ALABAMA DATA ACQUISITION MANUAL

Prepared by the

Alabama Statewide Cancer Registry
Bureau of Family Health Services
Alabama Department of Public Health

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INTRODUCTION

In the US, approximately 39 out of 100 men and 38 out of 100 women will develop cancer in their lifetime. Current estimates indicate that one out of every four Americans will develop a malignancy during their lifetime and approximately half will die from their malignancy. In Alabama, the American Cancer Society expects approximately 28,950 new cancer cases to be diagnosed in 2019. Alabama's cancer mortality rate exceeds the rate for the United States. Although cancer takes a heavy toll in Alabama, no statewide data were systematically collected on the number of Alabamians affected by this disease until the implementation of the Alabama Statewide Cancer Registry (ASCR) in 1996.Through the great efforts from the ASCR and registrars statewide in the past twenty years, the data in the ASCR's central repository has consistently reached national standards in completeness, timeliness, and quality.

Cancer registration is an important and fundamental tool in assessing the true extent of cancer in Alabama.The data collected through the statewide cancer registry can be used for epidemiological studies, medical research, and cancer control planning. This central repository of information is a valuable and essential tool in the identification of populations at high risk for cancer, the monitoring of cancer incidence trends, the facilitation of studies related to cancer prevention, the evaluation of cancer control initiatives, and the development of educational awareness programs. In summary, the Alabama Statewide Cancer Registry is a critical program for understanding and controlling cancer in Alabama.

The ASCR is funded through the Centers for Disease Control and Prevention (CDC) National Program of Cancer Registries. CDC has established national standards to ensure the completeness, timeliness and quality of cancer registry data. In addition, CDC recommends that central registries incorporate standards for data quality and format as described by the North American Association of Central Cancer Registries (NAACCR). NAACCR annually reviews member registries' abilities to produce complete, accurate and timely data. Registries that meet the highest standards receive NAACCR certification. This achievement would not be possible without the prompt and accurate reporting from hospitals, healthcare providers and reporting facilities throughout Alabama.

ALABAMA LAW 95-275

The Alabama Statewide Cancer Registry (ASCR), with authorization from legislative Act 95-275, titled the "Alabama Statewide Cancer Registry Act," enacted in July 1995, began collecting required information effective January 1, 1996, on each cancer patient diagnosed or treated at a hospital, clinical laboratory, cancer treatment center, or physician's office within the state of Alabama. Act 95-275 was amended in 2004 to require the reporting of all confirmed cases of cancer and benign brain-related tumors. Each health care facility or provider is required to report cancer cases to the ASCR according to the conditions set forth in the Rules of the State Board of Health (Chapter 420-7-3). The Rules were also amended in 2004 to require the reporting of benign brain tumors. A copy of Act 95-275 and the Rules of the State Board of Health can be found on the ASCR website at www.adph.org/ASCR.

CONFIDENTIALITY

Data obtained under the Alabama Statewide Cancer Registry Act are for the confidential use of

the Alabama Department of Public Health and the persons designated by the State Health Officer to carry out the interests of the Act. The data are privileged and may not be divulged or made public in a manner that discloses the identity of the patient or the reporting facility or physician. Information revealing the caseload of a particular facility or health care professional is also confidential. All reporting entities that comply with the Alabama Statewide Cancer Registry Act in good faith are immune from liability for furnishing the required information to the ASCR.

EFFECTS OF HIPAA

HIPAA does not affect surveillance programs such as the ASCR or hospital-based cancer registries, and does not supersede existing state law. Section 512 part (b) of the HIPAA regulations state:

> (b) Standard: uses and disclosures for public health activities.
> (1) Permitted disclosures: A covered entity may disclose protected health information for the purpose of preventing or controlling disease, injury, or disability, including, but not limited to, the reporting of disease, injury, vital events such as birth or death, and the conduct of public health surveillance, public health investigations, and public health interventions; or, at the direction of a public health authority, to an official of a foreign government agency that is acting in collaboration with a public health authority;" Disclosure is permissible to a public health authority authorized by law to collect or receive such information for the purpose of preventing or controlling disease…including...reporting of disease...and the conduct of public health surveillance...". In other words, HIPAA provided for public health surveillance activities such as cancer registries. As cancer reporting to the ASCR is required by public health law and rules and this requirement is often fulfilled by the hospital-based cancer registry, they are also given access, by law, to all records. All reporting facilities and providers are acting as representatives of the ADPH in collecting and reporting cancer information. And, as a representative, they have full access to the medical records, as is defined in Alabama Act 95-275.

DISCLOSURE OF DATA

The Alabama Statewide Cancer Registry (ASCR) **may** exchange patient-specific information with the reporting facility or clinical facility for the purpose of obtaining information necessary to complete a case record, provided these facilities comply with all ASCR confidentiality policies.

To achieve complete case ascertainment, the ASCR **may** exchange patient-specific information with other state cancer registries if reciprocal data sharing agreements and confidentiality provisions are in place.

The ASCR **may** grant researchers access to confidential information concerning cancer patients, provided the research project has been approved by the Review Board of the Alabama Statewide Cancer Registry Advisory Council, the Internal Review Board of the Alabama Department of Public Health, and where pertinent, the research university's Internal Review Board **and** the researcher has complied with the provisions **and** confidentiality policies mandated by the Alabama Statewide Cancer Registry's requests for confidential data.

REPORTING REQUIREMENTS

All healthcare facilities and/or providers diagnosing or providing treatment to cancer patients shall report complete abstracts on each case of confirmed cancer on a monthly basis, **before the 10th of the following month**, in the prescribed format and within 180 days of admission or diagnosis. (Example: January cases will be reported by July 10th, February cases reported by August 10th, etc.) This method allows the ASCR to receive continuous reporting in a timely manner.

Healthcare facilities with an established cancer registry must report each case of cancer in the NAACCR Record Layout utilizing the software program of their choice.

Facilities without an established cancer registry must report each case of cancer in the NAACCR Record Layout, and must establish a reporting mechanism through direct reporting, partnering with an established cancer registry, or contracting with a Certified Tumor Registrar. All cases are to be reported in the NAACCR Record Layout format utilizing the software program of their choice. The ASCR offers a cancer abstraction software program at no charge.

Healthcare providers (specifically physicians) diagnosing or providing treatment to cancer patients each year must report each confirmed case of cancer not previously reported by a healthcare facility.

REQUIRED DATA ELEMENTS

All machine-readable reports of confirmed cases of cancer submitted to the ASCR shall include but not be limited to the NAACCR data items. Any further demographic, diagnostic, treatment or follow-up information is to be provided upon request by the ASCR concerning any person now or formerly receiving services, diagnosed as having or having had a malignant neoplasm. Additionally, the ASCR shall be permitted access to all records, including death certificates, which would identify confirmed cases of cancer or would establish characteristics of the cancer, treatment of the cancer, or medical status of any identified cancer patient.

REPORTING FORMATS

Cancer cases may be reported using the following formats determined according to your caseload:

1) **Internet Data Transfer** (Required for use by all reporting facilities.)

The Alabama Statewide Cancer Registry (ASCR) offers Internet data submission designed to allow for more efficient data management and information retrieval. To maintain the strictest confidentiality, the ASCR has implemented a secure data transfer system – Web Plus, using 128-bit encryption, the highest security available. A facility is required to complete a Web Plus Account Request Form in order to receive access permission. A user ID and password will be issued from the ASCR before a facility can log onto the Web Plus.

Each month, your facility will log onto Web Plus via the secure server, to submit data files or retrieve data reports. Access is limited to authorized individuals only: your facility cancer registrar and ASCR staff. Once a file has been transferred, the secure server encrypts the file, completes the transfer, and notifies ASCR staff that a file is present on the secure server. The file remains encrypted while ASCR staff are transferring the file from the secure server to our departmental server for processing. This server is housed in the central office of the Alabama Department of Public Health. This step provides additional security to prohibit unauthorized access to this confidential information.

The ASCR offers all reporting sources two cancer abstraction software options at no charge: Abstract Plus and Web Plus. Both programs support ASCR state reporting requirements only.

1) **Abstract Plus (Stand Alone Program for Local Computer)**

Abstract Plus is an abstracting tool used to summarize the medical record into an electronic report of cancer diagnosis and treatment by abstractors and other individuals or groups who work with cancer data. Data is maintained on a local hard drive at the reporting facility until exported and submitted to the ASCR monthly.

2) **Web Plus (Direct Internet Data Entry)**

Web Plus is also used as a Web-based application to collect cancer data securely over the Internet. Data entry through Web Plus is most suited for physicians' offices and other low-volume reporting sources that do not have facility-based cancer registries. Records are saved in a database at the ASCR, and cases entered by one facility or office, are not visible to other facilities. Data entered is validated by the EDITS Engine running on a Web server. Users, display types, and edit configurations are managed by the ASCR. Web Plus is hosted on a secure Web server that has a digital certificate installed; the communication between the client and the server is encrypted with Secure Socket Layer (SSL) technology.

Both software options were developed at the CDC Division of Cancer Prevention and Control in support of CDC's National Program of Cancer Registries (NPCR).

DATA SUBMISSION SCHEDULE

All healthcare facilities and/or providers diagnosing or providing treatment to cancer patients shall report complete abstracts on each case of confirmed cancer on a monthly basis, **before the 10th of the following month**, in the prescribed format and within 180 days of admission or diagnosis. (Example: January cases will be reported by July 10th, February cases reported by August 10th, etc.) This method allows the ASCR to receive continuous reporting in a timely manner.

Data submission schedules are shown in the charts below. Facilities with more than 50 cases a year should follow the schedule

ASCR Alabama Statewide Cancer Registry — 2020 DX cases Hospital Reporting Schedule		
Current Date	Level of Completeness	Dx Date of Cases (Timeliness)
Jul 2020	8%	Jan 2020
Aug 2020	17%	Feb 2020
Sept 2020	25%	Mar 2020
Oct 2020	33%	Apr 2020
Nov 2020	42%	May 2020
Dec 2020	50%	Jun 2020
Jan 2021	58%	July 2020
Feb 2021	67%	Aug 2020
Mar 2021	75%	Sept 2020
April 2021	83%	Oct 2020
May 2021	92%	Nov 2020
Jun 2021	100%	Dec 2020

ASCR Award Certificate Standards

	Gold	Silver – does not meet gold percentages
Completeness by July 10, 2020	≥95%	≥90%
Accuracy	≥98%	≥95%
Timeliness (compliant status on monthly data submissions)	≥10/12	9/12

Facilities with less than 50 cases a year and abstract via Web Plus should follow the schedule chart below.

DATE(S) OF DIAGNOSIS	*CASE FINDING INFORMATION DUE	ABSTRACT DUE
Jan, Feb, Mar 2020	April 30, 2020	July 31, 2020
Apr, May, Jun 2020	July 31, 2020	October 31, 2020
July, Aug, Sep 2020	October 31, 2020	January 31, 2021
Oct, Nov, Dec 2020	January 31, 2021	April 30, 2021

* Case finding information should include path reports, disease index, X-rays/Scans, etc.

After the ASCR case finding auditor reviews that information, a list of reportable cases will be sent back to facilities within one month. The reportable cases should be entered in Web Plus before abstract due date.

The reportable case list should be generated by the CF auditor and returned to the hospitals on or before the date due.

List of Reportable Cases SCHEDULE *(List to be Returned to Facility)*	
DATE(S) OF DIAGNOSIS	**DATE DUE**
Jan, Feb, Mar 2020	May 31, 2020
Apr, May, Jun 2020	August 31, 2020
July, Aug, Sep 2020	November 30, 2020
Oct, Nov, Dec 2020	February 28, 2021

DATA STANDARDS

The record layout adopted by the Alabama Statewide Cancer Registry (ASCR) was developed by the American College of Surgeons Commission on Cancer (COC) in consultation with physicians, nurses, cancer registrars, administrators, central and national registry organizations, software providers, and is maintained by the Uniform Data Standards Committee of the North American Association of Central Cancer Registries (NAACCR). The collaborative effort of these individuals and groups has encouraged accurate, uniform data collection.

Using Section Two: **Instructions for Coding**

The header that precedes each data item contains the following information:

Data Item Name	Appears at the left margin. The names of pre-existing data items may have been changed. The previous name for the item appears in parentheses.
Item Number	The NAACCR item number is recorded for each field.
Item Length	The total of the numbers and/or letters contained in a field (code) appears at the right margin.
Column #	Identifies what column/columns in NAACCR record layout for the data item
Allowable values	valid numerical and/or alpha codes for each data item
Data Type	This refers to the nature of the field. Alpha= alphabetic only; alphanumeric = a combination of alphabetic and numeric; numeric = numbers only; alpha character = alphabetical or character, such as / or &; and free text = any alphabetic, numeric, or character value. Data type may also provide additional instructions on the use of upper or lower case, right and left justification, zero-fill requirements, etc.

Other

Each institution is assigned a unique identification number used to identify reporting and following institutions as well as “Institution referred from” or “Institution referred to.” A copy of institution identification numbers for Alabama can be found in Appendix A.

County at Dx is standard codes in FIPS publication “Counties and Equivalent Entities of the United States, Its Possessions, and Associated Areas.” This information is important for measuring cancer incidence in a particular geographic area. Alabama Counties and Codes are listed in Appendix B.

Starting 2013, changes are made to capture state and country level information for Dx address, current address, birth place and place of death. The codes are listed in Appendix C.

ALABAMA'S CANCER REPORTING PRINCIPLES

The Alabama Statewide Cancer Registry (ASCR) has adopted the Facility Oncology Registry Data Standards (STORE) published by the Commission on Cancer, American College of Surgeons, along with additions and exceptions listed in this section. The STORE document contains detailed specifications on all data items, coding rules, codes, and definitions. To meet ASCR reporting requirements, facilities must comply with the following standards for operation and must maintain their databases using the codes and coding rules as defined in this text.

GENERAL PRINCIPLE

The cancer registry is a system to monitor all types of reportable malignancies diagnosed or treated in Alabama. This central repository of information is a valuable tool in monitoring trends in cancer incidence, identifying populations at high risk for cancer, facilitating studies related to cancer prevention, and planning cancer control initiatives.

The database includes case identification and a description of the patient and the cancer.

Registry responsibilities may also include lifetime clinical follow-up of the cancer patient. Follow-up is necessary to evaluate treatment outcome.

REFERENCE DATE

The reference date is the start date after which all eligible cases must be included in the registry. This date is a reference point for many standards. A program must establish a reference date as of January 1 of a given year. For the purpose of data collection and reporting, the ASCR reference date is January 1, 1996.

