same Row?

- Residing on the same row of the table **AND**
 - Different subtype/variants (column 3)

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Histology Instructions

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Important Notes for Coding Histology

Code the histology:

Prior to neoadjuvant therapy

Using priority list and H rules

Do not change histo to make the case applicable to staging

Exception: Initial dx based on FNA, smears, cytology or from a regional or metastatic site, and neoadjuvant treatment is given and followed by resection of primary site which identifies a different or specific histology, code the histology from the primary site [post-resection].

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Example for Coding Histo Post-Neoadjuvant

- Urine cytology reveals **urothelial carcinoma 8120/3**
- MRI notes invasion of the detrusor muscle (bladder wall)
- Patient is treated with neoadjuvant cisplatin-based chemotherapy
- Partial cystectomy reveals **papillary urothelial carcinoma 8130/3**

- Assign the post-neoadjuvant histology, **papillary urothelial carcinoma 8130/3**, since it is more specific histology than **urothelial carcinoma 8120/3**

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Important Notes for Coding Histology

Code **most specific** histology from either resection or biopsy:

Code the **invasive** when in situ and invasive in single tumor

Discrepancy between bx and resection (2 different histos/different rows), code from most representative specimen (>est amount of tumor)

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Documentation Priority to Identify Histology

1. Tissue/path report from primary (listed in priority order)

- Addendum
- Final dx/CAP synoptic report
- CAP protocol

2. Cytology (usually urine)

3. Metastatic tissue

4. Physician documentation (listed in priority order)

- Treatment plan
- Tumor Board
- Medical record referencing the original pathology, cytology, or scan(s)
- MD reference to histology

5. Imaging (CT and MRI have equal priority)

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Coding Histology – Single Tumor

1. Code the most specific histology or subtype/variant, regardless of whether it is described as:

A. Majority or predominant part of tumor

B. Minority part of tumor

C. A component

2. Code histo described as differentiation or features only when there is a specific ICD-O code for the NOS w/ features or differentiation

Terms A-C must describe a carcinoma or sarcoma

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Poll #12 – Coding Histology in a Single Tumor

- Sarcomatoid urothelial carcinoma 8122 with w/ majority of tumor being Urothelial carcinoma, NOS 8120
 - A. Urothelial carcinoma 8120
 - B. **Sarcomatoid urothelial carcinoma 8122**
- Urothelial carcinoma, NOS 8120 w/ minority component of Micropapillary urothelial carcinoma 8131/3
 - A. Urothelial carcinoma 8120
 - B. **Micropapillary urothelial carcinoma 8131**
- Urothelial carcinoma, NOS 8120 w/ Micropapillary component 8131/3
 - A. **Urothelial carcinoma 8120**
 - B. Micropapillary urothelial carcinoma 8131

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Coding Histology – Single Tumor, cont.

3. Code histo described by ambiguous terms only when the conditions in A **or** B are met:

- A. The only diagnosis available is **one histology** term described by ambiguous terminology (case accessioned based on ambiguous term and no other histo is available)
- B. There is a **NOS histology and a more specific** (subtype/variant) described by ambiguous terminology AND
 - Specific histo confirmed by a physician OR
 - Patient is being treated based on the specific histo described by the ambiguous term

If ‘3B’ applies, document supporting information in text.
Example: Mucinous carcinoma per 11/04/2021 med onc consult.

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Coding Histology – Single Tumor, cont.

List of Ambiguous Terms		
Apparently	Favor(s)	Probable
Appears	Malignant appearing	Suspect(ed)
Comparable with	Most likely	Suspicious (for)
Compatible with	Presumed	Typical (of)
Consistent with		

4. DO NOT CODE histology when described as:

- Architecture
- Foci; focus; focal
- Growth pattern
- Pattern

Configuration

- Removed from **DO NOT CODE** list with 09/2021 update

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Practice – Ambiguous Terms

- Sarcoma, consistent with leiomyosarcoma** (Treatment plan says pt will receive “XYZ regimen” for pt’s dx of leiomyosarcoma.)
8890/3 Leiomyosarcoma
- Outpatient bx says most likely papillary urothelial CA. No other information available.**
8130/3 Papillary urothelial carcinoma
- Adenocarcinoma, consistent w/mucinous adenocarcinoma** (Oncology consult says pt has mucinous adenocarcinoma)
8480/3 Mucinous adenocarcinoma

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Reminder!

