

CANCER REPORTING IN CALIFORNIA: STANDARDS FOR AUTOMATED REPORTING

CALIFORNIA CANCER REPORTING SYSTEM STANDARDS VOLUME II

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Revision 2

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PART I INTRODUCTION

The reporting of cancer is mandatory under provisions of California's Health and Safety Code.

Hospitals and other reporting facilities are required to report cancer information to the California Cancer Registry using computer reporting systems that meet State standards. This manual, *Cancer Reporting in California: Standards for Automated Reporting, California Cancer Reporting System Standards, Volume II (CCR Volume II)* is intended for hospitals and other reporting facilities or vendors wishing to update their own automated reporting systems or create new reporting systems that comply with State requirements.

The intended audience for this document is system analysts and software developers. It describes the format in which collected data must be reported.

Detailed instructions for collecting and coding data can be found in *Cancer Reporting in California: Data Standards and Data Dictionary, California Cancer Reporting System Standards, Volume I*.

Documentation for computer edits can be found in *Cancer Reporting in California: Data Standards for Regional Registries and California Cancer Registry, California Cancer Reporting System Standards, Volume III*.

Section I.1 Summary of Changes for 2011

Numerous data items have been added for 2011.

A few data item names have been slightly changed to be in complete compliance with NAACCR item names or the California item naming strategy.

Data items related to the NPCR Comparative Effectiveness Research (CER) Project have been placed in formerly reserved columns. Please observe that some character lengths have been revised for reserved records.

All changes in Appendix "A", starting on page 9, are identified by this change color.

Section I.1 Summary of Changes for Revision 2, 2011

Appendix A has been modified to require:

Statewide data collection for CER data items Height, Weight, and Tobacco Use. These data items are now marked "yes*" in the *CCR Required from Reporting Facility Software* column. Refer to pages 26 and 27.

Data item, Source Comorbidity is no longer required from Reporting Facility Software and is now marked "generate for extract" in the *Supplied by CCR* column. Refer to page 27.

PART II DATA TRANSMISSION STANDARDS

Section II.1 Summary

Communication between a reporting facility and the California Cancer Registry (CCR) can be of two forms: some types of records are transmitted from the reporting facility to the CCR, and other types of records are transmitted from the CCR to the reporting facility.

There are four record types that must be transmitted from the reporting facility to the central registry. They are: New Case records, Correction records, Follow-Up Only records, and Deletion records. All four of these record types are described in Section II.3. A reporting facility cancer registry is required to submit all four types of records, following the procedures described below, to be in compliance with the California Cancer Reporting System Standards, Volume II.

There is one type of record that is sent from the central registry to the reporting facility. This is Shared Follow-Up, described in Section II.4. Acceptance of that record by the reporting facility is optional (although we strongly recommend it).

Cases should NOT be transmitted to the CCR using a format that is earlier than the year that the case is reportable. For example, 2010 cases, as defined by the CCR casefinding rules, cannot be submitted in the format required in 2009.

Section II.2 Explanatory Notes

Reporting requirements vary by item and record type and are listed in the “CCR Required from Reporting Facility” column in the Appendices. Each record type is described in a table, which must be consulted to determine whether or not a particular item is required. The following key explains the terms used in the “CCR Required from Reporting Facility” column.

Key to Symbols

no	Not required. It is optional for the facility to submit this data item value to the central registry.
yes	Required. The facility must submit this data item value to the central registry.
yes*	Required if available. If the information can be obtained, the facility must submit it to the central registry. If not available or not applicable, may be left blank.
conditional	Required on selected cases dependent on one or more conditions being true, such as the case’s diagnosis date being before or after a certain date.
yes, gen by facility	Required, but the facility’s registry software must generate the data item value based on a standard algorithm, rather than a user manually entering the data item value.

Items that are facility-generated are described in more detail, including allowable values in Cancer Reporting in California, Data Standards for Regional Registries and California Cancer Registry (California Cancer Reporting System Standards, Volume III).

Section II.3 Transmission between Hospitals and Regions

II.3.1 Selection of Cases

Only cases which are reportable under California Cancer Registry (CCR) requirements are to be included in transmissions to the CCR. A reporting facility may elect to abstract certain benign conditions or skin cancers to meet local interest or ACoS requirements; however, these cases are not to be transmitted to the CCR.

Transmit all cases with a 2 or 3 (in situ or malignant) in Histology - Behavior, EXCEPT the following histology's occurring in the skin (site codes C44.0 -C44.9):

- 8000-8005 Neoplasms, malignant, NOS of the skin
- 8010-8046 Epithelial carcinomas of the skin
- 8050-8084 Papillary and squamous cell carcinomas of the skin
- 8090-8110 Basal cell carcinomas of the skin

In addition, for cases diagnosed after 1995, do not transmit any in situ (Histology - Behavior of 2) of the cervix (site codes C53.0 - C53.9). Beginning with cases diagnosed January 1, 2001, benign (behavior code 0) and uncertain behavior (behavior code 1) intracranial and central nervous system tumors are reportable. In addition, borderline ovarian tumors (behavior code 1) in ICD-O-3 are reportable.

II.3.2 New Case Record

For every abstract of a reportable case that is completed at the reporting facility, a New Case Record must be sent to the CCR. Timing considerations for reporting are discussed in Standards, Volume I, Section IX.1.1.

The format for the New Case record is specified in Appendix A. (Key to symbols is in Section II.2.)

II.3.3 Update (Correction) Record

An Update (Correction) record must be sent to the CCR every time a data item designated as "yes" in the column entitled, Update.

The following special items are used in the record layout for corrections:

Changed Data Item Number	The changed data item number is the updated/corrected data item's CCR Identifier from Appendix A (EXCLUDING the "F"), including any leading zero's.
Changed Item New Value	This field holds the new contents of the changed item. The data should be left-justified in a field of 1000 characters. The field may be blank if blanks are an allowable value for the item being changed.
Correction Comments	This is a 200-Character field (4 lines of 50 characters). It should contain a comment indicating the reasons for the changes. It should be left-justified beginning with the first of the 4 lines.
Old Item Value	This field holds the original contents of the changed item.

If a change is made solely because of information furnished by the CCR or one of the CCR's regional registries, the Update (Correction) Comments field should contain only an "R" or "REGION" (all upper case).

If the same field is changed more than once in a series of Update (Correction) records, the last correction on the transaction file is the one that prevails.

The Update (Correction) record may be used to change any field. When a change is being made to any of the data items listed in the identifier fields, the old values should appear in the identifier fields of the Update (Correction) record, with the new values in the Changed Item Value field.

II.3.3A Update (Correction) Record Layout

See Appendix B for the record layout for Update (Correction) records.

II.3.4 Follow-Up Only Shared Follow-Up Record

II.3.4.1 Follow-Up Only

A Follow-Up Only record must be sent to the CCR whenever the reporting facility changes data in any of the fields on the following list:

Item Name

- Date of Last Patient Contact or
- Death
- Vital Status
- Tumor Status
- Date of Last Tumor Status

Although only these items should trigger a Follow-Up Only record, all data items in the record are to be sent.

PLEASE NOTE: Whenever these items change due to the receipt of shared follow-up from the CCR, DO NOT SEND a Follow-Up record.

II.3.4.2 Shared Follow-Up

Reporting facilities which agree in advance may be able to receive shared follow-up. Whenever the CCR receives follow-up on a reporting facility's patient (and, possibly, that patient's tumor) from a different source (another reporting facility, State death tapes, DMV, etc.), the CCR may make available to the reporting facility the most current follow-up data available on that patient and tumor. The fields Follow-Up Hospital (Last) and Follow-Up - Last Type (Patient) and Follow-Up - Last Type (Tumor) in the Shared Follow-Up record will indicate the sources of the follow-up information being provided. The record format for Shared Follow-Up is the same as the record format for reporting facilities reporting follow-up to the CCR.

II.3.4A Follow-Up Only and Shared Follow-Up Record Layout

See Appendix C for the record layout for Follow-Up Only and Shared Follow-Up records. (Key to symbols is in Section II.2.)

II.3.5 Deletion Record

Whenever a reporting facility decides to delete from its database a case that has previously been reported to the CCR, a Deletion record must be transmitted to the CCR, EXCEPT when the reporting facility is deleting a duplicate.

The following special item is used in the record layout for this record type:

Text - Transaction Remarks - This is a 150-character field (3 lines of 50). It must contain a comment indicating the reason for deleting the record.

If a deletion is made because the CCR's regional registry instructed the reporting facility to do so, the Text-Transaction Remarks field should contain only an "R" or "REGION" (all upper case).

II.3.5A Deletion Record Layout

See Appendix D for layout of deletion records. (Key to symbols is in Section II.2.)

Section II.4 Data Transmittal Format

Transmitted Data Files

All electronic files must be encrypted and password protected. File names must conform to the following schema:

- A three-letter abbreviation assigned by the CCR regional registry to the hospital (the case file suffix).
- Plus the four-digit year (YYYY) showing the year the file was created.
- Plus the three-digit day of the year (001 through 366) showing the day the file was created.
- Plus a single letter (A-Z) showing the sequence within one day the file was created. (Different file types can have the same sequence letter.)
- Plus a standard suffix according to the record type (see below).

For example, the first file of new cases created on February 1 at hospital abbreviated STJ would be named STJ2003029A.XAA and the second file of new cases created that day would be STJ2003029B.XAA.

The following files may be included, in any order.

Record Type	File Suffix	Record Length
New Case	.XAA	22824 plus CR/LF
Correction	.XCO	2585 plus CR/LF
Follow-Up and Shared Follow-Up	.XFU	804 plus CR/LF
Shared Follow-Up	.XSH	804 plus CR/LF
Deletion	.XDL	368 plus CR/LF

Section II.5 Rules for Computer-Generated Data Items Required by California

Please refer to California Cancer Reporting System Standards, Volume III, for specifications for generating the data items referred to in Section II.5.1.2-4.II.5.1 Data Items.

To determine which items to generate in facility software, refer to the *CCR Required from Reporting Facility Software* column in Appendices A, B, C, or D.

Data Item Name	NAACCR Identifier	C/NEXT Identifier	Col-Start	Col-End	Length	CCR Required from Reporting Facility Software
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II.5.2 End of Record

Must be a period (.).

II.5.3 Record Type

This is a one-character field used to identify the type of record being processed. The hospital computer system must supply the appropriate code letter at the time that the file is created. The appropriate code for each record type is listed below:

New Case	A
Correction	U
Follow-Up Only	F
Deletion	D

The code for the record type generated by the central registry is:

Shared Follow-Up	S
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II.5.4 (NAACCR or Central Registry Record Version)

This field must contain the version code that identifies which revision of a record layout was used to create a record for the recipient. Once your software system has been modified to transmit records using the latest record layouts in this volume, all records transmitted must include the latest record version code(s), shown parenthetically after the record version data item name in each record layout.

Section II.6 Rules to Computer Generate Data Items for Standard Setting Organizations

The California Cancer Registry is required to submit data to standard-setting organizations. There are a number of data items that are generated for these submissions. These organizations include the North American Association of Central Cancer Registries (NAACCR), NCI’s Surveillance, Epidemiology and End Results Program (SEER) and the Center for Disease Control and Prevention’s National Program of Cancer Registries (NPCR). Please refer to California Cancer Reporting System Standards, Volume III, for specifications for the data items listed below.

