2014 Data Changes

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Overview

- New Data Items
- Reportability Clarifications
- New Coding Rules Grade
- ICD-O-3 Changes
- Collaborative Stage vo2o5

New Data Items for 2014

No New Data Items

Reportability Clarifications

Reportability Clarifications

- Positive Urine Cytology is reportable
 - For cases diagnosed 2013 forward
 - Code Primary Site to C68.9 in the absence of any other information
 - **EXCEPTION:** If a subsequent biopsy of a urinary site is negative, **do not** report the case

Reportability Clarifications

- NOT Reportable
 - Follicular Lymphoma In Situ
 - SEER SINQ @20130042
 - 2012 Hematopoietic Manual under Reportability
 - In situ duct adenocarcinoma of the prostate
 - AIN III (8077) arising in perianal skin (C445)

New Coding Rules - Grade

Updated Grade Rules

 New Grade rules in effect for cases diagnosed 2014 and later

 Replaces all old rules for cases diagnosed 2014 and later

Updated Grade Rules

- Rules are hierarchical
 - Begin at Rule #1 and read down the list.
 Stop at the first rule that applies
- Rules are broken into two separate sections
 - Solid Tumors
 - Hematopoietic and Lymphoid Neoplasms

Updated Grade Rules

- Hematopoietic & Lymphoid Neoplasms
 - No Changes
 - Reminder: Determine the Cell Indicator by applying the "Grade of Tumor Rules" within the current <u>Hematopoietic and</u> <u>Lymphoid Neoplasm Manual</u>

- Solid Tumors
 - New format of rules covering solid tumors
 - Nine consolidated hierarchical rules
 - Rules 1 5 are self explanatory and are not covered in this presentation
 - Rules 6 9 will be reviewed

- Retained the three separate grade systems
 - 2, 3, and 4 grade systems
- Retained Special coding systems for
 - Breast, Kidney Parenchyma, Soft Tissue, and Prostate
 - Specific rules unchanged

Rule 6

 Code the grade form the special grade system if applicable

 If special grade system cannot be applied move to next rule, #7

Updated Grade Rules – Solid Tumors Special Grade Systems Rules

- There are four special grade systems
 - Breast
 - Kidney Parenchyma
 - Soft Tissue
 - Prostate

Special Coding System – Breast

Updated Grade Rules – Solid Tumors Special Grade Systems Rules - Breast

- Bloom Richardson (BR)
- No changes
- Rules organized in hierarchical order
- If only a grade is stated (Grade 1 or Grade 3)
 - DO NOT assume stated grade is BR or Nottingham
 - Use the terminology to code grade

Special Coding System – Kidney Parenchyma

Updated Grade Rules – Solid Tumors Special Grade Systems Rules - Kidney

 Furman Nuclear Grade should be used for Kidney Parenchyma Only.

DO NOT Use for Kidney Renal Pelvis

Updated Grade Rules – Solid Tumors Special Grade Systems Rules - Kidney

- Fuhrman nuclear grade is a four-grade system based on
 - nuclear diameter and shape,
 - the prominence of nucleoli, and
 - the presence of chromatin clumping in the highest grade.

Updated Grade Rules – Solid Tumors Special Grade Systems Rules - Kidney

Description	Grade Code		
Grade 1	1		
Grade 2	2		
Grade 3	3		
Grade 4	4		

Special Coding System – Soft Tissue

- For use in the following sites only:
 - SoftTissue
 - HeartMediastinum
 - Peritoneum
 - Retroperitoneum

- The grading system of the French Federation of Cancer Centers Sarcoma Group (FNCLCC) is the preferred system.
- Record the grade from any three-grade sarcoma grading system the pathologist uses.
- For terms such as "well differentiated" or "poorly differentiated," go to Coding for Solid Tumors #8.

