

**CANCER REPORTING IN CALIFORNIA: ABSTRACTING AND  
CODING PROCEDURES FOR HOSPITALS**  
**California Cancer Reporting System Standards, Volume I**

***SUMMARY OF YEAR 2016 DATA CHANGES***

***Revised 02/02/2016***

This document provides a summary of data changes for 2016 for hospitals, abstracting vendors, and regional registry data collectors. The updated Volume I for 2016 will be available March, 2016. This document is divided into sections – Additions (New Data Items) with subcategories of Directly Coded Data Items (Abstractor interaction) and Derived Data Items (No abstractor interaction), Changes (Revised Data Items) with subcategories of General Changes and Specific Changes, and Additional Updates (other Volume I related items for cases diagnosed January 1, 2016 and forward):

**NAACCR ADDITIONS (New Data Items):**

**Directly Coded Data Items (Abstractor interaction):**

The data items listed below have been introduced as part of the staging transition. These items are required by the California Cancer Registry and will be collected and transmitted by the abstractor.

|                                       |                                 |
|---------------------------------------|---------------------------------|
| <b>Mets at DX-Bone</b>                | <b>NAACCR Item #1112</b>        |
| <b>Mets at DX-Brain</b>               | <b>NAACCR Item #1113</b>        |
| <b>Mets at DX-Distant LN</b>          | <b>NAACCR Item #1114</b>        |
| <b>Mets at DX-Liver</b>               | <b>NAACCR Item #1115</b>        |
| <b>Mets at DX-Lung</b>                | <b>NAACCR Item #1116</b>        |
| <b>Mets at DX-Other</b>               | <b>NAACCR Item #1117</b>        |
| <b>Each Field Length: 1 character</b> | <b>Source of Standard: SEER</b> |

There are six new Mets at Dx-Metastatic Sites fields that provide information on specific metastatic sites for data analysis. These fields identify whether the bone, brain, distant lymph nodes, liver, lung, or other site is an involved metastatic site.

|                                   |                                 |
|-----------------------------------|---------------------------------|
| <b><u>Tumor Size Clinical</u></b> | <b>NAACCR Item #752</b>         |
| <b>Field Length: 3 characters</b> | <b>Source of Standard: SEER</b> |

This data item records the size of a solid primary tumor before **any** treatment.

|                                     |                                 |
|-------------------------------------|---------------------------------|
| <b><u>Tumor Size Pathologic</u></b> | <b>NAACCR Item #754</b>         |
| <b>Field Length: 3 characters</b>   | <b>Source of Standard: SEER</b> |

This data item records the size of a solid primary tumor that has been resected.

**Tumor Size Summary**  
**Field Length: 3 characters**

**NAACCR Item #756**  
**Source of Standard: NPCR/CoC**

This data item records the most accurate measurement of a solid primary tumor, usually measured on the surgical resection specimen.

**Directly Assigned SS2017**  
**Field Length: 1 character**

**NAACCR Item #764**  
**Source of Standard: SEER**

This data item is a place holder (for now) for SEER for the 2017 Directly Assigned Summary Stage.

**SEER Primary tumor**  
**SEER Regional Nodes**  
**SEER Mets**  
**Each Field Length: 1 character**

**NAACCR Item #772**  
**NAACCR Item #774**  
**NAACCR Item #776**  
**Source of Standard: SEER**

These three newly proposed data items will be used to simply collect information on the primary tumor, regional nodes, and mets so that a summary stage can be easily derived for these cases. For 2016, these data items are only a place holder for SEER items to be collected in 2017.

**Derived Data Items (No abstractor interaction):**

The derived data items listed below are not collected by the abstractor but will be derived electronically at the central registry prior to submission to the standard setter.

|                                       |                                   |
|---------------------------------------|-----------------------------------|
| <b>County at Dx Geocode1990</b>       | <b>NAACCR Item #94</b>            |
| <b>County at DX Geocode2000</b>       | <b>NAACCR Item #95</b>            |
| <b>County at DX Geocode2010</b>       | <b>NAACCR Item #96</b>            |
| <b>County at DX Geocode2020</b>       | <b>NAACCR Item #97</b>            |
| <b>Each Field Length: 1 character</b> | <b>Source of Standard: NAACCR</b> |

These four derived County at DX Geocode items have been added in order to identify an address's geocode relative to each given decennial census. This is necessary because over time, boundaries of counties can change, therefore the counties of particular addresses can change. It is imperative to collect county census tract combinations correctly for the given decennial census.

