

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

SUMMARY OF YEAR 2026 DATA CHANGES

This document provides a summary of data changes for 2026 for hospitals, abstracting vendors, and regional registry data collectors. The updated Volume I for 2026 will be available as soon as possible, after receiving standard setter requirements and documentation. This document is divided into sections – Additions (New Data Items), Changes (Revised Data Items), Retired (Retired Data Items), and Other Data Item Updates.

NAACCR ADDITIONS (New Data Items):

NAACCR Data Standards and Data Dictionary, version 26 includes 8 new data items: 3 SSDIs, 1 demographic item, and 4 Geocoding/Census items. NAACCR Data Standards and Data Dictionary, version 26 as follows:

- 3 Site-Specific Data Items (SSDIs):
 - Spread Through Air Spaces (STAS) [NAACCR #1176]
 - Residual Cancer Burden [NAACCR #1178]
 - Residual Cancer Burden Class [NAACCR #1179]
- 1 New Demographic Data Item:
 - Sex Assigned at Birth [NAACCR #225]
IMPORTANT NOTE: With the 2026 data changes, the CCR is transitioning Item #220 (Sex) to a state-specific data item. We will continue to use and collect Item #220 as is, and convert to the new Sex Assigned at Birth data item at the central level.
- 4 Derived Geocoding and Census Data Items:
 - Geocoding Accuracy Score [NAACCR #331]
 - Geocoding Accuracy Type [NAACCR #332]
 - RUCA 2020 [NAACCR #342]
 - URIC 2020 [NAACCR #347]

Summary details of the above new data items are outlined below; for complete details refer to [NAACCR Data Standards and Data Dictionary](#), version 26.

Site Specific Data Items (SSDIs):

Three new Site-Specific Data Items, beginning with cases diagnosed 1/1/2026 have been added to the SSDI Manual, version 3.3. For additional information and coding instructions, please see the [SSDI Manual](#) located on the NAACCR website. The list of new SSDI's and applicable schemas are listed below for your convenience.

Site-Specific Data Items (SSDIs) - New Items List

<u>NAACCR Name</u>	<u>Source of Standard</u>	<u>Schema</u>	<u>NAACCR Item #</u>	<u>Field Length</u>
Spread Through Air Spaces (STAS) (Stage/Prognostic Factors) Micropapillary clusters, solid nests, or single cells of tumor extending beyond the edge of the tumor into the air spaces of the surrounding lung parenchyma	NAACCR	Lung (09360)	1176	1
Residual Cancer Burden (Stage/Prognostic Factors) Measures the amount of cancer remaining in the breast and the regional lymph nodes after neoadjuvant therapy and surgical resection	NAACCR	Breast (00480)	1178	5
Residual Cancer Burden Class (Stage/Prognostic Factors) Score that measures the amount of cancer remaining in the breast and the regional lymph nodes after neoadjuvant therapy and surgical resection	NAACCR	Breast (00480)	1179	1

Geocoding/Census - New Items List (derived)

<u>NAACCR Name</u>	<u>Source of Standard</u>	<u>NAACCR Item #</u>	<u>Field Length</u>
Geocoding Accuracy Score	NAACCR	331	4
Geocoding Accuracy Type	NAACCR	332	21
RUCA 2020	NAACCR	342	1
URIC 2020	NAACCR	347	1

Demographics - New Items List

<u>NAACCR Name</u>	<u>Source of Standard</u>	<u>NAACCR Item #</u>	<u>Field Length</u>
Sex Assigned at Birth (CCR will derive at the central level)	NAACCR	225	1

NAACCR CHANGES (Revised Data Items):

Listed below are revisions made in the NAACCR Data Standards and Data Dictionary for 2026. It has been separated into General Changes and Specific Changes.

General Changes:

1. **IMPORTANT** note added to NAACCR Required Status Table:

Retired data items are not included in the Required Status Table. A data item that is retired remains in the NAACCR Data Dictionary as a retired data item and the data item number is not reused. Retired means that the data item is not maintained by a standard setting agency and is no longer in the data transmission layout (no longer transmitted in NAACCR data files from the effective date forward); however, it does not impact the data previously collected and stored in a registry database. Data collected in retired data items SHOULD NOT be deleted from registry databases without prior approval from the registries. Retired data items are removed from the NAACCR Base Dictionary. Registries that would like to continue collecting data of a retired data item can add the data item to their user-defined dictionary.

2. Reference manual links have been updated throughout the NAACCR Data Standards and Data Dictionary.
3. The [*NAACCR Recommended Abbreviations for Abstractors*](#) lists have been updated for 2026.