- In some cases, especially for needle biopsies, grade may be specified only as "low grade" or "high grade."
 - The numeric grade takes precedence over "low grade" or "high grade"

Description	Grade Code
Specified as Grade 1 [of 3]	2
Specified as Grade 2 [of 3]	3
Specified as Grade 3 [of 3]	4
Grade stated as low grade, NOS	2
Grade stated as high grade, NOS	4

Special Coding System – Prostate

- Gleason Score 5 and 6 has been reclassified
 - Now considered Grade 1 (Well Differentiated)
- Gleason Score 7 has been reclassified, again
 - Now considered Grade 2 (Moderately Differentiated)

Updated Grade Rules – Solid Tumors Special Grade Systems Rules - Prostate

Prostate			
Gleason score	Description		
Gleason score	Grade Code	AJCC 7th	
2	1	G1	
3	1	G1	
4	1	G1	
5	1	G1	
6	1	G1	
7	2	G ₂	
8	3	G ₃	
9	3	G ₃	
10	3	G ₃	

If none of these systems apply, return to Grade rule sets and continue with Rule #7

Rule 7

- Use the Two-, Three-, or Four- grade system
 - Captured in 7a, 7b, and 7c respectfully

Rule 7a: Two-grade system

Term	Description	Grade Code	Exception for Breast and Prostate Grade Code
1/2, I/II	Low grade	2	1
2/2, II/II	High grade	4	3

NOTE: In transitional cell carcinoma for bladder, the terminology "high grade TCC" and "low grade TCC" are coded in the two-grade system

Rule 7b: Three-grade system

Term	Description	Grade Code	Exception for Breast and Prostate Grade Code
1/3	Low grade	2	1
2/3	Intermediate grade	3	2
3/3	High grade	4	3

Rule 7c: Four-grade system

Term	Description	Grade Code
1/4	Grade I; Well differentiated	1
2/4	Grade II; Moderately differentiated	2
3/4	Grade III; Poorly differentiated	3
4/4	Grade IV; Undifferentiated	4

Rule 8

 Terminology: use the 'Description' column or the 'Grade' column to code grade. Breast & Prostate use the same grade code with a few noted exceptions.

See Table – next couple slides

Description	Grade	Assigned Grade Code	Exception for Breast and Prostate Grade Code
Differentiated, NOS	I	1	
Well differentiated	I	1	
Only stated as 'Grade I'	I	1	
Fairly well differentiated	II	2	
Intermediate differentiation	II	2	
Low grade	I-II	2	1
Mid differentiated	II	2	
Moderately differentiated	II	2	
Moderately well differentiated	II	2	
Partially differentiated	II	2	

Description	Grade	Assigned Grade Code	Exception for Breast and Prostate Grade Code
Partially well differentiated	I-II	2	1
Relatively or generally well differentiated	II	2	
Only stated as 'Grade II'	II	2	
Medium grade, intermediate grade	II-III	3	2
Moderately poorly differentiated	III	3	
Moderately undifferentiated	III	3	
Poorly differentiated	III	3	
Relatively poorly differentiated	III	3	
Relatively undifferentiated	III	3	
Slightly differentiated	III	3	
Dedifferentiated	III	3	
Only stated as 'Grade III'	III	3	
High grade	III-IV	4	3
Undifferentiated, anaplastic, not differentiated	IV	4	
Only stated as 'Grade IV'	IV	4	
Non-high grade	nges Presentation	9 CDIC	

Updated Grade Rules – Solid Tumors

Rule 9

 Use Code 9 (Unknown) if no description fits or grade is unknown prior to neoadjuvant therapy

- Effective with cases <u>diagnosed</u> January 1, 2014 and later
- 36 New <u>terms</u> added
 - 21 malignant (/3) terms
 - 1 borderline (/1) term of CNS
 - 14 benign (/o) or uncertain malignancy
 (/1) terms

- Of the 36 new terms
 - 5 are "preferred" terms
 - 3 are malignant terms
 - There are many new "related" and "synonyms" terms

Examples of new preferred terms

- 8150/3 Pancreatic endocrine tumor, malignant (C25._)
 - 8150/3 Islet cell tumor, NOS (C25._)
- 8244/3 Mixed adenoneuroendocrine carcinoma
 - 8244/3 Composite carcinoid