II. 6. 1 Data Items

- Census Tract Coding System 1970/80/90
- COC Coding Sys - Current
- COC Coding Sys - Original
- Coding System for EOD
- Computer-Derived Ethnicity (formerly Spanish Surname)
- Computer-Derived Ethnicity Source
- First Course Calc. Method
- ICD Revision Number

- Industry (Census)
- Industry Source
- Follow-Up Source- Central (Mapped from Last Type of Follow-Up (Patient))
- Morph Coding Sys - Current
- Morph Coding Sys – Original
- Occup/Ind Coding System
- Occupation (Census)
- Occupation Source
- Race Coding Sys - Current
- Race Coding Sys - Original
- Registry ID
- Registry Type
- RX Coding System - Current
- SEER Coding Sys - Current
- SEER Coding Sys - Original
- Site Coding Sys - Current
- Site Coding Sys - Original

Part III Quality Control Standards

Section III.1 Summary

One method used by the regional registry for insuring data quality is to pass submitted records through computer edits to assess whether coding rules have been properly followed. Two types of computer edits will be applied to submitted data: item edits and interfield edits. These edits are described in Cancer Reporting in California: Standards for Regional Registries and the California Cancer Reporting System Standards, Volume III. See Section III.4 in this manual for the acceptance standards.

Section III.2 Item Edits

Most individual items will be checked for valid codes or other types of allowable values. Valid values for specific items can be found in California Cancer Reporting System Standards, Volume III. This document is available on the CCR website at www.ccrca.org.

Section III.3 Interfield Edits

An interfield edit compares the contents of two or more fields for consistency. Only the New Case record will be edited. Other types of records will be checked for consistency with the previously sent New Case record, as it would be modified by this newer information. A large number of interfield edits will be applied to any data records submitted. Interfield edits that will be applied are documented in California Cancer Reporting System Standards, Volume III.

Section III.4 Acceptance Procedure

III.4.1 Acceptance Standards for Software

Hospitals (and other reporting sources) wishing to develop their own systems for automated reporting to the regional registry, or vendors wishing to market software which meets California Cancer Registry requirements, are required to demonstrate

that they have procedures in place to assure the accuracy of the data being collected. In order for another method of automated reporting to be accepted for reporting to the California Cancer Registry and its regional registries, the hospital or vendor must demonstrate the following:

1. Data must conform to the specifications previously described in this document.
2. Software must allow all valid values in data item fields.
3. All records must pass the item edits (California Cancer Reporting System Standards, Volume III).
4. All records must pass the interfield edits (California Cancer Reporting System Standards, Volume III).
5. A certain percentage of incoming records must contain data in those fields, which are required but may be left blank if the information is not available. This percentage will vary by item. These fields are indicated by yes* on the record layouts.

A hospital or vendor must demonstrate its ability to meet these standards before its system is accepted, and it will be expected to continue to meet these standards. Each time a hospital or vendor changes the registry software it must again demonstrate its ability to meet these standards.

III.4.2 Test Submission

In order for the California Cancer Registry to determine whether a hospital or vendor meets the above requirements, the hospital or vendor must submit test records of each type for approximately 50 cases, covering one-month, three-months, or six-months; whichever time period is closest to 50 cases. A test file cannot contain only easy cases, but must contain a sample that is representative of the normal caseload. After the submission is evaluated by the California Cancer Registry, the reporting facility or vendor will receive notification of problems detected and what changes, if any, need to be made before the reporting facility's or vendor's software can be accepted for automated reporting.

Each time this volume is revised, vendors must submit additional test files to demonstrate that they meet the new requirements.

Appendix A: New Case Layout

Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Record ID Section									
Record Type [A]	10	none	1	1	1	yes, gen by facility	gen for extract	no	
Registry Type	30	F01001	2	2	1	no		no	
FIN Coding System	35	F01995	3	3	1	no		no	
Reserved 00	37	none	4	16	13				
NAACCR Record Version [121]	50	none	17	19	3	yes, gen by facility	gen for extract	no	Record Version number updated to 121.
NPI--Registry ID	45	F03712	20	29	10	yes*		no	
Registry ID	40	F04388	30	39	10	yes, gen by facility	gen for extract	no	
Tumor Record Number	60	F00127	40	41	2	no	gen in db	no	
Patient ID Number	20	none	42	49	8	no	gen in db	no	
Patient System ID-Hosp	21	F00003	50	57	8	no		no	
Reserved 01	370	none	58	94	37				
Demographic									
Addr at DX--City	70	F00013	95	144	50	yes		yes	
Addr at DX--State	80	F00014	145	146	2	yes		yes	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Addr at DX--Postal Code	100	F00015	147	155	9	yes		yes	
County at DX	90	F00017	156	158	3	yes		yes	
Census Tract 1970/80/90	110	F00620	159	164	6	no	geocoding	no	
CensusBlockGroup 70/80/90	368	F06066	165	165	1	no	geocoding	no	
Census Cod Sys 1970/80/90	120	F00622	166	166	1	no	gen for extract	no	
Census Tr Cert 1970/80/90	364	F00154	167	167	1	no	geocoding	no	
Census Tract 2000	130	F00587	168	173	6	no	geocoding	no	
Census Block Group 2000	362	F00621	174	174	1	no	geocoding	no	
Census Tr Certainty 2000	365	F06009	175	175	1	no	geocoding	no	
Marital Status at DX	150	F00023	176	176	1	yes		yes	
Race 1	160	F00021	177	178	2	yes		yes	
Race 2	161	F03073	179	180	2	yes		yes	
Race 3	162	F03074	181	182	2	yes		yes	
Race 4	163	F03075	183	184	2	yes		yes	
Race 5	164	F03076	185	186	2	yes		yes	
Race Coding Sys--Current	170	F00549	187	187	1	no	gen for extract	no	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Race Coding Sys--Original	180	F00550	188	188	1	no	gen for extract	no	
Spanish/Hispanic Origin	190	F00138	189	189	1	yes		yes	
Computed Ethnicity	200	F00551	190	190	1	no	gen for extract	no	
Computed Ethnicity Source	210	F00552	191	191	1	no	gen for extract	no	
Sex	220	F00022	192	192	1	yes		yes	
Age at Diagnosis	230	F00020	193	195	3	yes, gen by facility	gen on demand	no	
Date of Birth	240	F00019	196	203	8	yes		yes	
Date of Birth Flag	241	F05497	204	205	2	yes		yes	
Birthplace	250	F00018	206	208	3	yes		yes	
Occupation Code--Census	270	F00113	209	211	3	no	gen for extract	no	
Industry Code--Census	280	F00114	212	214	3	no	gen for extract	no	
Occupation Source	290	F00600	215	215	1	no	gen for extract	no	
Industry Source	300	F00601	216	216	1	no	gen for extract	no	
Text--Usual Occupation	310	F00112	217	316	100	yes		yes	
Text--Usual Industry	320	F00153	317	416	100	yes		yes	
Occup/Ind Coding System	330	F00602	417	417	1	no	gen for extract	no	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
NHIA Derived Hisp Origin	191	F06091	418	418	1	no	gen in db	no	
Race-NAPIIA (derived API)	193	F06097	419	420	2	no	gen in db	no	
IHS Link	192	F06090	421	421	1	no	link with IHS DB	no	
GIS Coordinate Quality	366	F05424	422	423	2	no		no	
RuralUrban Continuum 1993	3300	F06093	424	425	2	no		no	
RuralUrban Continuum 2003	3310	F06092	426	427	2	no		no	
Census Tract 2010	135	F06013	428	433	6	no	geocoding	no	New for 2011, NAACCR
Census Block Group 2010	363	F06014	434	434	1	no	geocoding	no	New for 2011, NAACCR
Census Tr Certainty 2010	367	F06015	435	435	1	no	geocoding	no	New for 2011, NAACCR
Reserved 02	530	none	436	527	92	no			Length reduced from 100 to 92.
Cancer Identification – Record Area Non-Confidential									
Sequence Number--Central	380	F00605	528	529	2	no	gen in db	no	
Date of Diagnosis	390	F00029	530	537	8	yes		yes	
Date of Diagnosis Flag	391	F05499	538	539	2	yes		yes	
Primary Site	400	F00152	540	543	4	yes		yes	
Laterality	410	F00032	544	544	1	yes		yes	
Morph--Type&Behav ICD-O-2	419	F00033	545	549	5			no	The following two items are subsets of this item for cases DX'd <2001.

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Histology (92-00) ICD-O-2	420	F02501	545	548	4	conditional		yes	Item 420 is a subset of Item 419. For cases DX'd <2001.
Behavior (92-00) ICD-O-2	430	F00164	549	549	1	conditional		yes	Item 430 is a subset of item 419. For cases DX'd <2001.
Morph--Type&Behav ICD-O-3	521	F02503	550	554	5			no	The following two items are subsets of this item.
Histologic Type ICD-O-3	522	F02502	550	553	4	yes		yes	Item 522 is a subset of item 521
Behavior Code ICD-O-3	523	F02504	554	554	1	yes		yes	Item 523 is a subset of item 521.
Grade	440	F00034	555	555	1	yes		yes	
Grade Path Value	441	F05521	556	556	1	yes		yes	
Grade Path System	449	F05520	557	557	1	yes		yes	
Site Coding Sys--Current	450	F00658	558	558	1	no	gen for extract	no	
Site Coding Sys--Original	460	F00659	559	559	1	no	gen for extract	no	
Morph Coding Sys--Current	470	F00660	560	560	1	no	gen for extract	no	
Morph Coding Sys--Originl	480	F00661	561	561	1	no	gen for extract	no	
Diagnostic Confirmation	490	F00129	562	562	1	yes		yes	
Type of Reporting Source	500	F00110	563	563	1	yes		yes	
Casefinding Source	501	F00150	564	565	2	yes		yes	
Ambiguous Terminology DX	442	F04254	566	566	1	yes*		yes	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Date of Conclusive DX	443	F04255	567	574	8	yes*		yes	
Date Conclusive DX Flag	448	F05494	575	576	2	yes		yes	
Mult Tum Rpt as One Prim	444	F04256	577	578	2	yes*		yes	
Date of Multiple Tumors	445	F04257	579	586	8	yes*		yes	
Date of Mult Tumors Flag	439	F05504	587	588	2	yes		yes	
Multiplicity Counter	446	F04258	589	590	2	yes*		yes	
Reserved 03	680	none	591	690	100	no			
Hospital Specific – Non-Confidential									
NPI--Reporting Facility	545	F03711	691	700	10	yes*		yes*	
Reporting Facility	540	F01683	701	710	10	yes		yes	
NPI--Archive FIN	3105	F03713	711	720	10	no		no	
Archive FIN	3100	F03452	721	730	10	no		no	
Accession Number--Hosp	550	F00016	731	739	9	yes		yes	
Sequence Number--Hospital	560	F00005	740	741	2	yes		yes	
Abstracted By	570	F00081	742	744	3	yes		no	
Date of 1st Contact	580	F00024	745	752	8	yes		yes	
Date of 1st Contact Flag	581	F05495	753	754	2	yes		yes	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Date of Inpatient Adm	590	F00427	755	762	8	yes		yes	
Date of Inpt Adm Flag	591	F05501	763	764	2	yes		yes	
Date of Inpatient Disch	600	F00128	765	772	8	yes		yes	
Date of Inpatient Disch Flag	601	F05502	773	774	2	yes		yes	
Inpatient Status	605	F05522	775	775	1	no		no	
Class of Case	610	F00026	776	777	2	yes		yes	
Primary Payer at DX	630	F03534	778	779	2	yes		yes	
Reserved 16	2400	none	780	780	1	no		no	
RX Hosp—Surg App 2010	668	F05523	781	781	1	no		no	
RX Hosp--Surg Prim Site	670	F03492	782	783	2	yes		yes	
RX Hosp--Scope Reg LN Sur	672	F03486	784	784	1	yes		yes	
RX Hosp--Surg Oth Reg/Dis	674	F03497	785	785	1	yes		yes	
RX Hosp--Reg LN Removed	676	F00504	786	787	2	no		no	
Reserved 17	2450	none	788	788	1	no		no	
RX Hosp--Radiation	690	F00049	789	789	1	no		no	
RX Hosp--Chemo	700	F03374	790	791	2	yes		yes	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
RX Hosp--Hormone	710	F03378	792	793	2	yes		yes	
RX Hosp--BRM	720	F03376	794	795	2	yes		yes	
RX Hosp--Other	730	F00058	796	796	1	yes		yes	
RX Hosp--DX/Stg Proc	740	F00421	797	798	2	yes*		yes	
RX Hosp--Palliative Proc	3280	F03459	799	799	1	no		no	
RX Hosp Surg Site 98-02	746	F00431	800	801	2	no		no	
RX Hosp Scope Reg 98-02	747	F00503	802	802	1	no		no	
RX Hosp Surg Oth 98-02	748	F00507	803	803	1	no		no	
Chemo 1 NSC Number	9751	F04744	804	809	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 1 Num Doses Planned	9761	F04745	810	811	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 1 Planned Dose	9771	F04746	812	817	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 1 Planned Dose Unit	9781	F04747	818	819	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 1 Num Doses Receivd	9791	F04748	820	821	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 1 Received Dose	9801	F04749	822	827	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 1 Received DoseUnit	9811	F04750	828	829	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 1 Start Date	9821	F04751	830	837	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Chemo 1 Start Date Flag	9831	F04752	838	839	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 1 End Date	9841	F04753	840	847	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 1 End Date Flag	9851	F04754	848	849	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 2 NSC Number	9752	F04762	850	855	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 2 Num Doses Planned	9762	F04763	856	857	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 2 Planned Dose	9772	F04764	858	863	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 2 Planned Dose Unit	9782	F04765	864	865	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 2 Num Doses Received	9792	F04766	866	867	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 2 Received Dose	9802	F04767	868	873	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 2 Received DoseUnit	9812	F04768	874	875	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 2 Start Date	9822	F04769	876	883	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 2 Start Date Flag	9832	F04770	884	885	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 2 End Date	9842	F04771	886	893	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 2 End Date Flag	9852	F04772	894	895	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Reserved 04	750	none	896	903	8				Length changed from 100 to 8 to accommodate CER data items.
Stage/Prognostic Factors -- Record Area Non-Confidential									
SEER Summary Stage 2000	759	F02506	904	904	1	conditional		yes	For cases DX'd 2001 forward.

