

Colon Cancer – Case #1

Physician Report

EXAM: CT chest with contrast

CLINICAL HISTORY: Colon cancer

Comparison: 6/18/12, 2/24/12

Technique: Helical CT of the chest was performed following the administration of intravenous contrast. Thin section axial and coronal images were obtained. Total DLP: 3200.85 mGycm

Findings: The following small are stable: Left upper lobe on image 14, right lower lobe image 30, left lower lobe image 28, right middle lobe image 33. Calcified granuloma within the right lower lobe remains as well. There is no new nodule or mass. There is no consolidation or effusion. The central airways are patent. There is no mediastinal adenopathy or mass. There is no pericardial effusion. The heart is not enlarged. Right chest port remains with catheter tip in the superior vena cava. Benign hemangioma within the T12 vertebral body is stable. Mild degenerative changes are present throughout the spine with no focal blastic or destructive process. The skin and surrounding soft tissues are unremarkable.

IMPRESSION: Stable exam with no evidence of metastatic disease in the chest.

Coding Summary

	ICD-9	ICD-10
Primary Dx	153.9 - Malignant neoplasm of colon, unspecified	C18.9 - Malignant neoplasm of colon, unspecified

ICD-10 Guidance

10 potential ICD-10 codes exist under C18 - Malignant neoplasm of colon

- Histologic behavior and type (cancer)
- Location (colon)

Breast Cancer - Case #2

Physician Report

EXAM: US GUIDED NEEDLE PLACEMENT

CLINICAL HISTORY: 62 year old female with Left breast cancer.

FINDINGS: Following explanation of the risks, benefits, and alternatives to the procedure, the patient gave oral and written consent. Then, using sterile technique, local anesthetic, and ultrasound guidance, a localizing wire was positioned at the 9:00 axis of the left breast in the region of the mass of concern. There were no immediate complications. Postprocedure mammographic images confirm adequate placement of the localizing wire.

IMPRESSION:

1. Ultrasound guided wire localization left breast.
2. BIRADS 6-known carcinoma.

Coding Summary

	ICD-9	ICD-10
Primary Dx	174.8 – Malignant neoplasm of the female breast, other specified sites	C50.812 – Malignant neoplasm of overlapping site of left female breast

ICD-10 Guidance

6 potential ICD-10 codes exist under C50.8- Malignant neoplasm of overlapping sites of breast

- Gender (female)
- Histologic behavior and type (cancer)
- Laterality (left)
- Location (9:00 axis)

Liver Mets - Case # 3

Physician Report

EXAM: Right upper quadrant ultrasound

Comparison: Abdomen and pelvic CT December 19, 2013

CLINICAL HISTORY: elevated liver enzymes.

Grayscale and color Doppler evaluation of the right upper quadrant of the abdomen is performed. Pancreatic head is partially visualized. The aorta and inferior vena cava are within normal limits. Liver is remarkable for multiple metastases, the largest within the right lobe measuring 12.6 cm. The liver is enlarged measuring 20.9 cm. Common bile duct is 3 mm. Gallbladder is free of calculus, wall thickening, and pericholecystic fluid. Minimal amount of fluid is present adjacent to the liver. Fluid is noted adjacent to the gallbladder. Right kidney is 12.6 cm x 4.7 cm x 4.9 cm. Renal cortical echotexture is unremarkable.

Impression:

1. **Hepatic metastatic disease** with hepatomegaly. No acute sonographic abnormality otherwise

Coding Summary

	ICD-9	ICD-10
Primary Dx	197.7 - Secondary malignant neoplasm of liver	C78.7- Secondary malignant neoplasm of liver and intrahepatic bile duct

ICD-10 Guidance

14 potential ICD-10 codes exist under C78 - Secondary malignant neoplasm of respiratory and digestive organs

- Histologic behavior and type (metastatic)
- Location (hepatic)