

Basics and Beyond Metastatic Cancers

BASICS

- Metastatic cancer refers to a cancer than spreads from its site of origin to another part of the body.
- If two or more sites are described as metastatic the diagnosis description should be stated and coded as secondary or metastatic.
- If patient presents for treatment of secondary site ONLY, report the secondary code first, followed by primary malignancy.

ICD10 Code	Sub Codes	Description
C ₇₇ .X	C ₇₇ .0-C ₇₇ .2, C ₇₇ .4-C ₇₇ .8	Secondary and Unspec Malignant Neoplasm of Lymph Nodes
C ₇ 8.X	-	Secondary Malignant Neoplasm of Respiratory and Digestive Organs
C ₇₉ .X	C79.00-C79.72, C79.81-C79.89, C79.9	Secondary Malignant Neoplasm of Other and Unspecified Sites

• When documenting it is important to consider the relationship between the secondary and primary neoplasms.

Metastatic	Description
то	Indicates the site mentioned is secondary (eg. Metastatic carcinoma <i>to</i> the breast is coded as secondary malignant neoplasm of the breast (C79.81))
FROM	Indicates the site mentioned is the primary site (eg. Metastatic carcinoma <i>from</i> the breast indicates the breast is the primary site.(C50.9) A code for the metastatic site should also be documented (Secondary Codes, below))
NO SECONDARY SITE	C79.9 (Secondary malignant neoplasm of unspecified site) should be assigned when no site is identified for the secondary neoplasm. This is also true if the morphology type is qualified but no site is indicated in the diagnostic. In this case, code the primary neoplasm and C79.9.

• If the primary/secondary status is not indicated in documentation, the following sites should be considered as *secondary* sites of malignancy:

Bone	Brain	Mediastinum
Pleura	Heart	Meninges
Spinal Cord	Diaphragm	*The liver has a specific code in these cases, C22.o, Malignant
Peritoneum or Retroperitoneum	Lymph Nodes	Neoplasm of liver, not specified as primary or secondary

Use ALL applicable codes to accurately document a patient's condition, more than 1 can be documented Remember to M.E.A.T. (Monitor, Evaluate, Assess and/or Treat) and document:

- Primary malignancy or a metastatic malignancy
- Primary and secondary cancer site(s) or behavior
- Current status
- Histological type or behavior
- · Location, laterality and gender

- Treatments and if they are active or prophylactic
- Therapy codes (eg. Chemotherapy, immunotherapy or radiation therapy), if applicable
- Diagnostic tests with dates
- Surgical procedure and dates, if applicable



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BEYOND THE BASICS ICD10 CODING CONSIDERATIONS

CANCER STATUS

• It is important to correctly document and code if cancer is current cancer or history of.

When to code as	Consideration(s)
	Evidence of disease
Current	Patient is receiving active or curative treatment
	No evidence of disease
Historical	No active treatment
(Z Codes)	Patient is receiving preventative or prophylactic treatment

COMPLICATIONS

 When an encounter for a complication associated to the neoplasm is for treatment of the complication, it should be coded first.

Complication	Consideration(s)
Anemia With Malignancy	Code malignancy first, anemia second
Anemia With Chemo/ Immunotherapy	Code adverse event first, anemia second, then malignancy
Anemia With Radiation	Code anemia first, malignancy second and third as cause of abnormal reaction or later complication
Pathological Fracture	When due to neoplasm and focus of treatment is fracture, code fracture first and then neoplasm

COMORBIDITIES

- Comorbidities are illnesses other than the primary diagnosis that can influence outcome of treatment.
- Common conditions related to neoplasms include:

ICD10 Code	Condition
l10	Essential (Primary) HTN
J44.X	COPD
E10.X, E11.X	Diabetes (Type 1, Type 2)
16o.X-169.X	Cerebrovascular Disease
I50.X	Congestive Heart Failure (identify acuity)
l ₇₃ .X	Other Peripheral Vascular Disease

STAGING FORMS

- Cancer staging has its own classification systems, and can be helpful when abstracting diagnoses from clinical documentation.
- Two types of staging systems are:

System	Descriptions
0-IV	0 - Carcinoma in situ; I, II, III - Identify incrementally the size and extent of malignancy; IV - Distant metastases
TNM	T - Size and Extent of primary tumor; N - Number of lymph nodes near the primary tumor that are positive for malignancy; M - If primary malignancy has metastasized to other organs

ICD10 CODING SCENARIOS

Example	ICD 10 Coding
Female patient seen for metastatic bone cancer, previously had mastectomy 7 weeks ago, and currently having radiation treatments for breast cancer. Primary neoplasm located in upper outer quadrant, right breast.	•C79.51, Neoplasm, bone, secondary AND •C50.411, Malignant neoplasm of upper-outer quadrant of right female breast AND •Z90.10, Absence of unspecified breast or nipple
Patient present for treatment of ureter. Primary malignancy is in right renal pelvis that metastasized to right ureter.	•C79.19, Secondary malignant neoplasm of other urinary organs AND •C65.1, Malignant neoplasm of right renal pelvis
Following lobectomy and chemotherapy, patient is diagnosed with metastatic brain cancer, secondary to lung cancer.	•C79.31, Secondary malignant neoplasm of brain AND •Z85.118, Personal history of malignant neoplasm bronchus and lung.