REPORTABLE DIAGNOSES

After their reference date, facilities must include all reportable malignancies that meet the following criteria:

- Patients diagnosed or receiving cancer-directed care in the institution's inpatient or outpatient department or ambulatory care center.[1] Patients diagnosed at a staff physician's office and receiving any part of their first course of treatment at the reporting institution.
- Patients diagnosed with a behavior code of 2[2] or higher as defined in the *International Classification of Diseases for Oncology*, Third Edition (ICD-O-3).
- Patients diagnosed with basal and squamous cell cancers originating in mucoepidermoid sites: lip (C00.0-C00.0); anus (C21.0); vulva (C51.0-C51.9); vagina (C52.9); penis (C60.0-C60.9); scrotum (C63.2).
- Vaginal intraepithelial neoplasia, Grade III or VAIN III (8077/2)
- Vulvar intraepithelial neoplasia, Grade III or VIN III (8077/2)
- Laryngeal intraepithelial neoplasia, Grade III (LIN III) (8077/2) (C320-C329)
- Squamous intraepithelial neoplasia, Grade III (SINIII) (8077/2), except cervix and skin

[1] If the medical record is the property of the reporting institution, the case must be included in the database.

[2] Certain exceptions apply. See exclusion section.

ASCR-SPECIFIC REQUIREMENTS

The ASCR requires facilities to include reportable malignancies diagnosed and/or initially treated at the reporting institution, and which meets the criteria for analytic (class of case 00 - 22) and non-analytic cases (class of case 32** 34, 36, 38, 40, 41, 42 and 43). Inpatients, outpatients, and clinically diagnosed patients (not histologically confirmed) must be included.

Analytic Cases

00, 10, 11, 12, 13, 14, 20, 21, 22

Non- Analytic Cases

32**, 34, 36, 38, 40, 41, 42, 43,

Class of Case Codes 40 and 41:

These are used by hospitals that abstract cases that were diagnosed and treated only in a staff physician(s) office.

Class of Case Code 42:

It is optional for the hospital to abstract cases for a clinic or other facility such as chemotherapy or radiation that is not owned by the hospital. However, the ASCR encourages the hospitals to report those cases.

Class of Case codes not required to be abstracted (the ASCR's exclusion list): 30, 31, 33, 34*, 35, 36*,37 and 99

*** Cases with Class of case code 34 and 36 are reportable to the ASCR, if they are**

- Vaginal intraepithelial neoplasia, Grade III or (VAIN III) (8077/2)
- Vulvar intraepithelial neoplasia, Grade III or (VIN III) (8077/2)
- Laryngeal intraepithelial neoplasia, Grade III (LINIII) (8077/2), (C320-C329)
- Squamous intraepithelial neoplasia, Grade III (SINIII) (8077/2), except Cervix and Skin

**Class of case code 32 should be reportable to the ASCR if the diagnosis date of the tumor is known.

OTHER ALABAMA-SPECIFIC REQUIREMENTS

Text-Usual Occupation
Text-Usual Industry

Managing Physician

Reason for No Surgery
Reason for No Chemo

Cause of Death
ICD Revision Number

Type of Reporting Source
NPI Numbers

Primary Surgeon

Reason for No Radiation
Reason for No Hormones

Place of Death
Follow-Up Contact Phone

Required TEXT

Diagnostic
- PE
- Xray/Scan
- Scopes
- Lab Tests
- Operative Reports
- Path Reports
- Primary Site
- Histology
- Staging

Treatment
- Surgery

Supplemental TEXT

Treatment
- BRM
- Radiation
- Chemo
- Hormones
- Other

Exclusions:
Facilities are not required to accession, abstract, or conduct follow-up for cases that meet the following criteria:

< **Patients** seen in consultation only. A consult may be done to confirm a diagnosis or treatment plan. The reporting institution may provide services not available at the diagnosing or treating facility, such as Computerized Tomography (CT) scans, Magnetic Resonance Imaging (MRI) scans, or placement of venous access devices.

< **Patients** receiving transient care at the reporting institution to prevent interruption of the first course of treatment. The patient may be vacationing or visiting in the area, or equipment failure at the primary treating institution may require the patient to temporarily receive treatment elsewhere.

< **Patients** with active, previously diagnosed cancer who are admitted to the reporting institution for unrelated medical conditions.

< **Patients** with precancerous conditions or benign tumors.[3]

< **Patients** with carcinoma-in-situ of the cervix (CIS).

< **Patients** with an intraepithelial neoplasia. Diagnoses include:
Cervical intraepithelial neoplasia
< **Patients** with skin cancers, (C44.-) who do not meet the conditions specified in the reportable diagnosis list.
< **Patients** with a history of malignancy who are clinically free of disease.
< **Patients** admitted for terminal supportive care, including home care service.
< **Patients** admitted to a designated hospice.
< **Patients** who are diagnosed at a staff physician's office and treated in another facility.

[3] These cases may be reportable -by-agreement.

Table 1

Registry Functions by Type of Case

	Accession	Index	Abstract	Follow[4]
Analytic (class of case 00 - 22)	X	X	X	X
Non-analytic (class of case 32, 34, 36, 38, 40, 41, 42 and 43)	X	X	X	
Carcinoma-in-situ of the cervix (CIS)				
Basal or squamous cell carcinoma of a mucoepidermoid site	X	X	X	X
Foreign residents	X	X	X	X

- X identifies required functions

[4]Follow-up is not required if the patient resides in a foreign country at the time of diagnosis or follow-up.

REPORTABLE LIST

The reportable list identifies all diagnoses and type of cases that must be included in the registry database. See Appendix D for ASCR reportable list.

CANCER REGISTRY RULES FOR OPERATION

CASEFINDING

Casefinding is a systematic method of locating all eligible cases. The method of casefinding must include all points of service from which a patient may enter the health care delivery system for diagnosis or therapeutic services for the management of cancer. Casefinding will identify both new cases and cases already entered into the registry. Readmissions may be a source of follow-up information.

Multiple sources must be used to identify the eligible cases. Casefinding sources include:

- Health Information Management Department (HIM). This department maintains the medical records and a disease index that identifies the patient, date of service, and the diagnosis.
- Pathology and Cytology Departments. The histology, cytology, bone marrow, and autopsy reports are source documents for identifying eligible cases.
- Oncology-related services. Radiation and medical oncology treatment areas are sources of casefinding.

SUSPENSE SYSTEM

Reporting sources should maintain a suspense system which identifies cases that have not been completely abstracted. The cases should be sorted and listed by date of diagnosis. Cases should be processed in chronological order for ensuring timely state reporting. Periodically, administrative reports should be produced to assess timeliness of the abstracting process. The abstracting currency must be six months or less from date of diagnosis. If a registry serves multiple institutions, the register must include an institution identifier.

A suspense list should contain the patient's name, patient identifier, date of diagnosis, and primary site.

ACCESSION REGISTER

An accession register is an annual, sequential listing of all reportable cancer included in a cancer registry. It may be presented either on-screen or in hard-copy and must be readily accessible. The register must include the accession and sequence numbers, patient name, primary site, and date of initial diagnosis. If a registry serves multiple institutions, the register must include an institution identifier. The accession register is used to audit other registry files, monitor casefinding, assess the workload, and verify patient identification. Detailed information on the assignment of accession and sequence numbers can be found in Section Two of the STORE 2018 Manual.

PATIENT INDEX

The patient index is an alphabetical list of each patient entered into the registry since the reference date. The list must contain the patient's name, sex, date of birth, primary site(s), laterality, histology(ies), date(s) of diagnosis, accession number, sequence number(s), medical record number, and date of death.

For patients with multiple primaries, the patient index must include the primary site, laterality, histologic type, date of diagnosis, and sequence number of each primary.

ABSTRACT

An abstract must be completed for all analytic cases that meet the criteria for inclusion in the registry. The abstract is a summary of pertinent information about the patient, the cancer, the treatment, and the outcome. Components include patient identification, cancer identification, stage of disease at initial diagnosis, first course of treatment, recurrence, treatment for recurrence or progression of disease, and follow-up. The abstract must contain the items in the NAACCR record layout. Patient gender, race, sex, primary site, histology, laterality of disease, first course of treatment, and patient status at last contact must be also recorded in natural language in corresponding text fields. (*Not coded*) See Appendix D for complete data item requirement by ASCR.

If a patient has multiple primary malignancies, an abstract must be prepared for each reportable primary diagnosed or treated at the reporting institution after the reference date. Abstracting must be completed within six months from date of initial diagnosis.

QUALITY CONTROL

One of the most important elements in the establishment and maintenance of a cancer registry is the quality of the data collected. To be most effective, quality control should deal with every aspect of production, from acquisition of raw material to distribution of the final product. The term "quality-control program" refers to the implementation and routine use of various quality-control methods in an organized, planned manner and implies a comprehensive approach to the maintenance of quality.

The ASCR will edit standard data fields using the appropriate national edit standards for that field. This allows, at the earliest states of data collection, the identification of errors, opportunities for improvement, and identification of topics for continuing education.

On-site casefinding and/or re-abstracting audits of all reporting sources will be performed by the ASCR at least once every five years. The data fields to be evaluated will be determined at the time of the audits. Outcomes will reveal evidence of completeness of casefinding, timeliness, and accuracy. Results of these audits with analysis of discrepancies and recommendations for improvement will be described in a report to be distributed to study participants.

FOLLOW-UP

Systematic annual follow-up of patients is an important cancer registry function. Follow-up is based on the date of last contact and is delinquent (lost) if no contact has been made within 15 months after the date of last follow-up-information. Cases that are lost (delinquent) should remain in the follow-up process until information is obtained. In order to monitor the success of the follow-up activity, it is useful to calculate a percentage of people who have been successfully followed. The observed follow-up rate is calculated using follow-up data on all patients, alive or dead, while the relative follow-up rate considers the differences in the risk of dying from causes other than the disease under study. Every effort should be made to have no losses to follow-up, however, losses are expected. Non-analytic cases, foreign residents, benign or borderline malignancies, carcinoma in situ of the cervix, and localized basal and squamous skin cancers are not included in follow-up calculations. Patients who are delinquent or lost to follow-up and whose age exceeds

100 years may be excluded from follow-up calculations. Follow-up data must include the date(s) and type(s) of treatment for cancer, the site(s) of distant metastasis, the site and histology(ies) of any subsequent primary(ies), the date of last contact, and the status of the patient and the cancer.

To obtain appropriate follow-up data, the registrar must make use of all available resources. Key resources include: telephone directories, physician (institution, local and national) directories, and listing of institutions, nursing homes, home-care agencies, and county health departments.

Recommended follow-up procedures are as follows:

< Determine frequency of contact; annual is standard
< Produce list of patients due for follow-up
< Check in-house sources
< Inpatient admissions
< Outpatient surgery, chemotherapy, radiation therapy
< Clinic or other type of outpatient department visit
< Emergency department
< Social services
< Business office
< Contact the physician
< Determine hierarchy; e.g., managing physician, medical oncologist, radiation oncologist, surgeon, internist, other non-cancer specialist
< Approved follow-up letter recommended
< Telephone contact, especially with non-responders
< Contact the patient
< Approved follow-up letter recommended
< Telephone
< Contact a third party
< Approved follow-up letter recommended
< Relatives
< Friends
< Others
< Contact other sources
< Other institutions
< Central registries (ASCR, other states)
< Obituaries
< National death index
< Visiting nurses associations
< Home health agencies

When contacting patients or a third party for follow-up data, the contact must be initiated in a sensitive but professional manner. Most registries make this contact through the use of form letters, but direct contact by telephone may be necessary. It is important to keep in mind, at all times, the sensitive nature of the work being performed. Follow-up should always operate within hospital policy since this work is conducted with the hospital's "public," and in actual fact serves as a public relations service for the hospital. If direct patient contact by telephone is used, be prepared with appropriate information and referral information, practice a prepared outline or script, select a good time to place the call, and remove distractions. Be sure to ask only for the needed information; "How are you since your hospital stay in...?," "Who are your present

physicians?" Answer questions honestly and promptly and, if the patient or third party asks a question out of your expertise, be sure to refer them to the appropriate person.

If the patient becomes "lost to follow-up, "and date of last contact is greater than 15 months, every effort should be made to locate the patient. Many times, a personal call to the physician's office, or a second letter, may elicit a very useful piece of information. Even if no other information is available, the call can alert the staff as to the need for additional follow-up information.

- Be organized; be able to produce an accurate list of patients due for follow-up
- Be consistent; develop routines. This is especially important for physician's offices that receive a large volume of follow-up requests.
- Be courteous; telephone manners are especially important when speaking with physician's offices, patients or other registries
- Be cooperative; helping someone else will bring rewards later
- Be inventive; try new ways of reaching your objective
- Be flexible; if someone seems unwilling to help, ask if you can call back at a more convenient time
- Give feedback; share your follow-up information with physicians, medical records, radiation therapy, administration, public relations, and other appropriate sources.

CONFIDENTIALITY AND RELEASE OF INFORMATION

The release of information involves accommodating general, case, and patient-specific data requests. Release of information must be closely supervised. Information may be requested by staff physicians, other cancer registries, or by national organizations. Some of the requests will be for general information that does not include patient identification. The facility may authorize the release of general information to specific groups. The registry staff could routinely respond to these requests for information and document releases in a request log: the request date, requestor's name or organization, information requested, intended use of the data, and the date the information was sent to the requestor should be included. Other requests may be for confidential information that would specifically identify the patient, the physician, or another individual. The registrar must comply with the hospital or reporting facility's established guidelines and procedures for release of confidential information. All requests must be processed according to those procedures and recorded in the request log. Each facility should coordinate with appropriate committees to develop and document policies and procedures that address the following:

< Data release criteria
< Patient rights
< Informed consent
< Authorization

REPORTING

Analysis and use of registry data are important end products of data collection. The ASCR encourages frequent use of the data and will provide facilities with appropriate reports for comparison with regional and national data. A critique of the data may identify trends and serve as the basis for quality management and planning.

RETENTION OF DOCUMENTS

Indefinite retention of registry data and files is required.

PROCEDURE MANUAL

The ASCR recommends that facilities maintain a complete, up-to-date procedure manual that documents each phase of its cancer reporting operations. A procedure manual is a valuable and necessary tool used to organize and maintain an effective, efficient program. A complete procedure manual details the overall structure of the reporting requirements and the day-to-day operations of the registry. When adhered to, this manual will ensure a smooth operation with consistent and accurate abstracting, systematic and continuous follow-up, and good reporting. The manual is also

invaluable for training new registry personnel. The procedure manual should contain the following: job descriptions and specifications of registry positions; case eligibility criteria; the reportable list; procedures for casefinding; maintaining and using the suspense file, and accessioning cases into the registry; a description of the registry filing systems; documentation of data collection methods, including principles of abstracting, detailed definitions for each data item, references used for coding systems, if applicable, and staging systems used in the registry; follow-up procedures, including institution and registry policies for contacting patients and samples of approved follow-up letters; documentation of quality control procedures; a description of reporting mechanisms; description of quality management and improvement system; policy statements about confidentiality and the release of information; and documentation of the date(s) of implementation or changes in policies or registry operations.