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
SEER Summary Stage 1977	760	F00041	905	905	1	conditional		yes	For cases DX'd < 2001
Extent of Disease 10-Dig	779	F06100	906	917	12				Entire group of item 779 is 12 digits. The following 6 items are subsets of this item.
EOD--Tumor Size	780	F00035	906	908	3	conditional		yes	For cases DX'd <2004. Item 780 is a subset of item 779.
EOD--Extension	790	F01908	909	910	2	conditional		yes	For cases DX'd <2004. Item 790 is a subset of item 779.
EOD--Extension Prost Path	800	F01907	911	912	2	conditional		yes	For cases DX'd <2004. Item 800 is a subset of item 779.
EOD--Lymph Node Involv	810	F00039	913	913	1	conditional		yes	For cases DX'd <2004. Item 810 is a subset of item 779.
Regional Nodes Positive	820	F01982	914	915	2	yes		yes	Item 820 is a subset of item 779.
Regional Nodes Examined	830	F01983	916	917	2	yes		yes	Item 830 is a subset of item 779.
EOD--Old 13 Digit	840	F00578	918	930	13	no		no	
EOD--Old 2 Digit	850	F00579	931	932	2	no		no	
EOD--Old 4 Digit	860	F00580	933	936	4	no		no	
Coding System for EOD	870	F00553	937	937	1	no	gen for extract	no	
TNM Edition Number	1060	F01918	938	939	2	yes*		yes	
TNM Path T	880	F01930	940	943	4	yes*		yes	
TNM Path N	890	F01924	944	947	4	yes*		yes	
TNM Path M	900	F01921	948	951	4	yes*		yes	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
TNM Path Stage Group	910	F01927	952	955	4	yes*		yes	
TNM Path Descriptor	920	F01914	956	956	1	no		no	
TNM Path Staged By	930	F01917	957	957	1	yes*		yes	
TNM Clin T	940	F01928	958	961	4	yes*		yes	
TNM Clin N	950	F01922	962	965	4	yes*		yes	
TNM Clin M	960	F01919	966	969	4	yes*		yes	
TNM Clin Stage Group	970	F01925	970	973	4	yes*		yes	
TNM Clin Descriptor	980	F01912	974	974	1	no		no	
TNM Clin Staged By	990	F01915	975	975	1	yes*		yes	
Pediatric Stage	1120	F00548	976	977	2	conditional		yes	For pediatric cases only
Pediatric Staging System	1130	F00547	978	979	2	conditional		yes	For pediatric cases only
Pediatric Staged By	1140	F00417	980	980	1	conditional		yes	For pediatric cases only
Tumor Marker 1	1150	F01204	981	981	1	conditional		yes	Site specific for cases DX'd <2004
Tumor Marker 2	1160	F01205	982	982	1	conditional		yes	Site specific for cases DX'd <2004
Tumor Marker 3	1170	F01206	983	983	1	conditional		yes	Site specific for cases DX'd <2004
Lymph-vascular Invasion	1182	F05565	984	984	1	conditional		yes	For testis and penis cases DX'd 2010 and forward.

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CS Tumor Size	2800	F03577	985	987	3	conditional		yes	For cases DX'd 2004 and forward
CS Extension	2810	F03578	988	990	3	conditional		yes	For cases DX'd 2004 and forward
CS Tumor Size/Ext Eval	2820	F03579	991	991	1	conditional		yes	For cases DX'd 2004 and forward
CS Lymph Nodes	2830	F03580	992	994	3	conditional		yes	For cases DX'd 2004 and forward
CS Lymph Nodes Eval	2840	F03581	995	995	1	conditional		yes	For cases DX'd 2004 and forward
CS Mets at DX	2850	F03582	996	997	2	conditional		yes	For cases DX'd 2004 and forward
CS Mets Eval	2860	F03583	998	998	1	conditional		yes	For cases DX'd 2004 and forward
CS Mets at Dx-Bone	2851	F05541	999	999	1	conditional		yes	For cases DX'd 2004 and forward
CS Mets at Dx-Brain	2852	F05542	1000	1000	1	conditional		yes	For cases DX'd 2004 and forward
CS Mets at Dx-Liver	2853	F05543	1001	1001	1	conditional		yes	For cases DX'd 2004 and forward
CS Mets at Dx-Lung	2854	F05544	1002	1002	1	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 1	2880	F03584	1003	1005	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 2	2890	F03585	1006	1008	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 3	2900	F03586	1009	1011	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 4	2910	F03587	1012	1014	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 5	2920	F03588	1015	1017	3	conditional		yes	For cases DX'd 2004 and forward

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
CS Site-Specific Factor 6	2930	F03589	1018	1020	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 7	2861	F05545	1021	1023	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 8	2862	F05546	1024	1026	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 9	2863	F05547	1027	1029	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific actor 10	2864	F05548	1030	1032	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 11	2865	F05549	1033	1035	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 12	2866	F05550	1036	1038	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 13	2867	F05551	1039	1041	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 14	2868	F05552	1042	1044	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 15	2869	F05553	1045	1047	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 16	2870	F05554	1048	1050	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 17	2871	F05555	1051	1053	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 18	2872	F05556	1054	1056	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 19	2873	F05557	1057	1059	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 20	2874	F05558	1060	1062	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 21	2875	F05559	1063	1065	3	conditional		yes	For cases DX'd 2004 and forward

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
CS Site-Specific Factor 22	2876	F05560	1066	1068	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 23	2877	F05561	1069	1071	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 24	2878	F05562	1072	1074	3	conditional		yes	For cases DX'd 2004 and forward
CS Site-Specific Factor 25	2879	F05563	1075	1077	3	conditional		yes	For cases DX'd 2004 and forward
CS PreRx Tumor Size	2730	F05584	1078	1080	3	no		no	
CS PreRX Extension	2735	F05578	1081	1083	3	no		no	
CS PreRX Tum Sz/Ext Eval	2740	F05583	1084	1084	1	no		no	
CS PreRX Lymph Nodes	2750	F05579	1085	1087	3	no		no	
CS PreRX Reg Nodes Eval	2755	F05582	1088	1088	1	no		no	
CS PreRX Mets at DX	2760	F05580	1089	1090	2	no		no	
CS PreRX Mets Eval	2765	F05581	1091	1091	1	no		no	
CS PostRX Tumor Size	2770	F05577	1092	1094	3	no		no	
CS PostRx Extension	2775	F05574	1095	1097	3	no		no	
CS PostRx Lymph Nodes	2780	F05575	1098	1100	3	no		no	
CS PostRx Mets at DX	2785	F05576	1101	1102	2	no		no	
Derived AJCC-6 T	2940	F03590	1103	1104	2	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Derived AJCC-6 T Descript	2950	F03591	1105	1105	1	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.
Derived AJCC 6 N	2960	F03592	1106	1107	2	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.
Derived AJCC-6 N Descript	2970	F03593	1108	1108	1	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.
Derived AJCC-6 M	2980	F03594	1109	1110	2	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.
Derived AJCC-6 M Descript	2990	F03595	1111	1111	1	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.
Derived AJCC-6 Stage Group	3000	F03596	1112	1113	2	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.
Derived AJCC-7 T	3400	F05570	1114	1116	3	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.
Derived AJCC-7 T Descript	3402	F05571	1117	1117	1	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.
Derived AJCC-7 N	3410	F05568	1118	1120	3	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.
Derived AJCC-7 N Descript	3412	F05569	1121	1121	1	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.
Derived AJCC-7 M	3420	F05566	1122	1124	3	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.
Derived AJCC-7 M Descript	3422	F05567	1125	1125	1	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.
Derived AJCC-7 Stage Grp	3430	F05572	1126	1128	3	conditional		no	Refer to the Collaborative Stage (CS) Data Collection System for details.