Specific Changes:

Name Changes:

No data item name changes for 2026.

Case Transmittal Changes:

- **Microsatellite Instability [NAACCR# 3890]:**
This data item is an existing SSDI for the Colon and Rectum (00200) schema, and is now added to the Corpus Carcinoma and Carcinosarcoma schema (00530). For Corpus Carcinoma and Carcinosarcoma cases diagnosed prior to January 1, 2026, this item must be left blank.
- **Schema Discriminator 1 [NAACCR# 3926]:**
Nasopharynx and Oropharynx schemas were revised to reflect the new names of the schemas and to limit the use of this discriminator with C11.1 to diagnosis years 2018-2024. This field was removed from Nasopharynx V9 (09090) which only includes cases diagnosed on January 1, 2025, or later.
- **Schema Discriminator 2 [NAACCR# 3927]:**
Oropharynx schemas were revised to reflect the new names of the schemas and to include the Oropharynx HPV-Associated V9 schema in the validation table Schema ID column.
- **Percent Necrosis Post Neoadjuvant [NAACCR# 3908]:**
This data item for the Bone schemas (00381, 00382, 00382, 00383) will no longer be required by any standard setters as of January 1, 2026.
- **Oncotype Dx Risk Level-Invasive [NAACCR# 3906] and Oncotype Dx Risk Level – DCIS [NAACCR# 3905]:**
These data items for the Breast Schema (00480) will no longer be required by any standard setters as of January 1, 2026.
- To streamline maintenance, **several SSDIs in the Head and Neck related schemas** were adjusted to share the same validation table and notes wherever they are included. These SSDIs include:
 - Extranodal Extension Head and Neck Clinical [NAACCR# 3831]
 - Extranodal Extension Head and Neck Pathological [NAACCR# 3832]

- LN Size [NAACCR# 3883]
- LN Head and Neck Levels I-III [NAACCR# 3876]
- LN Head and Neck Levels IV-V [NAACCR# 3877]
- LN Head and Neck Levels VI-VII [NAACCR# 3878]
- LN Head and Neck Other [NAACCR# 3879]
- **RUCA 2000 [NAACCR# 339], RUCA 2010 [NAACCR# 341], URIC 2000 [NAACCR# 345] and URIC 2010 [NAACCR# 346]:**
Derived using either NAACCR*Prep for the Call for Data or File*Pro. The NAACCR data dictionary was updated to include all possible derived flavors of null codes (added codes A through D).

Coding System Data Changes – Allowable Values - New Codes Added:

- **NAACCR Record Version [NAACCR #50]:**
 - Code 260 added for 2026 version 26.
- **Morph Coding Sys--Current [NAACCR #470] and Morph Coding Sys--Original [NAACCR #480]:**
 - There are no ICD-O-3 changes for 2026; no new codes have been added to the Morph Coding Sys fields.
- **Schema ID Version Current [NAACCR #2117] and Schema ID Version Original [NAACCR #2118]:**
 - Code 3.3 is added for Schema ID Version Current and Schema ID Version Original in 2026.
 - Schema ID Version Current should be updated to the new value for all cases in the database diagnosed January 1, 2018, or later when the system is updated to include the new EOD 2018 version.
 - Schema ID Version Original should be set to the version in use when the case is collected. While this version is required for the 2026 diagnosis year, if a 2018-2025 case is collected after the system is updated for 2026, the schema ID Version Original should be set to 3.3.
- **AJCC Cancer Surveillance API Version Current [NAACCR #2158] and AJCC Cancer Surveillance API Version Original [NAACCR #2159]:**
 - Code 09.04.00.0001 is added for AJCC Cancer Surveillance DLL Version Current and AJCC Cancer Surveillance API Version Original in 2026.
 - AJCC Cancer Surveillance DLL Version Current should be updated to the new value for all cases in the database diagnosed January 1, 2018, or later when the system is updated to NAACCR v26.
 - AJCC Cancer Surveillance DLL Version Original should be set to the version in use when the case is collected. While this version is required for the 2026 diagnosis year, if a 2018-2025 case is collected after the system is updated for 2026, the AJCC Cancer Surveillance DLL Version Original should be set to 09.04.00.0001.
- **AJCC API Version Current [NAACCR #2156] and AJCC API Version Original [NAACCR #2157]:**
 - Code 09.04.00 is added for AJCC API Version Current and AJCC API Version Original in 2026.
 - AJCC API Version Current should be updated to the new value for all cases in the

database diagnosed January 1, 2018, or later when the system is updated to NAACCR v26.

