



National Cancer Institute

# Hematopoietic and Lymphoid Neoplasm Project





# **Multiple Primary Rules and using the Hemato Database Multiple Primaries Calculator**

Steven Peace, CTR

Westat

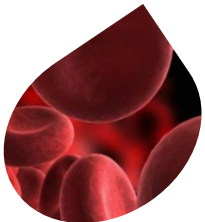
September 2009



# Multiple Primary Rules

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- 3 formats
  - Text
  - Matrix
  - Flowchart
- Use Multiple Primary Rules and Database
  - First Apply the Rules
  - If necessary – Apply Multiple Primary Calculator
- **DO NOT GO DIRECTLY** to the Database

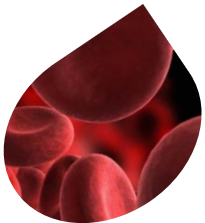




# ***MP Rules - Note 1***

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- Use Multiple Primary Rules M1 through M12 **before** using the Hematopoietic DB.

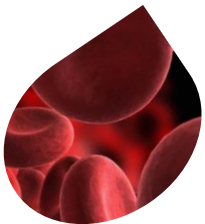




# ***MP Rules - Note 2***

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- The registrar must recognize that during the diagnostic workup the physician may start with a non-specific diagnosis (NOS) and as testing is completed, a more specific histology is identified. **These diagnoses are not multiple primaries; they represent steps in the diagnostic work-up. See rules M7-M12.**

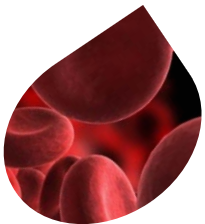




# Rule M1

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- Abstract as a single primary when **minimal information** is available (such as a death certificate only (DCO) case or a pathology-report-only case). \*

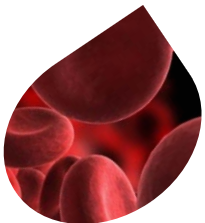




# Rule M2

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- Abstract as a single primary when there is a **single histology**.<sup>\*</sup>
  - **Example 1:** The diagnosis is multiple myeloma (9732/3). Abstract as a single primary.
  - **Example 2:** Multiple extraosseous plasmacytomas (9734/3) are present in the oropharynx. Abstract as a single primary.

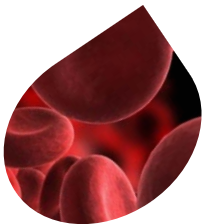




# Rule M2

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- **Example 3:** A single histology diagnosed by the definitive diagnostic method as defined in the Hematopoietic DB; for example. The patient had several provisional diagnoses but the definitive diagnostic method identifies a single histology. Abstract as a single primary.





# Flowchart Version

## Multiple Primary Rules - Flowchart Hematopoietic and Lymphoid Neoplasm

Use Multiple Primary Rules M1 through M13 **before** using the Hematopoietic DB.



\*Prepare one abstract. Use the primary site and histology coding rules to assign the appropriate primary site and histology codes.

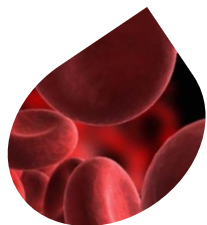
\*\*Prepare two or more abstracts. Use the primary site and histology coding rules to assign the appropriate primary site and histology codes to each case abstracted.

UNKNOWN IF SINGLE OR  
MULTIPLE TUMORS

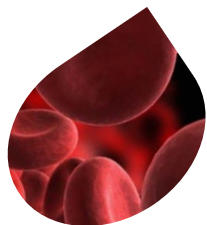
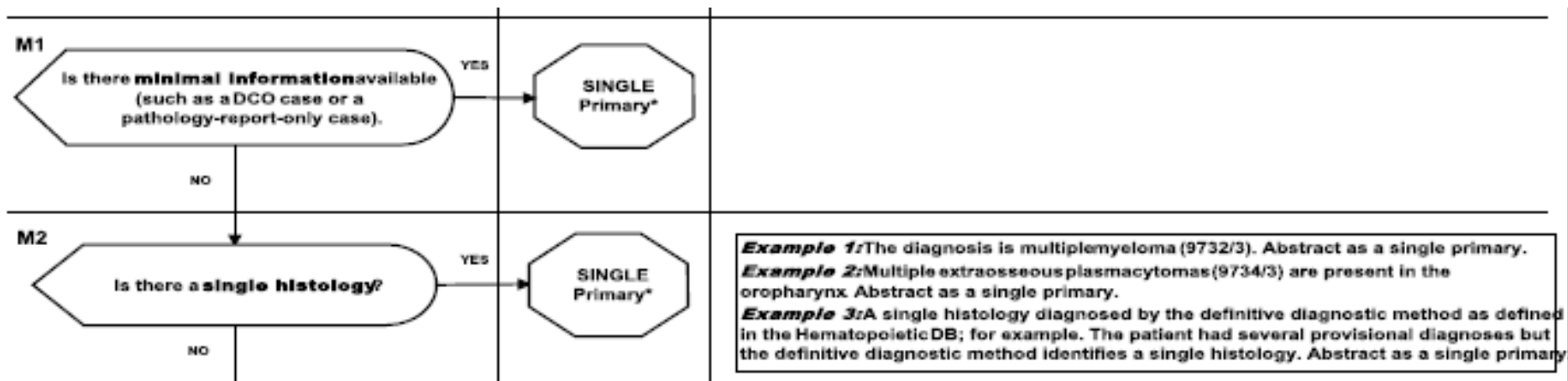
DECISION