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Derived PreRX-7 T	3440	F05594	1129	1131	3	no		no	
Derived PreRX-7 T Descript	3442	F05595	1132	1132	1	no		no	
Derived PreRX-7 N	3450	F05591	1133	1135	3	no		no	
Derived PreRX-7N Descript	3452	F05592	1136	1136	1	no		no	
Derived PreRX-7 M	3460	F05589	1137	1139	3	no		no	
Derived PreRX-7 M Descript	3462	F05590	1140	1140	1	no		no	
Derived PreRX-7 Stage Grp	3470	F05593	1141	1143	3	no		no	
Derived Post RX-7 T	3480	F05588	1144	1146	3	no		no	
Derived Post RX-7 N	3482	F05586	1147	1149	3	no		no	
Derived Post RX-7 M	3490	F05585	1150	1151	2	no		no	
Derived Post RX-7 Stge Grp	3492	F05587	1152	1154	3	no		no	
Derived SS1977	3010	F03597	1155	1155	1	yes		no	
Derived SS2000	3020	F03598	1156	1156	1	yes		no	
Derived Neoadjuv Rx Flag	3600	F05573	1157	1157	1	no		no	
Derived AJCC--Flag	3030	F03599	1158	1158	1	yes		no	
Derived SS1977--Flag	3040	F03600	1159	1159	1	yes		no	

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Derived SS2000--Flag	3050	F03601	1160	1160	1	yes		no	
CS Version Input Current	2937	F05564	1161	1166	6	yes		no	
CS Version Input Original	2935	F03648	1167	1172	6	yes		no	
CS Version Derived	2936	F03649	1173	1178	6	yes		no	
SEER Site-Specific Fact 1	3700	F05525	1179	1179	1	no		no	
SEER Site-Specific Fact 2	3702	F05526	1180	1180	1	no		no	
SEER Site-Specific Fact 3	3704	F05527	1181	1181	1	no		no	
SEER Site-Specific Fact 4	3706	F05528	1182	1182	1	no		no	
SEER Site-Specific Fact 5	3708	F05529	1183	1183	1	no		no	
SEER Site-Specific Fact 6	3710	F05530	1184	1184	1	no		no	
ICD Revision Comorbid	3165	F04265	1185	1185	1	yes*		yes	
Comorbid/ Complication 1	3110	F03442	1186	1190	5	yes		yes	
Comorbid/ Complication 2	3120	F03443	1191	1195	5	yes*		yes	
Comorbid/ Complication 3	3130	F03444	1196	1200	5	yes*		yes	
Comorbid/ Complication 4	3140	F03445	1201	1205	5	yes*		yes	
Comorbid/ Complication 5	3150	F03446	1206	1210	5	yes*		yes	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Comorbid/ Complication 6	3160	F03447	1211	1215	5	yes*		yes	
Comorbid/ Complication 7	3161	F04261	1216	1220	5	yes*		yes	
Comorbid/ Complication 8	3162	F04262	1221	1225	5	yes*		yes	
Comorbid/ Complication 9	3163	F04263	1226	1230	5	yes*		yes	
Comorbid/ Complication 10	3164	F04264	1231	1235	5	yes*		yes	
Height	9960	F04773	1236	1237	2	yes*		yes	CER: Required for all cases diagnosed in 2011, when available.
Weight	9961	F04774	1238	1240	3	yes*		yes	CER: Required for all cases diagnosed in 2011, when available.
BCR-ABL Cytogenetic	9900	F04775	1241	1243	3	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
BCR-ABL Cytogenetic Date	9901	F04776	1244	1251	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
BCR-ABL Cytogen Date Flag	9902	F04777	1252	1253	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
BCR-ABL FISH	9903	F04778	1254	1256	3	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
BCR-ABL FISH Date	9904	F04779	1257	1264	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
BCR-ABL FISH Date Flag	9905	F04780	1265	1266	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
BCR-ABL RT-PCR Qual	9906	F04781	1267	1269	3	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
BCR-ABL RT-PCR Qual Date	9907	F04782	1270	1277	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
BCR-ABL RT-PCR Qual DtFlg	9908	F04783	1278	1279	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
BCR-ABL RT-PCR Quant	9909	F04784	1280	1282	3	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
BCR-ABL RT-PCR Quant Date	9910	F04785	1283	1290	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
BCR-ABL RT-PCR Quan DtFlg	9911	F04786	1291	1292	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Tobacco Use Cigarettes	9965	F04787	1293	1293	1	yes*		yes	CER: Required for all cases diagnosed in 2011, when available.
Tobacco Use Other Smoke	9966	F04788	1294	1294	1	yes*		yes	CER: Required for all cases diagnosed in 2011, when available.
Tobacco Use Smokeless	9967	F04789	1295	1295	1	yes*		yes	CER: Required for all cases diagnosed in 2011, when available.
Tobacco Use NOS	9968	F04790	1296	1296	1	yes*		yes	CER: Required for all cases diagnosed in 2011, when available.
Source Comorbidity	9970	F04791	1297	1297	1	no	gen for extract	no	CER: Required on extract for all cases diagnosed in 2011.
Reserved	none	none	1298	1299	2				New for 2011
Chemo 3 NSC Number	9753	F04792	1300	1305	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 3 Num Doses Planned	9763	F04793	1306	1307	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 3 Planned Dose	9773	F04794	1308	1313	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 3 Planned Dose Unit	9783	F04795	1314	1315	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 3 Num Doses Receivd	9793	F04796	1316	1317	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 3 Received Dose	9803	F04797	1318	1323	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 3 Received DoseUnit	9813	F04798	1324	1325	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Chemo 3 Start Date	9823	F04799	1326	1333	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 3 Start Date Flag	9833	F04800	1334	1335	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 3 End Date	9843	F04801	1336	1343	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 3 End Date Flag	9853	F04802	1344	1345	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 4 NSC Number	9754	F04803	1346	1351	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 4 Num Doses Planned	9764	F04804	1352	1353	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 4 Planned Dose	9774	F04805	1354	1359	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 4 Planned Dose Unit	9784	F04806	1360	1361	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 4 Num Doses Receivd	9794	F04807	1362	1363	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 4 Received Dose	9804	F04808	1364	1369	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 4 Received DoseUnit	9814	F04809	1370	1371	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 4 Start Date	9824	F04810	1372	1379	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 4 Start Date Flag	9834	F04811	1380	1381	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 4 End Date	9844	F04812	1382	1389	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 4 End Date Flag	9854	F04813	1390	1391	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Reserved 05	1180	none	1392	1435	44				Length changed from 200 to 44 for CER.
Treatment -- 1st Course Record Area Non-Confidential									

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Date of Initial RX--SEER	1260	F01344	1436	1443	8	no	gen in db	no	Eureka generates this upon upload and during consolidation
Date of Initial RX Flag	1261	F05500	1444	1445	2	no	gen in db	no	Eureka generates this upon upload and during consolidation
Date of 1st Crs RX--COC	1270	F00560	1446	1453	8	no		no	
Date of 1st Crs Rx Flag	1271	F05496	1454	1455	2	no		no	
RX Date--Surgery	1200	F00432	1456	1463	8	yes*		yes	
RX Date--Surgery Flag	1201	F05516	1464	1465	2	yes*		yes	
RX Date--Mst Defn Srg	3170	F03448	1466	1473	8	yes*		yes	
RX Date Mst Defn Srg Flag	3171	F05506	1474	1475	2	yes		yes	
RX Date--Surgical Disch	3180	F03449	1476	1483	8	no		no	
RX Date Surg Disch Flag	3181	F05508	1484	1485	2	no		no	
RX Date--Radiation	1210	F00470	1486	1493	8	yes*		yes	
RX Date--Radiation Flag	1211	F05515	1494	1495	2	yes*		yes	
RX Date--Radiation Ended	3220	F03450	1496	1503	8	no		no	
RX Date Rad Ended Flag	3221	F05507	1504	1505	2	no		no	
RX Date--Systemic	3230	F03451	1506	1513	8	no	gen in db	yes	Eureka generates this upon upload and during consolidation
RX Date--Systemic Flag	3231	F05509	1514	1515	2	no	gen in db	yes	Eureka generates this upon upload and during consolidation

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
RX Date--Chemo	1220	F00473	1516	1523	8	yes*		yes	
RX Date--Chemo Flag	1221	F05511	1524	1525	2	yes*		yes	
RX Date--Hormone	1230	F00476	1526	1533	8	yes*		yes	
RX Date--Hormone Flag	1231	F05513	1534	1535	2	yes*		yes	
RX Date--BRM	1240	F00479	1536	1543	8	yes*		yes	
RX Date--BRM Flag	1241	F05510	1544	1545	2	yes*		yes	
RX Date--Other	1250	F00482	1546	1553	8	yes*		yes	
RX Date--Other Flag	1251	F05514	1554	1555	2	yes*		yes	
RX Date--DX/Stg Proc	1280	F00422	1556	1563	8	yes*		yes	
RX Date--DX/Stg Proc Flag	1281	F05512	1564	1565	2	yes*		yes	
RX Summ--Treatment Status	1285	F05524	1566	1566	1	yes		yes	
RX Summ--Surg Prim Site	1290	F03491	1567	1568	2	yes		yes	
RX Summ--Scope Reg LN Sur	1292	F03485	1569	1569	1	yes		yes	
RX Summ--Surg Oth Reg/Dis	1294	F03496	1570	1570	1	yes		yes	
RX Summ--Reg LN Examined	1296	F00526	1571	1572	2	conditional		yes	For cases DX'd < 2003.
RX Summ--Surgical Approach	1310	F00529	1573	1573	1	no		no	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
RX Summ--Surgical Margins	1320	F03498	1574	1574	1	no		no	
RX Summ--Reconstruct 1st	1330	F00169	1575	1575	1	conditional		yes	For cases DX'd < 2003.
Reason for No Surgery	1340	F00118	1576	1576	1	yes		yes	
RX Summ--DX/Stg Proc	1350	F00420	1577	1578	2	yes*		yes	
RX Summ--Palliative Proc	3270	F03458	1579	1579	1	no		no	
RX Summ--Radiation	1360	F00050	1580	1580	1	yes, gen by facility	gen in db	yes	
RX Summ--Rad to CNS	1370	F00139	1581	1581	1	no		no	
RX Summ--Surg/Rad Seq	1380	F00051	1582	1582	1	yes		yes	
RX Summ--Transplnt/Endocr	3250	F03456	1583	1584	2	yes		yes	
RX Summ--Chemo	1390	F03373	1585	1586	2	yes		yes	
RX Summ--Hormone	1400	F03377	1587	1588	2	yes		yes	
RX Summ--BRM	1410	F03375	1589	1590	2	yes		yes	
RX Summ--Other	1420	F00059	1591	1591	1	yes		yes	
Reason for No Radiation	1430	F00567	1592	1592	1	yes		yes	
RX Coding System--Current	1460	F00554	1593	1594	2	no	gen for extract	no	
First Course Calc Method	1500	F01054	1595	1595	1	no	gen for extract	no	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Rad--Regional Dose: CGY	1510	F00568	1596	1600	5	no		no	
Rad--No of Treatment Vol	1520	F00569	1601	1603	3	no		no	
Rad--Treatment Volume	1540	F00571	1604	1605	2	no		no	
Rad--Location of RX	1550	F00572	1606	1606	1	yes		yes	
Rad--Regional RX Modality	1570	F00574	1607	1608	2	yes		yes	
Rad--Boost RX Modality	3200	F03454	1609	1610	2	yes		yes	
Rad--Boost Dose cGy	3210	F03455	1611	1615	5	no		no	
RX Summ--Systemic Sur Seq	1639	F04260	1616	1616	1	yes		yes	
RX Summ--Surgery Type	1640	F00046	1617	1618	2	no		no	
Readm Same Hosp 30 Days	3190	F03453	1619	1619	1	no		no	
RX Summ--Surg Site 98-02	1646	F00430	1620	1621	2	conditional		yes	For cases DX'd < 2003.
RX Summ--Scope Reg 98-02	1647	F00525	1622	1622	1	conditional		yes	For cases DX'd < 2003.
RX Summ--Surg Oth 98-02	1648	F00527	1623	1623	1	conditional		yes	For cases DX'd < 2003.
Chemo 5 NSC Number	9755	F04814	1624	1629	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 5 Num Doses Planned	9765	F04815	1630	1631	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 5 Planned Dose	9775	F04816	1632	1637	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Chemo 5 Planned Dose Unit	9785	F04817	1638	1639	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 5 Num Doses Receivd	9795	F04818	1640	1641	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 5 Received Dose	9805	F04819	1642	1647	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 5 Received DoseUnit	9815	F04820	1648	1649	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 5 Start Date	9825	F04821	1650	1657	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 5 Start Date Flag	9835	F04822	1658	1659	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 5 End Date	9845	F04823	1660	1667	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 5 End Date Flag	9855	F04824	1668	1669	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 6 NSC Number	9756	F04825	1670	1675	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 6 Num Doses Planned	9766	F04826	1676	1677	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 6 Planned Dose	9776	F04827	1678	1683	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 6 Planned Dose Unit	9786	F04828	1684	1685	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 6 Num Doses Receivd	9796	F04829	1686	1687	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 6 Received Dose	9806	F04830	1688	1693	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 6 Received DoseUnit	9816	F04831	1694	1695	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 6 Start Date	9826	F04832	1696	1703	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Chemo 6 Start Date Flag	9836	F04833	1704	1705	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 6 End Date	9846	F04834	1706	1713	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo 6 End Date Flag	9856	F04835	1714	1715	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Chemo Completion Status	9859	F04837	1716	1716	1	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Reserved 06	1190	none	1717	1723	7				Length changed from 100 to 7 for CER.
Treatment -- Subsequent & Other Record Area Non-Confidential									
Subsq RX 2nd Course Date	1660	F01500	1724	1731	8	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2ndCrS Date Flag	1661	F05517	1732	1733	2	yes*		yes	
Subsq RX 2nd Course Codes	1670	F06101	1734	1744	11	no		no	The following nine items are subsets of this item.
Subsq RX 2nd Course Surg	1671	F01357	1734	1735	2	no		no	NAACCR item 1671 is a subset of NAACCR item 1670.
Subsq RX 2nd--Scope LN SU	1677	F01385	1736	1736	1	no		no	NAACCR item 1677 is a subset of NAACCR item 1670.
Subsq RX 2nd--Surg Oth	1678	F01381	1737	1737	1	no		no	NAACCR item 1678 is a subset of NAACCR item 1670.
Subsq RX 2nd--Reg LN Rem	1679	F01393	1738	1739	2	no		no	NAACCR item 1679 is a subset of NAACCR item 1670.
Subsq RX 2nd Course Rad	1672	F01365	1740	1740	1	no		no	NAACCR item 1672 is a subset of NAACCR item 1670.
Subsq RX 2nd Course Chemo	1673	F01369	1741	1741	1	no		no	NAACCR item 1673 is a subset of NAACCR item 1670.
Subsq RX 2nd Course Horm	1674	F01373	1742	1742	1	no		no	NAACCR item 1674 is a subset of NAACCR item 1670.
Subsq RX 2nd Course BRM	1675	F01377	1743	1743	1	no		no	NAACCR item 1675 is a subset of NAACCR item 1670.