- Always apply the M rules FIRST
 - Note: when multiple tumors are present, you may have to assign provisional histologies to each of the tumors **before** using the M rules
- If the tumors are found to be a **single primary**, use the H rules to to assign the final histology incorporating the histologies of **all tumors** involved into the final histology

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Reminder, cont.

- If the tumors are found to be multiple primaries, use the H rules to assign the final histology to each primary **independently**
 - Example: one tumor is **poorly differentiated carcinoma 8020/3** and the other is **neuroendocrine carcinoma 8246/3**; these are multiple primaries per rule M13 (different rows are multiple primaries)
 - Primary #1 is assigned **poorly differentiated carcinoma 8020**
 - Primary #2 is assigned **neuroendocrine carcinoma 8246/3**

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Histology Rules 2024 Update (9 H rules)

Single tumor	Multiple tumors	
H1	H6	Code the histology when only one histology is present.
H2	H7	Code the invasive histology when in situ and invasive histologies are present in the same tumor [H7 in all tumors]
H3	H8	Code the subtype/variant when there is a NOS and a single subtype/variant of that NOS [H8 when all multifocal/multicentric tumors are a NOS...]
H4	H9	Code mixed small cell carcinoma 8045 when the final diagnosis is any of the following: Small cell NEC + any other carcinoma 2 or more subtypes/variants of small cell NEC Subtype/variant of small cell NEC + any other carcinoma
H5		When the listed histology is mixed w/ adenocarcinoma or squamous cell carcinoma including their subtypes, code the resulting mixed urothelial carcinoma as follows: 8120: urothelial carcinoma 8130: papillary urothelial carcinoma 8183: micropapillary urothelial carcinoma

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Histology Rules 2025 Update (11 H rules)

- H1 Code the histology when only one histology is present.

- H7 Code the histology when only one histology is present **in all tumors.**

- H2 Code the **invasive** histology when **in situ** and **invasive** histologies are present in the **same tumor.**

- H8 Code the **invasive** histology when there are **in situ** and **invasive** histologies
 - Mixed in each of the tumors
 - In separate tumors (1 or more invasive and 1 or more in situ)

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Histology Rules 2025 Update

- H3 Code the **subtype/variant** when there is a **NOS** and a **single subtype/variant** of that NOS

- H9 Code the **subtype/variant** when **all multifocal/multicentric** tumors are a **NOS** and a **single subtype/variant** of that NOS .

- H4 Code mixed small cell carcinoma **8045** when the final diagnosis is:
 - Small cell neuroendocrine mixed with any other type of **carcinoma.**

- H10 Code mixed small cell carcinoma **8045** when the **final diagnosis** for all tumors is:
 - Small cell neuroendocrine mixed with any other type of **carcinoma.**

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Rule H8 (H9 2025+): Multiple Tumors Abstracted as a Single Primary

- Patient has 3 tumors in the bladder, deemed to be a single primary per rule M9 (multiple invasive urothelial carcinomas) with the following histologies:
 - Urothelial carcinoma, NOS 8120/3
 - Clear cell (glycogen-rich) urothelial carcinoma 8120/3
 - Plasmacytoid urothelial carcinoma 8122/3
- Consult Table 2
 - Urothelial carcinoma, NOS 8120/3 and Clear cell (glycogen-rich) urothelial carcinoma 8120/3 have the same histology 8120/3.
 - Plasmacytoid urothelial carcinoma 8122/3 is a subtype/variant of 8120/3. Assign Plasmacytoid urothelial carcinoma 8122/3 because it is a **subtype/variant**

