

2018 Coding Manuals: SEER and STORE 2018

KCR 2018 SPRING TRAINING

2018 Spring Update Training More changes to SEER Manual

Date of Diagnosis – you **may use the date** of a suspicious cytology as the diagnosis date if the tumor is later confirmed by a definitive diagnosis.

Reportability

Neoplasms and tumor are reportable terms for brain and CNS because they are listed in ICD-O-3 with behavior codes of /0 and /1. **Mass and lesion are not reportable terms for brain and CNS** because they are **not listed in ICD-O-3** with behavior codes of /0 or /1.

The Solid Tumor rules for non-malignant CNS tumors consider tumor, mass, lesion, and neoplasm as equivalent terms only for determining multiple primaries – not for casefinding or reportability.

2018 Spring Update Training More changes to SEER Manual

Changing information on the Abstract

1. To correct errors
2. Better information becomes available; examples are:
 - Primary site determined after an unknown primary abstracted
 - Original diagnosis is in situ; later the patient develops metastases; change behavior code to /3
3. The diagnosis date is confirmed in retrospect to be earlier than the date originally abstracted, for example, biopsy slides are reviewed and considered malignant later after the original diagnosis had no reportable terminology.

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New data item: CoC Accredited Flag

This item identifies abstracts from CoC accredited hospitals. Codes are:

- 0 – non-CoC accredited facility
- 1 – Analytic case from CoC accredited facility (class 10-22)
- 2 – Non-analytic case from CoC accredited facility

This flag will be automatically set by the software. It is required for KCR by CDC and SEER to identify central registry abstracts where at least one reporting source was a CoC accredited facility.

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New Override Flags

Override flag for Name/Sex – for extremely rare combinations, such as John/female

Override flag for TNM Tis – indicates a review confirms that a T value of noninvasive is correct when an N or M or Stage Group indicates invasive

Override flag for Site TNM-Stage Group – for pediatric cases, the flag confirms the case was coded using a pediatric coding system

2018 Spring Update Training More changes to SEER Manual

New codes for LV Invasion

Description

Lymph-vascular Invasion indicates whether lymphatic duct or blood vessel is identified in the pathology report.

Note: SEER requires Lymph-vascular Invasion (LVI) recorded for penis and testis cases only. SEER registries may submit LVI for other sites when available. Record 8 for sites other than penis and testis when LVI is not available or when not applicable (see #4).

Code	Description
0	Lymph-vascular Invasion stated as Not Present
1	Lymph-vascular Invasion Present/Identified
2	Lymphatic and small vessel invasion only (L)
3	Venous (large vessel) invasion only (V)
4	BOTH lymphatic and small vessel AND venous (large vessel) invasion
8	Not applicable
9	Unknown/Indeterminate/not mentioned in path report

2018 Spring Update Training – Radiation therapy revisited

Radiation Treatment (CPDMS Radiation page 1) – new items

Date Radiation Ended

Reason Radiation Discontinued Early (COC only)

Number of Phases to this Volume (COC only)

Total Dose across all phases (COC only)

2018 Spring Update Training – Radiation therapy revisited

What is a Phase?

Radiation treatment is commonly delivered in one or more phases. In each phase, a tumor bed is treated.

The first phase is often called an initial plan, and a subsequent phase may be called a boost or a cone down.

A new phase begins when there is a change to the target volume, treatment dose, modality, or treatment technique. Any of these changes means a new radiation phase.

2018 Spring Update Training – Radiation therapy revisited

Regarding Phase

Note 1: “On line adaptive therapy” means that the shape of the target may change, but the volume being targeted does not change. This is NOT a new phase.

Note 2: When the primary volume is lymph nodes, the data item ‘Draining Lymph Nodes’ should be coded ‘88’.

2018 Spring Update Training – Radiation therapy revisited

Radiation-Phase I, II, III (CPDMS Radiation pages 2, 3, 4)

Primary Treatment Volume (COC only)

Radiation to Draining Lymph Nodes (COC only)

Radiation Treatment Modality (COC and SEER)

External Beam Planning Technique (COC only)

Dose per Fraction (COC only)

Number of Fractions (COC only)

Total dose for this phase

Radiation Primary Treatment Volume – Phase I, II, or III

Identifies the primary treatment volume or primary anatomic target treated during the first phase of radiation therapy during the first course of treatment. This data item is required for CoC-accredited facilities as of 01/01/2018.

