Quick Quiz 4 – Lung

Use Grade table set **02** to code each data item:

- CT Chest 4cm mass right upper lobe of the lung with extensive hilar & mediastinal LAD. Lung mass Bx confirms anaplastic small cell carcinoma. Patient not a surgical candidate. RX plan Chemo/Radiation.

Code	Grade Description
1	G1: Well differentiated
2	G2: Moderately differentiated
3	G3: Poorly differentiated
4	G4: Undifferentiated
9	Grade cannot be assessed (GX); Unknown

Grade Clinical	4
Grade Pathological	9
Grade Post-Therapy	blank

- Per Clinical Grade Note 3: G4 includes Anaplastic

- Pathological Grade: No surgical resection

- Post-Therapy Grade: No Neoadjuvant Tx – Clinical case only

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Quick Quiz 5 – Prostate

Use Grade table set **17** to code each data item:

- Patient with history of elevated PSA presents for a biopsy of the prostate. Final pathologic diagnosis: Prostatic Adenocarcinoma, Gleason Score 3+3=6. Treatment was discussed and patient elects active surveillance

Code	Grade Description
1	Grade Group 1: Gleason score less than or equal to 6
2	Grade Group 2: Gleason score 7 Gleason pattern 3+4
3	Grade Group 3: Gleason score 7 Gleason pattern 4+3
4	Grade Group 4: Gleason score 8
5	Grade Group 5: Gleason score 9 or 10
A	Well differentiated
B	Moderately differentiated
C	Poorly differentiated
D	Undifferentiated, anaplastic
E	Stated as "Gleason score 7" with no patterns documented or Any Gleason patterns combination equal to 7 not specified in 2 or 3
9	Grade cannot be assessed; Unknown

Grade Clinical	1
Grade Pathological	9
Grade Post-Therapy	blank

- Clinical Grade: Gleason Score of 6 = Grade Group 1, Grade code 1

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Quick Quiz 6 – Bladder

Use Grade table set **19** to code each data item:

- Hx hematuria. Cystoscopy revealed tumor in bladder trigone. Bx confirms high grade papillary urothelial ca with focus of muscle invasion. Pt received neoadjuvant chemo followed by radical cystectomy. Final pathological dx: High grade papillary urothelial ca.

	Code	Grade Description
G1-G3 reserved for Adenocarcinoma Squamous Cell Ca	1	G1: Well differentiated
	2	G2: Moderately differentiated
	3	G3: Poorly differentiated
L & H For Urothelial Cancers	L	LG: Low-grade
	H	HG: High-grade
	9	Grade cannot be assessed (GX); Unknown

Grade Clinical	H
Grade Pathological	9
Grade Post-Therapy	H

- Clinical grade is "high grade"; Code H; (HG: High-grade)
- Pathological grade is 9; criteria not met- see post-therapy grade
- Post-therapy grade = "high grade" per surgical resection following Neoadjuvant Tx

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Quick Quiz 7 – Prostate

Use Grade table set **17** to code each data item:

- Patient with biopsy proven prostatic adenocarcinoma Gleason score 7 (3+4) presented for a robotic assisted prostatectomy. Final Dx from prostatectomy: Moderately differentiated adenocarcinoma, Gleason 6 (3+3)

Code	Grade Description
1	Grade Group 1: Gleason score less than or equal to 6
2	Grade Group 2: Gleason score 7 Gleason pattern 3+4
3	Grade Group 3: Gleason score 7 Gleason pattern 4+3
4	Grade Group 4: Gleason score 8
5	Grade Group 5: Gleason score 9 or 10
A	Well differentiated
B	Moderately differentiated
C	Poorly differentiated
D	Undifferentiated, anaplastic
E	Stated as "Gleason score 7" with no patterns documented or Any Gleason patterns combination equal to 7 not specified in 2 or 3
9	Grade cannot be assessed; Unknown

Grade Clinical	2
Grade Pathological	2
Grade Post-Therapy	blank

- Pathological Grade Note 2: If clinical grade higher than path grade, use clinical grade for both

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Quick Quiz 8 – Ovary

Use Grade table set **15** table to code each data item:

- Patient with abdominal distension and pain. CT reveals liver mass with abdominal and pelvic ascites. Liver biopsy positive for high grade serous carcinoma c/w ovarian origin.

Code	Grade Description
1	G1: Well differentiated
2	G2: Moderately differentiated
3	G3: Poorly differentiated, undifferentiated
B	GB: Borderline Tumor
L	Low grade
H	High grade
9	Grade cannot be assessed (GX); Unknown

Grade Clinical	9
Grade Pathological	9
Grade Post-Therapy	blank

- 1st basic coding rule- Code grade from the primary site, not a metastatic site

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Quick Quiz 9 – Colon

Use Grade table set **02** to code each data item:

- Patient had routine colonoscopy revealing a mass in ascending colon. Bx positive for invasive Mod-diff Adenocarcinoma. Subsequent hemicolectomy final pathologic diagnosis: High grade adenocarcinoma.

Code	Grade Description
1	G1: Well differentiated
2	G2: Moderately differentiated
3	G3: Poorly differentiated
4	G4: Undifferentiated
9	Grade cannot be assessed (GX); Unknown

Grade Clinical	2
Grade Pathological	9
Grade Post-Therapy	blank

- Pathological Grade: High grade not a code option & coding notes provide no special direction in this case; Code grade as 9

- Can't use mapping terms – Generic categories designated with numeric 1-4 codes & no A-D code options

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Quick Quiz 10A – Breast

Use Grade table set **12** to code each data item:

- Patient with left UOQ breast mass 1.0cm; Breast bx positive for invasive Ductal ca Nottingham Grade 1:3-5 points (Tubule formation 2, Nuclear pleomorphism 2, mitotic activity 1). Patient underwent lumpectomy. Final Pathology: Residual DCIS 0.3 cm, intermediate grade. No remaining invasive tumor. 0/1 sentinel LN pos(+). Margins clear.

Grade Clinical	1
Grade Pathological	1
Grade Post-Therapy	blank

- Clinical: Invasive Ductal ca, Grade 1
- General rules direct to code grade from invasive component of tumor
- Pathological Note 2: If clinical grade higher, code clinical Grade for both clinical & path

Quick Quiz 10B – Breast

Use Grade table set **12** to code each data item:

- Mammogram: UOQ breast mass 1.3cm. Breast bx: DCIS, high grade. Patient underwent definitive lumpectomy. Final Pathology: Invasive ductal carcinoma 0.8cm, Nottingham Grade 1:3-5 points; residual DCIS 0.2cm high grade. 0/1 sentinel LN pos(+). Margins clear.

Grade Clinical	H
Grade Pathological	1
Grade Post-Therapy	blank

- Clinical: Only DCIS high grade noted on diagnostic workup & microscopic exam

- Pathological: **Invasive** Ductal Ca identified on surgical specimen, Grade 1;
  Per *General Rules*: Code grade for invasive component when both in situ/invasive