

## NON-REPORTABLE CONDITIONS

### PRECANCEROUS CONDITIONS OR BENIGN TUMORS

Patients with precancerous conditions or benign tumors are not reportable. Examples of such diagnoses include atypical adenoma.

### SKIN CANCER

The following histology/site combinations for skin cancers are not reportable:

- 8000-8005 Neoplasms malignant, NOS of the skin (C44.0-C44.9)
- 8010-8046 Epithelial carcinomas of the skin (C44.0-C44.9)
- 8050-8084 Papillary and squamous cell carcinomas of the skin (44.0-C44.9)
- 8090-8110 Basal cell carcinomas of the skin (C44.0-C44.9)

ICD-O codes C44.0-C44.9 include: skin of the lip, eyelid, external ear, face, nose, scalp, neck, trunk, perineum, (peri) anus, umbilicus, upper and lower limbs, shoulders, hips, and skin around ostomy sites. Metastasis from non-reportable site: if the primary site is not reportable but the cancer has metastasized to other sites, the record is still not reportable.

### CARCINOMA IN SITU OF THE CERVIX

The diagnosis carcinoma *in situ* of the cervix (CIS) is not reportable except adenocarcinoma in situ.

### INTRAEPITHELIAL NEOPLASIA

Patients with the following diagnoses of intraepithelial neoplasia are not reportable to these specific sites only:

- Cervical intraepithelial neoplasia (CIN)
- Prostatic intraepithelial neoplasia (PIN)

### CONSULT ONLY RECORDS

Patients seen in consultation to confirm a diagnosis only are not reportable. A consult may be done to confirm a diagnosis or treatment plan. If a chart is created, the case would be reportable.

### AMBIGUOUS TERMS THAT DO **NOT** CONSTITUTE A DIAGNOSIS OF CANCER

Do not interpret the following terms as a diagnosis of malignancy. Do not report patients who have a final diagnosis consisting only if these terms without additional information to support reportability.

***Cannot be ruled out***

***Equivocal***

***Possible***

***Potentially malignant***

***Questionable***

***Rule out***

***Suggests***

***Worrisome***

Example: If the final diagnosis is reported as possible carcinoma of the breast, the case is not reportable.

Note: If a phrase such as “strongly suggestive” or “highly worrisome” is used, disregard the modifier (“-ly”) and refer to the guidelines above regarding the primary term.

### SLIDE REVIEWS

Records in which slides are sent to your pathologist for second opinion are encouraged to be reported, but are not required. The slide was already read by another pathologist, the facility requesting the slide review is required to report the final diagnosis as determined after the slide review.

### HISTORY OF

Patients with a history of malignancy who are clinically free of disease are not reportable. If however, the patient has actually received cancer-directed or non-cancer directed treatment during the encounter, the record must be reported.

### METASTATIC SITES

Do not report the metastatic or secondary sites of a malignant neoplasm; however check to make sure the primary site was previously reported. A diagnosis of metastatic cancer with an unknown primary site not previously reported should be submitted with the primary site documented or coded as unknown.

### RECURRENCE

Recurrence is defined as the same cancer arising in or from the primary site where it appeared earlier and is not considered a new primary cancer by the physician. Do not report a recurrent diagnosis when you previously reported it.