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Subsq RX 2nd Course Oth	1676	F01389	1744	1744	1	no		no	NAACCR item 1676 is a subset of NAACCR item 1670.
Subsq RX 3rd Course Date	1680	F01501	1745	1752	8	no		no	
Subsq RX 3rdCrS Date Flag	1681	F05518	1753	1754	2	no		no	
Subsq RX 3rd Course Codes	1690	F06102	1755	1765	11	no		no	The following nine items are subsets of this item.
Subsq RX 3rd Course Surg	1691	F01358	1755	1756	2	no		no	NAACCR item 1691 is a subset of NAACCR item 1690.
Subsq RX 3rd--Scope LN Su	1697	F01386	1757	1757	1	no		no	NAACCR item 1697 is a subset of NAACCR item 1690. Corrected name to match NAACCR. LNSu is now LN Su. (space added)
Subsq RX 3rd--Surg Oth	1698	F01382	1758	1758	1	no		no	NAACCR item 1698 is a subset of NAACCR item 1690.
Subsq RX 3rd--Reg LN Rem	1699	F01394	1759	1760	2	no		no	NAACCR item 1699 is a subset of NAACCR item 1690.
Subsq RX 3rd Course Rad	1692	F01366	1761	1761	1	no		no	NAACCR item 1692 is a subset of NAACCR item 1690.
Subsq RX 3rd Course Chemo	1693	F01370	1762	1762	1	no		no	NAACCR item 1693 is a subset of NAACCR item 1690.
Subsq RX 3rd Course Horm	1694	F01374	1763	1763	1	no		no	NAACCR item 1694 is a subset of NAACCR item 1690.
Subsq RX 3rd Course BRM	1695	F01378	1764	1764	1	no		no	NAACCR item 1695 is a subset of NAACCR item 1690.
Subsq RX 3rd Course Oth	1696	F01390	1765	1765	1	no		no	NAACCR item 1696 is a subset of NAACCR item 1690.
Subsq RX 4th Course Date	1700	F01502	1766	1773	8	no		no	
Subsq RX 4thCrS Date Flag	1701	F05519	1774	1775	2	no		no	Corrected name to match NAACCR. 4th Crs is now 4thCrS. (space removed)

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Subsq RX 4th Course Codes	1710	F06103	1776	1786	11				Entire group, Item 1710 is 11 digits. The following 9 items are subsets..
Subsq RX 4th Course Surg	1711	F01359	1776	1777	2	no		no	Item 1711 is a subset of item 1710. Corrected name to match NAACCR. CourseSurg is now Course Surg. (space added)
Subsq RX 4th--Scope LN Su	1717	F01387	1778	1778	1	no		no	Item 1717 is a subset of item 1710. Corrected name to match NAACCR. LNSu is now LN Su. (space added)
Subsq RX 4th--Surg Oth	1718	F01383	1779	1779	1	no		no	Item 1718 is a subset of item 1710.
Subsq RX 4th--Reg LN Rem	1719	F01395	1780	1781	2	no		no	Item 1719 is a subset of item 1710.
Subsq RX 4th Course Rad	1712	F01367	1782	1782	1	no		no	Item 1712 is a subset of item 1710.
Subsq RX 4th Course Chemo	1713	F01371	1783	1783	1	no		no	Item 1713 is a subset of item 1710.
Subsq RX 4th Course Horm	1714	F01375	1784	1784	1	no		no	Item 1714 is a subset of item 1710.
Subsq RX 4th Course BRM	1715	F01379	1785	1785	1	no		no	Item 1715 is a subset of item 1710.
Subsq RX 4th Course Oth	1716	F01391	1786	1786	1	no		no	Item 1716 is a subset of item 1710.
Subsq RX--Reconstruct Del	1741	F00437	1787	1787	1	no		no	Item 1716 is a subset of item 1741.
Reason Subsq RX	9920	F04836	1788	1788	1	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2ndCrS Surg	9921	F04838	1789	1790	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2ndCrS Rad	9922	F04839	1791	1792	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2ndCrS Chemo	9923	F04840	1793	1794	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Subsq RX 2ndCrS Horm	9924	F04841	1795	1796	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2ndCrS BRM	9925	F04842	1797	1798	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2ndCrS Oth	9926	F04843	1799	1799	1	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2ndCrS Trans/End	9927	F04844	1800	1801	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2nd Chemo 1 NSC	9931	F04845	1802	1807	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2nd Chemo 2 NSC	9932	F04846	1808	1813	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2nd Chemo 3 NSC	9933	F04847	1814	1819	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2nd Chemo 4 NSC	9934	F04848	1820	1825	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2nd Chemo 5 NSC	9935	F04849	1826	1831	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2nd Chemo 6 NSC	9936	F04850	1832	1837	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2nd Horm 1 NSC	9941	F04851	1838	1843	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2nd Horm 2 NSC	9942	F04852	1844	1849	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2nd BRM 1 NSC	9951	F04853	1850	1855	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2nd BRM 2 NSC	9952	F04854	1856	1861	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Subsq RX 2nd DateFlag CER	9955	F04864	1862	1863	2	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Reserved 07	1300	none	1864	1887	24				Length changed from 100 to 24 for CER.
Edit Over-rides/Conv History, Sys Admin Record Area Non-Confidential									

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Over-ride SS/NodesPos	1981	F02507	1888	1888	1	no		no	
Over-ride SS/ TNM-N	1982	F02508	1889	1889	1	no		no	
Over-ride SS/ TNM-M	1983	F02509	1890	1890	1	no		no	
Over-ride Acsn/Class/Seq	1985	F02511	1891	1891	1	no		no	
Over-ride HospSeq/DxConf	1986	F00632	1892	1892	1	yes		yes	
Over-ride COC-Site/Type	1987	F02513	1893	1893	1	no		no	
Over-ride HospSeq/Site	1988	F02514	1894	1894	1	yes*		yes	
Over-ride Site/TNM-StgGrp	1989	F02515	1895	1895	1	no		no	
Over-ride Age/Site/Morph	1990	F00631	1896	1896	1	yes*		yes	
Over-ride SeqNo/DxConf	2000	F02512	1897	1897	1	no	gen in db	no	
Over-ride Site/Lat/SeqNo	2010	F00633	1898	1898	1	yes*		yes	
Over-ride Surg/DxConf	2020	F00634	1899	1899	1	yes*		yes	
Over-ride Site/Type	2030	F00635	1900	1900	1	yes*		yes	
Over-ride Histology	2040	F00636	1901	1901	1	yes*		yes	
Over-ride Report Source	2050	F00637	1902	1902	1	yes*		yes	
Over-ride Ill-define Site	2060	F00638	1903	1903	1	yes*		yes	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Over-ride Leuk, Lymphoma	2070	F00639	1904	1904	1	yes*		yes	
Over-ride Site/Behavior	2071	F00671	1905	1905	1	yes*		yes	
Over-ride Site/EOD/DX Dt	2072	F00672	1906	1906	1	yes*		yes	
Over-ride Site/Lat/EOD	2073	F00673	1907	1907	1	yes*		yes	
Over-ride Site/Lat/Morph	2074	F00674	1908	1908	1	yes*		yes	
Site (73-91) ICD-O-1	1960	F00031	1909	1912	4	no		no	
Morph (73-91) ICD-O-1	1970	F00557	1913	1918	6	no		no	Entire group, Item 1970 is 6 digits. The following 3 items are subsets of this item.
Histology (73-91) ICD-O-1	1971	F06104	1913	1916	4	no		no	Item 1971 is a subset of item 1970
Behavior (73-91) ICD-O-1	1972	F06105	1917	1917	1	no		no	Item 1972 is a subset of item 1970
Grade (73-91) ICD-O-1	1973	F06106	1918	1918	1	no		no	Item 1973 is a subset of item 1970
ICD-O-2 Conversion Flag	1980	F00623	1919	1919	1	no		no	
CRC CHECKSUM	2081	F00686	1920	1929	10	no		no	
SEER Coding Sys--Current	2120	F00558	1930	1930	1	no	gen for extract	no	
SEER Coding Sys--Original	2130	F00559	1931	1931	1	no	gen for extract	no	
COC Coding Sys--Current	2140	F00663	1932	1933	2	no	gen for extract	no	
COC Coding Sys--Original	2150	F00664	1934	1935	2	no	gen for extract	no	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Vendor Name	2170	F00297	1936	1945	10	yes, gen by facility	gen for extract	no	
SEER Type of Follow-Up	2180	F00665	1946	1946	1	no	gen for extract	no	
SEER Record Number	2190	F00399	1947	1948	2	no	gen for extract	no	
Diagnostic Proc 73-87	2200	F00667	1949	1950	2	no		no	
Date Case Initiated	2085	F00082	1951	1958	8	yes, gen by facility		no	
Date Case Completed	2090	F00083	1959	1966	8	yes, gen by facility		no	
Date Case Completed—CoC	2092	F05492	1967	1974	8	no		no	
Date Case Last Changed	2100	F00084	1975	1982	8	yes, gen by facility		no	
Date Case Report Exported	2110	F00146	1983	1990	8	yes, gen by facility		no	
Date Case Report Received	2111	F00613	1991	1998	8	no	gen in db	no	
Date Case Report Loaded	2112	F00684	1999	2006	8	no	gen in db	no	
Date Tumor Record Availbl	2113	F06095	2007	2014	8	no	gen in db	no	
ICD-O-3 Conversion Flag	2116	F02505	2015	2015	1	yes		no	
Over-ride CS 1	3750	F04724	2016	2016	1	no		no	New for 2011, NAACCR
Over-ride CS 2	3751	F04725	2017	2017	1	no		no	New for 2011, NAACCR
Over-ride CS 3	3752	F04726	2018	2018	1	no		no	New for 2011, NAACCR