APPENDIX A: ALABAMA REPORTING SOURCES

Hospitals

Organization Name	City	FIN
Andalusia Regional Hospital	Andalusia	6530050
Athens-Limestone Hospital	Athens	6530090
Atmore Community Hospital	Atmore	6530100
Baptist Medical Center - East	Montgomery	6530800
Baptist Medical Center - Shelby	Alabaster	6530010
Baptist Medical Center - South	Montgomery	0020000190
Bibb Medical Center	Centreville	6530314
Brookwood Medical Center	Birmingham	6530175
Bryan W. Whitfield Memorial Hospital	Demopolis	6530345
Bullock County Hospital	Union Springs	6531013
Callahan Eye Foundation Hospital	Birmingham	6530187
Cherokee Baptist Medical Center	Centreville	6530313
Central Alabama Veterans Healthcare System (CAVHCS)	Montgomery	6530740
Childrens Hospital of Alabama	Birmingham	6530170
Choctaw General Hospital	Butler	6530311
Citizens Baptist Medical Center	Talladega	6530910
Clay County Hospital	Ashland	6530080
Community Hospital	Tallassee	6530380
Cooper Green Mercy Health Services	Birmingham	6530205
Coosa Valley Medical Center	Sylacauga	6530900
Crenshaw County Hospital	Luverne	6530585
Crestwood Medical Center	Huntsville	6530521
Cullman Regional Medical Center	Cullman	6530320
D.W. McMillan Memorial Hospital	Brewton	6530310
Dale Medical Center	Ozark	0010000186
DCH Regional Medical Center	Tuscaloosa	6530960
Decatur Morgan Hospital - Decatur General Campus	Decatur	6530330
Decatur Morgan Hospital – Parkway Campus	Decatur	6530330
DeKalb Baptist Medical Center	Fort Payne	6530455
East Alabama Medical Center	Opelika	0020000145
Elba General Hospital	Elba	6530382
Elmore Community Hospital	Wetumpka	6531017
Evergreen Medical Center	Evergreen	6530415
Fayette Medical Center	Fayette	6530425
Flowers Hospital	Dothan	6530350
Gadsden Regional Medical Center	Gadsden	6530460
Georgiana Hospital	Georgiana	6530478
Grandview Medical Center	Birmingham	6530161
Greene County Hospital	Eutaw	6530401
Grove Hill Memorial Hospital	Grove Hill	6530505
Hale County Hospital	Greensboro	6530480

Organization Name	City	FIN
Helen Keller Memorial	Sheffield	6530880
Highlands Medical Center	Scottsboro	6530823
Hill Hospital of Sumter County	York	6531040
Huntsville Hospital	Huntsville	6530510
J. Paul Jones Hospital	Camden	6539030
Jack Hughston Memorial	Phenix City	0010000628
Jackson Medical Center	Montgomery	6530530
Jackson Hospital & Clinics	Jackson	6530695
Jacksonville Medical Center	Jacksonville	6530535
L.V. Stabler Memorial Hospital	Greenville	6530500
Lake Martin Community Hospital	Dadeville	6530323
Lanier Memorial Hospital	Valley	0020000145
Lawrence Medical Center	Lawrence	6539110
Madison Hospital	Madison	6530510
Marshal Medical Center North	Madison	6530511
Marshall Medical Center South	Boaz	6530308
Medical Center Barbour	Eufaula	6530400
Medical Center Enterprise	Enterprise	6530390
Mizell Memorial Hospital	Opp	6530765
Mobile Infirmary	Mobile	6530620
Monroe County Hospital	Monroe	6530650
North Alabama Medical Center	Florence	6530440
North Baldwin Infirmary	Bay Minette	6530116
North Mississippi Medical Center-Hamilton	Hamilton	6530516
Northport Medical Center – DCH	Northport	6538099
Northwest Medical Center	Winfield	6531027
Pickens County Medical Center	Carrollton	6539015
Prattville Baptist Hospital	Prattville	6530780
Princeton Baptist Medical Center	Birmingham	6530160
Providence Hospital	Mobile	6530630
Randolph Medical Center	Roanoke	6530802
Red Bay Hospital	Red Bay	6539120
Regional Medical Center - Anniston	Anniston	6530070
Riverview Regional Medical Center	Gadsden	6530470
Russell Medical Center	Alexander City	6530030
Russellville Hospital	Russellville	6530810
Shoals Hospital	Muscle Shoals	6530901
South Baldwin Hospital	Foley	6530446
Southeast Health	Dothan	6530373
Springhill Memorial	Mobile	6530640
St. Vincent’s Birmingham	Birmingham	6530260
St. Vincent’s Blount	Oneonta	6530755
St. Vincent's East	Birmingham	6530180
St. Vincent’s St. Clair	Pell City	6530772

Organization Name	City	FIN
Stringfellow Memorial Hospital	Anniston	6530073
Thomas Hospital	Fairhope	6530417
Thomasville Regional Medical Center	Thomasville	0370009746
Troy Regional Medical Center	Troy	6530950
UAB Medical West	Bessemer	6530142
University of Alabama Hospitals	Birmingham	6530304
University of South Alabama Medical Center	Mobile	6530600
VA Medical Center Birmingham	Birmingham	6530305
Vaughan Regional Medical Center	Selma	6530860
Walker Baptist	Jasper	6530540
Washington County Infirmary	Washington	6530317
Wedowee Hospital	Wedowee	6539160
Wiregrass Medical Center	Geneva	6530475

Cancer Center

Organization Name	City	FID
21st Century Oncology Andalusia	Andalusia	0010001195
21st Century Oncology Dothan	Dothan	0010000668
Baldwin County Radiation Center	Fairhope	0370005301
Bethesda Regional Cancer Center - Florence	Florence	0370001112
Blood and Cancer Center - Florence	Florence	0370001101
Cancer Care Center – Jackson	Montgomery	0370001210
Cancer Care Center of Anniston	Anniston	0370001214
Cancer Care Center of Athens	Athens	0370001208
Cancer Care Center at Tuscaloosa	Tuscaloosa	0370001200
Cancer Care Center of Montgomery	Montgomery	0370001203
Cancer Care Center of Montgomery South	Montgomery	0370001200
Cancer Care Center in Demopolis	Demopolis	0370001207
Cancer Care Center of Providence	Mobile	0370001209
Clearview Cancer Center	Huntsville	0370001106
Coosa Valley Regional Cancer Center	Coosa Valley	0370001201
Cullman Radiation Therapy Services PC	Cullman	0370005306
Decatur Oncology	Decatur	0370001109
Dekalb Cancer Center	Dekalb	0370001103
Gulf Coast Cancer Center - Brewton	Brewton	0370001211
Gulf Coast Cancer Center - Daphne	Daphne	0370005307
Gulf Coast Cancer Center - Foley	Foley	0370005308
Gulf Coast Cancer Center - Gulf Shores	Gulf Shores	0370001216
Life First Oncology	Cullman	0370005306
Montgomery Cancer Center	Montgomery	0020000190
Northwest Alabama Cancer Center	Muscle Shoals	0370001104
Northwest Regional Cancer Center	Winfield	0370001105
Shelby Cancer Center	Alabaster	0370001202
Southeast Cancer Center – Mobile	Mobile	0370001206
Southwest Alabama Community Cancer Center	Monroeville	0370001217
Valley Regional Cancer Treatment Cancer	Sheffield	0370001107
Walker Cancer Center	Jasper	0370001108

Surgery Center

Organization Name	City	FID
Advanced Surgical Care, P.C.	Muscle Shoals	0370007207
Birmingham Surgery Center	Birmingham	0370007219
Decatur Ambulatory Surgery Center	Decatur	0370007211
Dothan Surgery Center	Dothan	0370007216
Eufaula General Surgery	Eufaula	0370007218
Gadsden Surgery Center	Gadsden	0370007206
General & Vascular Surgery of Northwest AL	Winfield	0370007222
Huntsville Endoscopy Center	Huntsville	0370007217
Madison Surgery Center	Madison	0370007205
Medical West Surgery Center	Birmingham	0370007208
Montgomery Surgical Center	Montgomery	0370007204
Northwest Surgical Center	Winfield	0370007209
Outpatient Services East	Trussville	0370007201
Plastic Surgery Specialist	Birmingham	0370007212
Shoals Outpatient Surgery Center	Shoals	0370007701
Surgical Group, P. C. - Florence	Florence	0370003101
The Surgery Center at Oxford	Oxford	0370007210
The Surgery Center of Cullman	Cullman	0370007213

Physician Offices

Organization Name	Specialty	City	FIN
A. Lynn Ridgeway, M.D.	Pulmonologist	Sheffield	0370003105
Affiliated Dermatology, P. C.	Dermatology	Dothan	0370003323
Alabama Skin Institute -B'ham	Dermatology	Hoover	0370003201
Ann Bennett, M.D.	Dermatology	Florence	0370003106
Anniston Dermatology	Dermatology	Oxford	0370015551
Baptist Health Centers	Dermatology	Hoover	0370003330
Bay Shore Dermatology, PC	Dermatology	Fairhope	0370003153
Brookwood Dermatology	Dermatology	Vestavia Hills	0370003202
Carlota Ob-Gyn, PC	Ob/Gyn	Athens	0370003315
Christopher B. Harmon	Dermatology	Birmingham	0370020579
Clinical Urology Associates	Urology	Gadsden	0370003324
Cullman Dermatology	Dermatology	Cullman	0370003109
David H Morgan, MD	Urology	Madison	0370018103
Decatur ENT Associates	ENT	Decatur	0370024976
Deep South Dermatology	Dermatology	Daphne	0370003306
Dermatology and Dermatologic Surgery	Dermatology	Daphne	0370003328
Dermatology and Laser of Alabama	Dermatology	Birmingham	0370003316
Dermatology Associates	Dermatology	Montgomery	0370003310
Dermatology Associates	Dermatology	Dothan	0370003151
Dermatology Plus	Dermatology	Birmingham	0370004114
Dothan Specialty Clinic - Dr.	Dermatology	Dothan	0370003305
Ginsburg Dermatology-B'ham	Dermatology	Birmingham	0370003150
Gulf Coast Derm and Skincare	Dermatology	Mobile	0370021520
Henderson and Walton	OBGYN	Birmingham	0370003325
Johnson, Carole L	Dermatology	Dothan	0370003156
Lane Medical Group	Dermatology	Monroeville	0370003303
Mallette Dermatology	Dermatology	Athens	0370003308
Martin Dermatology	Dermatology	Hoover	0370003214
Medical Specialists-North Alabama	Gastroenterology	Boaz	0370014641
Mobile Urology Group	Urology	Mobile	0370003302
Montclair Dermatology	Dermatology	Birmingham	0370003154
Northeast Alabama	Dermatology	Huntsville	0370003331
Northington Clinic – Florence	Cosmetic Surgery	Florence	0370003107
Primary Care Dermatology	Dermatology	Decatur	0370003311
Pynes, L Terry, MD	Dermatology	Dothan	0370003301
Sherrer W T, MD	Urology	Selma	0370016425

Organization Name	Specialty	City	FIN
Smith Dermatology PC	Dermatology	Cullman	0370003216
Southeastern Dermatology	Dermatology	Birmingham	0370003203
Tennessee River Dermatology	Dermatology	Florence	0370003110
Tennessee Valley ENT Clinic, PC	Otolaryngology	Sheffield	0370003309
Tennessee Valley Gynecologic, Oncology	Oncology	Huntsville	0370003307
The Center for Dermatology	Dermatology	Mobile	0370003155
The Dermatology Center	Dermatology	Mobile	0370003304
Total Skin and Beauty Lab	Dermatology	Birmingham	0370003205
Urologic Clinics of North	Urology	Huntsville	0370003322
Urology Centers of Alabama	Urology	Birmingham	0370003113
Urology Clinic of South	Urology	Andalusia	0370025839
Urology Specialists	Urology	Huntsville	0370003108
Yates, Ruth A, MD	Dermatology	Huntsville	0370013786
Yerubandi, MD	Surgery	Huntsville	0370011366

APPENDIX B: ALABAMA COUNTIES AND CODES

County	Code	County	Code	County	Code
Autauga	001	Dallas	047	Marion	093
Baldwin	003	DeKalb	049	Marshall	095
Barbour	005	Elmore	051	Mobile	097
Bibb	007	Escambia	053	Monroe	099
Blount	009	Etowah	055	Montgomery	101
Bullock	011	Fayette	057	Morgan	103
Butler	013	Franklin	059	Perry	105
Calhoun	015	Geneva	061	Pickens	107
Chambers	017	Greene	063	Pike	109
Cherokee	019	Hale	065	Randolph	111
Chilton	021	Henry	067	Russell	113
Choctaw	023	Houston	069	St.Clair	115
Clarke	025	Jackson	071	Shelby	117
Clay	027	Jefferson	073	Sumter	119
Cleburne	029	Lamar	075	Talledega	121
Coffee	031	Lauderdale	077	Tallapoosa	123
Colbert	033	Lawrence	079	Tuscaloosa	125
Conecuh	035	Lee	081	Walker	127
Coosa	037	Limestone	083	Washington	129
Covington	039	Lowndes	085	Wilcox	131
Crenshaw	041	Macon	087	Winston	133
Cullman	043	Madison	089	Unknown	999
Dale	045	Marengo	091	Out-of-state	998

APPENDIX C-1: GeoCode/Country/State Codes in USA

Rec#	GEOCODE	COUNTRY	STATE	LABEL
63	099	USA	AA	Armed Force
64	099	USA	AE	Armed Force
58	091	USA	AK	Alaska
25	037	USA	AL	Alabama
65	099	USA	AP	Armed Force
45	071	USA	AR	Arkansas
56	087	USA	AZ	Arizona
61	097	USA	CA	California
52	083	USA	CO	Colorado
8	007	USA	CT	Connecticut
16	022	USA	DC	District of Washington
13	017	USA	DE	Delaware
24	035	USA	FL	Florida
23	033	USA	GA	Georgia
62	099	USA	HI	Hawaii
35	053	USA	IA	Iowa
50	081	USA	ID	Idaho
40	061	USA	IL	Illinois
30	045	USA	IN	Indiana
42	065	USA	KS	Kansas
31	047	USA	KY	Kentucky
46	073	USA	LA	Louisiana
6	005	USA	MA	Massachusetts
15	021	USA	MD	Maryland
3	002	USA	ME	Maine
28	041	USA	MI	Michigan
34	052	USA	MN	Minnesota
41	063	USA	MO	Missouri
26	039	USA	MS	Mississippi
38	056	USA	MT	Montana
19	025	USA	NC	North Carolina
36	054	USA	ND	North Dakota
43	067	USA	NE	Nebraska
4	003	USA	NH	New Hampshire
9	008	USA	NJ	New Jersey
55	086	USA	NM	New Mexico
2	001	USA	NN	New England
54	085	USA	NV	Nevada
11	011	USA	NY	New York

