



## Grade Clinical (c) Time Frame

The grade information we collect is an assessment of the **aggressiveness** of a tumor

### GENERAL RULES

- Code grade from the primary tumor only
- Do NOT code grade based on metastatic tumor or recurrence

### How do you code Grade if there is no resection of primary tumor?

#### Grade Clinical

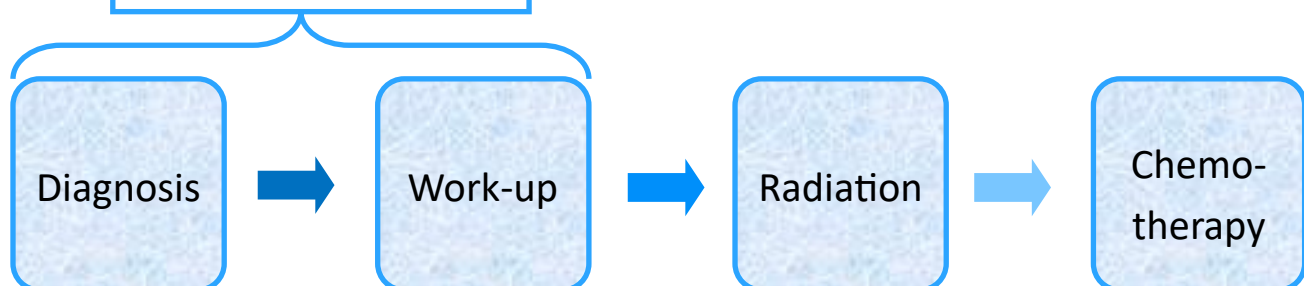
- Code the highest known grade during clinical time frame – usually from a biopsy or FNA.
- Grade Clinical may never be blank.
- Assign clinical grade based on histological information from the primary tumor collected before any treatment such as surgical resection or neoadjuvant therapy, etc.

**Example:** A patient presents with persistent cough. A CT/Chest showed a mass in the lower lobe right lung. A biopsy of the tumor in the right lung was positive for moderately differentiated adenocarcinoma. Patient was not a surgical candidate. The patient went on to have radiation and chemotherapy.

| Grade Data Item                      | Grade Value |
|--------------------------------------|-------------|
| Grade Clinical                       | 2           |
| Grade Pathological                   | 9           |
| Grade Post Therapy Clinical (yc)     | blank       |
| Grade Post Therapy Pathological (yp) | blank       |

| Code | Description                   |
|------|-------------------------------|
| 1    | G1: Well differentiated       |
| 2    | G2: Moderately differentiated |
| 3    | G3: Poorly differentiated     |
| 4    | G4: Undifferentiated          |
| 9    | Grade cannot be assessed      |

#### Clinical (c) Time Frame



Sources: Grade Manual, NAACCR Talks-Grade 8/26/20, NCRA Webinar on Coding Grade 9/22/20



## Grade Pathological (p) Time Frame

### Grade Pathological

- Code the grade of a solid primary tumor that has been surgically resected and no neoadjuvant therapy was administered during the pathological time frame.
  - This may include the grade from the clinical work-up, as all information from diagnosis (clinical staging) through surgical resection is used for pathological staging.
- Grade Pathological may never be blank.

For bladder and prostate, a **TURB** or **TURP** do not qualify for surgical resection.

A cystectomy, (partial or total) or a prostatectomy, must be performed.

