2016 DATA CHANGES

CALIFORNIA CANCER REGISTRY

Outline

- New Data Items
  - 3 New Tumor Size Fields
  - Mets at Diagnosis Fields
- Collaborative Stage
  - What's discontinued
  - Data items remaining
- Revised Data items
  - New AJCC categories
  - Examples TNM data entry 2015 vs 2016
- TNM Edits
- CCR Updates/Reminders
  - ICD-O-3
  - Reportability update for CCR
  - Visually Edited Data Items for 2016
  - 2016 Staging Requirements

New Data Item – Tumor Size Clinical

- Tumor Size ***Clinical*** *(SEER)*
  - Record largest ***clinical*** tumor size prior to any treatment, i.e., neoadjuvant therapy, or surgery, etc.
    - **Code the largest TS from PE, imaging, Bx, or other diagnostic procedure**

      Example:
      - Patient has a palpable 2.2 cm mass in the right breast. Bx confirms invasive ductal ca. Pathologic tumor size from surgical resection is 2.8 cm.
      - **Record Tumor Size Clinical as 022** (2.2cm=22mm)
    - If pretreatment clinical tumor size is not known, use code 999

New Data Item – Tumor Size Pathologic

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- Tumor Size ***Pathologic*** *(SEER)*
  - Record largest ***pathologic*** TS from surgical resection
    - **Even if patient received neoadjuvant therapy**

      Example:
      - Patient with 2.2 cm mass in right breast. Bx confirms invasive ductal ca. Patient receives preoperative combination chemo followed by surgical resection. Pathologic resection tumor size is 1.8 cm.
      - **Record Tumor Size Pathologic as 018** (18mm)
  - Information from a PE or imaging/radiographic techniques ***cannot*** be used to code Tumor size pathologic

New Data Item – Tumor Size Summary

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- Tumor Size ***Summary*** (NPCR/CoC)
  - When surgery is first definitive treatment
    - And NO neoadjuvant treatment received
    - **Record TS from surgical resection**
  - If neoadjuvant therapy preceded surgery
    - **Record largest pretreatment tumor size(i.e., clinical tumor size)**
    - Do not code size from pathologic specimen
    - If pretreatment tumor size is unknown, code 999
  - If no surgical resection performed
    - **Code TS from PE, imaging or other diagnostic workup (i.e., clinical tumor size)**

New Data Item – Tumor Size Summary

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Example 1:

- Patient with 2.2 cm mass right breast. Bx confirms invasive ductal ca. Patient undergoes lobectomy and pathologic tumor is 2.8 cm.
  - **Record Tumor Size Summary as 028 (28mm)**
    - Pathologic tumor size

Example 2*:*

- Patient with 2.2 cm mass right breast. FNA/bx confirms invasive ductal ca. Patient receives neoadjuvant chemo followed by lobectomy. Surgical resection pathologic tumor size is 2.8 cm.
  - **Record Tumor Size Summary as 022 (22mm)**
    - Clinical TS

New Data Items – Tumor Size

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- Reminder: Document information in text to support Tumor Size codes
- **For Complete Coding Guidelines refer to CCR Volume 1:**
  - Tumor Size Clinical
    - Section V.4.1.1 – placeholder for finalized SEER coding guidelines
  - Tumor Size Pathologic
    - Section V.4.1.2 – placeholder for finalized SEER coding guidelines
  - Tumor Size Summary
    - Section V.4.1.3 – Complete coding guidelines available
      - Additional reference 2016 FORDS Manual

New Data Items – Mets at Diagnosis

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- **Replace similarly named CS Mets at Dx data items.**
  - Mets at Diagnosis- Bone
  - Mets at Diagnosis- Brain
  - Mets at Diagnosis- Liver
  - Mets at Diagnosis- Lung
  - Mets at Diagnosis- Other
  - Mets at Diagnosis- Distant Lymph Node(s)

Codes:
0= None, no involvement
1=Yes, mets in this site
8=Not Applicable
9=Unknown

- Mets may be clinical or pathologic
- Mets may be solitary or multiple
- Code all fields whether or not patient had preoperative systemic therapy.