Rec#	GEOCODE	COUNTRY	STATE	LABEL
29	043	USA	OH	Ohio
47	075	USA	OK	Oklahoma
60	095	USA	OR	Oregon
12	014	USA	PA	Pennsylvania
7	006	USA	RI	Rhode Island
20	026	USA	SC	South Carolina
37	055	USA	SD	South Dakota
22	031	USA	TN	Tennessee
48	077	USA	TX	Texas
1	000	USA	US	United States
10	010	USA	US	North Mid-
14	020	USA	US	South Mid-
21	030	USA	US	Southeastern
27	040	USA	US	North Central
32	050	USA	US	Northern M
39	060	USA	US	Central Mi
44	070	USA	US	Southern M
49	080	USA	US	Mountain S
57	090	USA	US	Pacific Co
53	084	USA	UT	Utah
17	023	USA	VA	Virginia
5	004	USA	VT	Vermont
59	093	USA	WA	Washington
33	051	USA	WI	Wisconsin
18	024	USA	WV	West Virginia
51	082	USA	WY	Wyoming

APPENDIX C-2: GeoCode/Country/State Codes in Other Countries

Rec#	GEOCODE	COUNTRY	STATE	LABEL
130	245	ABW	XX	Aruba
330	638	AFG	XX	Afghanistan
268	543	AGO	XX	Angola
114	245	AIA	XX	Anguilla
181	429	ALA	XX	Aland Islands
226	481	ALB	XX	Albania
194	443	AND	XX	Andorra
314	629	ARE	XX	United Arab
158	365	ARG	XX	Argentina
320	633	ARM	XX	Armenia
72	121	ASM	AS	American Samoa
385	750	ATA	XX	Antarctica
387	750	ATF	XX	French Southern Territories
115	245	ATG	XX	Antigua and Barbuda
363	711	AUS	XX	Australia
364	711	AUS	XX	Australia
188	436	AUT	XX	Austria
321	633	AZE	XX	Azerbaijan
286	579	BDI	XX	Burundi
185	433	BEL	XX	Belgium
251	539	BEN	XX	Benin
133	245	BES	XX	Bonaire, Saint Eustatius and Saba
240	520	BFA	XX	Burkina Faso
336	645	BGD	XX	Bangladesh
213	454	BGR	XX	Bulgaria
309	629	BHR	XX	Bahrain
135	247	BHS	XX	Bahamas
207	453	BIH	XX	Bosnia and Herzogovina
129	245	BLM	XX	St. Barthelemy
218	457	BLR	XX	Belarus
139	252	BLZ	XX	Belize
134	246	BMU	XX	Bermuda
348	671	BRN	XX	Brunei
156	355	BOL	XX	Bolivia
153	341	BRA	XX	Brazil
116	245	BRB	XX	Barbados
335	643	BTN	XX	Bhutan
386	750	BVT	XX	Bouvet Island
272	545	BWA	XX	Botswana
253	539	CAF	XX	Central African Republic
99	224	CAN	AB	Alberta

Rec#	GEOCODE	COUNTRY	STATE	LABEL
105	226	CAN	BC	British Columbia
90	220	CAN	CD	Canada
100	224	CAN	MB	Manitoba
91	221	CAN	MM	Maritime Provinces (New Brunswick, Newfound, Nova Scotia, PE)
92	221	CAN	NB	New Brunswick
93	221	CAN	NL	Newfoundland and Labrador
94	221	CAN	NS	Nova Scotia
103	225	CAN	NT	Northwest
106	227	CAN	NU	Nunavut
97	223	CAN	ON	Ontario
95	221	CAN	PE	Prince Edward Island
98	224	CAN	PP	Prairie Provinces (Alberta, Manitoba, Saskatchewan)
96	222	CAN	QC	Quebec
101	224	CAN	SK	Saskatchewan
102	225	CAN	YN	Northwest
104	225	CAN	YT	Yukon Territory
367	711	CCK	XX	Cocos (Keeling) Island
187	435	CHE	XX	Switzerland
157	361	CHL	XX	Chile
354	682	CHN	XX	China
357	685	CHN	XX	China
254	539	CIV	XX	Cote d'Ivoire
252	539	CMR	XX	Cameroon
267	541	COD	XX	Congo, Democratic Republic of
255	539	COG	XX	Congo
75	124	COK	XX	Cook Island
148	311	COL	XX	Colombia
288	580	COM	XX	Comoros
196	445	CPV	XX	Cape Verde
143	256	CRI	XX	Costa Rica
109	241	CUB	XX	Cuba
131	245	CUW	XX	Curacao
366	711	CXR	XX	Christmas
118	245	CYM	XX	Cayman Islands
230	495	CYP	XX	Cyprus
204	452	CZE	XX	Czech Republic
183	431	DEU	XX	Germany
296	583	DJI	XX	Djibouti
119	245	DMA	XX	Dominica
177	425	DNK	XX	Denmark
111	243	DOM	XX	Dominican
235	513	DZA	XX	Algeria

Rec#	GEOCODE	COUNTRY	STATE	LABEL
154	345	ECU	XX	Ecuador
238	519	EGY	XX	Egypt
165	401	ENG	XX	England
299	585	ERI	XX	Eritrea
247	520	ESH	XX	Western Sahara
193	443	ESP	XX	Spain
219	458	EST	XX	Estonia
298	585	ETH	XX	Ethiopia
180	429	FIN	XX	Finland
372	721	FJI	XX	Fiji
162	381	FLK	XX	Falkland Islands
191	441	FRA	XX	France
178	425	FRO	XX	Faroe Islands
74	123	FSM	FM	Micronesia
258	539	GAB	XX	Gabon
163	400	GBR	XX	United Kingdom
322	633	GEO	XX	Georgia
166	401	GGY	XX	Guernsey
259	539	GHA	XX	Ghana
227	485	GIB	XX	Gibraltar
260	539	GIN	XX	Guinea
121	245	GLP	XX	Guadeloupe
257	539	GMB	XX	Gambia
261	539	GNB	XX	Guinea Bissau
256	539	GNQ	XX	Equatorial
224	471	GRC	XX	Greece
120	245	GRD	XX	Grenada
89	210	GRL	XX	Greenland
138	251	GTM	XX	Guatemala
152	333	GUF	XX	French Guiana
77	126	GUM	GU	Guam
150	331	GUY	XX	Guyana
355	683	HKG	XX	Hong Kong
388	750	HMD	XX	Heard Island and McDonald Islands
140	253	HND	XX	Honduras
208	453	HRV	XX	Croatia
110	242	HTI	XX	Haiti
225	475	HUN	XX	Hungary
349	673	IDN	XX	Indonesia
168	401	IMN	XX	Isle of Man
333	641	IND	XX	India

Rec#	GEOCODE	COUNTRY	STATE	LABEL
294	580	IOT	XX	British Indian Ocean Territory
172	410	IRL	XX	Ireland
329	637	IRN	XX	Iran
307	627	IRQ	XX	Iraq
174	421	ISL	XX	Iceland
317	631	ISR	XX	Israel
197	447	ITA	XX	Italy
112	244	JAM	XX	Jamaica
167	401	JEY	XX	Jersey
306	625	JOR	XX	Jordan
82	133	JPN	XX	Japan
83	134	JPN	XX	Japan
360	693	JPN	XX	Japan
324	634	KAZ	XX	Kazakhstan
284	575	KEN	XX	Kenya
325	634	KGZ	XX	Kyrgyzstan
343	663	KHM	XX	Cambodia
73	122	KIR	XX	Kiribati
124	245	KNA	XX	St. Kitts and Nevis
361	695	KOR	XX	South Korean
310	629	KWT	XX	Kuwait
342	661	LAO	XX	Laos
305	623	LBN	XX	Lebanon
262	539	LBR	XX	Liberia
237	517	LBY	XX	Libya
125	245	LCA	XX	St. Lucia
189	437	LIE	XX	Liechtenstein
337	647	LKA	XX	Sri Lanka
273	545	LSO	XX	Lesotho
221	461	LTU	XX	Lithuania
186	434	LUX	XX	Luxembourg
220	459	LVA	XX	Latvia
358	686	MAC	XX	Macao
234	511	MAR	XX	Morocco
192	441	MCO	XX	Monaco
217	456	MDA	XX	Moldova
280	555	MDG	XX	Madagascar
332	640	MDV	XX	Maldives
107	230	MEX	XX	Mexico
80	131	MHL	MH	Marshall Islands
209	453	MKD	XX	Macedonia
242	520	MLI	XX	Mali

Rec#	GEOCODE	COUNTRY	STATE	LABEL
229	491	MLT	XX	Malta
338	649	MMR	XX	Myanmar
210	453	MNE	XX	Montenegro
359	691	MNG	XX	Mongolia
79	129	MNP	MP	Northern Mariana Islands
279	553	MOZ	XX	Mozambique
243	520	MRT	XX	Mauritania
123	245	MSR	XX	Montserrat
122	245	MTQ	XX	Martinique
289	580	MUS	XX	Mauritius
278	551	MWI	XX	Malawi
346	671	MYS	XX	Malaysia
290	580	MYT	XX	Mayotte
274	545	NAM	XX	Namibia
375	721	NCL	XX	New Caledonia
244	520	NER	XX	Niger
381	725	NFK	XX	Norfolk Island
249	531	NGA	XX	Nigeria
142	255	NIC	XX	Nicaragua
171	404	NIR	XX	Northern Ireland (Ulster)
369	715	NIU	XX	Niue
184	432	NLD	XX	Netherland
175	423	NOR	XX	Norway
334	643	NPL	XX	Nepal
378	723	NRU	XX	Nauru
368	715	NZL	XX	New Zealand
311	629	OMN	XX	Oman
331	639	PAK	XX	Pakistan
70	110	PAN	XX	Panama
144	257	PAN	XX	Panama
382	725	PCN	XX	Pitcairn Islands
155	351	PER	XX	Peru
351	675	PHL	XX	Philippine
87	139	PLW	PW	Palau (Trust Territory of Pacific Islands)
365	711	PNG	XX	Papua New
202	451	POL	XX	Poland
67	101	PRI	PR	Puerto Rico
362	695	PRK	XX	North Korean
195	445	PRT	XX	Portugal
159	371	PRY	XX	Paraguay
318	631	PSE	XX	Palestine
380	725	PYF	XX	French Polynesia

Rec#	GEOCODE	COUNTRY	STATE	LABEL
312	629	QAT	XX	Qatar
291	580	REU	XX	Mayotte
200	449	ROU	XX	Romania
214	455	RUS	XX	Russia
285	577	RWA	XX	Rwanda
313	629	SAU	XX	Saudi Arab
170	403	SCT	XX	Scotland
245	520	SDN	XX	Sudan
263	539	SEN	XX	Senegal
347	671	SGP	XX	Singapore
389	750	SGS	XX	South Georgia and the South Sandwich Islands
292	580	SHN	XX	St. Helena
176	423	SJM	XX	Svalbard and Jan Mayen
373	721	SLB	XX	Solomon Islands
264	539	SLE	XX	Sierra Leo
141	254	SLV	XX	El Salvador
198	447	SMR	XX	San Marino
295	581	SOM	XX	Somalia
136	249	SPM	XX	St Pierre
211	453	SRB	XX	Serbia
246	520	SSD	XX	South Sudan
269	543	STP	XX	Sao Tome & Principe
151	332	SUR	XX	Suriname
212	453	SVN	XX	Slovenia
179	427	SWE	XX	Sweden
205	452	SVK	XX	Slovakia
275	545	SWZ	XX	Swaziland
132	245	SXM	XX	Sint-Maarten
293	580	SYC	XX	Seychelles
304	621	SYR	XX	Syria
128	245	TCA	XX	Turks and Caicos
241	520	TCD	XX	Chad
265	539	TGO	XX	Togo
340	651	THA	XX	Thailand
326	634	TJK	XX	Tajikistan
85	136	TKL	XX	Tokelau Is
327	634	TKM	XX	Turkmenistan
350	673	TLS	XX	Timor-Leste
384	725	TON	XX	Tonga
127	245	TTO	XX	Trinidad and Tobago
236	515	TUN	XX	Tunisia
302	611	TUR	XX	Turkey

Rec#	GEOCODE	COUNTRY	STATE	LABEL
76	125	TUV	XX	Tuvalu
356	684	TWN	XX	Taiwan
282	571	TZA	XX	Tanzania
283	573	UGA	XX	Uganda
216	456	UKR	XX	Ukraine
78	127	UMI	UM	U.S. Minor
81	132	UMI	UM	U.S. Minor
84	135	UMI	UM	U.S. Minor
86	137	UMI	UM	U.S. Minor
160	375	URY	XX	Uruguay
328	634	UZB	XX	Uzbekistan
199	447	VAT	XX	Vatican City
126	245	VCT	XX	St. Vincent and the Grenadines
149	321	VEN	XX	Venezuela
117	245	VGB	XX	British Virgin Islands
68	102	VIR	VI	U.S. Virgin Islands
374	721	VUT	XX	Vanuatu
344	665	VNM	XX	Vietnam
376	721	WLF	XX	Wallis and Fotuna
169	402	WLS	XX	Wales
383	725	WSM	XX	Samoa
308	629	XAP	YY	Arabian Peninsula
113	245	XCB	YY	Other Caribbean Islands
353	681	XCH	YY	China, NOS
319	633	XCR	YY	Caucasian
203	452	CSK	YY	Czechoslov
281	570	XEF	YY	East Africa
164	401	XEN	XX	England, Channel Islands, Isle of Man
297	585	XET	YY	Ethiopia (Abyssinia), Eritrea
182	430	XGR	YY	Germanic Countries
287	580	XIF	YY	African Coastal Islands (previously in South Africa, NOS)
316	631	XIS	YY	Israel and former Jewish Palestine
377	723	XMC	YY	Micronesia
371	721	XML	YY	Melanesian
345	671	XMS	YY	Malaysia,
233	510	XNF	YY	North Africa
108	240	XNI	YY	North American Islands
323	634	XOR	YY	Other Asia
379	725	XPL	YY	Polynesian
173	420	XSC	YY	Scandinavia
239	520	XSD	YY	Sudanese Countries
339	650	XSE	YY	Southeast