|  |                                 |
|--|---------------------------------|
| <b>Derived SEER Combined T</b>         | <b>NAACCR Item #3616</b>        |
| <b>Derived SEER Combined N</b>         | <b>NAACCR Item #3618</b>        |
| <b>Derived SEER Combined M</b>         | <b>NAACCR Item #3620</b>        |
| <b>Each Field Length: 5 characters</b> | <b>Source of Standard: SEER</b> |

These derived SEER Combined T, N, and M items have been added by SEER in order to collect a combined or "best stage" derived T, N, M and stage group.

|  |                                 |
|--|---------------------------------|
| <b>Derived SEER Path Stg Grp</b>       | <b>NAACCR Item #3605</b>        |
| <b>Derived SEER Clin Stg Grp</b>       | <b>NAACCR Item #3610</b>        |
| <b>Derived SEER Cmb Stg Grp</b>        | <b>NAACCR Item #3614</b>        |
| <b>Each Field Length: 5 characters</b> | <b>Source of Standard: SEER</b> |

These derived SEER Stg Grp items have been added by SEER in order to calculate clinical and pathologic stage based on their T, N, M, and other information collected to calculate stage.

|                                       |                                 |
|---------------------------------------|---------------------------------|
| <b>Derived SEER Cmb T Src</b>         | <b>NAACCR Item #3622</b>        |
| <b>Derived SEER Cmb N Src</b>         | <b>NAACCR Item #3624</b>        |
| <b>Derived SEER Cmb M Src</b>         | <b>NAACCR Item #3626</b>        |
| <b>Each Field Length: 1 character</b> | <b>Source of Standard: SEER</b> |

These derived SEER Cmb T, N, and M Src items have been added by SEER in order to store the results of the source information selected for the derived algorithm for each variable.

**NPCR Derived Clin Stg Grp**  
**NPCR Derived Path Stg Grp**  
**Each Field Length: 4 characters**

**NAACCR Item #3650**  
**NAACCR Item #3655**  
**Source of Standard: NPCR**

These derived NPCR Clin and Path Stg Grp items are needed to store the results of NPCR's derived algorithmic calculation of the clinical and pathological stage group based on AJCC T, N, and M and relevant biomarkers and prognostic factors.

**Derived SS2017**  
**Field Length: 1 character**

**NAACCR Item #762**  
**Source of Standard: SEER**

This derived SS2017 data item is needed to store the results of a 2017 version of Summary Stage based on a computer algorithm.

**Reserved 19**  
**Reserved 20**  
**Each Field Length: 1 character**

**NAACCR Item #2162**  
**NAACCR Item #2163**  
**Source of Standard: SEER**

Two new reserved fields have been added.

**RuralUrban Continuum 2013**  
**Field Length: 2 characters**

**NAACCR Item #3312**  
**Source of Standard: NAACCR**

This derived item has been added to separate counties into four metropolitan and six non-metropolitan categories, based on size and their populations and form a classification scheme that distinguishes metropolitan counties by size and non-metropolitan counties by degree of urbanization and proximity to metro areas. It will be derived using patients' state and county at diagnosis.

## **NAACCR CHANGES (Revised Data Items):**

Listed below are revisions made in the NAACCR Volume II, Standards and Data Dictionary for 2016. It has been separated into General Changes and Specific Changes.

### **General Changes:**

1. The NAACCR Record layout remains the same length.
2. Column spaces for some data items have been moved in the layout in order to accommodate the new and expanded data items.
3. The length of the data item Reserved 02 (NAACCR Volume II, Demographics Section) has been changed to 50 characters to accommodate the additional data items County at DX Geocode 1990, 2000, 2010, 2020, as well as the RuralUrban Continuum 2013.
4. The length of the data item Reserved 04 (NAACCR Volume II, Hospital Specific Section) has been changed to 30 characters to accommodate the new staging data items and the relocation of the TNM Staged By data items.
5. Reserved 19 and Reserved 20 data items have been added to the layout where the TNM Staged by data items were previously located.
6. The data items listed in Appendix B were updated to harmonize Standards Volume II, Version 16 with data coming in from electronic health record (EHR) reporting. For example, in the description and/or rationale for many of these data items, reference to “hospital” was replaced with “reporting facility”.