New Data Items – Mets at Diagnosis

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- **Mets at Diagnosis- Other**

  ***Some Examples*:**
  - Carcinomatosis
  - Bone *marrow*
  - Malignant pleural effusion
  - Peritoneum
  - Skin
  - Adrenal gland
- The "Mets at DX" fields are coded for all solid tumors, Kaposi sarcoma, Unknown Primary and Other and Ill-Defined primary sites.
- Refer to CCR Volume 1, Section V.4.2 for coding guidelines

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Collaborative Stage

Discontinued CS Items

Continuing Data Items

Discontinued CS Data Items for 2016

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- CS Tumor Size
- CS Extension
- CS Tumor Size/Ext Eval
- CS Lymph Nodes
- CS Lymph Nodes Eval
- CS Mets at DX
- CS Mets Eval
- CS Mets at DX Data Items
  - Bone, Brain, Liver, Lung

➢ **Still required for cases Dx 2004-2015**

Continuing Data Items for 2016

12

- Regional Nodes Examined
- Regional Nodes Positive
- If definition difference for “regional” lymph nodes between AJCC and SEER
  - ➢ **AJCC definition takes precedence**

Continuing Data Items for 2016

13

- Lymph-Vascular Invasion (presence or absence)
  - Required for ALL sites 2016 forward when available
    - Previously required for *all* Testis and Penis 2010 forward
- Surgical Margins
  - Required from all reporting sources when available
    - Previously only required for CoC
    - VE item for 2016

Codes:
0-No residual
1-Residual tumor, NOS
2-Microscopic residual tumor
3-Macroscopic residual tumor
7-Margins not evaluable
8-No primary surgery
9-Unknown not applicable

CS Site Specific Factors 2016

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- SSFs used to determine directly assigned AJCC TNM Stage
  - Example: Gleason score and PSA value
- SSFs with Prognostic significance
  - Example: ER/PR, HER2 for breast
- CoC requires same SSF's as collected in 2015

➢ **Refer to Appendix "Y" in Volume 1 for *CCR required* SSF's by primary site for 2016**

Appendix Y-Site Specific Factors 2016

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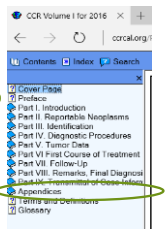
Navigate to CCR Volume 1:

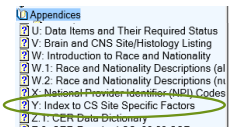
- http://www.ccrcal.org/Cancer_Reporting/Registrar_Resources/Reporting_Cancer_Cal.shtml

1.) Open Volume 1

2.) Note Appendices in Table of contents



3.) Open Appendix "Y"



Appendix Y- Site Specific Factors 2016

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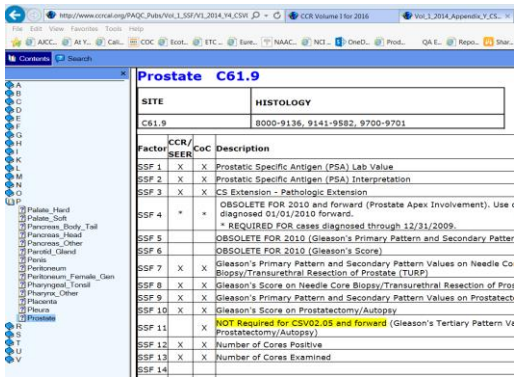
- Note Alpha List A-Z
- Choose "P"
- Select Prostate
- *Note columns for CCR, SEER or COC and their required SSFs*