Rec#	GEOCODE	COUNTRY	STATE	LABEL
341	660	XSE	YY	Indochina
266	540	XSF	YY	South Africa, NOS
201	450	XSL	XX	Slavic Countries
215	456	XUM	YY	Ukraine an
248	530	XWF	YY	West Africa
250	539	XWF	YY	Other West
206	453	YUG	YY	Yugoslavia
315	629	YEM	XX	Yemen
271	545	ZAF	XX	Republic of South Africa
277	549	ZMB	XX	Zambia
276	547	ZWE	XX	Zimbabwe
300	600	ZZA	YY	Asia, NOS
301	610	ZZA	YY	Asia, NOS
303	620	ZZA	YY	Asia, NOS
352	680	ZZA	YY	Asia, NOS
137	250	ZZC	XX	Central America, NOS
190	440	ZZE	YY	Europe, NOS
222	463	ZZE	YY	Europe, NOS
223	470	ZZE	YY	Europe, NOS
228	490	ZZE	YY	Europe, NOS
231	499	ZZE	YY	Europe, NOS
232	500	ZZF	YY	Africa, NOS
66	100	ZZN	YY	North America, NOS
69	109	ZZN	YY	North America
71	120	ZZP	YY	Pacific, NOS
147	300	ZZS	YY	South America
161	380	ZZS	YY	South America
146	265	ZZU	YY	Unknown
391	999	ZZU	ZZ	Unknown
390	998	ZZX	YY	Non-US/Canada, NOS

See http://seer.cancer.gov/manuals/2013/SPCSM_2013_AppendixB.pdf

APPENDIX D: ASCR CASEFINDING LIST (2020)

Casefinding Codes for ICD-O-3 Reportable Diseases

Please use the SEER link below for the most current ICD-10-CM list. Effective dates are 10/01/2019 – 09/30/2020. Previous ICD-10-CM codes are also located at the link

https://seer.cancer.gov/tools/casefinding/

The following lists are intended to assist in identifying reportable neoplasms found through casefinding sources that use ICD-10-CM codes to classify the diagnoses. These codes are to be effective with newly diagnosed cases beginning with October 1, 2019

ICD-10-CM Code	Explanation of Code
C00.-- *C43.-*, C4A.-, C45.-- C96.-	Malignant neoplasms (excluding category C44), stated or presumed to be primary (of specified site) and certain specified histologies
D00.-- D 09.-	In-situ neoplasms *Note: Carcinoma in situ of the cervix (CIN 111-8077/2) and Prostatic Intraepithelial Carcinoma {PIN 111-8148/2) are not reportable*
D18.1	Lymphangioma, any site *Note: Includes Lymphangiomas of Brain, Other parts of nervous system and endocrine glands, which are reportable*
D18.02	Hemangioma of intracranial structures and any site
D32.-	Benign neoplasm of meninges (cerebral, spinal and unspecified)
D33.-	Benign neoplasm of brain and other parts of central nervous system (includes Olfactory, Optic, Acoustic and Cranial Nerves)
D35.2- D35.4	Benign neoplasm of pituitary gland, craniopharyngeal duct and pineal gland
D37._ - D41._	Neoplasms of uncertain or unknown behavior (see "must collect" list for reportable neoplasms of uncertain or unknown behavior) *Note: Screen for incorrectly coded malignancies or reportable by agreement*
D42.-, D43.-	Neoplasm of uncertain or unknown behavior of meninges, brain, CNS
D44.3 - D44.5	Neoplasm of uncertain or unknown behavior of pituitary gland, craniopharyngeal duct and pineal gland
D45	Polycythemia vera (9950/3)
D46.-	Myelodysplastic syndromes (9980, 9982, 9983, 9985, 9986, 9989, 9991, 9992)
D47.0	Histiocytic and mast cell tumors of uncertain behavior *ICD-10-CM Coding instruction note: Excludes: malignant mast cell tumor (C96.2), mastocytosis (congenital) (cutaneous) (0852.2)*
D47.1	Chronic myeloproliferative disease (9963/3, 9975/3) *ICD-10-CM Coding instruction note: Excludes the following:* *Atypical chronic myeloid leukemia BCR/ABL-negative (C92.2_)* *Chronic myeloid leukemia BCR/ABL-positive (C92.1_)* *Myelofibrosis & Secondary myelofibrosis {D75.81) Myelophthisic anemia & Myelophthisis {D61.82)*
D47.3	Essential (hemorrhagic) thrombocythemia (9962/3) *Includes: Essential thrombocytosis, idiopathic hemorrhagic thrombocythemia*

D47.4	Osteomyelofibrosis {9961/3) Includes: Chronic idiopathic myelofibrosis Myelofibrosis (idiopathic) (with myeloid metaplasia) Myelosclerosis (megakaryocytic) with myeloid metaplasia) Secondary myelofibrosis in myeloproliferative disease
D47.Z-	Neoplasm of uncertain behavior of lymphoid, hematopoietic and related tissue, unspecified (9960/3,9970/1,9971/3,9931/3)
D47.9	Neoplasm of uncertain behavior of lymphoid, hematopoietic and related tissue, unspecified (9970/1,9931/3)
D49.6, D49.7	Neoplasm of unspecified behavior of brain, endocrine glands and other CNS
D63.0	Anemia in neoplastic disease
D64.81	Anemia due to antineoplastic chemotherapy
D72.1	Hypereosinophilic syndrome (9964/3)*
D76.1 – D76.3	Hemophagocytic syndromes. *Reportable inclusion terms: Histiocytic syndromes (9751/3)* Note: Hemophagocytic lymphohistiocytosis (also known as hemophagocytic syndrome) can be caused by or associated with a number of conditions, one of which is EBV+ T- cell lymphoproliferative disease of childhood (9724/3)
D81.6, D81.7, D81.89, D81.9, D84.9	Immunodeficiency, unspecified *Note: Associated with lymphoproliferative disorders*
D89.1	Gamma heavy chain disease; Franklin's disease
J91.0	Malignant pleural effusion *Note : Code first malignant neoplasm, if known*
R18.0	Malignant ascites *Note: Code first malignancy*
R85.614	Cytologic evidence of malignancy on smear of anus
R87.614	Cytologic evidence of malignancy on smear of cervix
R87.624	Cytologic evidence of malignancy on smear of vagina
Z03.89	Observation for suspected malignant neoplasm
Z12.31	Encounter for screening mammogram for malignant neoplasm of breast
Z51.0	Admission for radiotherapy
Z51.11	Encounter for antineoplastic chemotherapy
Z51.12	Encounter for antineoplastic immunotherapy

	Supplemental Codes
B20	Human immunodeficiency virus [HIV] disease with other diseases
B97.33, B97.34,	Papillomarvirus as the cause of diseases classified elsewhere
B97.35, B97.7	Human T-cell lymphotrophic virus,(type I [HTLV-1], type II [HTLV-11],type 2 [HIV 2]) as the cause of diseases classified elsewhere
Q85._	Neurofibromatosis (nonmalignant) (9540/1) *Note: Neurofibromatosis is not cancer. These tumors can be precursors to acoustic neuromas, which are reportable*

Please note:

- The central registry does **NOT** collect PIN III, CIN III, and CIS of the cervix.
- Borderline cystadenomas M-8442, 8451, 8462, 8472, 8473, of the ovaries which move from /3 to /1 will **NOT** be collected as of 1/1/2001, but cases diagnosed before 1/1/2001 will continue to be submitted to the central registry.
- Basal and Squamous cell carcinoma of the skin are not reportable but tumors that originate in the mucous membrane are reportable and include the following:

Lip	C00.0 – C00.9
Anus	C21.0
Labia	C51.0 – C51.1
Clitoris	C51.2
Vulva	C51.9
Vagina	C52.9
Prepuce	C60.0
Penis	C60.1 – C60.9
Scrotum	C63.2

- All melanomas are reportable.
- As of 1/1/2003 cases of in situ, localized, regional, or distant neoplasm of the skin (ICD-O Topography codes C44.0 – C44.9) with the following ICD-O Morphology codes are **NOT** reportable to ASCR.

M 8000 – 8004	Neoplasms, NOS
M 8010 – 8045	Epithelial neoplasms
M 8050 – 8082	Squamous cell neoplasms of the skin
M 8090 – 8110	Basal cell neoplasms of the skin

- The following terms are synonymous with in situ disease (Behavior code 2)
  - Adenocarcinoma in an adenomatous polyp with no invasion of stalk
  - Bowen's disease
  - Cervical intraepithelial neoplasia or CIN III (not reportable)
  - Clark's level I melanoma or limited to epithelium
  - Non-infiltrating comedocarcinoma, confined to epithelium
  - Hutchison's melanotic freckle NOS, intracystic non-infiltrating, intraductal, intraepithelium NOS, intraepidermal NOS (involvement up to but no including basement membrane.)
  - Lentigo maligna, lobular neoplasia, lobular non-infiltrating, noninvasive, no stromal involvement, Papillary non-infiltrating or intraductal
  - Precancerous melanosis
  - Prostatic intraepithelial neoplasia Grade III or PIN III (not reportable)
  - Queyrat's erthroplasia, stage 0
  - Vaginal intraepithelial neoplasia Grade III or VAIN III
  - Vulvar intraepithelial neoplasia Grade III or VIN III
  - Laryngeal intraepithelial neoplasia, grade III (LINIII) (8077/2), C320-C329) is REPORTABLE.
  - Squamous intraepithelial neoplasia, grade III (SINIII) (8077/2), except Cervix and Skin, is REPORTABLE.
- If any invasion is present, no matter how limited – these cases must be coded to invasive behavior

  Example: carcinoma in situ 8010/2 of vagina with microinvasion would be coded as invasive carcinoma 8010/3
- All cancer cases should be reported regardless of the patient's state of residency at the time of diagnosis. Cases from other states will be reported to that state but not included in Alabama statistics.

- All in situ cancer cases of the vagina, vulva, and anus are reportable to ASCR. VAIN III, VIN III, AIN III with morphology code of 8077/2
- One other NEW code of note with the October 1, 2007 revisions (but not necessarily for casefinding) is 789.51 (R18.0) malignant ascites…however; the primary site malignancy should be coded first rather than symptoms such as malignant ascites.
- 511.81(J91.0) - Malignant Pleural Effusion

- Carcinoid tumor, NOS, of the appendix is now reportable and should be coded to 8240/3.

- Urine cytology positive for malignancy is reportable for diagnoses in 2013 and forward
  Code the primary site to 689 in the absence of any other information
  Exception: When a subsequent biopsy of a urinary site is negative, do not report
  Do not implement new/additional casefindings methods to capture these cases
  Do not report cytology cases with ambiguous terminology

- Recode the following conditions as shown.

  - Recode all cases of enteroglucogonoma, NOS, as 8152/1. *Enteroglucagonoma is now a related term for glucogonoma.*
  - Then delete code 8157/1 Enteroglucagonoma, NOS
  - Recode all cases of enteroglucagonoma, malignant as 8152/3. *Enteroglucagonoma, malignant is now a related term for glucogonoma, malignant.*
  - Then delete code 8157/3 Enteroglucagonoma, malignant

NOTE: It is important to understand that cancer registry reportability rules based on behavior code still apply. With the exception of primary intracranial and central nervous system benign and borderline tumors, the addition of a /0 or /1 coded term to ICD-O-3 does not imply that it is now reportable.

Changes for ICD O-3 for 2016 Forward Diagnosed Cases

ICD-O-3 IMPLEMENTATION AND REPORTABILITY

In 2014 and 2015 SEER added new reportable histology terms to their Program and Coding Manual. These terms had not been included in any ICD-O-3 errata or implementation guide and therefore were not addressed throughout the cancer surveillance community. CDC has reviewed the terms (reportable according to SEER) and made the following decisions:

1. Non-invasive mucinous cystic neoplasm of the pancreas with high-grade dysplasia replaces mucinous cystadenocarcinoma, non-invasive (8470/2) and is REPORTABLE.
2. Solid pseudopapillary neoplasm of pancreas (8452/3) is synonymous with solid pseudopapillary carcinoma (C25._) and is REPORTABLE.
3. Based on expert pathologist consultation, metastases have been reported in some cystic pancreatic endocrine neoplasm (CPEN) cases. With all other pancreatic endocrine tumors now considered malignant, CPEN will also be considered malignant, until proven otherwise. Most CPEN cases are non-functioning and are REPORTABLE using histology code 8150/3, unless the tumor is specified as a neuroendocrine tumor, grade 1 (assign code 8240/3) or neuroendocrine tumor, grade 2 (assign code 8249/3)
4. Laryngeal intraepithelial neoplasia, grade III (LINIII) (8077/2), C320-C329) is REPORTABLE.
5. Squamous intraepithelial neoplasia, grade III (SINIII) (8077/2), except Cervix and Skin, is REPORTABLE.
6. Mature teratoma of the testes in adults is malignant and REPORTABLE as 9080/3, but continues to be non-reportable in prepubescent children (9080/0). The following provides additional guidance:
    - Adult is defined as post puberty
    - Pubescence can take place over a number of years
    - Do not rely solely on age to indicate pre or post puberty status. Review all information (physical history, etc.) for documentation of pubertal status. When testicular teratomas occur in adult males, pubescent status is likely to be stated in the medical record because it is an important factor of the diagnosis.
    - Do not report if unknown whether patient is pre or post pubescence. When testicular teratoma occurs in a male and there is no mention of pubescence, it is likely that the patient is a child, or pre-pubescent, and the tumor is benign.

While there has not been an official errata to address these histology terms, CDC recommends adding them to your ICD-O-3 Manuals.

The link below provides NAACCR updated Implementation Guidelines to terms and ICD-O-3 codes for cases diagnosed on or after Jan. 1, 2018

https://www.naaccr.org/icdo3/

Site Specific Data Items-Schema List and Grade Manual

(Data last updated: Aug 27, 2019 version 1.7)

Effective with Cases Diagnosed 1/1/2018 and Forward

This link below provides the most current search/coding manuals for SSDI fields and grade manual

https://apps.naaccr.org/ssdi/list/

SEER 2018 Solid Tumor Rules

Effective for cases diagnosed Jan 1, 2019

Use the 2007 General Instructions for Other Sites and Cutaneous Melanoma for cases diagnosed 2007 – 2020

The link below provides the most current coding for the 2018 Solid Tumor rules

https://seer.cancer.gov/tools/solidtumor/

Summary Stage 2018

Released Sept. 4, 2019 Version 1.7

The link below is for the 2018 version of Summary Stage and applies to every site and/or histology combination including lymphomas and leukemias. Effective for cases diagnosed Jan 1, 2018 forward

https://seer.cancer.gov/tools/ssm/

APPENDIX E: ASCR REQUIRED DATA ELEMENTS (Version v18

Below are the ASCR Data Items for v18. The Color Coding System is colored backgrounds for items in the table. The coloring of the items are indicated in the key at the start of the table. An expanded key is located at the end of the two tables explaining the NPCR recommendation for data collection.