NOTES and EXAMPLES

The registrar must recognize that during the diagnostic workup the physician may start with a non-specific diagnosis (NOS) and as testing is completed, a more specific histology is identified. These diagnoses are not multiple primaries; they represent steps in the diagnostic work-up. See rules M7 - M12.



# Rules M1 and M2 - Flowchart



# Matrix Version

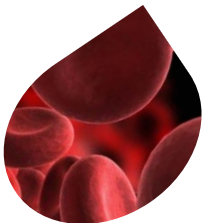
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## Multiple Primary Rules Matrix Format

*Note 1:* Use Multiple Primary Rules M1 through M13 before using the Hematopoietic DB.

*Note 2:* The registrar must recognize that during the diagnostic workup the physician may start with a non-specific diagnosis (NOS) and as testing is completed, a more specific histology is identified. These diagnoses are not multiple primaries; they represent steps in the diagnostic work-up. See rules M7-M12.

Rule #	Histology	Number of Primaries	Examples/Comments
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# Rules M1 and M2 - Matrix

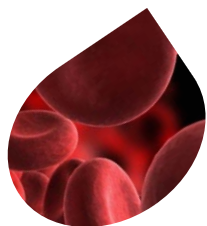
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## Multiple Primary Rules Matrix Format

*Note 1:* Use Multiple Primary Rules M1 through M13 before using the Hematopoietic DB.

*Note 2:* The registrar must recognize that during the diagnostic workup the physician may start with a non-specific diagnosis (NOS) and as testing is completed, a more specific histology is identified. These diagnoses are not multiple primaries; they represent steps in the diagnostic work-up. See rules M7-M12.

Rule #	Histology	Number of Primaries	Examples/Comments
<b>M1</b>	Minimal information available, such as DCO case or a pathology only case	Single*	
<b>M2</b>	Single histology	Single*	<i>Example 1:</i> The diagnosis is multiple myeloma (9732/3). Abstract as a single primary. <i>Example 2:</i> Multiple extraosseous plasmacytomas (9734/3) are present in the oropharynx. Abstract as a single primary. <i>Example 3:</i> A single histology diagnosed by the definitive diagnostic method as defined in the Hematopoietic DB; for example. The patient had several provisional diagnoses but the definitive diagnostic method identifies a single histology. Abstract as a single primary.

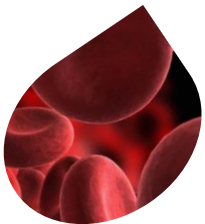




# Rule M3

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- Abstract as a single primary when **two or more types of non-Hodgkin lymphoma** are present in the same anatomic location(s), such as one lymph node region, one organ, or one tissue.\*
  - **Example:** Biopsy of cervical lymph node shows **two** different non-Hodgkin lymphomas. Abstract as a single primary.





# Rule M3

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- **Note 1:** When the disease is in an early stage, the involved lymph node(s) will be in the same region as defined by ICD-O-3 codes. See Appendix C for information on lymph node codes and regions.
- **Note 2:** When the disease is in a more advanced stage, both non-Hodgkin lymphomas may be present in multiple lymph node regions as defined by ICD-O-3 or in an organ and that organ's regional lymph nodes or in multiple organs. (additional note next slide)
- **Note 3:** Do not query the Hematopoietic DB in this situation.