- AJCC API Version Original should be set to the version in use when the case is collected. While this version is required for the 2026 diagnosis year, if a 2018-2025 case is collected after the system is updated for 2026, the AJCC API Version Original should be set to 09.04.00.

- **Pediatric ID Version Current [NAACCR#1133] and Pediatric ID Version Original [NAACCR# 1134]:**

- Code 1.3 is added for Pediatric ID Version Current and Pediatric ID Version Original in 2026.

- Pediatric ID Version Current should be updated to the new value for all cases containing PDCS values in the database, diagnosed January 1, 2018, or later, when the system is updated to NAACCR v26.

Note: As collection of these fields was not required at any level until January 1, 2025, it is likely that cases diagnosed in 2018-2024 will not have these fields.

- Pediatric ID Version Original should be set to the version in use when the case is collected. While this version is required for the 2026 diagnosis year, if a 2018-2025 case is collected after the system is updated for 2026, the Pediatric ID Version Original should be set to 1.3.

Note: The versioning of the AJCC API and DLL may be updated after the release of the 2026 Implementation Guidelines. See [Cancer Staging System Products](#) for the latest version number(s).

NAACCR RETIRED (Retired Data Items):

Beginning with cases diagnosed 1/1/2026, the following 17 data items have been retired in the NAACCR, Data Standards and Data Dictionary, version 26.

NAACCR Data Standards and Data Dictionary V26 - Retired Items List

<u>Item#</u>	<u>Item Name</u>	<u>Source of Standard</u>
220	Sex	SEER/CoC
1120	Pediatric Stage	CoC
1130	Pediatric Staging System	CoC
1140	Pediatric Staged By	CoC
3110	Comorbid/Complication 1	CoC
3120	Comorbid/Complication 2	CoC
3130	Comorbid/Complication 3	CoC
3140	Comorbid/Complication 4	CoC
3150	Comorbid/Complication 5	CoC
3160	Comorbid/Complication 6	CoC

3161	Comorbid/Complication 7	CoC
3162	Comorbid/Complication 8	CoC
3163	Comorbid/Complication 9	CoC
3164	Comorbid/Complication 10	CoC
3645	NPCR Derived AJCC 8 TNM Clin Stg Grp	NPCR
3646	NPCR Derived AJCC 8 TNM Path Stg Grp	NPCR
3647	NPCR Derived AJCC 8 TNM Post Therapy Stg Grp	NPCR

Other Data Item Updates:

ICDO-3.2

There are no changes to reportability in the 2026 ICD-O-3.2 for 2026. Refer to the updated [2026 ICD-O-3.2 - Coding Tables](#) and the [2026 ICD-O-3.2 Implementation Guidelines](#) for new terms and required coding practices.

Cancer PathCHART Site/Morphology Validation Lists

The SEER Site/Histology Validation List, updated through 2023, is used to verify valid combinations of site and morphology codes for cases diagnosed in 2023 or earlier. For cases diagnosed in 2024, the SEER Site/Histology Validation List was replaced by the 2024 Cancer PathCHART ICD-O-3 Site Morphology Validation List. Version 2 of the 2024 and 2025 CPC SMVLs was released during the 2025 calendar year. The 2026 CPC SMVL is scheduled for release on January 1, 2026, and will be used for cases diagnosed beginning in 2026.

[CPC*Search](#) is an interactive web tool for searching the 2024 Cancer PathCHART ICD-O-3 Site Morphology Validation List (CPC*SMVL) by tumor site, histology, behavior terms, and codes. It should not be used as the primary resource for determining site, histology, and behavior code combinations. Registrars should first review the medical record, consult the SEER Hematopoietic Database for hematolymphoid cases and the Solid Tumor Rules for others, then use CPC*Search to confirm code combinations. Remaining questions should be directed to the pathologist or oncologist/hematologist. If uncertainty persists, registrars may submit inquiries via Ask a SEER Registrar. CPC*Search can also help identify similar terms that represent different entities across organ systems.

Example: 8550/3 acinar cell carcinoma is invalid in the prostate, while 8140/3 acinar adenocarcinoma is valid.

Refer to the NAACCR [Data Standards and Data Dictionary](#) v26 and the [2026 ICD-O-3.2 Implementation Guidelines](#) for additional information.

CCR Updates:

ADDITIONAL UPDATES (other Volume I related items for cases diagnosed January 1, 2026 and forward).