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
10	Record Type	R		
20	Patient ID Number	R		
21	Patient System ID-Hosp	.		
30	Registry Type	.		
37	Reserved 00			
40	Registry ID	R		
45	NPI--Registry ID	.		
50	NAACCR Record Version	R		
60	Tumor Record Number	.		
70	Addr at DX--City	R		
80	Addr at DX--State	R		
81	State at DX Geocode 1970/80/90	D	**New**	
82	State at DX Geocode 2000	D	**New**	
83	State at DX Geocode 2010	D	**New**	
84	State at DX Geocode 2020	D	**New**	
89	County at DX Analysis	D	**New**	
90	County at DX Reported	R	Revised	
94	County at DX Geocode 1970/80/90	D	Revised	
95	County at DX Geocode2000	D		
96	County at DX Geocode2010	D		
97	County at DX Geocode2020	D	Revised	
100	Addr at DX--Postal Code	R		
102	Addr at DX--Country	.		
110	Census Tract 1970/80/90	RH*		
120	Census Cod Sys 1970/80/90	RH*		

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
125	Census Tract 2020	D	**New**	
130	Census Tract 2000	RH		
135	Census Tract 2010	R		
145	Census Tr Poverty Indictr	R		
150	Marital Status at DX	.		
160	Race 1	R		
161	Race 2	R		
162	Race 3	R		
163	Race 4	R		
164	Race 5	R		
170	Race Coding Sys--Current	.		
180	Race Coding Sys--Original	.		
190	Spanish/Hispanic Origin	R		
191	NHIA Derived Hisp Origin	D		
192	IHS Link	R*		
193	Race--NAPIIA(derived API)	R		
200	Computed Ethnicity	R		
210	Computed Ethnicity Source	R		
220	Sex	R	Revised	
230	Age at Diagnosis	R		
240	Date of Birth	R	Revised	
241	Date of Birth Flag	R		
250	Birthplace	RH*	Revised	
252	Birthplace--State	R*	Revised	
254	Birthplace--Country	R*	Revised	
270	Census Occ Code 1970-2000	R*		
272	Census Ind Code 2010 CDC	R*		
280	Census Ind Code 1970-2000	R*		
282	Census Occ Code 2010 CDC	R*		
290	Occupation Source	R*		
300	Industry Source	R*		
310	Text--Usual Occupation	R*		
320	Text--Usual Industry	R*		

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
330	Census Occ/Ind Sys 70-00	R*		
339	RUCA 2000	D	**New**	
341	RUCA 2010	D	**New**	
345	URIC 2000	D	**New**	
346	URIC 2010	D	**New**	
351	GeoLocationID - 1970/80/90	D	**New**	
352	GeoLocationID - 2000	D	**New**	
353	GeoLocationID - 2010	D	**New**	
354	GeoLocationID - 2020	D	**New**	
361	Census Block Group 2020	.	**New**	
362	Census Block Group 2000	.		
363	Census Block Group 2010	.		
364	Census Tr Cert 1970/80/90	RH*		
365	Census Tr Certainty 2000	RH		
366	GIS Coordinate Quality	R*		
367	Census Tr Certainty 2010	R		
368	Census Block Grp 1970/80/90	.	Revised	
369	Census Tract Certainty 2020	D	**New**	
370	Reserved 01			
380	Sequence Number--Central	R		
390	Date of Diagnosis	R		
391	Date of Diagnosis Flag	R		
400	Primary Site	R		
410	Laterality	R	Revised	
419	Morph--Type&Behav ICD-O-2	.		
420	Histology (92-00) ICD-O-2	RH		
430	Behavior (92-00) ICD-O-2	RH		
439	Date of Mult Tumors Flag	.		
440	Grade	R	Revised	
441	Grade Path Value	RH*		
442	Ambiguous Terminology DX	.		
443	Date Conclusive DX	.		
444	Mult Tum Rpt as One Prim	.		

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
445	Date of Mult Tumors	.		
446	Multiplicity Counter	.		
448	Date Conclusive DX Flag	.		
449	Grade Path System	RH*		
450	Site Coding Sys--Current	R		
460	Site Coding Sys--Original	.		
470	Morph Coding Sys--Current	R	Revised	
480	Morph Coding Sys--Originl	.		
490	Diagnostic Confirmation	R		
500	Type of Reporting Source	R		
501	Casefinding Source	R*		
521	Morph--Type&Behav ICD-O-3	.		
522	Histologic Type ICD-O-3	R		
523	Behavior Code ICD-O-3	R		
530	Reserved 02			
540	Reporting Facility	R		
545	NPI--Reporting Facility	R*		
550	Accession Number--Hosp	.		
560	Sequence Number--Hospital	.		
570	Abstracted By	.		
580	Date of 1st Contact	R		
581	Date of 1st Contact Flag	R		
590	Date of Inpt Adm	.		
591	Date of Inpt Adm Flag	.		
600	Date of Inpt Disch	.		
601	Date of Inpt Disch Flag	.		
605	Inpatient Status	.		
610	Class of Case	R		
630	Primary Payer at DX	R*		
668	RX Hosp--Surg App 2010	.		
670	RX Hosp--Surg Prim Site	.		
672	RX Hosp--Scope Reg LN Sur	.		
674	RX Hosp--Surg Oth Reg/Dis	.		

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
676	RX Hosp--Reg LN Removed	.		
680	Reserved 03			
682	Date Regional Lymph Node Dissection	.	**New**	
683	Date Regional Lymph Node Dissection Flag	.	**New**	
690	RX Hosp--Radiation	.		
700	RX Hosp--Chemo	.		
710	RX Hosp--Hormone	.		
720	RX Hosp--BRM	.		
730	RX Hosp--Other	.		
740	RX Hosp--DX/Stg Proc	.		
746	RX Hosp--Surg Site 98-02	.		
747	RX Hosp--Scope Reg 98-02	.		
748	RX Hosp--Surg Oth 98-02	.		
750	Reserved 04			
752	Tumor Size Clinical	.	Revised	
754	Tumor Size Pathologic	.	Revised	
756	Tumor Size Summary	R		
759	SEER Summary Stage 2000	**RH**	Revised	
760	SEER Summary Stage 1977	RH		
762	Derived Summary Stage 2018	.	Revised	
764	Summary Stage 2018	R	Revised	
772	EOD Primary Tumor	**.**	Revised	
774	EOD Regional Nodes	**.**	Revised	
776	EOD Mets	**.**	Revised	
779	Extent of Disease 10-Dig	RN	Revised	
780	EOD--Tumor Size	RN	Revised	
785	Derived EOD 2018 T	.	**New**	
790	EOD--Extension	RN	Revised	
795	Derived EOD 2018 M	.	**New**	
800	EOD--Extension Prost Path	**RH**	Revised	
810	EOD--Lymph Node Involv	**RH**		
815	Derived EOD 2018 N	**RN**	**New**	
818	Derived EOD 2018 Stage Group	**RN**	**New**	

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
820	Regional Nodes Positive	R		
830	Regional Nodes Examined	R		
832	Date of Sentinel Lymph Node Biopsy	.	**New**	
833	Date Sentinel Lymph Node Biopsy Flag	.	**New**	
834	Sentinel Lymph Nodes Examined	.	**New**	
835	Sentinel Lymph Nodes Positive	.	**New**	
840	EOD--Old 13 Digit	.		
850	EOD--Old 2 Digit	.		
860	EOD--Old 4 Digit	.		
870	Coding System for EOD	.		
880	TNM Path T	RH	Revised	
890	TNM Path N	RH	Revised	
900	TNM Path M	RH	Revised	
910	TNM Path Stage Group	RH	Revised	
920	TNM Path Descriptor	RH	Revised	
930	TNM Path Staged By	.	Revised	
940	TNM Clin T	RH	Revised	
950	TNM Clin N	RH	Revised	
960	TNM Clin M	RH	Revised	
970	TNM Clin Stage Group	RH	Revised	
980	TNM Clin Descriptor	RH	Revised	
990	TNM Clin Staged By	.	Revised	
995	AJCC ID	**D**	**New**	
1001	AJCC TNM Clin T	**.**	**New**	
1002	AJCC TNM Clin N	**.**	**New**	
1003	AJCC TNM Clin M	**.**	**New**	
1004	AJCC TNM Clin Stage Group	**.**	**New**	
1011	AJCC TNM Path T	**.**	**New**	
1012	AJCC TNM Path N	**.**	**New**	
1013	AJCC TNM Path M	**.**	**New**	
1014	AJCC TNM Path Stage Group	**.**	**New**	
1021	AJCC TNM Post Therapy T	**.**	**New**	
1022	AJCC TNM Post Therapy N	**.**	**New**	

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
1023	AJCC TNM Post Therapy M	.	**New**	
1024	AJCC TNM Post Therapy Stage Group	.	**New**	
1030	TNM Other Stage Group		Retired	
1031	AJCC TNM Clin T Suffix	.	**New**	
1032	AJCC TNM Path T Suffix	.	**New**	
1033	AJCC TNM Post Therapy T Suffix	.	**New**	
1034	AJCC TNM Clin N Suffix	.	**New**	
1035	AJCC TNM Path N Suffix	.	**New**	
1036	AJCC TNM Post Therapy N Suffix	.	**New**	
1060	TNM Edition Number	RH	Revised	
1112	Mets at DX-Bone	.	Revised	
1113	Mets at DX-Brain	.	Revised	
1114	Mets at Dx-Distant LN	.	Revised	
1115	Mets at DX-Liver	.	Revised	
1116	Mets at DX-Lung	.	Revised	
1117	Mets at DX-Other	.	Revised	
1120	Pediatric Stage	.		
1130	Pediatric Staging System	.		
1140	Pediatric Staged By	.		
1150	Tumor Marker 1	.		
1160	Tumor Marker 2	.		
1170	Tumor Marker 3	.		
1180	Reserved 05			
1182	Lymph-vascular Invasion	R*		
1190	Reserved 06			
1200	RX Date Surgery	R		
1201	RX Date Surgery Flag	R		
1210	RX Date Radiation	R		
1211	RX Date Radiation Flag	R		
1220	RX Date Chemo	R		
1221	RX Date Chemo Flag	R		
1230	RX Date Hormone	R		
1231	RX Date Hormone Flag	R		

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
1240	RX Date BRM	R		
1241	RX Date BRM Flag	R		
1250	RX Date Other	R		
1251	RX Date Other Flag	R		
1260	Date Initial RX SEER	R#		
1261	Date Initial RX SEER Flag	R#		
1270	Date 1st Crs RX CoC	R#		
1271	Date 1st Crs RX CoC Flag	R#		
1280	RX Date DX/Stg Proc	.		
1281	RX Date DX/Stg Proc Flag	.		
1285	RX Summ--Treatment Status	R#		
1290	RX Summ--Surg Prim Site	R		
1292	RX Summ--Scope Reg LN Sur	R		
1294	RX Summ--Surg Oth Reg/Dis	R		
1296	RX Summ--Reg LN Examined	.		
1300	Reserved 07			
1310	RX Summ--Surgical Approch	.		
1320	RX Summ--Surgical Margins	.		
1330	RX Summ--Reconstruct 1st	.		
1340	Reason for No Surgery	R		
1350	RX Summ--DX/Stg Proc	.		
1360	RX Summ--Radiation	RH	Revised	
1370	RX Summ--Rad to CNS	.		
1380	RX Summ--Surg/Rad Seq	R		
1390	RX Summ--Chemo	R		
1400	RX Summ--Hormone	R		
1410	RX Summ--BRM	R		
1420	RX Summ--Other	R		
1430	Reason for No Radiation	R	Revised	
1460	RX Coding System--Current	R		
1501	Phase I Dose per Fraction	.	**New**	
1502	Phase I Radiation External Beam Planning Tech	.	**New**	
1503	Phase I Number of Fractions	.	**New**	

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
1504	Phase I Radiation Primary Treatment Volume	.	**New**	
1505	Phase I Radiation to Draining Lymph Nodes	.	**New**	
1506	Phase I Radiation Treatment Modality	R	**New**	
1507	Phase I Total Dose	.	**New**	
1510	Rad--Regional Dose: cGy	.	Revised	
1511	**Phase II Dose per Fraction**	**.**	**New**	
1512	**Phase II Radiation External Beam Planning Tech**	**.**	**New**	
1513	**Phase II Number of Fractions**	**.**	**New**	
1514	**Phase II Radiation Primary Treatment Volume**	**.**	**New**	
1515	**Phase II Radiation to Draining Lymph Nodes**	**.**	**New**	
1516	**Phase II Radiation Treatment Modality**	**.**	**New**	
1517	**Phase II Total Dose**	**.**	**New**	
1520	Rad--No of Treatment Vol	.	Revised	
1521	**Phase III Dose per Fraction**	**.**	**New**	
1522	**Phase III Radiation External Beam Planning Tech**	**.**	**New**	
1523	**Phase III Number of Fractions**	**.**	**New**	
1524	**Phase III Radiation Primary Treatment Volume**	**.**	**New**	
1525	**Phase III Radiation to Draining Lymph Nodes**	**.**	**New**	
1526	**Phase III Radiation Treatment Modality**	**.**	**New**	
1527	**Phase III Total Dose**	**.**	**New**	
1531	**Radiation Treatment Discontinued Early**	**.**	**New**	
1532	**Number of Phases of Rad Treatment to this Volume**	**.**	**New**	
1533	**Total Dose**	**.**	**New**	
1540	Rad--Treatment Volume	.	Revised	
1550	Rad--Location of RX	.	Revised	
1570	Rad--Regional RX Modality	.	Revised	
1639	RX Summ--Systemic/Sur Seq	R		
1640	RX Summ--Surgery Type	.		
1646	RX Summ--Surg Site 98-02	.		
1647	RX Summ--Scope Reg 98-02	.		
1648	RX Summ--Surg Oth 98-02	.		
1650	Reserved 08			

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
1660	Subsq RX 2nd Course Date	.		
1661	Subsq RX 2ndCrs Date Flag	.		
1670	Subsq RX 2nd Course Codes	.		
1671	Subsq RX 2nd Course Surg	.		
1672	Subsq RX 2nd Course Rad	.		
1673	Subsq RX 2nd Course Chemo	.		
1674	Subsq RX 2nd Course Horm	.		
1675	Subsq RX 2nd Course BRM	.		
1676	Subsq RX 2nd Course Oth	.		
1677	Subsq RX 2nd--Scope LN SU	.		
1678	Subsq RX 2nd--Surg Oth	.		
1679	Subsq RX 2nd--Reg LN Rem	.		
1680	Subsq RX 3rd Course Date	.		
1681	Subsq RX 3rdCrs Date Flag	.		
1690	Subsq RX 3rd Course Codes	.		
1691	Subsq RX 3rd Course Surg	.		
1692	Subsq RX 3rd Course Rad	.		
1693	Subsq RX 3rd Course Chemo	.		
1694	Subsq RX 3rd Course Horm	.		
1695	Subsq RX 3rd Course BRM	.		
1696	Subsq RX 3rd Course Oth	.		
1697	Subsq RX 3rd--Scope LN Su	.		
1698	Subsq RX 3rd--Surg Oth	.		
1699	Subsq RX 3rd--Reg LN Rem	.		
1700	Subsq RX 4th Course Date	.		
1701	Subsq RX 4thCrs Date Flag	.		
1710	Subsq RX 4th Course Codes	.		
1711	Subsq RX 4th Course Surg	.		
1712	Subsq RX 4th Course Rad	.		
1713	Subsq RX 4th Course Chemo	.		
1714	Subsq RX 4th Course Horm	.		
1715	Subsq RX 4th Course BRM	.		
1716	Subsq RX 4th Course Oth	.		