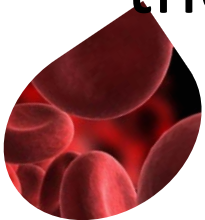




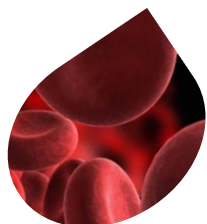
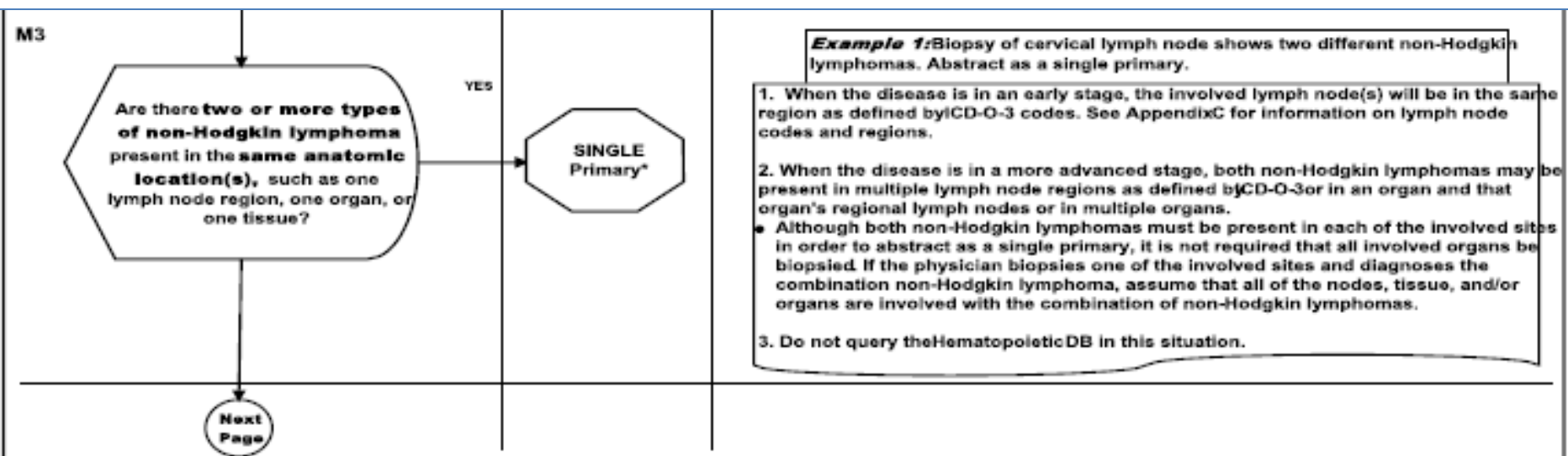
# Rule M3

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- Although both non-Hodgkin lymphomas must be present in each of the involved sites in order to abstract as a single primary, it is not required that all involved organs be biopsied. If the physician biopsies one of the involved sites and diagnoses the combination non-Hodgkin lymphoma, assume that all of the nodes, tissue, and/or organs are involved with the combination of non-Hodgkin lymphomas.



# Rule M3 - Flowchart

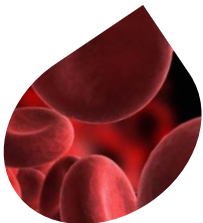




# Rule M3 - Matrix

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<b>M3</b>	<b>Two or more types of non-Hodgkin lymphoma are present in the same anatomic location(s), such as</b> <ul style="list-style-type: none"><li>• One lymph node region OR</li><li>• One organ OR</li><li>• One tissue</li></ul>	<b>Single*</b>	<p><i>Example:</i> Biopsy of cervical lymph node shows two different non-Hodgkin lymphomas. Abstract as a single primary.</p> <p><i>Note 1:</i> When the disease is in an early stage, the involved lymph node(s) will be in the same region as defined by ICD-O-3 codes. See Appendix C for information on lymph node codes and regions.</p> <p><i>Note 2:</i> When the disease is in a more advanced stage, both non-Hodgkin lymphomas may be present in multiple lymph node regions as defined by ICD-O-3 or in an organ and that organ's regional lymph nodes or in multiple organs.</p> <ul style="list-style-type: none"><li>• Although both non-Hodgkin lymphomas must be present in each of the involved sites in order to abstract as a single primary, it is not required that all involved organs be biopsied. If the physician biopsies one of the involved sites and diagnoses the combination non-Hodgkin lymphoma, assume that all of the nodes, tissue, and/or organs are involved with the combination of non-Hodgkin lymphomas.</li></ul> <p><i>Note 3:</i> Do not query the Hematopoietic DB in this situation.</p>
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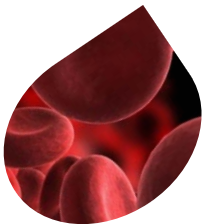




# Rule M4

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- Abstract as a single primary when both **Hodgkin and non-Hodgkin** lymphoma are present in the **same anatomic location(s)**. Hodgkin and non-Hodgkin may be present in one lymph node region, one organ, or one tissue.\*
  - **Example:** Biopsy of cervical lymph node shows Hodgkin and non-Hodgkin lymphomas. Abstract as a single primary.