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Over-ride CS 4	3753	F04727	2019	2019	1	no		no	New for 2011, NAACCR
Over-ride CS 5	3754	F04728	2020	2020	1	no		no	New for 2011, NAACCR
Over-ride CS 6	3755	F04729	2021	2021	1	no		no	New for 2011, NAACCR
Over-ride CS 7	3756	F04730	2022	2022	1	no		no	New for 2011, NAACCR
Over-ride CS 8	3757	F04731	2023	2023	1	no		no	New for 2011, NAACCR
Over-ride CS 9	3758	F04732	2024	2024	1	no		no	New for 2011, NAACCR
Over-ride CS 10	3759	F04733	2025	2025	1	no		no	New for 2011, NAACCR
Over-ride CS 11	3760	F04734	2026	2026	1	no		no	New for 2011, NAACCR
Over-ride CS 12	3761	F04735	2027	2027	1	no		no	New for 2011, NAACCR
Over-ride CS 13	3762	F04736	2028	2028	1	no		no	New for 2011, NAACCR
Over-ride CS 14	3763	F04737	2029	2029	1	no		no	New for 2011, NAACCR
Over-ride CS 15	3764	F04738	2030	2030	1	no		no	New for 2011, NAACCR
Over-ride CS 16	3765	F04739	2031	2031	1	no		no	New for 2011, NAACCR
Over-ride CS 17	3766	F04740	2032	2032	1	no		no	New for 2011, NAACCR
Over-ride CS 18	3767	F04741	2033	2033	1	no		no	New for 2011, NAACCR
Over-ride CS 19	3768	F04742	2034	2034	1	no		no	New for 2011, NAACCR

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Over-ride CS 20	3769	F04743	2035	2035	1	no		no	New for 2011, NAACCR
Reserved 08a	1650	none	2036	2049	14			no	New for 2011. Length made 14 to fit in CER items. In NAACCR 12-1, Reserved 08 is columns 2036-2115.
Hormone 1 NSC Number	9861	F04855	2050	2055	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Hormone 2 NSC Number	9862	F04856	2056	2061	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
BRM 1 NSC	9871	F04857	2062	2067	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
BRM 2 NSC	9872	F04858	2068	2073	6	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Granulocyte CSF Status	9880	F04859	2074	2074	1	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Erythro Growth Factor Sta	9881	F04860	2075	2075	1	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Thrombocyte GrowthFactSta	9882	F04861	2076	2076	1	conditional		yes	CER: For 2011 Breast, Colorectal, and CML cases only.
Reserved 08b	none	none	2077	2115	39				New for 2011. Length made 39 to fit in CER items. Reserved 08 is columns 2036-2115.
Follow-Up/Recurrence/Death Record Area Non-Confidential									
Date of Last Contact	1750	F00068	2116	2123	8	yes		no	
Date of Last Contact Flag	1751	F05503	2124	2125	2	yes		no	
Vital Status	1760	F00069	2126	2126	1	yes		no	
Cancer Status	1770	F00070	2127	2127	1	yes		no	
Quality of Survival	1780	F05245	2128	2128	1	no		no	

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Follow-Up Source	1790	F01059	2129	2129	1	no		no	
Next Follow-Up Source	1800	F01060	2130	2130	1	no		no	
Addr Current--City	1810	F05269	2131	2180	50	yes*		no	
Addr Current--State	1820	F05270	2181	2182	2	yes*		no	
Addr Current--Postal Code	1830	F05271	2183	2191	9	yes*		no	
County--Current	1840	F05272	2192	2194	3	no		no	
Unusual Follow-Up Method	1850	F03753	2195	2195	1	no		no	
Recurrence Date--1st	1860	F00065	2196	2203	8	no		no	
Recurrence Date--1st Flag	1861	F05505	2204	2205	2	no		no	
Recurrence Type--1st	1880	F05275	2206	2207	2	no		no	
Follow-Up Contact--City	1842	F05276	2208	2257	50	yes*		no	
Follow-Up Contact--State	1844	F05277	2258	2259	2	yes*		no	
Follow-Up Contact--Postal	1846	F05278	2260	2268	9	yes*		no	
Cause of Death	1910	F00078	2269	2272	4	no	death clearance	no	
ICD Revision Number	1920	F00079	2273	2273	1	no	gen for extract	no	
Autopsy	1930	F00586	2274	2274	1	no		no	

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Place of Death	1940	F00080	2275	2277	3	yes*		no	
Follow-Up Source Central	1791	F06096	2278	2279	2	no	gen for extract	no	
Date of Death--Canada	1755	F05493	2280	2287	8	no		no	
Date of Death--Canada Flag	1756	F05498	2288	2289	2	no		no	
Reserved 09	1740	none	2290	2339	50				
State Requestor Items									
Region ID	none	F03356	2340	2341	2	yes, gen by facility		no	
Other Reg ID	none	F00151	2342	2343	2	no	gen in db	no	Historical for CA cases, generated from NAACCR Registry ID for out of state cases.
Other Reg Pat No	none	F06021	2344	2351	8	no	gen in db	no	Historical for CA cases, generated from NAACCR Registry ID for out of state cases.
Other Reg Tum No	none	F06022	2352	2353	2	no	gen in db	no	Historical for CA cases, generated from NAACCR Registry ID for out of state cases.
Reg Pat No	none	F06061	2354	2361	8	no	historical	no	Historical for CA cases, generated from NAACCR Registry ID for out of state cases.
Reg Tum No	none	F00137	2362	2363	2	no	historical	no	
Date-Added	none	F06031	2364	2371	8	no	gen in db	no	
Date First Sent	none	F06032	2372	2379	8	no	historical	no	
Date Last Sent	none	F06033	2380	2387	8	no	historical	no	
Reg-Data	none	F00171 to	2388	2407	20	yes*		yes	

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		F00180							
Over-ride Name Sex	none	F00640	2408	2408	1	yes*		yes	
Over-ride Admis DX	none	F00641	2409	2409	1	yes*		yes	
Over-ride Race BPL	none	F00642	2410	2410	1	yes*		yes	
Over-ride Spanish BPL	none	F00643	2411	2411	1	yes*		yes	
Over-ride Site Stage	none	F00644	2412	2412	1	yes*		yes	
SSN Suffix	none	F00147	2413	2414	2	yes*		yes	
Occupation 80	none	F06019	2415	2418	4	no	gen in db	no	
Occupation 90	none	F00113	2419	2422	4	no	gen in db	no	
Industry 80	none	F06018	2423	2426	4	no	gen in db	no	
Industry 90	none	F00114	2427	2430	4	no	gen in db	no	
Census Block 90	none	F06066	2431	2431	1	no	geocoding	no	
Hospital Tumor Number CCR	none	F00127	2432	2433	2	yes		yes	
Type Admis	none	F00133	2434	2434	1	yes		yes	
Pat No Contact	none	F00429	2435	2435	1	yes		yes	
DC Race	none	F06063	2436	2437	2	no	death clearance	no	

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DCSpanish Origin	none	F06064	2438	2438	1	no	death clearance	no	
Coding Proc	none	F00115	2439	2440	2	yes, gen by facility		yes	
Payment Source Text	none	F00418	2441	2480	40	yes		yes	
Physician Referring	none	F01354	2481	2488	8	yes*		yes	
Stage Alternate	none	F00289	2489	2492	4	yes*		yes	
Follow-Up Last Type (Patient)	none	F00299	2493	2494	2	no		no	
Follow-Up Next Type	none	F01285	2495	2495	1	yes*		no	CCR name changed from "FU Next Type" to "Follow-Up Next Type".
Date Cancer Status	none	F00157	2496	2503	8	yes		no	
Date Cancer Status Flag	none	F05879	2504	2505	2	yes		no	
Follow-Up Last Type (Tumor)	none	F00072	2506	2507	2	yes		no	
Reserved	none	none	2508	2523	16	no		no	
Central Admission Number	none	F06905	2524	2531	8	no	gen in db	no	
Doc ID	none	F00117	2532	2541	10	no	historical	no	
DC Birth Place	none	F06016	2542	2544	3	no	death clearance	no	
Vendor License Number	none	F05439	2545	2554	10	yes, gen by facility		yes	
Transmit Vendor Version	none	F05438	2555	2564	10	yes, gen by facility	gen on demand	yes	

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Surg Prim Proc (1)	none	F05907	2565	2566	2	yes		yes	
Date Surg Proc (1)	none	F05908	2567	2574	8	yes*		yes	
Date Surg Proc (1) Flag	none	F05654	2575	2576	2	yes		yes	
Scope LN Proc (1)	none	F05909	2577	2577	1	yes		yes	
Surg Other Proc (1)	none	F05910	2578	2578	1	yes		yes	
Surg Prim Proc (2)	none	F03489	2579	2580	2	yes		yes	
Date Surg Proc (2)	none	F01399	2581	2588	8	yes*		yes	
Date Surg Proc (2) Flag	none	F05655	2589	2590	2	yes		yes	
Scope LN Proc (2)	none	F03483	2591	2591	1	yes		yes	
Surg Other Proc (2)	none	F03494	2592	2592	1	yes		yes	
Surg Prim Proc (3)	none	F03490	2593	2594	2	yes		yes	
Date Surg Proc (3)	none	F01400	2595	2602	8	yes*		yes	
Date Surg Proc (3) Flag	none	F05656	2603	2604	2	yes		yes	
Scope LN Proc (3)	none	F03484	2605	2605	1	yes		yes	
Surg Other Proc (3)	none	F03495	2606	2606	1	yes		yes	
Treatment Hospital Number Procedure 1	none	F05919	2607	2616	10	yes		yes	