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
1717	Subsq RX 4th--Scope LN Su	.		
1718	Subsq RX 4th--Surg Oth	.		
1719	Subsq RX 4th--Reg LN Rem	.		
1740	Reserved 09			
1741	Subsq RX--Reconstruct Del	.		
1750	Date of Last Contact	R		
1751	Date of Last Contact Flag	R		
1755	Date of Death--Canada	.		
1756	Date of Death--CanadaFlag	.		
1760	Vital Status	R		
1762	**Vital Status Recode**	**D**	**New**	
1770	Cancer Status	.		
1772	**Date of Last Cancer (tumor) Status**	**.**	**New**	
1773	**Date of Last Cancer (tumor) Status Flag**		**New**	
1775	**Record Number Recode**	**.**	**New**	
1780	Quality of Survival	.		
1782	Surv-Date Active Followup	.		
1783	Surv-Flag Active Followup	.		
1784	Surv-Mos Active Followup	.		
1785	Surv-Date Presumed Alive	D	Revised	
1786	Surv-Flag Presumed Alive	D	Revised	
1787	Surv-Mos Presumed Alive	D	Revised	
1788	Surv-Date DX Recode	D	Revised	
1790	Follow-Up Source	R*		
1791	Follow-up Source Central	R		
1800	Next Follow-Up Source	.		
1810	Addr Current--City	.		
1820	Addr Current--State	.		
1830	Addr Current--Postal Code	.		
1832	Addr Current--Country	.		
1835	Reserved 10			
1840	County--Current	.		
1842	Follow-Up Contact--City	.		

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
1844	Follow-Up Contact--State	.		
1846	Follow-Up Contact--Postal	.		
1847	FollowUp Contact--Country	.		
1850	Unusual Follow-Up Method	.		
1860	Recurrence Date--1st	.		
1861	Recurrence Date--1st Flag	.		
1880	Recurrence Type--1st	.		
1900	Reserved 11			
1910	Cause of Death	R		
1914	**SEER Cause Specific COD**	**D**	**New**	
1915	**SEER Other COD**	**D**	**New**	
1920	ICD Revision Number	R		
1930	Autopsy	.		
1940	Place of Death	RH		
1942	Place of Death--State	R		
1944	Place of Death--Country	R*		
1960	Site (73-91) ICD-O-1	.		
1970	Morph (73-91) ICD-O-1	.		
1971	Histology (73-91) ICD-O-1	.		
1972	Behavior (73-91) ICD-O-1	.		
1973	Grade (73-91) ICD-O-1	.		
1980	ICD-O-2 Conversion Flag	.		
1981	Over-ride SS/NodesPos	.		
1982	Over-ride SS/TNM-N	.		
1983	Over-ride SS/TNM-M	.		
1985	Over-ride Acsn/Class/Seq	.		
1986	Over-ride HospSeq/DxConf	.		
1987	Over-ride CoC-Site/Type	.		
1988	Over-ride HospSeq/Site	.		
1989	Over-ride Site/TNM-StgGrp	R		
1990	Over-ride Age/Site/Morph	R		
1992	Over-ride TNM Stage	R	**New**	
1993	Over-ride TNM Tis	R	**New**	

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
1994	Over-ride TNM 3	.	**New**	
2000	Over-ride SeqNo/DxConf	R		
2010	Over-ride Site/Lat/SeqNo	R		
2020	Over-ride Surg/DxConf	R		
2030	Over-ride Site/Type	R		
2040	Over-ride Histology	R		
2050	Over-ride Report Source	R		
2060	Over-ride Ill-define Site	R		
2070	Over-ride Leuk, Lymphoma	R		
2071	Over-ride Site/Behavior	R		
2072	Over-ride Site/EOD/DX Dt	.		
2073	Over-ride Site/Lat/EOD	.		
2074	Over-ride Site/Lat/Morph	R		
2078	**Over-ride Name/Sex**	**R**	**New**	
2080	Reserved 13			
2081	CRC CHECKSUM	.		
2085	Date Case Initiated	.		
2090	Date Case Completed	.		
2092	Date Case Completed--CoC	.		
2100	Date Case Last Changed	.		
2110	Date Case Report Exported	R		
2111	Date Case Report Received	R		
2112	Date Case Report Loaded	R		
2113	Date Tumor Record Availbl	R		
2116	ICD-O-3 Conversion Flag	R		
2120	SEER Coding Sys--Current	.		
2130	SEER Coding Sys--Original	.		
2140	CoC Coding Sys--Current	.		
2150	CoC Coding Sys--Original	.		
2152	**CoC Accredited Flag**	**R**	**New**	
2155	RQRS NCDB Submission Flag	.	**New**	
2161	Reserved 18		Retired	
2162	Reserved 19		Retired	

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
2163	Reserved 20		Retired	
2170	Vendor Name	.		
2180	SEER Type of Follow-Up	.		
2190	SEER Record Number	.		
2200	Diagnostic Proc 73-87	.		
2210	Reserved 14			
2220	State/Requestor Items	.		
2230	Name--Last	R		
2240	Name--First	R		
2250	Name--Middle	R		
2260	Name--Prefix	.		
2270	Name--Suffix	.		
2280	Name--Alias	R		
2290	Name--Spouse/Parent	.		
2300	Medical Record Number	R		
2310	Military Record No Suffix	.		
2315	Medicare Beneficiary Identifier		**New**	
2320	Social Security Number	R		
2330	Addr at DX--No & Street	R		
2335	Addr at DX--Supplementl	R		
2350	Addr Current--No & Street	.		
2352	Latitude	R*		
2354	Longitude	R*		
2355	Addr Current--Supplementl	.		
2360	Telephone	.		
2380	DC State File Number	R		
2390	Name--Maiden	R		
2392	Follow-Up Contact--No&St	.		
2393	Follow-Up Contact--Suppl	.		
2394	Follow-Up Contact--Name	.		
2400	Reserved 15			
2410	Institution Referred From	.		
2415	NPI--Inst Referred From	.		

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
2420	Institution Referred To	.		
2425	NPI--Inst Referred To	.		
2440	Following Registry	.		
2445	NPI--Following Registry	.		
2450	Reserved 16			
2460	Physician--Managing	.		
2465	NPI--Physician--Managing	.		
2470	Physician--Follow-Up	.		
2475	NPI--Physician--Follow-Up	.		
2480	Physician--Primary Surg	.		
2485	NPI--Physician--Primary Surg	.		
2490	Physician 3	.		
2495	NPI--Physician 3	.		
2500	Physician 4	.		
2505	NPI--Physician 4	.		
2508	EHR Reporting	.	**New**	
2510	Reserved 12			
2520	Text--DX Proc--PE	R^		
2530	Text--DX Proc--X-ray/Scan	R^		
2540	Text--DX Proc--Scopes	R^		
2550	Text--DX Proc--Lab Tests	R^		
2560	Text--DX Proc--Op	R^		
2570	Text--DX Proc--Path	R^		
2580	Text--Primary Site Title	R^		
2590	Text--Histology Title	R^		
2600	Text--Staging	R^		
2610	RX Text--Surgery	R^		
2620	RX Text--Radiation (Beam)	R^		
2630	RX Text--Radiation Other	R^		
2640	RX Text--Chemo	R^		
2650	RX Text--Hormone	R^		
2660	RX Text--BRM	R^		
2670	RX Text--Other	R^		

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
2680	Text--Remarks	.		
2690	Text--Place of Diagnosis	.		
2700	Reserved 17		Retired	
2730	CS PreRx Tumor Size		Retired	
2735	CS PreRx Extension		Retired	
2740	CS PreRx Tum Sz/Ext Eval		Retired	
2750	CS PreRx Lymph Nodes		Retired	
2755	CS PreRx Reg Nodes Eval		Retired	
2760	CS PreRx Mets at DX		Retired	
2765	CS PreRx Mets Eval		Retired	
2770	CS PostRx Tumor Size		Retired	
2775	CS PostRx Extension		Retired	
2780	CS PostRx Lymph Nodes		Retired	
2785	CS PostRx Mets at DX		Retired	
2800	CS Tumor Size	RH*	Revised	
2810	CS Extension	RH*	Revised	
2820	CS Tumor Size/Ext Eval	RH*	Revised	
2830	CS Lymph Nodes	RH*	Revised	
2840	CS Lymph Nodes Eval	RH*	Revised	
2850	CS Mets at DX	RH*	Revised	
2851	CS Mets at Dx-Bone	.	Revised	
2852	CS Mets at Dx-Brain	.	Revised	
2853	CS Mets at Dx-Liver	.	Revised	
2854	CS Mets at Dx-Lung	.	Revised	
2860	CS Mets Eval	RH*	Revised	
2861	CS Site-Specific Factor 7	RH*	Revised	
2862	CS Site-Specific Factor 8	RH*	Revised	
2863	CS Site-Specific Factor 9	RH*	Revised	
2864	CS Site-Specific Factor10	RH*	Revised	
2865	CS Site-Specific Factor11	RH*	Revised	
2866	CS Site-Specific Factor12	RH*	Revised	
2867	CS Site-Specific Factor13	RH*	Revised	
2868	CS Site-Specific Factor14	RH*	Revised	

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
2869	CS Site-Specific Factor15	RH*	Revised	
2870	CS Site-Specific Factor16	RH*	Revised	
2871	CS Site-Specific Factor17	RH*	Revised	
2872	CS Site-Specific Factor18	.	Revised	
2873	CS Site-Specific Factor19	.	Revised	
2874	CS Site-Specific Factor20	.	Revised	
2875	CS Site-Specific Factor21	.	Revised	
2876	CS Site-Specific Factor22	.	Revised	
2877	CS Site-Specific Factor23	.	Revised	
2878	CS Site-Specific Factor24	.	Revised	
2879	CS Site-Specific Factor25	RH*	Revised	
2880	CS Site-Specific Factor 1	RH*	Revised	
2890	CS Site-Specific Factor 2	RH*	Revised	
2900	CS Site-Specific Factor 3	RH*	Revised	
2910	CS Site-Specific Factor 4	RH*	Revised	
2920	CS Site-Specific Factor 5	RH*	Revised	
2930	CS Site-Specific Factor 6	RH*	Revised	
2935	CS Version Input Original	R*	Revised	
2936	CS Version Derived	RH*	Revised	
2937	CS Version Input Current	R*	Revised	
2940	Derived AJCC-6 T	.	Revised	
2950	Derived AJCC-6 T Descript	.	Revised	
2960	Derived AJCC-6 N	.	Revised	
2970	Derived AJCC-6 N Descript	.	Revised	
2980	Derived AJCC-6 M	.	Revised	
2990	Derived AJCC-6 M Descript	.	Revised	
3000	Derived AJCC-6 Stage Grp	.	Revised	
3010	Derived SS1977	.	Revised	
3020	Derived SS2000	RH*	Revised	
3030	Derived AJCC--Flag	.	Revised	
3040	Derived SS1977--Flag	.		
3050	Derived SS2000--Flag	RH*	Revised	
3100	Archive FIN	.		

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
3105	NPI--Archive FIN	.		
3110	Comorbid/Complication 1	.	Revised	
3120	Comorbid/Complication 2	.	Revised	
3130	Comorbid/Complication 3	.	Revised	
3140	Comorbid/Complication 4	.	Revised	
3150	Comorbid/Complication 5	.	Revised	
3160	Comorbid/Complication 6	.	Revised	
3161	Comorbid/Complication 7	.	Revised	
3162	Comorbid/Complication 8	.	Revised	
3163	Comorbid/Complication 9	.	Revised	
3164	Comorbid/Complication 10	.	Revised	
3165	ICD Revision Comorbid	.		
3170	RX Date Mst Defn Srg	R	Revised	
3171	RX Date Mst Defn Srg Flag	R	Revised	
3180	RX Date Surg Disch	.		
3181	RX Date Surg Disch Flag	.		
3190	Readm Same Hosp 30 Days	.		
3200	Rad--Boost RX Modality	.	Revised	
3210	Rad--Boost Dose cGy	.	Revised	
3220	RX Date Rad Ended	.		
3221	RX Date Rad Ended Flag	.		
3230	RX Date Systemic	.		
3231	RX Date Systemic Flag	.		
3250	RX Summ--Transplnt/Endocr	R		
3270	RX Summ--Palliative Proc	.		
3280	RX Hosp--Palliative Proc	.		
3300	RuralUrban Continuum 1993	D		
3310	RuralUrban Continuum 2003	D		
3312	RuralUrban Continuum 2013	D		
3400	Derived AJCC-7 T	RH*	Revised	
3402	Derived AJCC-7 T Descript	RH*	Revised	
3410	Derived AJCC-7 N	RH*	Revised	
3412	Derived AJCC-7 N Descript	RH*	Revised	

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
3420	Derived AJCC-7 M	RH*	Revised	
3422	Derived AJCC-7 M Descript	RH*	Revised	
3430	Derived AJCC-7 Stage Grp	RH*	Revised	
3440	Derived PreRx-7 T	.		
3442	Derived PreRx-7 T Descrip	.		
3450	Derived PreRx-7 N	.		
3452	Derived PreRx-7 N Descrip	.		
3460	Derived PreRx-7 M	.		
3462	Derived PreRx-7 M Descrip	.		
3470	Derived PreRx-7 Stage Grp	.		
3480	Derived PostRx-7 T	.		
3482	Derived PostRx-7 N	.		
3490	Derived PostRx-7 M	.		
3492	Derived PostRx-7 Stge Grp	.		
3600	Derived Neoadjuv Rx Flag	.		
3605	Derived SEER Path Stg Grp	.	Revised	
3610	Derived SEER Clin Stg Grp	.	Revised	
3614	Derived SEER Cmb Stg Grp	.	Revised	
3616	Derived SEER Combined T	.	Revised	
3618	Derived SEER Combined N	.	Revised	
3620	Derived SEER Combined M	.	Revised	
3622	Derived SEER Cmb T Src	.	Revised	
3624	Derived SEER Cmb N Src	.	Revised	
3626	Derived SEER Cmb M Src	.	Revised	
3645	NPCR Derived AJCC 8 TNM Clin Stg Grp	.	**New**	
3646	NPCR Derived AJCC 8 TNM Path Stg Grp	.	**New**	
3647	NPCR Derived AJCC 8 TNM Post Therapy Stg Grp	.	**New**	
3650	NPCR Derived Clin Stg Grp	RH		
3655	NPCR Derived Path Stg Grp	RH		
3700	SEER Site-Specific Fact 1	.	Revised	
3702	SEER Site-Specific Fact 2	.		
3704	SEER Site-Specific Fact 3	.		
3706	SEER Site-Specific Fact 4	.		