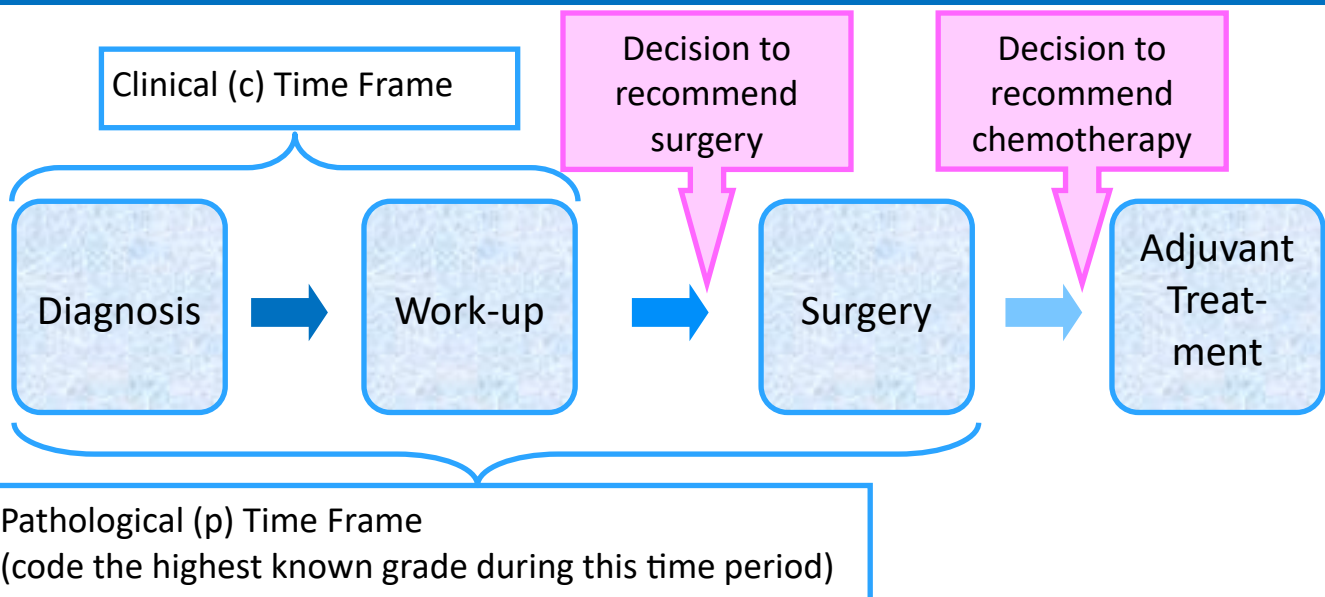
### Clinical vs Pathological Grade

Sources: Grade Manual, NAACCR Talks-Grade 8/26/20, NCRA Webinar on Coding Grade 9/22/20

**Example:** Patient presents for colonoscopy and is found to have a mass in the cecum. Biopsy is positive for well differentiated adenocarcinoma. Segmental resection of the cecum is performed. Pathology shows poorly differentiated adenocarcinoma.

| Grade Data Item                      | Grade Value |
|--------------------------------------|-------------|
| Grade Clinical                       | 1           |
| Grade Pathological                   | 3           |
| Grade Post Therapy Clinical (yc)     | blank       |
| Grade Post Therapy Pathological (yp) | blank       |

| Code | Description                   |
|------|-------------------------------|
| 1    | G1: Well differentiated       |
| 2    | G2: Moderately differentiated |
| 3    | G3: Poorly differentiated     |
| 4    | G4: Undifferentiated          |
| 9    | Grade cannot be assessed      |





## Grade Post-Therapy Clinical (yc) Time Frame

### Grade Post-Therapy Clinical (yc) New Data Item for cases diagnosed 01/01/2021 and forward

Highest known grade after neoadjuvant treatment, but before surgery of the primary tumor.