# Rule M4

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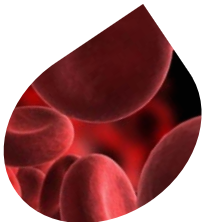
- **Note 1:** When the disease is in an early stage, the involved lymph node(s) will be in the same region as defined by ICD-O-3 codes. See Appendix C for lymph node codes and regions.
- **Note 2:** When the disease is in a more advanced stage, both Hodgkin and non-Hodgkin lymphomas may be present in multiple lymph node regions as defined by ICD-O-3 codes or in an organ and that organ's regional lymph nodes or in multiple organs.
- **Note 3:** Do not query the Hematopoietic DB in this situation.



# Rule M4

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- Although both Hodgkin and non-Hodgkin lymphomas must be present in each of the involved sites in order to abstract as a single primary, it is not required that all involved organs be biopsied. If the physician biopsies one of the involved sites and diagnoses the combination Hodgkin and non-Hodgkin lymphomas, assume that all of the nodes, tissue, and/or organs are involved with the combination of Hodgkin and non-Hodgkin lymphomas.

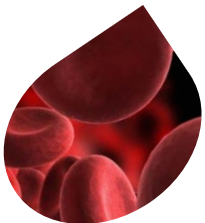




# Rule M5

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- Abstract as multiple primaries when any of the following situations are met \*\*
  - Hodgkin lymphoma in **one node** and non-Hodgkin lymphoma in a **different node** (Appendix C)
  - Hodgkin lymphoma in **one organ** and non-Hodgkin lymphoma in a **different organ**
  - Hodgkin lymphoma in **tissue** and non-Hodgkin lymphoma in **different tissue**

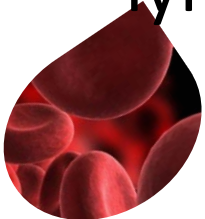




# Rule M5

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- **Example 1:** Patient is diagnosed with Hodgkin lymphoma in the cervical lymph nodes and also with non-Hodgkin lymphoma in the inguinal lymph nodes. Abstract as multiple primaries.
- **Example 2:** Hodgkin lymphoma in thymus and non-Hodgkin lymphoma in the tonsil. Abstract as multiple primaries.
- **Example 3:** Hodgkin lymphoma in the brain and non-Hodgkin lymphoma in the mediastinal lymph nodes. Abstract as multiple primaries.

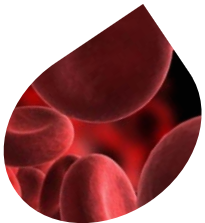




# Rule M6

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- Abstract as a single primary when a **more specific** histology is diagnosed after an **NOS** in the same histologic grouping as defined in Appendix B Histology Lineages.\*
  - **Note 1:** There are no time restrictions on these diagnoses; the interval between the NOS and the more specific histology does not affect this rule stating that the two neoplasms are a single primary.
  - **Note 2:** The Hematopoietic DB will identify these histologies as a single primary.

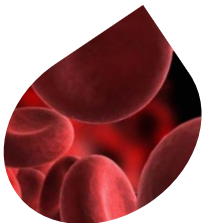




# Rule M7

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- Abstract as a single primary when both the chronic and the acute phase of the neoplasm are diagnosed within 21 days **AND \***
  - There is documentation of one positive bone marrow biopsy
  - **Note:** When these diagnoses happen within 21 days, it is highly possible that one diagnosis was provisional and the bone marrow identified the correct diagnosis.



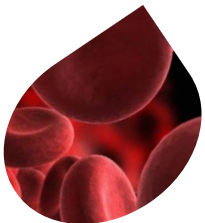




# Rule M8

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- Abstract as multiple primaries when both the chronic and the acute phase of the neoplasm are diagnosed within 21 days AND \*\*
  - There is documentation of two bone marrow examinations, one confirming the chronic neoplasm and another confirming the acute neoplasm

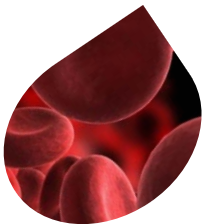




# Rule M9

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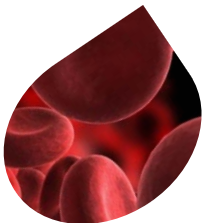
- Abstract as a single primary when both chronic and acute phase neoplasms are diagnosed within 21 days AND \*
  - There is no available documentation on bone marrow biopsy



# Rule M9

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- **Note 1:** The two diagnoses are likely the result of an ongoing diagnostic work-up. The later diagnosis is usually based on all of the test results.
- **Note 2:** This rule applies if both neoplasms are diagnosed simultaneously (at the same time).

