Government of **Western Australia**
Department of **Health**

Western Australian Coding Rule

1022/01 Malignant behaviour documented but no code available in ICD-10-AM

Q. What codes are assigned when a neoplasm is only classified to uncertain behaviour /1, but has been diagnosed/documented as malignant?

A. As per the logic in retired rules Q3429 *Malignant and metastatic melanotic neuroectodermal tumour* and Q3252 *Benign juvenile granulosa cell tumour of the testis*, if the code does not exist in ICD-10-AM, we are forced to assign the closest morphology available, along with a malignant site code.

For example, for malignant glioneuronal tumour of the brain, assign:
C71.9 *Brain, unspecified*
9509/1 *Papillary glioneuronal tumour*

The invalid code combination will trigger a HMDC Data Validation (edit). The edit will be overridden based on hospital response advising the tumour is documented to be malignant.
Both Q3429 and Q3252 were retired as the missing morphology codes were created in new Editions. A query has been sent to IHACPA to confirm the logic of these rules is still applicable, and ask for it to be formally published.

DECISION
When a neoplasm has been documented as malignant but there is no corresponding morphology code available in ICD-10-AM, assign the closest morphology available, along with a malignant site code.

[Effective 1 October 2022, ICD-10-AM/ACHI/ACS 12th Ed.]

better health • better care • better value