

California Cancer Registry

Production Automation and Quality Control Unit

Data Alert - Registrar 2015-040

Updates to Volume I

Category: **Changes and Clarification**

Subject: **Volume I Updates**

Outlined below please find the summary of changes made to Volume I for 2015. Clarifications and formatting revisions were added to Volume I following review of SEER's latest Program Manual. No new data fields and/or codes were added. All revisions were limited to clarifications and formatting changes only.

The revised 2015 html version of Volume I has now been posted to the CCR web site at www.ccrca.org. Formatting alterations have been made as well as the following updates and clarifications:

- ***1.1.6 Reporting***
 - Removed "Consult Only" from CMR List.

- ***1.1.6.6 Coding Resources***
 - Updated Collaborative Staging Data Collection System Coding instructions to current release date and provided link.
 - Added link to access SEER Summary Stage 2000.

- ***1.1.6.7 Reportability Guide***
 - Added the following SEER reportability clarifications which have been reportable to CCR January 1, 2001 and forward, nationally January 1, 2004 and forward.
 - Brain/CNS: Hemangioma, NOS and Cavernous hemangiomas in the dura and parenchyma of the brain/CNS
 - Pituitary gland, Rathke Pouch tumor
 - Added the following SEER reportability requirements for cases diagnosed January 1, 2015 and forward:
 - Appendix: Carcinoid tumors, NOS
 - Pancreas tumors:
 - Neuroendocrine tumor when clinical dx is insulinoma
 - Cystic pancreatic endocrine neoplasm (CPEN)
 - Cystic pancreatic endocrine neoplasm specified as neuroendocrine tumor, Grade 1

June 18, 2015

California Cancer Registry

- Cystic pancreatic endocrine neoplasm specified as neuroendocrine tumor, Grade 2
- Solid pseudopapillary neoplasm of pancreas
- Non-invasive mucinous cystic neoplasm (MCN) of pancreas with high grade dysplasia. NOTE: Term high-grade dysplasia replaces term mucinous cystadenocarcinoma, non-invasive
- Testes, Mature teratoma of testes in adult (Adult defined as post puberty).

NOTE: Do not report if it is unknown whether patient is pre or post pubescence.

- **III.2.7 Sex**

- Updated code 4 instruction to include the instruction to use when the natal sex is unknown and the primary site is NOT C510-C589 or C600-C639.
- Added instruction stating codes 5 and 6 can be used for cases prior to 2015.
- Clarifications made for coding instructions where the patient's gender is unknown:
 - Code to 1 when primary site IS C600-C639
 - Code to 2 when primary site IS C510-C589
 - Code to 9 for primary sites not included above

- **V.3.5 Grade and Differentiation Section (including sections V.3.5.1-V.3.5.10)**

- Created links to current V.3.7 Sections (including sections V.3.7.1-V.3.7.7)

NOTE: The historical information for these sections can be accessed via a dropdown link located at the bottom of the current sections.

- **V.3.5.11 Grade Path System**

- Effective with cases diagnosed January 1, 2015 and forward, this item is no longer reportable.

NOTE: The historical information for these sections can be accessed via a dropdown link located at the bottom of the current sections.

- **V.3.5.12 Grade Path Value**

- Effective with cases diagnosed January 1, 2015 and forward, this item is no longer reportable.

NOTE: The historical information for these sections can be accessed via a dropdown link located at the bottom of the current sections.

- ***V.3.7 Grade and Differentiation Section (including sections V.3.7.1-V.3.7.7)***
 - Created drop down links located at the bottom of the current sections to capture historical coding instructions regarding Grade and Differentiation (including sections V.3.5.1-V.3.7.10).
- ***V.4 Coding Systems Section (including: Extent of Disease, Collaborative Stage Coding V.4.1-V.4.2.4, Summary Stage V.5-V.5.14, Tumor Markers V.6-V.6.4, and Pediatric Staging V.7.8-V.7.10)***
 - 2015 and forward, directly coded SEER Summary Stage and AJCC TNM Stage is required to be completed and will be visually edited. The decision was made to update the Coding and Staging sections of Volume I in preparation for these requirements.
 - Major formatting changes have been incorporated.
- ***VI First Course of Treatment Section (including General Instructions, Data Entry, Codes, Dates, and Text VI.1-VI.1.3-6)***
 - Updates have been made to the treatment pages because with 2015 and forward, treatment data fields will be visually edited.
 - Major formatting changes have been incorporated.
- ***VI.2.1 Surgery of the Primary Site***
 - Added clarifying note regarding the CCR requirement for incisional biopsy with no residual at re-excision.
 - Major formatting changes have been incorporated.
- ***VI.2.3.1 Regional Lymph Nodes Positive***
 - New page added that did not previously exist in Volume I.
- ***VI.2.4 Surgery of Other Regional Sites, Distant Sites, or Distant Lymph Nodes***
 - Added instruction for coding contralateral breast removal for a single breast cancer.
- ***VI.2.9 Reason for No Surgery of the Primary Site***
 - Diagnosed at Autopsy was moved from Code 1 to Code 9.
- ***VI.2.10 Diagnostic or Staging Procedures***
 - Added clarifying note regarding the CCR requirement for incisional biopsy with no residual at re-excision.
 - Major formatting changes have been incorporated.

- ***VI.3.1.2 Radioactive Implants***
 - Code 2 - Added tumor embolization using a radioactive agent or seeds
- ***VI.7 Transplant/Endocrine Procedures and Codes***
 - Added instructions for the use of:
 - Code 20 for umbilical code stem cell transplant (single or double)
 - Code 88 when the patient does not have a rescue
- ***Appendix F - California Reporting Facility Codes (including associated pages referring to the PDF links: III.1.4 Reporting Facility, III.3.10 Reporting Facility Referred From, III.3.11 Reporting Facility Referred To, IV.4.1 Path Reporting Facility 1-5, VI.2.6 Treatment Facility Number, VII.2.7 Last Follow-Up Facility, and VII.2.9 Next Follow-Up Facility)***
 - Provided description of items
 - Created link to California Cancer Registry's - Reporting Cancer in California to provide access to the most current code and alphabetical PDF lists.
- ***Appendix Q2 - Brain***
 - Added new SEER Note to code 10.
 - Added new SEER Note to code 90.
 - Updated all "SEER Guidelines" on page to "SEER Notes" to parallel SEER.
- ***Appendix V - Brain and CNS Site/Histology Listing***
 - Note added to refer users to the ICD-O-3 SEER Site/Histology Validation List.
 - Added note indicating the list is not to be used for determining reportability
 - Added link to our reportability requirements page
 - Added link to casefinding list page
 - All other information is historical and can be accessed in a historical link located below the current instructions.
- ***Appendix X - National Provider Identifier NPI Codes***
 - Added link to the National Plan & Provider Enumeration System (NPPES) for registrars to be able to search:
 - Individual Provider Numbers
 - Organizational NPI Numbers

As a reminder, cases diagnosed in 2015 **must** be submitted using the 2015 reporting software, when it becomes available. Consult your vendor for software release dates. Only facilities using software that is fully approved by the CCR for 2015 may transmit cases entered after the installation of 2015 software.

June 18, 2015