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
3708	SEER Site-Specific Fact 5	.		
3710	SEER Site-Specific Fact 6	.		
3720	NPCR Specific Field	R		
3750	Over-ride CS 1	.	Revised	
3751	Over-ride CS 2	.	Revised	
3752	Over-ride CS 3	.	Revised	
3753	Over-ride CS 4	.	Revised	
3754	Over-ride CS 5	.	Revised	
3755	Over-ride CS 6	.	Revised	
3756	Over-ride CS 7	.	Revised	
3757	Over-ride CS 8	.	Revised	
3758	Over-ride CS 9	.	Revised	
3759	Over-ride CS 10	.	Revised	
3760	Over-ride CS 11	.	Revised	
3761	Over-ride CS 12	.	Revised	
3762	Over-ride CS 13	.	Revised	
3763	Over-ride CS 14	.	Revised	
3764	Over-ride CS 15	.	Revised	
3765	Over-ride CS 16	.	Revised	
3766	Over-ride CS 17	.	Revised	
3767	Over-ride CS 18	.	Revised	
3768	Over-ride CS 19	.	Revised	
3769	Over-ride CS 20	RH	Revised	
3780	Secondary Diagnosis 1	.		
3782	Secondary Diagnosis 2	.		
3784	Secondary Diagnosis 3	.		
3786	Secondary Diagnosis 4	.		
3788	Secondary Diagnosis 5	.		
3790	Secondary Diagnosis 6	.		
3792	Secondary Diagnosis 7	.		
3794	Secondary Diagnosis 8	.		
3796	Secondary Diagnosis 9	.		
3798	Secondary Diagnosis 10	.		

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
3800	Schema ID	D	**New**	
3801	Chromosome 1p: Loss of Heterozygosity (LOH)	.	**New**	
3802	Chromosome 19q: Loss of Heterozygosity (LOH)	.	**New**	
3803	Adenoid Cystic Basaloid Pattern	.	**New**	
3804	Adenopathy	.	**New**	
3805	AFP Post-Orchiectomy Lab Value	.	**New**	
3806	AFP Post-Orchiectomy Range	.	**New**	
3807	AFP Pre-Orchiectomy Lab Value	.	**New**	
3808	AFP Pre-Orchiectomy Range	.	**New**	
3809	AFP Pretreatment Interpretation	.	**New**	
3810	AFP Pretreatment Lab Value	.	**New**	
3811	Anemia	.	**New**	
3812	B symptoms	.	**New**	
3813	Bilirubin Pretreatment Total Lab Value	.	**New**	
3814	Bilirubin Pretreatment Unit of Measure	.	**New**	
3815	Bone Invasion	.	**New**	
3816	Brain Molecular Markers	R	**New**	
3817	Breslow Tumor Thickness	R	**New**	
3818	CA-125 Pretreatment Interpretation	.	**New**	
3819	CEA Pretreatment Interpretation	.	**New**	
3820	CEA Pretreatment Lab Value	.	**New**	
3821	Chromosome 3 Status	.	**New**	
3822	Chromosome 8q Status	.	**New**	
3823	Circumferential Resection Margin (CRM)	.	**New**	
3824	Creatinine Pretreatment Lab Value	.	**New**	
3825	Creatinine Pretreatment Unit of Measure	.	**New**	
3826	Estrogen Receptor Percent Positive or Range	.	**New**	
3827	Estrogen Receptor Summary	R	**New**	
3828	Estrogen Receptor Total Allred Score	.	**New**	
3829	Esophagus and EGJ Tumor Epicenter	.	**New**	
3830	Extranodal Extension Clin (non-Head and Neck)	.	**New**	
3831	Extranodal Extension Head and Neck Clinical	.	**New**	

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
3832	Extranodal Extension Head and Neck Pathological	.	**New**	
3833	Extranodal Extension Path (non-Head and Neck)	.	**New**	
3834	Extravascular Matrix Patterns	.	**New**	
3835	Fibrosis Score	R	**New**	
3836	FIGO Stage	.	**New**	
3837	Gestational Trophoblastic Prognostic Scoring Index	.	**New**	
3838	Gleason Patterns Clinical	.	**New**	
3839	Gleason Patterns Pathological	.	**New**	
3840	Gleason Score Clinical	.	**New**	
3841	Gleason Score Pathological	.	**New**	
3842	Gleason Tertiary Pattern	.	**New**	
3843	Grade Clinical	R	**New**	
3844	Grade Pathological	RN	**New**	
3845	Grade Post Therapy	RN	**New**	
3846	hCG Post-Orchiectomy Lab Value	.	**New**	
3847	hCG Post-Orchiectomy Range	.	**New**	
3848	hCG Pre-Orchiectomy Lab Value	.	**New**	
3849	hCG Pre-Orchiectomy Range	.	**New**	
3850	HER2 IHC Summary	.	**New**	
3851	HER2 ISH Dual Probe Copy Number	.	**New**	
3852	HER2 ISH Dual Probe Ratio	.	**New**	
3853	HER2 ISH Single Probe Copy Number	.	**New**	
3854	HER2 ISH Summary	.	**New**	
3855	HER2 Overall Summary	R	**New**	
3856	Heritable Trait	.	**New**	
3857	High Risk Cytogenetics	.	**New**	
3858	High Risk Histologic Features	.	**New**	
3859	HIV Status	.	**New**	
3860	International Normalized Ratio Prothrombin Time	.	**New**	
3861	Ipsilateral Adrenal Gland Involvement	.	**New**	
3862	JAK2	.	**New**	
3863	Ki-67	.	**New**	

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
3864	Invasion Beyond Capsule	.	**New**	
3865	KIT Gene Immunohistochemistry	.	**New**	
3866	KRAS	.	**New**	
3867	LDH Post-Orchiectomy Range	.	**New**	
3868	LDH Pre-Orchiectomy Range	.	**New**	
3869	LDH Pretreatment Level	.	**New**	
3870	LDH Upper Limits of Normal	.	**New**	
3871	LN Assessment Method Femoral-Inguinal	.	**New**	
3872	LN Assessment Method Para-Aortic	.	**New**	
3873	LN Assessment Method Pelvic	.	**New**	
3874	LN Distant Assessment Method	.	**New**	
3875	LN Distant: Mediastinal, Scalene	.	**New**	
3876	LN Head and Neck Levels I-III	.	**New**	
3877	LN Head and Neck Levels IV-V	.	**New**	
3878	LN Head and Neck Levels VI-VII	.	**New**	
3879	LN Head and Neck Other	.	**New**	
3880	LN Isolated Tumor Cells (ITC)	.	**New**	
3881	LN Laterality	.	**New**	
3882	LN Positive Axillary Level I-II	.	**New**	
3883	LN Size	.	**New**	
3884	LN Status Femoral-Inguinal, Para-Aortic, Pelvic	.	**New**	
3885	Lymphocytosis	.	**New**	
3886	Major Vein Involvement	.	**New**	
3887	Measured Basal Diameter	.	**New**	
3888	Measured Thickness	.	**New**	
3889	Methylation of O6-Methylguanine-Methyltransferase	.	**New**	
3890	Microsatellite Instability (MSI)	RS*	**New**	
3891	Microvascular Density	.	**New**	
3892	Mitotic Count Uveal Melanoma	.	**New**	
3893	Mitotic Rate Melanoma	.	**New**	
3894	Multigene Signature Method	.	**New**	
3895	Multigene Signature Results	.	**New**	
3896	NCCN International Prognostic Index (IPI)	.	**New**	

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
3897	Number of Cores Examined	.	**New**	
3898	Number of Cores Positive	.	**New**	
3899	Number of Examined Para-Aortic Nodes	.	**New**	
3900	Number of Examined Pelvic Nodes	.	**New**	
3901	Number of Positive Para-Aortic Nodes	.	**New**	
3902	Number of Positive Pelvic Nodes	.	**New**	
3903	Oncotype Dx Recurrence Score-DCIS	.	**New**	
3904	Oncotype Dx Recurrence Score-Invasive	.	**New**	
3905	Oncotype Dx Risk Level-DCIS	.	**New**	
3906	Oncotype Dx Risk Level-Invasive	.	**New**	
3907	Organomegaly	.	**New**	
3908	Percent Necrosis Post Neoadjuvant	.	**New**	
3909	Perineural Invasion	.	**New**	
3910	Peripheral Blood Involvement	.	**New**	
3911	Peritoneal Cytology	R	**New**	
3913	Pleural Effusion	.	**New**	
3914	Progesterone Receptor Percent Positive or Range	.	**New**	
3915	Progesterone Receptor Summary	R	**New**	
3916	Progesterone Receptor Total Allred Score	.	**New**	
3917	Primary Sclerosing Cholangitis	.	**New**	
3918	Profound Immune Suppression	.	**New**	
3919	Prostate Pathological Extension	.	**New**	
3920	PSA (Prostatic Specific Antigen) Lab Value	R	**New**	
3921	Residual Tumor Volume Post Cytoreduction	.	**New**	
3922	Response to Neoadjuvant Therapy	.	**New**	
3923	S Category Clinical	.	**New**	
3924	S Category Pathological	.	**New**	
3925	Sarcomatoid Features	.	**New**	
3926	Schema Discriminator 1	R	**New**	
3927	Schema Discriminator 2	R	**New**	
3928	Schema Discriminator 3	.	**New**	
3929	Separate Tumor Nodules	.	**New**	
3930	Serum Albumin Pretreatment Level	RN	**New**	

Item #	Item Name	NPCR Collect	Status of Data Item	Suggested Default Value/Rational & Notes
3931	Serum Beta-2 Microglobulin Pretreatment Level	RN	**New**	
3932	LDH Pretreatment Lab Value	R	**New**	
3933	Thrombocytopenia	.	**New**	
3934	Tumor Deposits	.	**New**	
3935	Tumor Growth Pattern	.	**New**	
3936	Ulceration	.	**New**	
3937	Visceral and Parietal Pleural Invasion	.	**New**	
7010	Path Reporting Fac ID 1	.		
7011	Path Reporting Fac ID 2	.		
7012	Path Reporting Fac ID 3	.		
7013	Path Reporting Fac ID 4	.		
7014	Path Reporting Fac ID 5	.		
7090	Path Report Number 1	.		
7091	Path Report Number 2	.		
7092	Path Report Number 3	.		
7093	Path Report Number 4	.		
7094	Path Report Number 5	.		
7100	Path Order Phys Lic No 1	.		
7101	Path Order Phys Lic No 2	.		
7102	Path Order Phys Lic No 3	.		
7103	Path Order Phys Lic No 4	.		
7104	Path Order Phys Lic No 5	.		
7190	Path Ordering Fac No 1	.		
7191	Path Ordering Fac No 2	.		
7192	Path Ordering Fac No 3	.		
7193	Path Ordering Fac No 4	.		
7194	Path Ordering Fac No 5	.		
7320	Path Date Spec Collect 1	.		
7321	Path Date Spec Collect 2	.		
7322	Path Date Spec Collect 3	.		
7323	Path Date Spec Collect 4	.		
7324	Path Date Spec Collect 5	.		
7480	Path Report Type 1	.		

Item #	Item Name	NPCR Collect	**Status of Data Item**	Suggested Default Value/Rational & Notes
7481	Path Report Type 2	.		
7482	Path Report Type 3	.		
7483	Path Report Type 4	.		
7484	Path Report Type 5	.		

Section 2			
ASCR Retired Data Items or AL Specific Items Codes and Retention Information			
Item Number	**Name**	**Position Item Number**	**Length**
9020	Follow-up Contact--Phone	Column 2343-2352	8

Code	Fam Hist of CA	Tobacco History	Alcohol History
0	No	Never Used	No history of alcohol use
1	Yes	Cigarette smoker, current	Current use of alcohol
2		Cigar/pipe smoker, current	Past history of alcohol use, does not currently use
3		Snuff /Chew/smokeless, current	
4		Combination use, current	
5		Previous Use	
9	Unknown	Unknown	Unknown

NPCR Collection Key

R = Required , RH = Historically collected and currently transmitted, RS = Required, site specific, S = Supplementary/recommended
R# = Required; central registries may code available data using either SEER or CoC data items and associated rules
R#* = Required, when available; central registries may code available data using either SEER or CoC data items and associated rules
R* = Required, when available
R^ = Required, these text requirements may be met with one or several text block fields
RH* = Historically collected and currently transmitted when available
RN = Collect according to NPCR stage transition schedule
RS# = Required, site specific; central registries may code available data using either SEER or CoC data items and associated rules
RS* = Required, site specific; when available

FupUnusual - Unusual F-up Methods - use to indicate whether patients want the medical record to be released for other purpose
00 - OK to release
01 – Not release – Out of State
02 - Do not release (HIPPA) (Example: For use when a patient request that their medical record information not be released.)
03 – Do not release (Interstate Data Exchange Cases + HIPAA)
04 - Do not release (VA)
05 - Do not release (Interstate Data Exchange Cases + VA)
06 - Do not release (VA + HIPAA)
07 - Do not release (Interstate Data Exchange Cases + HIPAA+VA)