Grade Pathological (Melanoma Conjunctiva)

Organization	Field Name	ID	Required
KCR	Grade Pathological	30137	yes
SEER	Grade Pathological	3844	yes

Note 1 Grade Pathological must not be blank.

Note 2 Assign the highest grade from the primary tumor.

Note 3 If there are multiple tumors with different grades abstracted as one primary, code the highest grade.

Note 4 Use the grade from the clinical work up from the primary tumor in different scenarios based on behavior or surgical resection

Behavior

- · Tumor behavior for the clinical and the pathological diagnoses are the same AND the clinical grade is the highest grade
- · Tumor behavior for clinical diagnosis is invasive, and the tumor behavior for the pathological diagnosis is in situ

Surgical Resection

- · Surgical resection is done of the primary tumor and there is no grade documented from the surgical resection
- · Surgical resection is done of the primary tumor and there is no residual cancer

No surgical resection

 Surgical resection of the primary tumor has not been done, but there is positive microscopic confirmation of distant metastases during the clinical time frame

Note 5 Code 9 (unknown) when

- Grade from primary site is not documented
- No resection of the primary site (see exception in Note 4, Surgical resection, last bullet)
- Neo-adjuvant therapy is followed by a resection (see Grade Post Therapy Path (yp))
- · Grade checked "not applicable" on CAP Protocol (if available) and no other grade information is available
- Clinical case only (see Grade Clinical)
- . There is only one grade available and it cannot be determined if it is clinical, pathological, post therapy clinical or post therapy pathological

Code	Description
Α	Well differentiated
В	Moderately differentiated
С	Poorly differentiated
D	Undifferentiated, anaplastic
9	Grade cannot be assessed; Unknown