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Specific and NOS Histology Codes	Synonyms	Subtypes/Variants
Squamous cell carcinoma 8070	Pure squamous cell carcinoma SCC Pure squamous carcinoma of urothelial tract	Verrucous carcinoma 8051
<div>Urothelial carcinoma 8120</div> <div>Note 1: Previously called transitional cell carcinoma, a term that is no longer recommended.</div> <div>Note 2: Micropapillary 8131 is a subtype/variant of papillary urothelial carcinoma 8130. It is an invasive /3 neoplasm with aggressive behavior.</div> <div>Note 3: The histology term is exactly Plasmacytoid/signet ring cell/diffuse variant. All three terms are used together to indicate a specific variant (coded 8082/3).</div> <div>6 more synonyms (Col. 2) did not fit on the slide</div>	<div>Clear cell (glycogen-rich) urothelial carcinoma 8120/3</div> <div>Conventional urothelial carcinoma 8120/3</div> <div>Infiltrating urothelial carcinoma 8120/3</div> <div>Infiltrating urothelial carcinoma with divergent differentiation 8120/3</div> <div>Infiltrating urothelial carcinoma with endodermal sinus lines 8120/3</div> <div>Infiltrating urothelial carcinoma with glandular differentiation 8120/3</div> <div>Infiltrating urothelial carcinoma with squamous differentiation 8120/3</div> <div>Infiltrating urothelial carcinoma with trophoblastic differentiation 8120/3</div> <div>Large nested urothelial carcinoma 8120/3</div>	<div>Giant cell urothelial carcinoma 8031/3</div> <div>Lymphoepithelioma-like urothelial carcinoma 8082/3</div> <div>Plasmacytoid/signet ring cell/diffuse variant (see Note 3)</div> <div>Papillary urothelial (transitional cell) carcinoma in situ 8130/2</div> <div>invasive 8130/3</div> <div>low-grade papillary urothelial carcinoma with inverted growth pattern 8130/2</div> <div>non-invasive papillary urothelial carcinoma, high-grade 8130/2</div> <div>non-invasive papillary urothelial carcinoma, low-grade 8130/2</div> <div>Micropapillary urothelial carcinoma 8131/3</div> <div>Plasmacytoid urothelial carcinoma (cases diagnosed 1/1/2024 forward)/ sarcomatoid urothelial carcinoma 8122/3</div> <div>Poorly differentiated carcinoma/poorly differentiated urachal carcinoma 8020/3</div> <div>H8 (H9 in 2025): Code the subtype/variant when all multifocal tumors are a NOS and a single subtype/variant of that NOS</div>

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Specific and NOS Histology Codes	Synonyms	Subtypes/Variants
Squamous cell carcinoma 8070	Pure squamous cell carcinoma SCC Pure squamous carcinoma of urothelial tract	Verrucous carcinoma 8051
Urothelial carcinoma 8120 <i>Note 1:</i> Previously called transitional cell carcinoma , a term that is no longer recommended. <i>Note 2:</i> Micropapillary 8131 is a subtype/variant of papillary urothelial carcinoma 8130. It is an invasive /3 neoplasm with aggressive behavior. <i>Note 3:</i> The histology term is exactly Plasmacytoid/signet ring cell/diffuse variant. All three terms are used together to indicate a specific variant (coded 8082/3). 6 more synonyms (Col. 2) did not fit on the slide	Clear cell (glycogen-rich) urothelial carcinoma 8120/3 Conventional urothelial carcinoma 8120/3 Infiltrating urothelial carcinoma 8120/3 Infiltrating urothelial carcinoma with divergent differentiation 8120/3 Infiltrating urothelial carcinoma with endodermal sinus lines 8120/3 Infiltrating urothelial carcinoma with glandular differentiation 8120/3 Infiltrating urothelial carcinoma with squamous differentiation 8120/3 Infiltrating urothelial carcinoma with trophoblastic differentiation 8120/3 Large nested urothelial carcinoma 8120/3	Giant cell urothelial carcinoma 8031/3 Lymphoepithelioma-like urothelial carcinoma 8082/3 Plasmacytoid/signet ring cell/diffuse variant (see Note 3) Papillary urothelial (transitional cell) carcinoma in situ 8130/2 invasive 8130/3 low-grade papillary urothelial carcinoma with inverted growth pattern 8130/2 non-invasive papillary urothelial carcinoma, high-grade 8130/2 non-invasive papillary urothelial carcinoma, low-grade 8130/2 Micropapillary urothelial carcinoma 8131/3 Plasmacytoid urothelial carcinoma (cases diagnosed 1/1/2024 forward) sarcomatoid urothelial carcinoma 8122/3 Poorly differentiated carcinoma/poorly differentiated urachal carcinoma 8020/3 H8 (H9 in 2025): Code the subtype/variant when all multifocal tumors are a NOS and a single subtype/variant of that NOS

