

**Renal Pelvis, Ureter, Bladder, and Other Urinary Multiple Primary Rules – Text  
C659, C669, C670-C679, C680-C689  
(Excludes lymphoma and leukemia M9590-9989 and Kaposi sarcoma M9140)**

**UNKNOWN IF SINGLE OR MULTIPLE TUMORS**

*Note:* Tumor(s) not described as metastasis

**Rule M1** When it is not possible to determine if there is a **single** tumor **or multiple** tumors, opt for a single tumor and abstract as a single primary.\*

*Note:* Use this rule only after all information sources have been exhausted.

**\* Prepare one abstract. Use the histology coding rules to assign the appropriate histology code.  
This is the end of instructions for Unknown if Single or Multiple Tumors.**

**SINGLE TUMOR**

*Note 1:* Tumor not described as metastasis

*Note 2:* Includes combinations of in situ and invasive

**Rule M2** A **single tumor** is always a single primary. \*

*Note:* The tumor may overlap onto or extend into adjacent/contiguous site or subsite.

**This is the end of instructions for Single Tumor.**

**\* Prepare one abstract. Use the histology coding rules to assign the appropriate histology code.**

**MULTIPLE TUMORS**

Multiple tumors may be a single primary or multiple primaries.

*Note 1:* Tumors not described as metastases

*Note 2:* Includes combinations of in situ and invasive

**Rule M3** When no other urinary sites are involved, tumor(s) in the **right renal pelvis AND** tumor(s) in the **left renal pelvis** are multiple primaries. \*\*

*Note:* Use this rule and abstract as a multiple primary unless documented to be metastatic

**Rule M4** When no other urinary sites are involved, tumor(s) in both the **right ureter AND** tumor(s) in the **left ureter** are multiple primaries. \*\*

*Note:* Use this rule and abstract as a multiple primary unless documented to be metastatic

Urinary MP

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**Rule M5** An **invasive** tumor **following** a **non-invasive or in situ** tumor more than 60 days after diagnosis is a multiple primary. \*\*

*Note 1:* The purpose of this rule is to ensure that the case is counted as an incident (invasive) case when incidence data are analyzed.

*Note 2:* Abstract as multiple primaries even if the medical record/physician states it is recurrence or progression of disease

**Rule M6** Bladder tumors with any **combination** of the following histologies: **papillary carcinoma** (8050), **transitional cell carcinoma** (8120-8124), **or papillary transitional cell carcinoma** (8130-8131), are a single primary. \*

**Rule M7** Tumors diagnosed **more than three (3) years** apart are multiple primaries. \*\*

**Rule M8** Urothelial tumors in two or more of the following sites are a single primary\* (See Table 1)

- Renal pelvis (C659)
- Ureter(C669)
- Bladder (C670-C679)
- Urethra /prostatic urethra (C680)

**Rule M9** Tumors with ICD-O-3 **histology** codes that are **different** at the first (xxxx), second (xxxx) or third (xxx) number are multiple primaries. \*\*

**Rule M10** Tumors in sites with ICD-O-3 **topography** codes with **different** second (Cxxx) and/or third characters (Cxxx) are multiple primaries\*

**Rule M11** Tumors that **do not meet any** of the above **criteria** are a single primary.\*

*Note:* When an invasive tumor follows an in situ tumor within 60 days, abstract as a single primary.

**This is the end of instructions for Multiple Tumors.**

**\* Prepare one abstract. Use the histology coding rules to assign the appropriate histology code.**

**\*\* Prepare two or more abstracts. Use the histology coding rules to assign the appropriate histology code to each case abstracted.**

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