



Melanoma Diagnoses 2023+

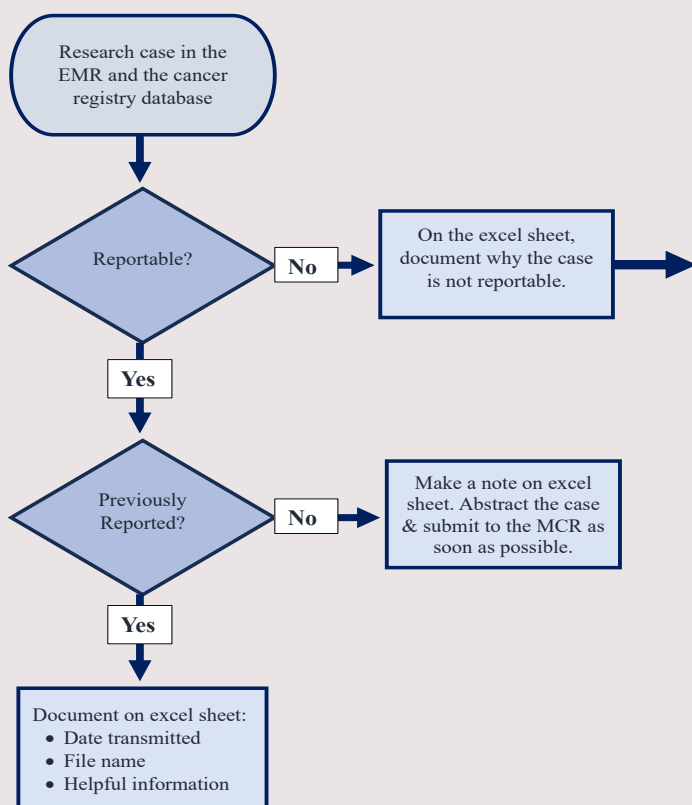
- The following procedures are no longer coded as diagnostic staging procedures and should be coded as surgical procedures.
 - ⇒ Shave
 - ⇒ Punch
 - ⇒ Elliptical
- Do not code procedures according to previous rules that considered margins status.

Update: “*Note 2*” and “*Example*” regarding shave biopsy on page 170, in the 2023 SEER Coding Manual should not be referred to for 2023+ cases. SEER has recognized that this information should have been removed. The 2024 manual was updated to reflect the change.

- The priority order for sources used to assign Melanoma surgery codes:
 - ⇒ Operative report
 - ⇒ Statement from a physician
 - ⇒ Description of the surgical procedure on a pathology report
 - ⇒ Results of the pathology report
- If the reporting facility captures more than one procedure code, two surgical procedures will most often be coded rather than a biopsy and a surgical procedure.
 - ⇒ Refer to [SEER, Appendix C](#) for Surgery Codes.
 - ⇒ Refer to [Appendix M in the 2024 STORE Manual](#) for case studies.
- Code the clinical margin width in the corresponding SSDI field.
 - ⇒ Refer to the [SSDI manual](#) for coding instructions.

Death Clearance Process

The death clearance process is a source of case finding for the state and is required by the state. When cases are not reportable for a hospital facility due to lack of a definitive diagnosis, please do not report them as class 49: death certificate only cases. Rather, document information on the provided excel sheet (see examples below). Summarized background information such as date of diagnosis (even if estimated), primary site, histology and first course treatment allows the MCR to create a missing case from the death certificate.



Examples

Ex 1: Excel sheet requests “H&N Squamous Cell CA”. NR as DX is skin primary with cervical LN involvement.

Ex 2: Admitted 2/15/22 failure to thrive. Imaging showed nodules lung and liver possible lung cancer. Patient transitioned to CMO and passed on 2/16/22. No definitive cancer diagnosis in EMR. Only on death certificate.

Ex 3: DX Spring 2015 while living in NC. Stage 1, Breast IDC, TX w/ lumpectomy, RT, Declined hormone. Moved to MA in 2020. Now DX with bone mets from 2015 DX. No new primary breast tumor.

Ex 4: Excel sheet requests lung primary. Not a new primary lung CA. Recent DX of distant mets from previous C209, Submitted 3/30/23, “File Name”.

Ex 5: No confirmed DX of transformation to AML. MDS-EB-2 only, Submitted 5/29/23.