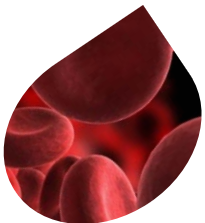




# Rule M10

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- Abstract as multiple primaries when a neoplasm is **originally diagnosed** in a **chronic** (less aggressive) phase AND **second diagnosis** of a blast or acute phase **21 days or more** after the chronic diagnosis. \*\*
  - **Note 1: This is a change from previous rules.** Use the Hematopoietic DB to determine multiple primaries when a transformation from the chronic to a blast or acute phase occurs.





# Rule M10

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- **Note 2:** When the subsequent diagnosis occurs 21 days or more after the original diagnosis of acute disease it is important to follow-back to obtain information on treatment or **information that a subsequent bone marrow biopsy proved that the diagnosis of acute disease was incorrect.**
- **Note3:** Transformations are defined in the Hematopoietic DB for each hematopoietic and lymphoid neoplasm.

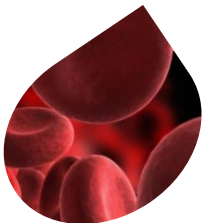




# Rule M11

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- Abstract the acute phase as a single primary when a neoplasm is originally diagnosed in the blast or acute phase and **reverts** to a less aggressive/chronic phase and there is no confirmation available that the patient has been treated.
  - **Note 1:** When these diagnoses happen **within 21 days**, it is highly possible that the first diagnosis of acute disease was a provisional diagnosis.

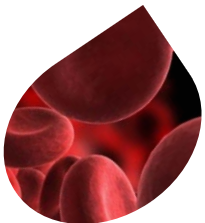




# Rule M11

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- **Note 2:** When the subsequent diagnosis occurs more than 21 days after the original diagnosis of acute disease it is important to follow-back to obtain information on treatment or a subsequent bone marrow biopsy that negates the diagnosis of acute disease.

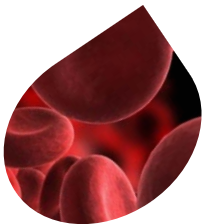




# Rule M12

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- Abstract as multiple primaries when a neoplasm is originally diagnosed in the blast or acute phase and **reverts** to a less aggressive/chronic phase **after treatment.** \*\*
  - **Note 1:** Only abstract as a multiple primary when the patient has been treated for the acute disease.



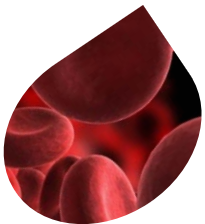




# Rule M12

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- **Note 2:** This is a change from previous rules. Use the Hematopoietic DB to determine multiple primaries when a transformation from the blast or acute phase to a chronic phase occurs.
- **Note 3:** Transformations are defined in the Hematopoietic DB for each hematopoietic and lymphoid neoplasm.

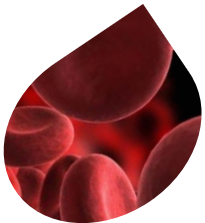




# Rule M13

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- Use the Hematopoietic DB to determine the number of primaries for all cases that do **not** meet the criteria of M1-M12.





# Hematopoietic Database



Enter search term:

Search

Display Codes...

Multiple Primaries Calculator...

Hemato Manual



# Hematopoietic Database



Multiple Primaries Calculator

Disease 1

Disease 2

Compare

Display Codes...

Close Calculator

Hemato Manual



# Hematopoietic Database



## Multiple Primaries Calculator

9731

Disease 1

9861

Disease 2

Compare

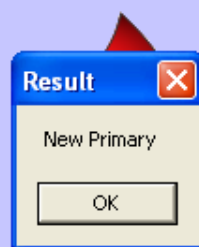
Display Codes...

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Hemato Manual



# Hematopoietic Database



Multiple Primaries Calculator

9731 Disease 1      9861 Disease 2

Compare

Display Codes...

Close Calculator

Hemato Manual



# Hematopoietic Database



## Multiple Primaries Calculator

Disease 1

Disease 2

Compare

Display Codes...

Close Calculator

Hemato Manual



# Hematopoietic Database



## Multiple Primaries Calculator

Same Primary

Ok

Display Codes...

Close Calculator

Hemato Manual





# Conclusion

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- The new hematopoietic and lymphoid neoplasm rules go into effect for cases diagnosed **January 1, 2010 and later**
- Email address for questions [askseerctr@imsweb.com](mailto:askseerctr@imsweb.com)