ICD-O-3 Changes Examples of new preferred terms

- 8154/3 Mixed pancreatic endocrine and exocrine tumor, malignant (C25._)
 - Mixed islet cell and exocrine adenocarcinoma (C25._)

- For detailed listing of the changes
 - Journal of Registry Management
 - Fall 2013 Article by April Fritz
 - NAACCR website
 - Guidelines for ICD-O-3 Update Implementation
 - CCR PAQC Data Alert 2013-017

Collaborative Stage vo205 Changes

Collaborative Stage v0205

- CS 02.05 Changes
 - New Notes 7
 - Updated Notes 38
 - New Codes NONE
 - Updated Code Descriptions 59
- Discontinued SSF's
 - 109 SSF's in 61 schemas are no longer required by CCR and SEER
 - CoC still requires these SSF's to be reported

Collaborative Stage vo205 Changes

Part 1 Section 1 and Section 2

New Instruction

- Recording Lab Tests and Tumor Markers in SSF's
 - (NEW) Note 1 Timing for Recording Laboratory Tests
 - Unless stated otherwise, record only tests results obtained:
 - A. before any cancer-directed treatment is given, **and**
 - B. no earlier than approximately three months before diagnosis.

- Intrahepatic Bile Ducts, Perihilar Bile Ducts
 - SSF 10 (Tumor Growth Pattern)
 - Added clarification that information can be obtained from radiology, surgery, or pathology reports

- Esophagus and Esophagus GE Junction
 - CS Regional Lymph Nodes and CS Mets at Diagnosis
 - Information added to Part 1 Section 2 and notes were added clarifying regional nodes.
 - Some nodal chains in this large area are partially regional and partially distant

- Prostate
 - SSF 7 & SSF 8
 - Revised coding information to include TURB

- Prostate
- CS SSF 8 and SSF 10
 - Example for Gleason 4 has been corrected to reflect correct code for Gleason Score
 - Gleason Score 4 (SSF 8) is to be coded 999
 - (assume a number in the range 2 to 5 is a pattern and code the total score to 999)

- Prostate
- CS SSF 8 and SSF 10
 - Example for Gleason 7 has been updated to provide a rationale for the code
 - Gleason Score 7 (SSF 8) is to be coded 007
 - (assume a number in the range 6-10 is a score and code as stated)

- Brain, CNS Other, Intracranial Gland
- SSF 1 (WHO Grade Classification)
 - Clarified that a WHO grade can only be assigned from pathologic review of tissue
 - Code the WHO grade as documented in the pathology report
 - Do not convert terminology such as well-, moderately-, or poorly differentiated to code this field.

- Prostate
- CS Extension (Clinical Extension)
 - Clarification added to Notes 3A, 3B, 3C, and codes 100 – 240 that only physical exam is used to determine an inapparent tumor versus apparent tumor unless the managing clinician/urologist considers the imaging reliable for staging

Collaborative Stage vo205 Changes Part 2 – Site Specific Schemas

CS Clarifications and Corrections New Instruction

- Bladder
 - SSF 2 (Size of Metastasis in Lymph Nodes)
 - Note 1 has been added indicating common iliac nodes are excluded when determining size of metastasis in lymph nodes.

- Colon
 - CS Lymph Nodes
 - Note 5 corrected to reference code 220
 - Code 210: Added periappendiceal lymph nodes as a regional chain for cecal primaries

- Esophagus
 - CS Extension
 - Added Note 4 describing the different possible meaning of the phrase "through the muscularis propria" and how to apply this to the extension codes

- Esophagus
 - SSF #1 (Clinical Assessment of Regional Lymph Nodes)
 - Added Note 1 describing "clinically evident lymph nodes"

HemeRetic

- CS Extension
 - Added Note 2 indicating not to code lymph node involvement for the histologies listed in code 100
 - If there is lymph node involvement for any of these histologies, ignore this information and:
 - Code 100 for localized disease, or
 - Code 800 for systemic disease