**(must be microscopically sampled)**

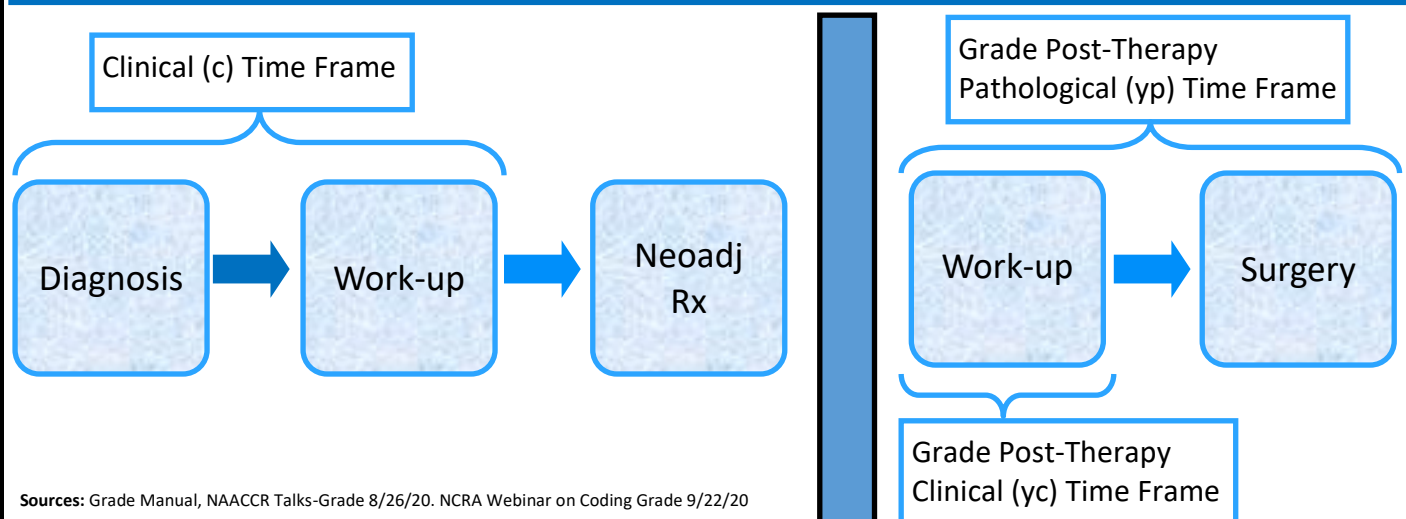
- For cases diagnosed 2018-2020, this data item can be left blank.
- Do **NOT** mix information obtained *prior* to neoadjuvant treatment with information obtained *after* neoadjuvant treatment!
- If AJCC staging is being assigned, the tumor must have met the neoadjuvant therapy or primary systemic and radiation therapy requirements in the AJCC manual or according to national treatment guidelines.
- If no neoadjuvant therapy done, then leave Grade Post-Therapy Clinical (yc) blank.
- Code 9 when
  - Microscopic exam is done after neoadjuvant therapy and grade from primary site is not documented.
  - Grade information is not documented.
  - There is no residual disease.

**Example:** Patient presents with a rectal tumor. A core biopsy shows undifferentiated adenocarcinoma. Patient received neoadjuvant chemotherapy and radiation. Patient is found to have residual tumor that is biopsied. Pathology shows well differentiated adenocarcinoma. A low anterior resection is performed and the tumor is positive for poorly differentiated adenocarcinoma.

| Grade Data Item                      | Grade Value |
|--------------------------------------|-------------|
| Grade Clinical                       | 4           |
| Grade Pathological                   | 9           |
| Grade Post Therapy Clinical (yc)     | 1           |
| Grade Post Therapy Pathological (yp) | 3           |

#### Code Grade Post-Therapy Clinical (yc) - 1

Code Grade Post-Therapy Clinical from the biopsy after neoadjuvant therapy but before the surgery of the primary tumor.



Sources: Grade Manual, NAACCR Talks-Grade 8/26/20. NCRA Webinar on Coding Grade 9/22/20



## Grade Post-Therapy Pathological (yp) Time Frame

### Grade Post-Therapy Pathological (yp) *New name. Previously Grade Post-Therapy*

- Highest known grade after neoadjuvant treatment and surgery to the primary tumor-usually resection or attempted resection of the primary tumor.
- This may include the grade from the clinical work-up, as all information from diagnosis (clinical staging) through surgical
- If no neoadjuvant therapy done, then leave Grade Post-Therapy Pathological (yp) blank.
- Code 9 when
  - Microscopic exam is done after neoadjuvant therapy and grade from primary site is not documented.
  - Grade information is not documented.
  - There is no residual disease.