Please see the CCR requirements listed below for cases diagnosed January 1, 2026 and forward.

Demographics:

- Sex Assigned at Birth – (NAACCR#225) - With the 2026 data changes, the CCR will transition Item #220 (Sex) to a state-specific data item. We will continue to collect and use Item #220 in its current form and convert it to the new field at the central registry.

Reportability:

- Reportability for cases diagnosed January 1, 2026 and forward, is based on the ICD-O-Third Edition, Second Revision Morphology (ICD-O-3.2). There are no code changes for ICD-O-3 or changes to Reportability for cases diagnosed in 2026. New and related terms for ICD-O-3 are posted on the NAACCR. Please use the [2026 ICD-O-3.2 – Coding Tables](#) for 2026 diagnoses.
 - Table 1: 2026 ICD-O-3.2 Update (Numeric)
 - Table 2: 2026 ICD-O-3.2 Update (Alpha)
- Reportable terms added to the [2026 SEER Program Manual](#) and the associated [Appendix E1: Reportable Examples](#), the [Solid Tumor Rules](#), and the [Hematopoietic Manual](#). These terms will only be incorporated into the CCR Volume 1 Reportability Guide, when there is a difference in reporting between the Standard Setter and the CCR.
- For cases diagnosed 2026 and forward, the applicable 2026 standards are in the 2026 CPC SMVL. CPC SMVL files can be found at [Cancer PathCHART ICD-O-3 Site Morphology Validation List](#).

Staging:

The CCR Staging requirements for cases diagnosed January 1, 2026 forward follow standard setter changes for 2026 and are as follows:

- Extent of Disease (EOD) required by all facilities.
 - New EOD Schemas added to align with AJCC V9:

New EOD Schemas – Introduced in 2026

Schema Name	Schema ID	Diagnosis Year +
Salivary Gland (V9)	09100	2026 +
Oropharynx (HPV-Associated (V9)	09081	2026 +

Note: Major Salivary Glands Schema ID is 09081 in anticipation of a new schema for minor salivary glands, to be defined soon.

- Existing Schema changes:
 - The two original 8th edition Oropharynx schemas were renamed to align with current terminology. The new names are:
 - Oropharynx HPV-Associated 8th: 2018-2025 (00100)
 - Oropharynx HPV-Independent 8th (00111)
 - Schema Discriminator 1 [NAACCR# 3926] - Changes were made to so that C11.1 is always assigned to Nasopharynx V9 (09090) for cases diagnosed on January 1, 2025, and later. The relevant notes and schema selection logic for the Nasopharynx and Oropharynx schemas were adjusted accordingly.
 - Sex [NAACCR# 220] - Four schemas used the data item sex as part of the schema

selection. This field is being replaced with Sex Assigned at Birth [NAACCR# 225].

- Primary Peritoneal Carcinoma (00552)
- Retroperitoneum (00440)
- Soft Tissue Rare (00450)
- Soft Tissue Other (00459)
- Derived EOD 2018 Stage Group [NAACCR# 818] - For the Prostate it was determined that some combinations of data were incorrectly deriving a stage group. The table has been changed to assign 99 for these combinations. If Derived EOD 2018 Stage Group is in use, it must be recalculated.
- Some Extent of Disease fields changed to improve clarity or to address questions that were raised in the various forums. Registrars are not required to update previously coded information.
 - For Breast, EOD Primary Tumor [NAACCR# 772], codes 450 and 700 became obsolete; the preferred code to use instead will be provided for each code but no conversion is needed at this time. All these changes are applicable to cases diagnosed January 1, 2018, and forward.
- For additional information and coding instructions, please see the [SEER Extent of Disease Manual](#) located on the SEER website.
- Pediatric Data Collection System (PDCS) required by all facilities if available.
 - These data items were required from participating registries only for the 2024 and 2025 diagnosis years. Beginning in 2026, PDCS will be required from all facilities, if available.
 - ***There are no major changes to the PDCS for 2026.***
 - Some Pediatric fields were modified slightly to improve clarity or to address questions that were raised. These changes are applicable to cases diagnosed January 1, 2018, and forward. Registrars are not required to update previously coded information.
 - For additional information and coding instructions, please see the [Pediatric Data Collection System and Staging Manual](#) located on the NAACCR website.
- Summary Stage directly coded required by all facilities.
 - ***There are no changes to the Summary Stage Manual for 2026.***
 - Refer to the [Historical Staging and Coding Manuals](#) for previous versions of the manual.
 - For additional information and coding instructions, please see the [Summary Stage Manual](#) located on the SEER website.
- AJCC TNM directly assigned by CoC facilities for:
 - AJCC TNM 8th Edition (cases diagnosed 2018 +) and
 - AJCC TNM Version 9 Protocols (Version 9 Protocols replace the current AJCC 8th edition chapter for these disease sites AND have been assigned a new AJCC ID number).