- Kidney Parenchyma
 - CS Extension
 - Code 750 clarified Liver and Spleen involvement

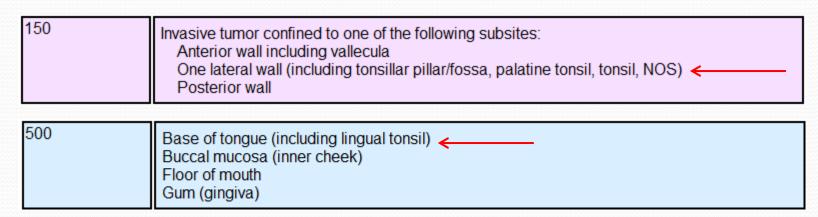
	Liver from right kidney Spleen from left kidney Stomach
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- Lung
 - SSF 1 (Separate Tumor Nodules Ipsilateral Lung)
 - Note 4 added to clarify that in situ tumors are to be coded ooo for SSF1

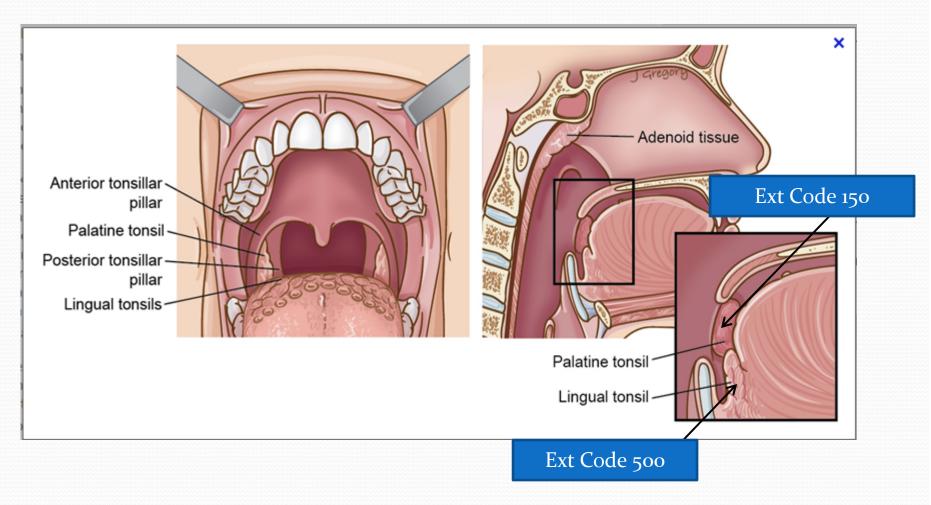
- Mycosis Fungoides
 - CS Tumor Size
 - Note added to clarify that size of tumor only is coded, not size of patches, papules, or plaques

- Nasopharynx
 - CS Lymph Nodes
 - Level IV nodes have been removed from the description for code 130 and are listed for code 650 only.
 - Level V nodes (NOS) added to the definition of code 115

- Oropharynx
 - CS Extension
 - Codes 150 and 500 updated to specify coding for tonsillar involvement



Tonsillar Pillar and Tonsils



- Pancreas Body Tail
 - Two Notes added for clarification regarding how to code mesenteric, NOS and porta hepatic lymph nodes.
 - Notes 3 & 4 (identical) added in both CS Lymph Nodes and CS Mets at Diagnosis

- Prostate
 - CS Tumor Size/Ext Eval
 - Note 2 expanded to add clarification on how to correctly use the CS Tumor Size/Ext Eval codes for this site
 - Note 4 (0204) was removed and remaining notes renumbered

- Prostate
 - CS Extension
 - Note 7 added to address incidental finding of prostate cancer on prostatectomy performed for other reasons
 - Note 4 in 0205 was Note 3E in 0204
 - Notes renumbered beginning with note 4

- Prostate
 - CS SSF 9 (Gleason Primary Pattern Value on Prost), CS SSF 10 (Gleason Score on Prost)
 - Code 999 definition modified to include "no residual disease"