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Treatment Hospital Number Procedure 2	none	F01691	2617	2626	10	yes		yes	
Treatment Hospital Number Procedure 3	none	F01692	2627	2636	10	yes		yes	
ACOS Approved Flag	none	F00091	2637	2637	1	yes		yes	CCR name changed from "ACOS Approved" to "ACOS Approved Flag".
Tumor Marker CA 1	none	F00092	2638	2638	1	conditional		yes	Breast cases only, DX'd < 2004.
Census Source 2000	none	F06008	2639	2640	2	no	geocoding	no	
Date VE	none	F06084	2641	2648	8	no	gen in db	no	
Date VE Reported	none	F06085	2649	2656	8	no	gen in db	no	
Date VE Resolved	none	F06086	2657	2664	8	no	gen in db	no	
Pay Source 2	none	F03535	2665	2666	2	yes*		yes	
Death File No St	none	F00669	2667	2668	2	no	death clearance	no	
Census Block 2000	none	F06006	2669	2672	4	no	geocoding	no	
Census Place 2000	none	F06007	2673	2677	5	no	geocoding	no	
Discovered by Screening	none	F00592	2678	2678	1	yes		yes	
RX Date Transp Endo	none	F03562	2679	2686	8	yes		yes	CCR name changed from "Date Transp Endo." to "RX Date Transp Endo".
RX Date Transp Endo Flag	none	F05606	2687	2688	2	yes		yes	CCR name changed from "Date Transp Endo Flag" to "RX Date Transp Endo Flag".
Transp Endo Hosp	none	F03564	2689	2690	2	yes*		yes	

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Hosp Surg Prim First	none	F03671	2691	2700	10	no	gen in db	no	
Hosp Surg Prim Sum	none	F06370	2701	2710	10	no	gen in db	no	
Surg Prim First	none	F03672	2711	2712	2	no	gen in db	no	
Date Surg Prim First	none	F03673	2713	2720	8	no	gen in db	no	
Date Surg Prim First Flag	none	F06099	2721	2722	2	no	gen in db	no	
Religion	none	F00116	2723	2724	2	yes		yes	
Follow-Up Hospital Last	none	F01686	2725	2734	10	yes		yes	CCR name changed from "FU Hosp Last" to "Follow-Up Hospital Last".
Year First Seen	none	F00119	2735	2738	4	yes		yes	
Physician Other 1	none	F01508	2739	2746	8	yes*		yes	
NPI--Physician Other 1	none	F03722	2747	2756	10	yes*		yes	
Physician Other 2	none	F01509	2757	2764	8	yes*		yes	
NPI--Physician Other 2	none	F03723	2765	2774	10	yes*		yes	
Protocol Participation	none	F05267	2775	2776	2	yes		yes	
Census Source 2010	none	F06003	2777	2778	2	no	geocoding	no	New for 2011, California item
Census Block 2010	none	F06005	2779	2782	4	no	geocoding	no	New for 2011, California item
Reserved			2783	2839	57				New for 2011.
NBCCEDP Linkage Items									

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NBCCEDP Linkage Results	9980	none	2840	2840	1	no	gen in db	no	New for 2011, CER (Linkage between the central DMS and the BCCEDP database.)
NBCCEDP Linkage Date	9981	none	2841	2848	8	no	gen in db	no	New for 2011, CER (Linkage between the central DMS and the BCCEDP database.)
Reserved	none	none	2849	3339	491				Length changed from 563 to 491 due to inserted CER data items.
Patient Section -- Confidential									
Name--Last	2230	F00008	3340	3379	40	yes		yes	
Name--First	2240	F00009	3380	3419	40	yes		yes	
Name--Middle	2250	F00010	3420	3459	40	yes		yes	
Name--Prefix	2260	F01855	3460	3462	3	no		no	
Name--Suffix	2270	F00502	3463	3465	3	yes*		yes	
Name--Alias	2280	F00011	3466	3505	40	yes*		yes	
Name--Maiden	2390	F00148	3506	3545	40	yes*		yes	
Name--Spouse/Parent	2290	F03344	3546	3605	60	no		no	
Medical Record Number [Len 11]	2300	F01047	3606	3616	11	yes*		no	
Military Record No Suffix	2310	F00668	3617	3618	2	no		no	
Social Security Number	2320	F00007	3619	3627	9	yes		yes	
Addr at DX--No & Street	2330	F00012	3628	3687	60	yes		yes	

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Addr at DX--Supplementl	2335	F03460	3688	3747	60	yes*		yes	
Addr Current--No & Street	2350	F05296	3748	3807	60	yes*		no	
Addr Current--Supplementl	2355	F05297	3808	3867	60	yes*		no	
Telephone	2360	F01861	3868	3877	10	yes*		no	
DC State File Number	2380	F00132	3878	3883	6	no	death clearance	no	
Follow-Up Contact--Name	2394	F05298	3884	3943	60	yes*		no	
Follow-Up Contact--No&St	2392	F05299	3944	4003	60	yes*		no	
Follow-Up Contact--Suppl	2393	F05300	4004	4063	60	yes*		no	
Latitude	2352	F06034	4064	4073	10	no	geocoding	no	
Longitude	2354	F06035	4074	4084	11	no	geocoding	no	
Reserved 10	1835	none	4085	4284	200				
Hospital Section -- Confidential									
NPI--Following Registry	2445	F03714	4285	4294	10	no		no	
Following Registry	2440	F01687	4295	4304	10	no		no	
NPI--Inst Referred From	2415	F03715	4305	4314	10	yes*		yes	
Institution Referred From	2410	F01684	4315	4324	10	yes		yes	
NPI--Inst Referred To	2425	F03716	4325	4334	10	yes*		yes	

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Institution Referred To	2420	F01685	4335	4344	10	yes		yes	
Reserved 11	1900	none	4345	4394	50				
Other -- Confidential									
NPI--Physician--Managing	2465	F03717	4395	4404	10	yes*		yes	
Physician--Managing	2460	F00675	4405	4412	8	yes		yes	
NPI--Physician--Follow-Up	2475	F03719	4413	4422	10	yes*		yes	
Physician--Follow-Up	2470	F00075	4423	4430	8	yes*		yes	
NPI--Physician--Primary Surg	2485	F03718	4431	4440	10	yes*		yes	
Physician--Primary Surg	2480	F00676	4441	4448	8	yes*		yes	
NPI--Physician 3	2495	F03720	4449	4458	10	yes*		yes	
Physician 3	2490	F01356	4459	4466	8	yes*		yes	
NPI--Physician 4	2505	F03721	4467	4476	10	yes*		yes	
Physician 4	2500	F01355	4477	4484	8	yes*		yes	
Reserved 12	2510	none	4485	4534	50				
Pathology Record Area Non-Confidential									
Path Reporting Fac ID 1	7010	F05406	4535	4559	25	yes*		yes	
Path Report Number 1	7090	F05411	4560	4579	20	yes*		yes	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Path Date Spec Collect 1	7320	F05873	4580	4593	14	yes*		yes	
Path Report Type 1	7480	F05441	4594	4595	2	yes*		yes	
Path Ordering Fac No 1	7190	F05946	4596	4620	25	no		no	
Path Order Phys Lic No 1	7100	F05947	4621	4640	20	no		no	
Path Reporting Fac ID 2	7011	F05407	4641	4665	25	yes*		yes	
Path Report Number 2	7091	F05412	4666	4685	20	yes*		yes	
Path Date Spec Collect 2	7321	F05874	4686	4699	14	yes*		yes	
Path Report Type 2	7481	F05442	4700	4701	2	yes*		yes	
Path Ordering Fac No 2	7191	F05532	4702	4726	25	no		no	
Path Order Phys Lic No 2	7101	F05537	4727	4746	20	no		no	
Path Reporting Fac ID 3	7012	F05408	4747	4771	25	yes*		yes	
Path Report Number 3	7092	F05413	4772	4791	20	yes*		yes	
Path Date Spec Collect 3	7322	F05875	4792	4805	14	yes*		yes	
Path Report Type 3	7482	F05443	4806	4807	2	yes*		yes	
Path Ordering Fac No 3	7192	F05533	4808	4832	25	no		no	
Path Order Phys Lic No 3	7102	F05538	4833	4852	20	no		no	

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Path Reporting Fac ID 4	7013	F05409	4853	4877	25	yes*		yes	
Path Report Number 4	7093	F05414	4878	4897	20	yes*		yes	
Path Date Spec Collect 4	7323	F05876	4898	4911	14	yes*		yes	
Path Report Type 4	7483	F05444	4912	4913	2	yes*		yes	
Path Ordering Fac No 4	7193	F05534	4914	4938	25	no		no	
Path Order Phys Lic No 4	7103	F05539	4939	4958	20	no		no	
Path Reporting Fac ID 5	7014	F05410	4959	4983	25	yes*		yes	
Path Report Number 5	7094	F05415	4984	5003	20	yes*		yes	
Path Date Spec Collect 5	7324	F05877	5004	5017	14	yes*		yes	
Path Report Type 5	7484	F05445	5018	5019	2	yes*		yes	
Path Ordering Fac No 5	7194	F05535	5020	5044	25	no		no	
Path order Phys Lic No 5	7104	F05540	5045	5064	20	no		no	
Reserved 13	2080	none	5065	5564	500				
Text Diagnosis Record Area Non-Confidential									
Text--DX Proc--PE	2520	F01211	5565	6564	1000	yes*		yes	
Text--DX Proc-- X-ray/Scan	2530	F01212	6565	7564	1000	yes*		yes	
Text--DX Proc--Scopes	2540	F01209	7565	8564	1000	yes*		yes	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Text--DX Proc--Lab Tests	2550	F01210	8565	9564	1000	yes*		yes	
Text--DX Proc--Op	2560	F01214	9565	10564	1000	yes*		yes	
Text--DX Proc--Path	2570	F01213	10565	11564	1000	yes*		yes	
Text--Primary Site Title	2580	F00089	11565	11664	100	yes		yes	
Text--Histology Title	2590	F00090	11665	11764	100	yes		yes	
Text--Staging	2600	F01223	11765	12764	1000	yes*		yes	
Text Diagnosis Record Area Non-Confidential									
RX Text-- Surgery	2610	F05878	12765	13764	1000	yes*			This item includes the following four sub-items.
RX Text-- Surgery (1)	2610	F00701	12765	13097	333	yes*		yes	Subset of RX Text—Surgery starting in column 12765.
RX Text-- Surgery (2)	2610	F00702	13098	13430	333	yes*		yes	Subset of RX Text—Surgery starting in column 12765.
RX Text-- Surgery (3)	2610	F00703	13431	13763	333	yes*		yes	Subset of RX Text—Surgery starting in column 12765.
RX Text--Surgery (Reserved)	2610	F06107	13764	13764	1				Subset of RX Text—Surgery starting in column 12765.
RX Text--Radiation (Beam)	2620	F01215	13765	14764	1000	yes*		yes	
RX Text--Radiation Other	2630	F05952	14765	15764	1000	yes*		yes	
RX Text--Chemo	2640	F01216	15765	16764	1000	yes*		yes	
RX Text--Hormone	2650	F01217	16765	17764	1000	yes*		yes	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
RX Text--BRM	2660	F01218	17765	18764	1000	yes*		yes	
RX Text--Other	2670	F01219	18765	19764	1000	yes*		yes	
Text Miscellaneous Record Area Non-Confidential									
Text--Remarks	2680	F01221	19765	20764	1000	yes*		yes	
Text--Place of Diagnosis	2690	F01350	20765	20824	60	yes*		yes	
State/Requestor Items									
Text Final DX	none	F00030	20825	20924	100	yes		yes	
DC Father's Surname	none	F06089	20925	20964	40	no	death clearance	no	
Mother First Name	none	F00428	20965	21004	40	yes*		yes	
Alias Name (AKANAME1)	none	F06036	21005	21044	40	no	gen in db	no	
Alias-Flag (AKAFLAG1)	none	F06045	21045	21045	1	no	gen in db	no	
Alias Name (AKANAME 2)	none	F06037	21046	21085	40	no	gen in db	no	
Alias Flag (AKAFLAG 2)	none	F06046	21086	21086	1	no	gen in db	no	
Alias Name (AKANAME 3)	none	F06038	21087	21126	40	no	gen in db	no	
Alias Flag (AKAFLAG 3)	none	F06047	21127	21127	1	no	gen in db	no	
Alias-Name (AKANAME 4)	none	F06039	21128	21167	40	no	gen in db	no	
Alias Flag (AKAFLAG 4)	none	F06048	21168	21168	1	no	gen in db	no	