Prostate C61.9

SITE	HISTOLOGY
C61.9	8000-9136, 9141-9582, 9700-9701

Factor	CCR/SEER	CoC	Description
SSF 1	X	X	Prostatic Specific Antigen (PSA) Lab Value
SSF 2	X	X	Prostatic Specific Antigen (PSA) Interpretation
SSF 3	X	X	CS Extension - Pathologic Extension
SSF 4	*	*	OBSOLETE FOR 2010 and forward (Prostate Apex Involvement). Use diagnosed 01/01/2010 forward. * REQUIRED FOR cases diagnosed through 12/31/2009.
SSF 5			OBSOLETE FOR 2010 (Gleason's Primary Pattern and Secondary Patter
SSF 6			OBSOLETE FOR 2010 (Gleason's Score)
SSF 7	X	X	Gleason's Primary Pattern and Secondary Pattern Values on Needle Co Biopsy/Transurethral Resection of Prostate (TURP)
SSF 8	X	X	Gleason's Score on Needle Core Biopsy/Transurethral Resection of Pro
SSF 9	X	X	Gleason's Primary Pattern and Secondary Pattern Values on Prostatect
SSF 10	X	X	Gleason's Score on Prostatectomy/Autopsy
SSF 11		X	NOT Required for CSV02.05 and forward (Gleason's Tertiary Pattern V Prostatectomy/Autopsy)
SSF 12	X	X	Number of Cores Positive
SSF 13	X	X	Number of Cores Examined
SSF 14			

17 Revised Data Items

- Clinical & Pathologic prefixes 'c' & 'p' added to TNM categories
- A few examples 2015 vs 2016
- Staged By-codes revised

New AJCC T, N, & M categories/allowable values

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- **New 'c' & 'p' prefixes added to existing T, N & M values**
- Registry TNM data fields/record layout problematic
  - **cT cN cM** – string of clinical categories only. Any value entered presumed to be *clinical or cT cN cM* in timeframe or criteria
  - **pT pN pM** – String of pathologic categories only. Any value entered presumed to be *pathologic or pT pN pM* in timeframe or criteria
- 2 common scenarios current record layout does not allow
  - cT + cN + **pM** = Clinical Stage
  - pT + pN + **cM** = Pathologic stage

New AJCC T, N, & M categories/allowable values

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- Not every clinical category will have a "p" option
- Not every pathologic category will have a "c" option
- Only categories appropriate per AJCC TNM Rules
- Must assign stage per AJCC TNM rules
- v2016 registry software
  - Provides a "pick-list" of allowable categories for T, N, M & Stage Group
    - Site & histology specific
      - "List" limited to categories applicable to assigned site & histology

Clinical "T" Categories

20

- Each value now has a 'c' prefix
- New '**pT**' categories available to assign in *Clinical Stage Composition*

Code	Definition
(blank)	Not recorded
cX	cTX
c0	cT0
pA	pTa
pIS	pTis
pISU	pTispu
pISD	pTispd
c1MI	cT1mi, cT1mic
c1	cT1
c1A	cT1a
c1A1	cT1a1
c1A2	cT1a2

Code	Definition
c1B	cT1b
c1B1	cT1b1
c1B2	cT1b2
c1C	cT1c
c1D	cT1d
c2	cT2
c2A	cT2a
c2A1	cT2a1
c2A2	cT2a2
c2B	cT2b
c2C	cT2c
c2D	cT2d

Code	Definition
c3	cT3
c3A	cT3a
c3B	cT3b
c3C	cT3c
c3D	cT3d
c4	cT4
c4A	cT4a
c4B	cT4b
c4C	cT4c
c4D	cT4d
c4E	cT4e
88	Not applicable

Clinical "N" Categories

21

- No 'pN' categories applicable for use in *Clinical Stage composition*

Code	Definition
(blank)	Not recorded
cX	cNX
c0	cN0
c0A	cN0a
c0B	cN0b
c1	cN1
c1A	cN1a

Code	Definition
c1B	cN1b
c1C	cN1c
c2	cN2
c2A	cN2a
c2B	cN2b
c2C	cN2c
c3	cN3

Code	Definition
c3A	cN3a
c3B	cN3b
c3C	cN3c
c4	cN4
88	Not applicable

Clinical "M" Categories

22

- New 'pM' categories available to assign in *Clinical Stage Composition*

Code	Definition
(blank)	Not recorded
c0	cM0
c0I+	cM0(i+)
c1	cM1
c1A	cM1a
c1B	cM1b
c1C	cM1c
c1D	cM1d
c1E	cM1e

Code	Definition
p1	pM1
p1A	pM1a
p1B	pM1b
p1C	pM1c
p1D	pM1d
p1E	pM1e
88	Not applicable

