

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

Errata – 22nd Edition
May 2023

Please make note of the following changes to your California Cancer Reporting System Standards, Volume I. These errata and clarifications are effective from the date listed in the sections below. **Volume I will be updated in the next release, scheduled for 2023.**

Quick Look - Updates to Volume I

Section/Page /Reason /Date Added

<u>VOLI - Section #</u>	<u>Data Item or Volume I Topic</u>	<u>Reason for Revision</u>	<u>Date Added to Errata</u>
II.1	CCR Reportability Guide-Reportable	Correction of reportable codes - Thyroid Correction of description error - Prostate Revised description for - High Grade Squamous Intraepithelial Lesion Correction of reportable codes-Hemangioma, NOS Added AIN II, VIN II and VAIN II (CCR 2022+; SEER 2021+)	06/2022 07/2022 08/2022 12/2022
II.1.1	CCR Reportability Guide Non-Reportable	Correction of non-reportable codes	06/2022
V.2.1	Laterality	Added Code C444 to Paired Site table	06/2022
V.3.3.1	In-Situ Coding	Revised description for - High Grade Squamous Intraepithelial Lesion Added AIN II, VIN II and VAIN II	07/2022 12/2022
V.8	Terms Indicating In-Situ for Staging	Revised description for - High Grade Squamous Intraepithelial Lesion Added AIN II, VIN II and VAIN II	07/2022 12/2022
Appendix T	Text Documentation Guidelines ▪ Text-Radiation	Correction of error-Text clarification	07/2022
V.5.2	Tumor Size-Pathologic	Correction of coding instructions; added missing note regarding neoadjuvant therapy	05/2023

SECTION CHANGES

II.1 CCR Reportability Guide-Reportable

- ✓ Removed the following entry from the Reportable Diagnosis list. This is being moved to II.1.1 CCR Reportability Guide - Non-Reportable or Historically Reportable. This data item is no longer reportable effective 01/01/2021.
 - **Thyroid (C739)**
 - Non-invasive follicular thyroid neoplasm with papillary like nuclear features is a synonym for encapsulated follicular variant of papillary thyroid carcinoma, 8343/3, dx 01/01/2017 +
 - The behavior code was initially incorrectly added to volume I as /3, and will be updated to /2 when moved (see next change).

- ✓ Updated reportability instruction for Prostate (C619) to reference PI-RADS 4 or PI-RADS 5 from LR-4 & LR-5 (LR-4 & LR-5 are for liver primaries).
- ✓ Updated the description in Site-Specific Terms Indicating In-Situ Behavior section to “High grade squamous intraepithelial lesion rather than invasion. This affects the following sites in the list:
 - Anus
 - Vagina
 - Vulva
- ✓ Updated the following histology to the Reportable Diagnoses list:
 - Hemangioma, NOS 9210/0. The histology was incorrectly added to volume I as 9210/0 and will be updated to 9121/0.
- ✓ Added the following terms to the Site-Specific Terms Indicating In-Situ Behavior section:
 - Anal intraepithelial neoplasia II (AIN II), 8077/2, dx 01/01/2022+
 - Vaginal intraepithelial neoplasia II (VAIN II), 8077/2, dx 01/01/2022+
 - Vulvar intraepithelial neoplasia II (VIN II), 8077/2, dx 01/01/2022+

II.1.1 CCR Reportability Guide-Non-Reportable or Historically Reportable

- ✓ Adding the following entry to the Non-Reportable or Historically Reportable Diagnoses list.

Thyroid (C739)

 - Non-invasive follicular thyroid neoplasm with papillary like nuclear features is a synonym for encapsulated follicular variant of papillary thyroid carcinoma, 8343/2
 - Reportable with behavior /2 between 01/01/2017 through 12/31/2020.
 - The ICD0 3.2 histology changed to 8349/1 in the 2021 histology updates, making this diagnosis no longer reportable for cases diagnosed 01/01/2021 and forward.
- ✓ Correcting behavior to /2 from /3.
- ✓ Updating reportable diagnosis date to 01/01/2017-12/31/2020 from 01/01/2017 and forward.
- ✓ Adding note for histology change and that the diagnosis is no longer reportable (see second bullet under Thyroid above, for this page update).

V.2 Laterality – Paired Sites

- ✓ Added Site Code C444 to Paired Site list. This update was inadvertently omitted in the 2022 Volume I release. This is effective for cases diagnosed 01/01/2022 and forward.

V.3.3.1 In-Situ Coding

- ✓ Updated the description in Site-Specific Terms Indicating In-Situ Behavior section to “High grade squamous intraepithelial lesion rather than invasion. This affects the following sites in the list:
 - Anus
 - Vagina
 - Vulva
- ✓ Added the following terms to the Site-Specific Terms Indicating In-Situ Behavior section:
 - Anal intraepithelial neoplasia II (AIN II), dx 01/01/2022+
 - Vaginal intraepithelial neoplasia II (VAIN II), dx 01/01/2022+
 - Vulvar intraepithelial neoplasia II (VIN II), dx 01/01/2022+

V.8 Terms indicating In-Situ for Staging

- ✓ Updated the description in Site-Specific Terms Indicating In-Situ Behavior section to “High grade squamous intraepithelial lesion rather than invasion. This affects the following sites in the list:
 - Anus
 - Vagina
 - Vulva
- ✓ Added the following terms to the Site-Specific Terms Indicating In-Situ Behavior section:
 - Anal intraepithelial neoplasia II (AIN II), 8077/2, dx 01/01/2022+
 - Vaginal intraepithelial neoplasia II (VAIN II), 8077/2, dx 01/01/2022+
 - Vulvar intraepithelial neoplasia II (VIN II), 8077/2, dx 01/01/2022+

Appendix T

- ✓ Text – Radiation Therapy:
 - Replaced existing bullet text:
 - Your software vendor may allow text to be entered for *each* phase, but only text from the *first* phase will be transmitted to the CCR and used during Visual Editing and other QC processes to validate coded values are correct.
 - Added new bullet with the following text:
 - Your software vendor may allow text to be entered for *each* phase, but only one text field for all phases will be transmitted to the CCR and used during Visual Editing and other QC processes to validate coded values are correct. Documenting all the information in Phase I text eliminates the possibility of some text being “lost” when the case is transmitted to CCR

V.5.2 Tumor Size Pathologic

- ✓ Revised coding instructions for Tumor Size Pathologic
 - Replaced existing bullet text:
 - The pathologic tumor size is recorded from the surgical resection specimen when surgery (including after neoadjuvant therapy) is administered as part of the first course of treatment.
 - Added new bullet with the following text:
 - The pathologic tumor size is recorded from the surgical resection specimen when surgery is administered as part of the first course of treatment.
- ✓ Added clarification note for use of code 000 when no residual tumor is found in surgical specimen
 - Code 000 when:
 - No residual tumor found
 - **Note:** This also includes when neoadjuvant therapy has been administered and the surgical resection shows no residual tumor. For all other scenarios where neoadjuvant therapy was given, see code 999.