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

Changes and Clarifications –11th Edition
May 13, 2011

SECTION/CHANGE

I.1.6 Reporting/Required Method of Reporting to CCR
Moved example "Definitive or repeat biopsy following initial FNA or biopsy performed elsewhere" to Class of Case 21 (formerly noted as an example of Code 30).

I.1.6.5 Date Format and Date Flag Guide
Removed Date of Diagnosis Flag from Date Flag Guide. Inserted statement that date of diagnosis flag must always be blank and the Date of Diagnosis will always have a full or partial date recorded. At a minimum, a year of diagnosis is required for all cases.

I.1.6.6 Coding Resources
Updated resources.

III.2.1 Name
Added statement that CCR name formatting must be used. Added first, middle, and mother's first name as those that can have a hyphen or apostrophe used.

III.2.1.1 Last Name
Added an apostrophe as allowable character.

III.2.1.2 First Name
Added a statement regarding the allowable use of a hyphen or apostrophe in the first name field.

III.2.1.3 Middle Name
Added a statement regarding the allowable use of a hyphen or apostrophe in the middle name field.

III.2.1.4 Maiden Name
Added an apostrophe as an allowable character.

III.2.1.5 Alias Last Name
Added an apostrophe as an allowable character.

III.2.1.6 Alias First Name
Added an apostrophe as an allowable character.

III.2.1.9 Mother's First Name
Added a statement regarding the allowable use of a hyphen or apostrophe in the mother's first name field.

III.2.3 Social Security Number
Added instructions regarding the importance of obtaining a full social security number. Removed the number 8 from the values not allowed.

III.2.5.6 County at DX
Added instructions to code 000 for County at DX for states other than California.

III.2.6 Marital Status
Added Code 6 for Unmarried or Domestic Partner (same sex or opposite sex, registered or unregistered).

III.2.14 Patient, No Research Contact Flag
VA cases removed from code 4. Code 5 added for VA cases, Not for Research.
Added: Cases coded to 4 or 5 should not be contacted for research studies. Codes 4 and 5 are generated by the CCR.

III.3.3 Date of Diagnosis
Added instructions that an unknown date of diagnosis is no longer allowed and that a date of diagnosis must be estimated. Added: At a minimum, a year of diagnosis is required for all cases.

III.3.3.2 Vague Dates
Instructions moved to III.3.3.3 Approximation. Added instructions that an unknown date of diagnosis is no longer allowed and that a date of diagnosis must be estimated. Added: At a minimum, a year of diagnosis is required for all cases.

III.3.3.3 Approximation
Instructions moved to III.3.3.2 Vague Dates. Added instructions that at a minimum, a year of diagnosis is required for all cases. Added tables with terms and codes for estimating month and year. Added that documentation must be provided for the basis of estimating date.

III.3.3.4 Date of Diagnosis Flag
Changed instructions: The date of diagnosis flag should always be blank. Date of Diagnosis will always have a full or partial date recorded. Added: At a minimum, a year of diagnosis is required for all cases.

III.3.5 Class of Case
Changed definition for code 13 and 21 to state that part of first course treatment was done elsewhere.

III.3.9 Payment Source (Primary and Secondary) and Payment Source Text
Added FORDS Primary Payer at Diagnosis definitions.

V.1.7.3 Multiplicity Counter
Added two new codes.
    00   No primary tumor identified
    89   Multicentric, multifocal, number unknown

V.4.2.1 CS Mets at DX – Bone
Added clarification for using Code 1 if primary site is bone.

V.4.2.2 CS Mets at DX – Brain
Added clarification for using Code 1 if primary site is brain.

V.4.2.3 CS Mets at DX – Liver
Added clarification for using Code 1 if primary site is liver.

V.4.2.4 CS Mets at DX – Lung
Added clarification for using Code 1 if primary site is lung.

VI.3.7 Radiation/Surgery Sequence
Added note to code 4: At least two courses of radiation therapy must be given to assign code 4.

VI.2.14 Systemic/Surgery Sequence
Added note to code 4: At least two courses of systemic therapy must be given to assign code 4.

VI.9 RX Summary – Treatment Status
Added to code 0: treatment refused, or physician decides not to treat for any reason such as the presence of comorbidities.

APPENDICES

Appendix F1 and F2
Updated hospital file.

Appendix K-1
Updated to listing of Codes for Casefinding (For Cases Diagnosed January 1, 2011 and Later).
Added a note that casefinding codes for borderline ovarian tumors are included in a Supplementary List #2.

Appendix M1 and M2
Added abbreviations for Microsatellite Instability and Loss of Heterozygosity (18q).

Appendix Q2 – Surgery Codes
Breast
  Added code 76 for Bilateral mastectomy for a single tumor involving both breasts, as for bilateral inflammatory carcinoma.
  Added phrase to the description of a total mastectomy clarifying that sentinel lymph nodes may be removed, even when an axillary dissection is not done.
  In the note for contralateral breast as secondary primary, added surgical code 41 as an option for the first primary.

Hematopoietic/Reticuloendothelial/Immunoproliferative/Myeloproliferative Disease
  Added note to Code 99 to clarify that this code is for CCR use only.

Liver and Intrahepatic Bile Ducts
  Revised description of code 66: Excision of an intrahepatic bile duct PLUS partial hepatectomy.
  Revised description of code 75: Extrahepatic bile duct and hepatectomy WITH transplant.

Prostate
  Clarified code 19: Transurethral resection (TURP), NOS, and no specimen sent to pathology or unknown if sent.
  Clarified code 21: Transurethral resection (TURP), NOS, with specimen sent to pathology.

Appendix T – Deleted, refer to vendor specifications.

Appendix Y 2011 – Index to CSv02.03 Site Specific Factor Requirements
Added a link to a searchable table for CSv02.03 Site Specific Factors by schema. Revised/added applicable sites and histologies to each schema table.

Added new schema for CSv02.03, Myeloma Plasma Cell Disorder with the following CCR Site Specific Factor Requirements
  • SSF 2: Durie-Salmon Staging System
  • SSF 3: Multiple Myeloma Terminology

New CCR Site Specific Factor Requirements for CSv02.03:
  Bile Ducts Intrahepatic
    • SSF 10: Tumor Growth Pattern
  Testis
    • SSF 13: Postorchiectomy Alpha Fetoprotein (AFP) Range
    • SSF 15: Postorchiectomy Human Chorionic Gonadotropin (hCG) Range
    • SSF 16: Postorchiectomy Lactate Dehydrogenase (LDH) Range

  Breast
    • SSF 15: HER2: Summary result of testing

Appendix Z1 – Comparative Effectiveness Research (CER) Project Data Dictionary (New)
Added link to CER Data Dictionary for data codes and coding instructions. Provided background information on the CER Project.   Data collection of these variables are optional, except in Region 3 where the CCR Data Collection Unit will be collecting these data items in cooperation with reporting facilities. All data items will be collected as defined in the protocol and data dictionary for cases diagnosed between January 1, 2011, and December 31, 2011.

Appendix Z2 – CER Required CSv02.03 Site Specific Factors
Added Site Specific Factors tables for breast, colon, GIST colon, NET colon, rectum, GIST rectum, NET rectum, and chronic myelogenous leukemia.

Deleted the following historic sections:
I.2 Software specific
II.2.2 Software Specific Generated Accession Numbers
III.1.5 Software Specific Automatic Entries