Pathologic "T" Categories

23

- **No 'cT'** categories applicable to assign in *Pathologic Stage composition*

Code	Definition
(blank)	Not recorded
pX	pTX
p0	pT0
pA	pTa
pIS	pTis
pISU	pTispu
pISD	pTispd
p1MI	pT1mi, pT1 mic
p1	pT1
p1A	pT1a
p1A1	pT1a1
p1A2	pT1a2

Code	Definition
p1B	pT1b
p1B1	pT1b1
p1B2	pT1b2
p1C	pT1c
p1D	pT1d
p2	pT2
p2A	pT2a
p2A1	pT2a1
p2A2	pT2a2
p2B	pT2b
p2C	pT2c
p2D	pT2d

Code	Definition
p3	pT3
p3A	pT3a
p3B	pT3b
p3C	pT3c
p3D	pT3d
p4	pT4
p4A	pT4a
p4B	pT4b
p4C	pT4c
p4D	pT4d
p4E	pT4e
88	Not applicable

Pathologic "N" Categories

24

- Only one **'cN0'** category applicable to assign in *Pathologic Stage composition*
- **Can only be used for in situ tumors in 2016!**

Code	Definition
(blank)	Not recorded
pX	pNX
c0	cN0
p0	pN0
p0I-	pN0i-
p0I+	pN0i+
p0M-	pN0m-
p0M+	pN0m+
p1MI	pN1mi

Code	Definition
p0A	pN0a
p0B	pN0b
p1	pN1
p1A	pN1a
p1B	pN1b
p1C	pN1c
p2	pN2
p2A	pN2a
p2B	pN2b

Code	Definition
p2C	pN2c
p3	pN3
p3A	pN3a
p3B	pN3b
p3C	pN3c
p4	pN4
88	Not applicable

Pathologic "M" Categories

25

- New **'cM'** categories available to assign in *Pathologic Stage composition*

Code	Definition
(blank)	Not recorded
c0	cM0
c0I+	cM0(i+)
p1	pM1
p1A	pM1a
p1B	pM1b

Code	Definition
p1C	pM1c
p1D	pM1d
p1E	pM1e
c1	cM1
c1A	cM1a
c1B	cM1b

Code	Definition
c1C	cM1c
c1D	cM1d
c1E	cM1e
88	Not applicable

Summary
2016 TNM 'c' & 'p' prefixes

26

Clinical Stage: Allowable "p'" values to assign CLINICAL Stage	
Clinical T categories now include:	pTA, pTIS, pTISU, pTISD
Clinical N categories with a "p"	**None**
Clinical M categories now include:	pM1, pM1A, pM1B, pM1C, pM1D, pM1E
Pathologic Stage: Allowable "c'" values to assign PATHOLOGIC Stage	
Pathologic T categories with a "c"	**None**
Pathologic N categories now include:	cN0 - Only for *in situ* tumors in 2016
Pathologic M categories now include:	cM0, cM0(i+), cM1, cM1A, cM1B, cM1c, cM1D, cM1E

TNM-2015 versus 2016 data entry

27

Now have cM0 to assign in Pathologic Stage composition

Bladder/AJCC Stage
Clin: cT2 cN0 cM0, Stage 2
Path: pT2a pN0 **cM0**, Stage 2

Blank indicates "Implied Value"

Registry Data Entry

2015

	T	N	M	Stage Group
Clin	T2	N0	M0	2
Path	T2A	N0	cM0	2

Must leave pM blank
-Path stage uses implied value of cM0

2016

	T	N	M	Stage Group
Clin	cT2	cN0	cM0	2
Path	pT2A	pN0	cM0	2

Allows entry of "cM0" in path stage per correct AJCC stage composition

TNM-2015 versus 2016 data entry

28

For an *in situ* tumor: Bx DCIS & Surgery DCIS-No LNs removed
Correct stage composition now possible

Breast/AJCC Stage
Clin: **pTis, cN0, cM0**, Stage 0
Path: **pTis, cN0, cM0**, Stage 0

Registry Data Entry

2015

	T	N	M	Stage Group
Clin	pTis	N0	M0	0
Path	Tis	cN0	cM0	0

Must use blanks (*implied values*) to correctly represent stage in record layout

2016

	T	N	M	Stage Group
Clin	pTis	cN0	cM0	0
Path	pTis	cN0	cM0	0

- pTis, cN0, cM0 no longer "blank"- have values to complete correct clinical & path stage composition