### Grade Post-Therapy Clinical (yc) vs Grade Post-Therapy Pathological (yp)

**Example:** Patient presents with a 3 cm lump in her right breast. A core needle biopsy is positive for lobular carcinoma Nottingham grade 3 (G3) SBR score 8. The patient received neoadjuvant chemotherapy. Patient returns for a mastectomy. Pathology shows a 1 cm lobular carcinoma Nottingham grade 1 (G1).

| Grade Data Item              | Grade Value |
|------------------------------|-------------|
| Grade Clinical               | 3           |
| Grade Pathological           | 9           |
| Grade Post Therapy Clin (yc) | blank       |
| Grade Post Therapy Path (yp) | 1           |

| Code | Description                                    |
|------|--|
| 1    | G1: Low combined histologic grade              |
| 2    | G2: Intermediate combined histologic grade     |
| 3    | G3: High combined histologic grade             |
| L    | Nuclear Grade I (Low) (in situ only)           |
| M    | Nuclear Grade II (Intermediate) (in situ only) |
| H    | Nuclear Grade III (High) (in situ only)        |
| A    | Well differentiated                            |
| B    | Moderately differentiated                      |
| C    | Poorly differentiated                          |
| D    | Undifferentiated; anaplastic                   |
| 9    | Grade cannot be assessed                       |

#### Leave Grade Post-Therapy Clinical (yc) blank.

Patient did receive neoadjuvant treatment but did not have biopsy and microscopic exam of the primary site before going on to have surgery.

#### Patient does not meet criteria for Grade Post-Therapy Clinical (yc).

#### Code Grade Post-Therapy Pathological (yp) - 1

Sources: Grade Manual, NAACCR Talks-Grade 8/26/20. NCRA Webinar on Coding Grade 9/22/20



## Blank vs Unknown (9)

### Grade Post-Therapy Clinical (yc) vs Grade Post-Therapy Pathological (yp)

| No Neoadjuvant Therapy                     |   |          |          |
|--|---|----------|----------|
|  |   | Grade yc | Grade yp |
| No Neoadjuvant Therapy                     |   | Blank    | Blank    |
| Neoadjuvant Therapy                        |   |          |          |
|  |   | Grade yc | Grade yp |
| No biopsy of primary tumor                 | No resection of primary tumor                 | Blank    | Blank    |
| Biopsy of primary tumor, but no grade info | No resection of primary tumor                 | 9        | Blank    |
| No biopsy of primary tumor                 | Resection of primary tumor, but no grade info | Blank    | 9        |
| Biopsy of primary tumor, but no grade info | Resection of primary tumor, but no grade info | 9        | 9        |

**Example:** Patient present for a TURB of a bladder tumor. Pathology shows high-grade papillary urothelial carcinoma with invasion of muscle. Patient has neoadjuvant chemotherapy. A biopsy of the bladder shows high-grade urothelial carcinoma. A radical cystectomy is performed and shows residual low-grade urothelial carcinoma.

| Grade Data Item                      | Grade Value |
|--------------------------------------|-------------|
| Grade Clinical                       | H           |
| Grade Pathological                   | 9           |
| Grade Post Therapy Clinical (yc)     | H           |
| Grade Post Therapy Pathological (yp) | H           |

**Code Grade Post-Therapy Clinical (yp) - H**

**Code Grade Post-Therapy Pathological (yp) - H**

Grade Post-Therapy Path (yp) may include the grade from the clinical workup after neoadjuvant therapy, through the surgical resection.

| Code | Description                   |
|------|-------------------------------|
| 1    | G1: Well differentiated       |
| 2    | G2: Moderately differentiated |
| 3    | G3: Poorly differentiated     |
| L    | LG: Low-grade                 |
| H    | HG: High-grade                |
| 9    | Grade cannot be assessed      |

Sources: Grade Manual, NAACCR Talks-Grade 8/26/20. NCRA Webinar on Coding Grade 9/22/20