### **Specific Changes:**

#### **Sex**

**NAACCR Item #220**

**Field Length: 2 characters**

**Source of Standard: SEER/CoC**

Documentation under topic, “Codes” was revised to update Code 3 to further define “Other”. The updated code is as follows:

**Code 3** - Other (intersex, disorders of sexual development/DSD). The word hermaphrodite formally classified under this code is an outdated term.

**TNM Path T**

**NAACCR Item #880**

**TNM Path N**

**NAACCR Item #890**

**TNM Path M**

**NAACCR Item #900**

**TNM Clin T**

**NAACCR Item #940**

**TNM Clin N**

**NAACCR Item #950**

**TNM Clin M**

**NAACCR Item #960**

**Each Field Length: 4 characters**

**Source of Standard: CoC**

Clinical and pathologic indicators are to be added by modifying the existing values for the individual T, N, and M data items. The revisions will be incorporated into software look ups to allow for selection of necessary ‘p’ values within the clinical codes and selection of necessary ‘c’ values within the pathologic codes when abstracting.

**TNM Path Staged By**  
**TNM Clin Staged By**  
**Field Length: 2 characters**

**NAACCR Item #930**  
**NAACCR Item #990**  
**Source of Standard: CoC**

Codes have been added to these two data items. To accommodate these new codes, the length of both has been increased to 2 digits.

**Codes**

|    |  |
|----|--|
| 00 | Not staged   |
| 10 | Physician, NOS, or physician type not specified in codes 11-15   |
| 11 | Surgeon  |
| 12 | Radiation Oncologist   |
| 13 | Medical Oncologist   |
| 14 | Pathologist  |
| 15 | Multiple Physicians; tumor board, etc.                           |
| 20 | Cancer registrar   |
| 30 | Cancer registrar and physician                                   |
| 40 | Nurse, physician assistant, or other non-physician medical staff |
| 50 | Staging assigned at another facility                             |
| 60 | Staging by Central Registry                                      |
| 88 | Case is not eligible for staging                                 |
| 99 | Staged but unknown who assigned stage                            |

**Census Ind Code 2010 CDC**  
**Census Occ Code 2010 CDC**  
**Each Field Length: 4 characters**

**NAACCR Item #272**  
**NAACCR Item #282**  
**Source of Standard: Census/NPCR**

These data items have been renamed to include “CDC” in the name. The previous names have been added to the alternative name column.

**Blank** has been added to the allowable value for both items.

**SEER Coding Sys--Current**  
**Each Field Length: 1 character**

**NAACCR Item #2120**  
**Source of Standard: NAACCR**

Code G was added for the use of the 2016 SEER Coding Manual.

## **ADDITIONAL UPDATES (other Volume I related items for cases diagnosed January 1, 2016 and forward):**

### **CCR Updates**

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#### **Reportability:**

1. The CCR will no longer require borderline ovarian tumors to be collected – effective with cases diagnosed January 1, 2016 and forward.

#### **Staging:**

The CCR Staging requirements for cases diagnosed January 1, 2016 and forward are as follows:

- Directly assigned AJCC TNM 7<sup>th</sup> Edition (clinical and pathological) stage – required from all facilities
- Directly assigned SEER Summary Stage 2000 – required from all facilities
- Collaborative Stage will be utilized to collect the required SSFs, Regional Nodes Positive and Examined, and Lymph-vascular invasion – required from all facilities
  - CS v02.05 – will be utilized for cases diagnosed 2004-2015
- **RX Summ-Surgical Margins - CCR requires this information as available based on SEER's data collection requirements for 2016 forward. CCR previously collected this data item as a SEER requirement prior to 2000.**

#### **Visual Editing:**

- **The list of visually edited data items for 2016 has been posted to the CCR web site. Click [here](#) to access.**

## CoC (FORDS) ADDITIONS (New Data Items & Revised Data Items):

The release of the 2016 FORDS Manual is anticipated for December, 2015.

## ICD-O-3 Updates

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### **Reportability:**

*Note:* The NAACCR Guidelines for ICD-O-3 Update Implementation (published December 2013) included a table of new ICD-O-3 codes and terms effective for 2015; however, the use of the new codes was postponed due to issues with adding these codes to the CSV2 software. For diagnosis year 2016, all standard setters have agreed to postpone these codes once again. Volume I will be updated to reflect the extension of the use of the ICD-O-3 Histology Code Crosswalk (Section V.3, Attachment A).

## SEER Updates

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The release of the 2016 SEER Program Manual has not been determined.