Special In situ rule per AJCC pg 12, table 1.8

TNM-2015 versus 2016 data entry

29

Now have cM1 to assign in Pathologic Stage composition

Breast
Clinical: cT2, cN0, cM1, Stage IV (**clinical** bone mets on CT)
Pathologic: pT3, pN1b, **cM1**, Stage IV

Registry Data Entry

2015

	T	N	M	Stage Group
Clin	T2	N0	M1	4
Path	T3	N1b	cM1	4

- Must leave **pM** data field blank to correctly represent stage in record layout
- Blank pM data field =implied value of **cM1**

2016

	T	N	M	Stage Group
Clin	cT2	cN0	cM1	4
Path	pT3	pN1b	cM1	4

- Can now complete path stage using "cM1"

TNM-2015 versus 2016 data entry

30

Now have pM1 to assign in Clinical Stage composition

Example of AJCC "pM1 rule"

Kidney /AJCC Stage
Clin: cT4, cN1, **pM1**, Stage IV
Path: cT4, cN1, **pM1**, Stage IV

- Bone Bx/pos mets on DX workup
- No Surgery

Registry Data Entry

2015

	T	N	M	Stage Group
Clin	T4	N1	pM1	4
Path	cT4	cN1	M1	4

- Must leave cM blank-implied value is pM1. Code pM1 in path M data field
- May apply "pM1 rule" to assign pathologic stage 4 w/o tumor resection regardless of "c" or "p" status of T and N.
- Allowed due to path proven mets.

2016

	T	N	M	Stage Group
Clin	cT4	cN1	pM1	4
Path	cT4	cN1	pM1	4

- Can now complete clinical stage using "pM1"
- But-Path stage pT & pN data fields still blank
- No cT or cN allowable values to code in the pT or pN data fields at this time-but stage composition valid per AJCC rules.

See page 11, Table 1.7 for pM1/Stage IV rule
Can assign path stage w/o tumor resection if path proven mets on DX workup

TNM- "Staged By"

31

- New Codes Added
- Code length now 2 digits
- Record the code that best reflects the person(s) who staged case
- Separate code assigned for Clinical Stage & Pathologic Stage

00	Not Staged
10	Physician, NOS, or physician type not specified in codes 11-15
11	Surgeon
12	Radiation Oncologist
13	Medical Oncologist
14	Pathologist
15	Multiple Physicians, Tumor Board, etc.
20	Cancer Registrar
30	Cancer Registrar and Physician
40	Nurse, Physician Assistant, or other non-physician medical staff
50	Staging assigned at another facility
60	Staging by Central Registry
88	Case is no eligible for staging
99	Staged but unknown who assigned stage

2016 TNM Edits

32

- TNM edits for 2016
  - Volume of TNM edits has increased
  - Complexity of TNM edits has increased
  - Edits compare related data items to TNM stage assigned
    - SSFs
    - Tumor Size
    - Surgery codes
    - Stage Group against combo of TNM assigned
    - Prognostic factors needed for staging
    - Etc.

2016 TNM Edits

33

- Data conflicts will generate a TNM Edit

Examples:

- Regional LNs positive=0
- Path TNM coded as pN2

Conflict! Either LNs positive or pN is miscoded

Breast (no neoadjuvant rx)

- Tumor Size Summary coded 20mm(2.0cm), but
- pT3 assigned = TS of 50mm(5.0cm)

Conflict! These should match

Prostate

- TURP/Surgery Code 23
- Pathologic TNM stage coded: pT2a pN0 cM0 Stage I

Conflict! Surgery Code 23 does not meet criteria to assign a pathologic stage

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Updates / Reminders

Reportability
Visually Edited Fields
ICD-O-3
Staging

Reportability

35

- CCR Reportability Change
  - Borderline ovarian tumors
    - CCR will no longer collect
    - Effective 1/1/2016 forward

