

SCR Winter Newsletter Volume14, Issue2

Winter 2017



From the Director, Tara Freeman

I would like to thank all of you for your patience as we transitioned through multiple edit metafiles and changes this year. I also want to prepare you for the changes ahead. In 2018 we will follow new Multiple Primary and Histology (MP/H) rules, use the new AJCC 8th edition manual for 2018 cases, FORDS will become the new STORE manual, there will be a new Summary Stage manual, new grade rules, and we will be introduced to a new edit set to name a few. Visit the attached link for a full list of projected release dates for manuals and software release dates (https:// www.naaccr.org/wp-content/uploads/2017/11/2018-Implementations-and-Timeline-V1.4 20171114a.pdf). We will continue to send updates as changes occur. With all of the expected changes, it is imperative that you do not export any 2018 diagnosed cases in version 16 software. When the new software is ready, either I or Melissa will send out a notification.

We are still in need of your 2016 diagnosed cases. If you have not submitted all of your 2016 cases please do so as soon as possible. We are embarking upon our 2016 data submission in January and would like to meet our goal of at least 90% data submission rate. In order to meet that goal we need you. ASCR staff is working hard to ensure we are processing all cases and if for any reason you would like to discuss your submission status, please contact me or your Regional Coordinator. We will be happy to assist you.

I appreciate all of your timely submissions and hope the upcoming change does not cause major delays in normal processing. I have enjoyed working with all of you this year. However you choose to celebrate this season, I wish you prosperity as we prepare for the next phase of change.

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Question

Multiple Primary/Histology Rules/Histology--Bladder: Is urothelial carcinoma, high-grade, predominantly solid type, coded as 8120/3 or 8230/3? See Discussion.

Discussion

Urinary bladder: Invasive urothelial carcinoma, high-grade, 4.5cm, predominantly solid type, arising in background of carcinoma in-situ, carcinoma grossly extends into perivesical adipose tissue; lymph-vascular invasion is seen.

Answer

Assign histology code 8120/3, urothelial carcinoma, NOS. Solid type is not a recognized variant of urothelial tumors and likely represents the appearance of the urothelial cells within the tumor and not a specific histologic type.

Question

Multiple Primaries/Histology Rules/Multiple primaries--Kidney, renal pelvis: Are tumors diagnosed more than three years apart multiple primaries according to Rule M7 in a case with metastasis? See Discussion.

Discussion

5/27/02 Transurethral resection of bladder tumor (TURBT)--papillary transitional cell carcinoma, +lamina propria, no muscle invasion. All urine cytologies in 2011 and 2012 (only follow up received) show no malignancy. 3/11/15 Lung fine needle aspirate poorly differentiated carcinoma consistent with urothelial carcinoma. 4/30/15 Renal pelvis biopsy--low grade papillary urothelial carcinoma, no lamina propria invasion, no muscularis propria invasion.

Answer

Rule M7 applies. Abstract the bladder diagnosis and the renal pelvis diagnosis as separate primaries. The lung diagnosis is metastatic. The MP/H rules do not apply to metastatic tumors.



Small Hospitals Corner



I would like to thank all facilities for their hard work. A few reminders for the Small Hospitals:

Please follow the list that was provided for your facility by the case finding auditor. **Please DO NOT skip over patients**. In addition, for treatment please be specific on the date of first course of treatment, type of treatment, and if single/multiple agents were given. It would also be helpful if you would indicate the patient vital status in the text documentation (place/date of death).



Kandice Abernathy



Registry Plus Software Upgrades for 2018

ASCR is preparing for the 2018 upgrades for Abstract Plus and WebPlus. The software is scheduled for release <u>tenta-tively</u> in July 2018. Before the software is fully functioning and ready for release for abstracting there are some critical items that are needed:

Abstract Plus and Web Plus Software V18 with TNM release date is dependent on availability of all components referenced in the "2018 Implementation and Timeline Version 1.3 October 2, 2017." This may include new 2018 data items that expand the NAACCR record layout. Reporting facilities must install their v18 reporting software updates before completing cases diagnosed 01/01/2018 and later. With all of the expected changes, it is imperative that you **do not** export any 2018 diagnosed cases in version 16 software. If abstraction of cases diagnosed in 2018 is started in current v16 software we recommend that the following not be completed:

- Grade
- AJCC T, N, M Stage groups and Descriptors
- CS Site Specific Factors 1-25
- Radiation Treatment

2018 IMPLEMENTATIONS AND TIMELINE VERSION
1.3 OCTOBER 2, 2017
AJCC 8TH EDITION CHAPTER UPDATES TO HISTOLOGIES (RELEASE BY OCTOBER 13, 2017)

In addition to upgrades for the abstracting software, new software for quality control or checking your abstracts for edits before submission software, GenEDITS Plus 5, will be available. The software is ready to install and can be downloaded at setup geplus5 32bit 2017Apr19.exe. You will need an updated .smf edits metafile in order to operate the updated version. The tentative release date for the .smf edits metafile is March 2018. Prior to the release of the .smf edits file, ASCR will provide training on the use of the new GenEDITS Plus 5 software.

With all the changes that will occur in 2018, ASCR is dedicated to communicating with you but please keep in mind when timelines change on the progression towards the software's release. For questions, please contact Melissa.mcneil@adph.state.al.us.









Having Problems with Abstract Plus or Web Plus Software?

We can provide technical support not just by phone, but by facilitating live meetings, (i.e., being able to fix the issues by using screen sharing function). ASCR livemeetings are absolutely within a secured environment.

For Information Systems issues, please contact Melissa McNeil at 334-206-5557 or at melissa.mcneil@adph.state.al.us. For cancer abstraction concerns, please contact Crystal Jones at 334-206-5430 or at crystal.jones2@adph.state.al.us.

We will be glad to assist you!



Death Clearance Corner

Death Clearance Follow Back:

I would like to say thanks to all the facilities for their hard work in getting the death clearance information back to me in a timely manner.

I would also like to thank the facilities for sending in your monthly cancer cases on time.

Cassandra Reynolds

Non-Hospital Corner



To Non-Hospital Facilities,

I want to compliment you on a job well done. It takes time to report cancer cases diagnosed and or treated at your facility. As you continue to report, please remember the Web Plus text fields are very important. Please remember to <u>be specific:</u>

- Physical Exam field: Include patient race, age, sex and any history of other reportable cases
- Document laterality, grade, PSA, etc.
- Treatment: Be specific on date first course of therapy began, type of surgery/treatment done, # of nodes resected, single vs multi-agent chemo, etc.
- Laboratory findings: Document date, type, and results (ER, PR, CEA, etc.) (negative, positive, etc.)
- Make sure your text information supports your assigned code.

Thanks,

Angela L. Gaston-Murray, BBA, MSM
Public Health Research Analyst
Non-Hospital Reporting Coordinator
Alabama Statewide Cancer Registry



NCRA Week: April 9-13, 2018 Cancer Registrars:

2018 National Cancer Registrar Week

Cancer registrars throughout the world will join their colleagues, fellow medical professionals, and community leaders to observe the 22nd annual National Cancer Registrars Week (NCRW), April 9-13, 2018. The purpose of NCRW is to emphasize the important role cancer registrars play in capturing the data that informs cancer research, prevention, and treatment programs. The theme for 2018 is Hidden Jewels of Cancer Care.



Tribute to April Fritz, CTR



April passed away on September 12, 2017. She certainly played a significant role in educating Alabama registrars throughout the years and will truly be missed. She has come to Alabama on numerous occasions to teach Principles of Basic Abstracting, Advanced Abstracting, and Re-Introduction to Staging. Each time she came registrars were in awe of the knowledge she possessed and she always managed to make learning fun. Please join us here at ASCR as we remember April.



