Government of Western Australia
Department of Health

Western Australian Coding Rule

0725/59 Non-small cell carcinoma versus adenocarcinoma

Q.
When lung cancer is documented as “non-small cell lung carcinoma (adenocarcinoma)”, which morphology should be assigned?

A.
Lung carcinomas can be divided into two broad categories: small cell lung carcinoma (SCLC) and non-small cell lung carcinoma (NSCLC). The most common specific types of NSCLC are squamous cell carcinoma, large cell carcinoma and adenocarcinoma.

In accordance with *Conventions used in the ICD-10-AM Alphabetic Index/ Convention 9.3 NEC:* the abbreviation NEC (not elsewhere classified) is used in the Alphabetic Index after the term ‘non-small cell carcinoma’ as a warning that if the health care record includes more precise information, code assignment should be modified accordingly.

The term ‘non-small cell lung carcinoma (NSCLC)’ may be documented interchangeably even when the specific morphology (e.g. adenocarcinoma) is known. The more specific morphology (e.g. M8140/3 *Adenocarcinoma NOS*) should be coded if supported by the documentation in the health care record.

ACS 0233 *Morphology/Directive 2* is only applicable if NSCLC is specifically documented as a single morphological diagnosis, such as:

- “non-small cell lung carcinoma (adenocarcinoma)”. Apply ACS 0233 *Morphology/Directive 2* and select the higher number morphology: M8140/3 *Adenocarcinoma NOS* (i.e., higher than M8046/3 *Non-small cell carcinoma*).

- “non-small cell lung carcinoma (large cell carcinoma)”. Apply ACS 0233 *Morphology/Directive 2* to select the more **specific** morphology M8012/3 *Large cell carcinoma* (which, in this instance, happens to be a lower number than M8046/3 *Non-small cell carcinoma*).

DECISION
***Conventions used in the ICD-10-AM Alphabetic Index/Convention 9.3 NEC* is applicable for non-small cell carcinoma.**

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This WA Coding Rule 0725/59 *Non-small cell carcinoma versus adenocarcinoma* supersedes WA Coding Rule 0916/06 *Non-small cell carcinoma versus adenocarcinoma*.

This Rule has been modified to improve clarity; and to correspond with a minor modification in ICD-10-AM/ACHI/ACS Thirteenth Edition.

Effective 1 July 2025, ICD-10-AM/ACHI/ACS 13th Ed.

As per the Patient Activity Data Policy (MP 0164/21) Western Australian Coding Rules must be followed.

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Western Australian Coding Rule

0916/06 Non-small cell carcinoma versus adenocarcinoma

Q.
When a lung cancer is documented as non-small cell lung carcinoma (adenocarcinoma), which morphology should be coded?

A.
Lung carcinomas can be divided into two main types: small cell lung carcinoma (SCLC) and non-small cell lung carcinoma (NSCLC). As the name suggests, NSCLC refers to a group of lung carcinomas which are not small cell. The most common types of NSCLC are squamous cell carcinoma, large cell carcinoma and adenocarcinoma. Clinically, adenocarcinoma is a more specific type of NSCLC.

Additionally, ACS 0233 *Morphology* states "If a morphological diagnosis contains two histological terms which have different M codes, select the highest number as it is usually more specific".

M8140/3 *Adenocarcinoma NOS* is a higher number than M8046/3 *Non-small cell carcinoma*. It is also clinically a more specific diagnosis than NSCLC. Therefore, following the instruction in ACS 0233, M8140/3 *Adenocarcinoma NOS* should be assigned when 'non-small cell lung carcinoma (adenocarcinoma)' is documented.

DECISION
Following the instruction in ACS 0233, M8140/3 *Adenocarcinoma NOS* should be assigned when both non-small cell lung carcinoma and adenocarcinoma are documented.

[Effective 21 Sep 2016, ICD-10-AM/ACHI/ACS 9th Ed.]