Visually Edited Items for 2016

36

- *New* Visually Edited items
  - RX Summ-Surgical Margins
  - Tumor Size Clinical
  - Tumor Size Pathologic
  - Tumor Size Summary
  - Mets at Dx
    - Bone
    - Brain
    - Distant LN
    - Liver
    - Lung,
    - Other

- Feedback only 7/1/16 to 12/31/16
- Not counted in accuracy rate

Counted as a single discrepancy at end of "feedback" only period

Visually Edited Items for 2016

37

TNM data fields
- T
- N
- M
- Stage Group
- Descriptor

- Original feedback timeline 7/1/2015-6/30/2016
- Due to introduction of “c” & “p” prefixes
- **Feedback only Extended to 12/31/16**

- Please see CCR website under Visual Editing Standards for complete list of VE items and special notes

2015 ICD-0-3 “New codes & Terms” Continued Implementation Delay

38

- Update
  - Continued postponement for use of 2015 ICD-O-3 “new codes/terms” in effect…..
    - **Do not use for 2015 cases**
    - **Do not use for 2016 cases**

- Please refer to and continue to use the Histology Code Crosswalk:
  - **Volume 1, Section V.3 - Attachment A**

2015 ICD-0-3 “New codes & Terms” Implementation Delayed

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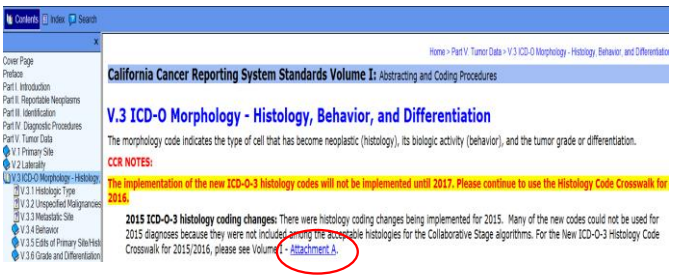
Volume 1, Section V.3 - Attachment A



2015 ICD-0-3 "New codes & Terms" Implementation Delayed

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Volume I: Attachment A

New ICD-O-3 Histology Code Crosswalk for 2015/2016:
The following table is an excerpt from the NAACCR Guidelines for ICD-O-3 Update Implementation (December 2013). The complete document can be found on the NAACCR web site: Guidelines for ICD-O-3 Update Implementation

ICD-O-3 Change	New ICD-O-3 Histology Code (do NOT use these codes in 2015/2016)	Description	Comment	Use this Histology Code in 2015/2016
New term and code	8158/1	Endocrine tumor, functioning, NOS	Not reportable	
New related term	8158/1	ACTH-producing tumor	Not reportable	
New term and code	8163/3	Pancreatobiliary-type carcinoma (C24.1)	DO NOT use new code	8255/3
New synonym	8163/3	Adenocarcinoma, pancreatobiliary-type (C24.1)	DO NOT use new code	8255/3
New term	8213/3	Serrated adenocarcinoma		8213/3*
New code and term	8265/3	Micropapillary carcinoma, NOS (C18._, C19.9, C20.9)	DO NOT use new code	8507/3*
New code and term	8480/1	Low grade appendiceal mucinous neoplasm (C18.1)	Not reportable	
New term and code	8552/3	Mixed acinar ductal carcinoma	DO NOT use new code	8523/3
New term and code	8975/1	Calcifying nested epithelial stromal tumor (C22.0)	Not reportable	
New term and code	9395/3	Papillary tumor of the pineal region	DO NOT use new code	9361/3*
New term and code	9425/3	Pilomyxoid astrocytoma	DO NOT use new code	9421/3

California Cancer Registry **Staging Requirements 2016**

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Required from all reporting sources:

- Directly assigned TNM stage, both clinical & pathologic
  - Utilizing **AJCC TNM 7th Edition**
- Directly assigned SEER Summary Stage 2000
- CCR required Collaborative Stage SSFs
  - *May differ from CoC*
  - **Refer to CCR Volume 1, Appendix Y**
- For cases Dx 2004-2015 *all previously required CS codes remain in effect* utilizing CS v02.05

42 Contact Information

Donna M. Hansen, CTR
Auditor/Education Training Coordinator
California Cancer Registry
916-731-2543
Email: dhansen@ccr.ca.gov