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Subtype/Variant that is also a NOS in Col 3		
Specific and NOS Histology Codes	Synonyms	Subtypes/Variants
Adenocarcinoma NOS 8140 <i>Note:</i> Urachal carcinoma NOS is coded 8010/3. Urachal adenocarcinoma is coded 8140/3.	Mixed adenocarcinoma Urachal adenocarcinoma	Clear cell carcinoma 8310 Endometrioid carcinoma 8380 Enteric adenocarcinoma 8144 Mucinous adenocarcinoma 8480
Malignant melanoma 8720/3 Malignant perivascular epithelioid cell tumor 8714/3	Malignant PEComa	
Sarcoma NOS 8800/3 <i>Note:</i> Rhabdomyosarcoma 8900 is a NOS with a subtype/variant of embryonal rhabdomyosarcoma/sarcoma botryoides 8910/3.		Angiosarcoma 9120/3 Chondrosarcoma 9220/3 Leiomyosarcoma 8890/3 Liposarcoma 8850/3 Malignant peripheral nerve sheath tumor (MPNST) 9540/3 Pleomorphic sarcoma 8802/3 Rhabdomyosarcoma 8900/3 Embryonal rhabdomyosarcoma/sarcoma botryoides 8910/3
Small cell neuroendocrine carcinoma 8041	Neuroendocrine carcinoma SmCC	Large cell neuroendocrine tumor 8013 Well-differentiated neuroendocrine tumor 8240
Squamous cell carcinoma 8070	Pure squamous cell carcinoma SCC	Verrucous carcinoma 8051

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Histology Rules 2025 Update

- NEW H5 Code combined large cell carcinoma 8013 when the final diagnosis is:
- Large cell neuroendocrine carcinoma and any other type of carcinoma

- NEW H11 Code combined large cell carcinoma 8013 when the final diagnosis **for all tumors** is:
- Large cell neuroendocrine carcinoma and any other type of carcinoma

H6 When the listed histology is **mixed** w/ **adenocarcinoma** or **squamous cell carcinoma** including their **subtypes**, code the resulting mixed urothelial carcinoma as follows:

- 8120: urothelial carcinoma
- 8130: papillary urothelial carcinoma
- 8183: micropapillary urothelial carcinoma

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Urinary Sites Table 2 (excerpt)

Specific and NOS Histology Codes	Synonyms	Subtypes/Variants
Adenocarcinoma NOS 8140 <i>Note:</i> Urachal carcinoma NOS is coded 8010/3. Urachal adenocarcinoma is coded 8140/3.	Mixed adenocarcinoma Urachal adenocarcinoma	Clear cell carcinoma 8310 Endometrioid carcinoma 8380 Enteric adenocarcinoma 8144 Mucinous adenocarcinoma 8480
Malignant melanoma 8720/3		
Malignant perivascular epithelioid cell tumor 8714/3	Malignant PEComa	
Neuroendocrine carcinoma, NOS 8246/3	<div>H5 and H11</div> <div>H4 and H10</div>	<div>Large cell neuroendocrine tumor/combined large cell neuroendocrine carcinoma 8013/3</div> <div>Small cell neuroendocrine carcinoma 8041/3</div>
Neuroendocrine tumor, NOS 8240/3	Neuroendocrine tumor, grade 1 Well differentiated neuroendocrine carcinoma Neuroendocrine carcinoma, low grade	Neuroendocrine tumor, grade 2 8249/3

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Coming Up!

- Hematopoietic Part 1
 - Juliet Wilkins, ODS
 - 12/4/24 and 12/5/24
- Hematopoietic Part 2
 - Jennifer Ruhl, ODS
 - 1/8/25 and 1/9/25

A background image showing numerous red blood cells in a dark red, slightly blurred environment, suggesting a microscopic view of blood.

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CE Phrase:

A background image featuring a dense collection of white, three-dimensional block letters (A-Z) scattered across a light gray surface, creating a textured, word-like effect.

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