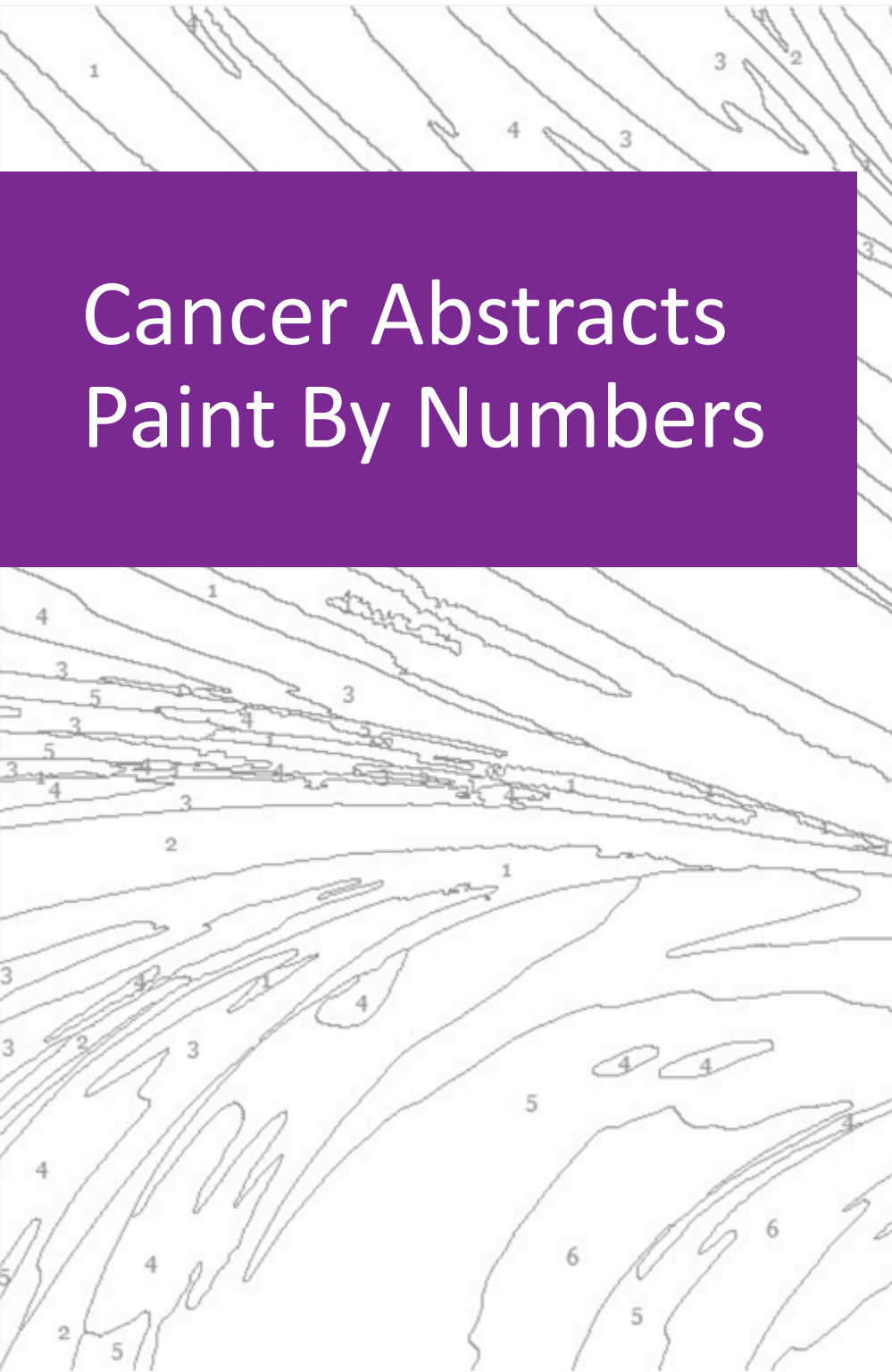# Cancer Abstracts Paint By Numbers

What Is A Cancer Abstract?

- Cancer abstracts organize, summarize and categorize the crucial information in a patient's medical records

- Cancer abstracting is taking the written information about the cancer patient's cancer, demographics, diagnostic studies, cancer staging, treatment, and follow-up and assigning this information numerical codes

- These numerical codes allows for the data to be broken down and analyzed

- These cancer codes tell the patient's story using numbers

- Thus, by looking at the assigned codes, one can see the patients story unfold

- As a cancer registrar it is your job to use these number or codes to paint a picture about the patient's cancer journey, essentially paining by numbers

How To Get Started

Thought there is not a set or official Order of Operations to follow, you need to understanding how to get started on your abstract

Before you can start adding codes (colors), you need to know what site (palette) to use

You have to know the site of the primary tumor to know:
- If the cancer is reportable
- What site-based chapters to use
- What site-based data items need to be coded
- What is the standard of care for this primary

The list goes on and on and on...

Primary Site

The primary site code is the key identifier of a tumor and determines the coding schema for many of the data items that follow in the abstract

If the primary site is coded incorrectly, by association, much of the rest of the abstract's tumor and treatment information may be incorrect

Unless otherwise instructed, use all available information in the medical record to code the site

A thorough diagnosis and work-up of the primary tumor site is paramount for directing treatment options, especially given the emergence of targeted therapies

A medical record may be quite simple, containing only a few pages; or it may be extremely complex containing a variety of reports

Review the following to help pin-point the primary site:

- Physical examination
- Imaging
- Scope reports
- Operative reports
- Pathology reports

- Code the site in which the primary tumor originated, even if it extends onto/into an adjacent subsite
- Code the primary site, not the metastatic site
- Site of origin is not necessarily the site of a biopsy
- Do not adjust the primary site code to fit staging or any other data items
- Do not code the metastatic site

Text is required to adequately justify ALL coded values and to document supplemental information

- Always record certain basic information in your text:
  - The date of the examination or procedure
  - The name of the examination or procedure
  - The results of the examination or procedure
    - Any pertinent positive or negative information
  - The diagnostic impression, if one is given

Code Laterality
Laterality describes the side of a paired organ or side of the body on which the reportable tumor originated

Determine whether laterality should be coded for each primary

See Seer Coding Manual Page 98-99 for the list of sites for which laterality must be recorded

Morphology

Morphology combines the histologic code with the behavior code

Coding Histology

Histology, describes the microscopic composition of cells and/or tissue for a specific primary

ICD-O-3.2
Standard setters have agreed to implement new histology terms and codes for ICD-O-3 based on the current versions of the World Health Organization Classification of Tumors

The update, referred to as ICD-O-3.2, includes comprehensive tables listing histology codes and behavior codes in effect beginning with cases diagnosed in 2021

Solid Tumor Rules:
Use the following to assign histology:
- General instructions **_and_**
- Instructions for coding histologic type found in the site-specific histology coding rules

Coding Behavior

The data item Behavior Code describes the malignant potential of the tumor

- Code the behavior before neoadjuvant treatment is initiated

- Code the behavior from the pathology report

Cases reported to SEER *cannot* have a metastatic (/6) behavior code

- If the only pathologic specimen is from a metastatic site, code the appropriate histology code and the malignant behavior code (/3)

- The primary site and its metastatic site(s) have the same histology

Figure 8. Structure of a Morphology Code

___ ___ ___ / ___ ___
histotology   behavior grade

Example: well-differentiated adenocarcinoma

M-8140 / 3   1

Tumor / cell type   Behavior   Differentiation
[adeno-]   [carcinoma]   [well-differentiated]

Once you have identified the Primary Site you can get started creating your masterpiece!

QUESTIONS?