New AJCC TNM Version 9 Protocol – Introduced in 2026

AJCC Protocol	AJCC ID	Diagnosis Year +
Salivary Glands	9017	2026 +
Oropharynx (HPV-Associated)	9018	2026 +

- These Version 9 protocols replace the current AJCC 8th edition chapters for these disease sites.
- Major Salivary Glands name changed to Salivary Glands. For 2026 + this will only include Major Salivary glands. Minor Salivary Glands will be added for 2027+.
- The two original Oropharynx chapters were renamed to align with current terminology. The new names are:
 - Oropharynx HPV-Associated 8th: 2018-2025 (AJCC ID: 10) and Oropharynx (HPV-Independent)
 - Hypopharynx (AJCC ID: 11.1)
- C11.1 was removed from Oropharynx (HPV-Associated) [8th Edition] (AJCC ID: 10) and Oropharynx (HPV-Independent) (AJCC ID: 11.1)

Note: Any non CoC facilities who voluntarily collect AJCC TNM please follow rules and requirements provided by AJCC.

- Site Specific Data Items (SSDIs) are required from all facilities unless specified in CCR's Volume I, [Appendix F - Site-Specific Data Items \(SSDIs\)](#).
 - For additional information and coding instructions, please see the [Site-Specific Data Items \(SSDI\) Manual](#) located on the NAACCR website.
- Grade is required from all facilities.
 - For additional information and coding instructions, please see the [Grade Manual](#) located on the NAACCR website.

Other:

- SEER Site-Specific Coding Modules:
 - Site-Specific Codes for Neoadjuvant Therapy Treatment Effect:
 - Bladder - **New** - Added a new site-specific coding document for Bladder.
 - Surgery Code updates for 2026:
 - Prostate
 - Note for code A220 revised to:
SEER Note: Assign code A220 for a tumor destruction procedure or other minimally invasive procedure when cancer is an incidental finding during surgery/procedure for benign disease (such as ablation [aqua, cold, heat, laser], Holmium laser enucleation of the prostate (HoLEP), or TURP). Use text fields to document the details.
 - Added "HoLEP" acronym to note under code A260
 - Skin
 - Added note associated with B200 codes:
Note: Elliptical/fusiform excisions are eye shape excisions around the circle outlining the amount of normal skin to take during the excision and are performed to allow for a better-looking scar.
 - See [Summary of Changes \(September 2025\)](#) document for additional information.
- Solid Tumor Rules:
 - New site-specific modules are not planned for 2026.

- The addition of new terminology, clarifications to equal/equivalent terms, and clarifications to terms that are not equal/equivalent comprise most of the changes for 2026.
- See the 2026 Revision History for the [Solid Tumor Rules 2026 Update](#) for details.
- Hematopoietic and Lymphoid Manual and Database updates.
 - The Hematopoietic Database was updated to reflect the new terms from the WHO 5th edition. Refer to the updated [2026 ICD-O-3.2 - Coding Tables](#) for a complete list of these terms.
 - Primaries for histologies 9811-9819 were changed to reflect that all Acute Lymphocytic Leukemia's (ALLs) are the same primary.
 - The manual was also updated with new formatting, updated sections and additional information. See the [Hematopoietic Manual](#) for a complete listing of changes.

References:

The following manuals are appropriate reference documents for cases diagnosed 1/1/2026 and forward.

- [Cancer Reporting in California: Abstracting and Coding Procedures for Hospitals](#)
- [American Joint Commission on Cancer \(AJCC\)](#)
 - AJCC 8th Edition Cancer Staging Manual
 - AJCC Version 9 Cancer Staging Protocols
- [2026 Standards for Oncology Registry Entry \(STORE\) Manual](#)
- [SEER Program Coding and Staging Manual 2026](#)
- [Pediatric Data Collection System \(PDCS\)](#)
- [Solid Tumor Rules](#)
- [Site-Specific Data Item \(SSDI\) Manual](#)
- [Grade Coding Instructions and Tables](#)
- [The Hematopoietic and Lymphoid Neoplasm Database](#)
- [SEER Summary Stage 2018 Manual](#)
- [Extent of Disease \(EOD\) 2018 General Coding Instructions](#)