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Appendix A Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Supplied by CCR	Correction Record Required	2011 Revision Notes (NAACCR v12.1)
Alias Name (AKANAME 5)	none	F06040	21169	21208	40	no	gen in db	no	
Alias Flag (AKAFLAG 5)	none	F06049	21209	21209	1	no	gen in db	no	
Contact Name	none	F01507	21210	21269	60	yes*		no	
Name Alias First	none	F00510	21270	21309	40	yes*		yes	
DCSSN	none	F06012	21310	21318	9	no	death clearance	no	
Hosp Pat No	none	F02516	21319	21330	12	yes		yes	
Medical Record Number [Len 12]	none	F01049	21331	21342	12	yes*		yes	
Reserved 14	2210	none	21343	22823	1481				
End of Record [.]			22824	22824	1				

Appendix B: Correction Record Required when Changed

Appendix B Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Comments for 2011 and NAACCR v12.1
Record Type [U]	10	none	1	1	1	yes, gen by facility	
Record Version [121]	9000	none	2	4	3	yes, gen by facility	Version 121 indicating NAACCR release 12.1.
Vendor Name	2170	F00297	5	14	10	yes, gen by facility	
Registry Type	30	F01001	15	15	1	yes, gen by facility	
Registry ID	40	F04388	16	25	10	yes, gen by facility	
Patient System ID-Hosp	21	F00003	26	33	8	no	
Tumor Record Number	60	F00127	34	35	2	no	
Reserved for Expansion	9002	none	36	55	20		
Patient Identification Number Received	9010	F00004	56	63	8	no	
Reg Tum No	none	F00137	64	65	2	no	
Name--Last	2230	F00008	66	105	40	yes	
Name--First	2240	F00009	106	145	40	yes	
Name--Middle	2250	F00010	146	185	40	yes	
Medical Record Number [Len 11]	2300	F01047	186	196	11	no	
Military Record No Suffix	2310	F00668	197	198	2	no	
Social Security Number	2320	F00007	199	207	9	yes	
Sex	220	F00022	208	208	1	yes	
Date of Birth	240	F00019	209	216	8	yes	
Date of Birth Flag	241	F05497	217	218	2	yes	
Reporting Facility	540	F01683	219	228	10	yes	
NPI--Reporting Facility	545	F03711	229	238	10	yes*	
Accession Number--Hosp	550	F00016	239	247	9	yes	
Date of Diagnosis	390	F00029	248	255	8	yes	
Date of Diagnosis Flag	391	F05499	256	257	2	yes	
Sequence Number--Hospital	560	F00005	258	259	2	yes	
Primary Site	400	F00152	260	263	4	yes	

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Appendix B Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Comments for 2011 and NAACCR v12.1
Laterality	410	F00032	264	264	1	yes	
Histology (92-00) ICD-O-2	420	F02501	265	268	4	yes	
Behavior (92-00) ICD-O-2	430	F00164	269	269	1	yes	
Histologic Type - ICD-O-3	522	F02502	270	273	4	yes	
Behavior Code - ICD-O-3	523	F02504	274	274	1	yes	
Reserved for Expansion	9050	none	275	314	40		
Date of This Change	9005	none	315	322	8	yes, gen by facility	
Time of This Change	9006	none	323	328	6	yes, gen by facility	
CRC CHECKSUM	2081	F00686	329	338	10	no	
Correction Comments	9020	none	339	538	200	yes	
Changed Item Number	9030	none	539	543	5	yes, gen by facility	
Changed Item New Value	9040	none	544	1543	1000	yes	
Hospital Tumor Number CCR	none	F00127	1544	1545	2	yes, gen by facility	
Hospital Patient Number CCR	none	F02516	1546	1557	12	yes, gen by facility	
Coding Proc	none	F00115	1558	1559	2	yes	
Medical Record Number [Len 12]	none	F01049	1560	1571	12	yes	
Abstractors Initials CCR	none	F00081	1572	1574	3	yes	
Transmit Vendor Version	none	F05438	1575	1584	10	yes, gen by facility	
Old Item Value	none	none	1585	2584	1000	yes	
End of Record[.]	none	none	2585	2585	1		

Appendix C: Follow-Up Only and Shared Follow-Up Record Layout

Appendix C Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Comments for 2011 and NAACCR v12.1
Record Type [F/S]	10	none	1	1	1	yes, gen by facility	
Record Version [M]	50	none	2	2	1	yes, gen by facility	Record version incremented from L to M.
Reporting Facility	540	F01683	3	12	10	yes	
Coding Proc	none	F00115	13	14	2	yes, gen by facility	
Accession Number--Hosp	550	F00016	15	23	9	yes	
Sequence Number--Hospital	560	F00005	24	25	2	yes	
Hospital Tumor Number CCR	none	F00127	26	27	2	yes, gen by facility	
Hospital Patient Number CCR	none	F02516	28	39	12	yes, gen by facility	
Patient ID Number	20	F00004	40	47	8	yes*	
Tumor Record Number	60	F00137	48	49	2	yes*	
Medical Record Number [Len 12]	none	F01049	50	61	12	yes*	
Social Security Number	2320	F00007	62	70	9	yes*	
SSN Suffix	none	F00147	71	72	2	yes*	
Name--Last	2230	F00008	73	112	40	yes	
Name--First	2240	F00009	113	152	40	yes	
Date of Birth	240	F00019	153	160	8	yes	
Date of Birth Flag	241	F05497	161	162	2	yes	
Sex	220	F00022	163	163	1	yes	
Primary Site	400	F00152	164	167	4	yes	
Laterality	410	F00032	168	168	1	yes	
Histology (92-00) ICD-O-2	420	F02501	169	172	4	yes	
Behavior (92-00) ICD-O-2	430	F00164	173	173	1	yes	
Date of Diagnosis	390	F00029	174	181	8	yes	
Date of Diagnosis Flag	391	F05499	182	183	2	yes	
Histologic Type - ICD-O-3	522	F02502	184	187	4	yes	

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Appendix C Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Comments for 2011 and NAACCR v12.1
Behavior Code - ICD-O-3	523	F02504	188	188	1	yes	
Transmit Vendor Version	none	F05438	189	198	10	yes, gen by facility	
Reserved	none	none	199	213	15		
Date of Last Contact	1750	F00068	214	221	8	yes	
Date of Last Contact Flag	1751	F05503	222	223	2	yes	
Vital Status	1760	F00069	224	224	1	yes	
Date Cancer Status	none	F00157	225	232	8	yes	
Date Cancer Status Flag	none	F05879	233	234	2	yes	
Cancer Status	1770	F00070	235	235	1	yes	
Follow-Up Hospital Last	none	F01686	236	245	10	yes	
Reserved for Expansion	none	none	246	250	5	yes	
Follow-Up Last Type (Patient)	none	F00299	251	252	2	yes	
Follow-Up Last Type (Tumor)	none	F00072	253	254	2	yes	
Follow-Up Registry - Next	none	F01687	255	264	10	yes*	
Reserved for Expansion	none	none	265	269	5		
Follow-Up Next Type	none	F01285	270	270	1	yes*	
Physician--Follow-Up	2470	F00075	271	278	8	yes*	
Cause of Death	1910	F00078	279	282	4	yes*	
Place of Death	1940	F00080	283	285	3	yes*	
Date Case Last Changed	2100	F00084	286	293	8	yes, gen by facility	
DC State File Number	2380	F00132	294	299	6	Yes*	
Contact Name	none	F01507	300	359	60	yes*	
Addr Current--No & Street	2350	F05296	360	419	60	yes*	
Addr Current--Supplementl	2355	F05297	420	479	60	yes*	
Addr Current--City	1810	F05269	480	529	50	yes*	
Addr Current--State	1820	F05270	530	531	2	yes*	
Addr Current--Postal Code	1830	F05271	532	540	9	yes*	

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Appendix C Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Length	CCR Required from Reporting Facility Software	Comments for 2011 and NAACCR v12.1
Telephone	2360	F01861	541	550	10	yes*	
Pat No Contact	none	F00429	551	551	1	yes*	
Follow-Up Contact--Name	2394	F05298	552	611	60	yes*	
Follow-Up Contact--No&St	2392	F05299	612	671	60	yes*	
Follow-Up Contact--Suppl	2393	F05300	672	731	60	yes*	
Follow-Up Contact--City	1842	F05276	732	781	50	yes*	
Follow-Up Contact--State	1844	F05277	782	783	2	yes*	
Follow-Up Contact--Postal	1846	F05278	784	792	9	yes*	
Reserved	none	none	793	803	11		
End of Record [.]	none	none	804	804	1	yes, gen by facility	

Appendix D: Deletion Record Layout

Appendix D Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Len	CCR Required from Reporting Facility Software	Comments for 2011 and NAACCR v12.1
Record Type [D]	10	none	1	1	1	yes, gen by facility	
Record Version [I]	none	none	2	2	1	yes, gen by facility	
Reporting Facility	540	F01683	3	12	10	yes	
Coding Proc	none	F00115	13	14	2	yes, gen by facility	
Accession Number--Hosp	550	F00016	15	23	9	yes	
Sequence Number Hospital	560	F00005	24	25	2	yes	
Hospital Tumor Number CCR	none	F00127	26	27	2	yes, gen by facility	
Hosp Pat Number	none	F02516	28	39	12	yes, gen by facility	
Patient ID Number	20	F00004	40	47	8	yes*	
Tumor Record Number	60	F00137	48	49	2	yes*	
Medical Record Number [Len 12]	none	F01049	50	61	12	yes*	
Social Security Number	2320	F00007	62	70	9	yes*	
SSN Suffix	none	F00147	71	72	2	yes*	
Name--Last	2230	F00008	73	112	40	yes	
Name--First	2240	F00009	113	152	40	yes	
Date of Birth	240	F00019	153	160	8	yes	
Date of Birth Flag	241	F05497	161	162	2	yes	
Sex	220	F00022	163	163	1	yes	
Primary Site	400	F00152	164	167	4	yes	
Laterality	410	F00032	168	168	1	yes	
Histology (92-00) ICD-O-2	420	F02501	169	172	4	yes	
Behavior (92-00) ICD-O-2	430	F00164	173	173	1	yes	
Date of Diagnosis	390	F00029	174	181	8	yes	
Date of Diagnosis Flag	391	F05499	182	183	2	yes	
Histologic Type - ICD-O-3	522	F02502	184	187	4	yes	

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Appendix D Data Item Name	NAACCR Identifier	CCR Identifier	Col Start	Col End	Len	CCR Required from Reporting Facility Software	Comments for 2011 and NAACCR v12.1
Behavior Code - ICD-O-3	523	F02504	188	188	1	yes	
Transmit Vendor Version	none	F05438	189	198	10	yes, gen by facility	
Date of 1st Contact	580	F00024	199	206	8	yes	
Date of 1st Contact Flag	581	F05495	207	208	2	yes	
Text - Transaction Remarks	none	none	209	358	150	yes	
Reserved	none	none	359	367	9	res	
End of Record [.]	none	none	368	368	1	yes	