Congratulation to Our New CTR'S

Dana Stagner-Self Employed Contractor Susan Elam-Huntsville Hospital



WELL DONE,
YOU DID IT!
CONGRATS



Education Corner-Results from Reabstracting 2017

Kidney

Please code Renal Cell Carcinoma, Clear Cell – 8310/3 per MPH Rules

- Cancer/malignant neoplasm, NOS (8000) and a more specific histology or
- Carcinoma, NOS (8010) and a more specific carcinoma or
- Adenocarcinoma, NOS (8140) and one specific adenocarcinoma type or
- Renal cell carcinoma, NOS (8312) and one specific renal cell type

Note 1: Use Table 1 to identify specific renal cell types.

Note 2: Renal cell carcinoma, NOS (8312) is the non-specific term under which the specific renal cell carcinoma types are listed.

Coding Grade for Kidney

Per Grade 2014+ instructions - Page 8 - The Fuhrman Nuclear Grade should be used to code grade for kidney parenchyma.

Prostate

Use the highest Gleason score from the biopsy/TURP or prostatectomy/autopsy. Exclude results from tests performed after neoadjuvant therapy began.

Laterality - Per FORDS Manual Section Two Page 122 - Laterality identifies the side of a paired organ or the side of the body on which the reportable tumor originated. This applies to primary site only. Non-paired sites may be coded right or left, if appropriate. Otherwise, code non-paired sites to 0.

Section One: Case Eligibility and Coding Principles Page 8 for a complete listing of Paired Organ Sites

Coding Grade for any Primary Site

Per instructions for coding Grade 2014+ Page 2.

Code the grade from the primary tumor only.

- a. **Do NOT** code grade based on metastatic tumor or recurrence. In the rare instance that tumor tissue extends contiguously to an adjacent site and tissue from the primary site is not available, code grade from the contiguous site.
- b. If primary site is unknown, code grade to 9.

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Incidence Rates for Top 5 Cancers in 2015 in Alabama by Race and Gender					
White Males	Column1	Column2	White Females	Column3	Column4
Rank	Cancer Site	Rate	Rank	Cancer Site	Rate
- Num					
1	Prostate	97.5	1	Breast	121.6
2	Lung and Bronchus	83.9	2	Lung and Bronchus	53.9
3	Colon and Rectum	47.8	3	Colon and Rectum	35.4
	Melanoma of the			Melanoma of the	
4	Skin	37.7	4	Skin	22.8
5	Urinary Bladder	35.7	5	Corpus and Uterus, NOS	19.5
					25.0
Black Males			Black Females		
Rank	Cancer Site	Rate	Rank	Cancer Site	Rate
1	Prostate	179.9	1	Breast	125.2
	Trostate	173.3		Breast	123.2
2	Lung and Bronchus	77.2	2	Colon and Rectum	42.3
2	Colon and David	50.7	2	Luna and D	25.4
3	Colon and Rectum	50.7	3	Lung and Bronchus	35.4
	Kidney and Baral			Corpus and Utama	
4	Kidney and Renal Pelvis	22.9	4	Corpus and Uterus, NOS	21.4
	Non-Hodgkin Lym-				
5	phoma	17.1	5	Pancreas	14.7

Rates are per 100,000 and age-adjusted to the 2000 U.S. (19 age groups) standard.

Rates are for malignant tumors only except for Urinary Bladder which contains in situ cases.

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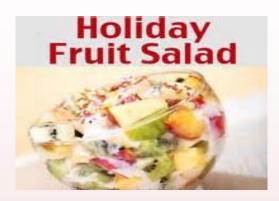


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Christmas Fruit Salad Recipe

Ingredients

- 1 24 oz box or bowl of frozen Strawberries, Cut In Half
 - 1 Can Mandarin Orange
 - 1 Can Pineapple Chunks
 - 1 Can Peach Pie Filling



Preparation

Gently mix all the ingredients together and chill until ready to serve. Make sure to drain the pineapple and the mandarin oranges.

If using frozen strawberries, use a 24 oz. container (do not drain). This salad can be prepared the night before. You can double the ingredients depending on the number of people.

Name That Song Quiz:

- 1. "A day or two ago, I thought I'd take a ride"?
- 2. "With every Christmas card I write may your days be merry and bright?
- 3. "It doesn't show signs of stopping, and I brought some corn for popping".
 - 4. "Snowing and blowing up bushels of fun"