00	No radiation treatment	24	Sinuses/Nasal tract	57	Biliary tree or gallbladder	82	Shoulder
01	Neck lymph node regions	25	Parotid or other salivary glands	58	Pancreas or hepatopancreatic ampulla	83	Ribs
02	Thoracic lymph node regions	26	Thyroid	59	Abdomen (NOS)	84	Hip
03	Neck and thoracic lymph node regions	29	Head and neck (NOS)	60	Bladder - whole	85	Pelvic bones
04	Breast/ Chestwall lymph node regions	30	Lung or bronchus	61	Bladder - partial	86	Pelvis (NOS, non-visceral)
05	Abdominal lymph nodes	31	Mesothelium	62	Kidney	88	Extremity bone, NOS
06	Pelvic lymph nodes	32	Thymus	63	Ureter	90	Skin
07	Abdominal and pelvic lymph nodes	39	Chest/lung (NOS)	64	Prostate - whole	91	Soft tissue
09	Lymph node region, NOS	40	Breast - whole	65	Prostate - partial	92	Hemibody
10	Eye/orbit/optic nerve	41	Breast - partial	66	Urethra	93	Whole body
11	Pituitary	42	Chest wall	67	Penis	94	Mantle, mini-mantle (obsolete after 2017)
12	Brain	50	Esophagus	68	Testicle or scrotum	95	Lower extended field (obsolete after 2017)
13	Brain (Limited)	51	Stomach	70	Ovaries or fallopian tubes	96	Inverted Y (obsolete after 2017)
14	Spinal cord	52	Small bowel	71	Uterus or Cervix	97	Invalid historical FORDS value
20	Nasopharynx	53	Colon	72	Vagina	98	Other
21	Oral Cavity	54	Rectum	73	Vulva	99	Unknown
22	Oropharynx	55	Anus	80	Skull		
23	Larynx (glottis) or hypopharynx	56	Liver	81	Spine/vertebral bodies		

Radiation to Draining Lymph Nodes – Phase I, II, or III

Identifies the draining lymph nodes treated (if any) during a phase of radiation therapy delivered to the patient during the first course of treatment. This data item is required for CoC-accredited facilities as of 01/01/2018.

Code	Description	Code	Description
00	No radiation treatment	06	Pelvic lymph nodes
01	Neck lymph node regions	07	Abdominal and pelvic lymph nodes
02	Thoracic lymph node regions	08	Lymph node region, NOS
03	Neck and thoracic lymph node regions	88	Not applicable; Phase I Radiation Primary Treatment Volume is lymph nodes
04	Breast/Chest wall lymph node regions	99	Unknown if any radiation treatment to draining lymph nodes; Unknown if radiation treatment administered
05	Abdominal lymph nodes		

Radiation Modality - Phase I, II, III

Phase I, II, and III identify the radiation modality administered during the first, second, and third phase, respectively, of radiation treatment delivered during the first course of treatment.

Code Description

00 No Radiation Treatment
 01 External beam, NOS
 02 External beam, photons
 03 External beam, protons
 04 External beam, electrons
 05 External beam, neutrons
 06 External beam, carbon ions

Code Description

07 Brachytherapy, NOS
 08 Brachytherapy, intracavitary, LDR
 09 Brachytherapy, intracavitary, HDR
 10 Brachytherapy, Interstitial, LDR
 11 Brachytherapy, Interstitial, HDR
 12 Brachytherapy, electronic
 13 Radioisotopes, NOS
 14 Radioisotopes, Radium-232
 15 Radioisotopes, Strontium-89
 16 Radioisotopes, Strontium-90
 99 Treatment radiation modality unknown

Radiation External Beam Planning Technique – Phase I, II, or III

Identifies the external beam radiation planning technique used to administer a phase of radiation treatment during the first course of treatment. This data item is required for CoC-accredited facilities as of 01/01/2018.

Code	Description	Code	Description
00	No radiation treatment	07	Stereotactic radiotherapy or radiosurgery, robotic.
01	External beam, NOS	08	Stereotactic radiotherapy or radiosurgery, Gamma Knife®
02	Low energy x-ray/photon therapy	09	CT-guided online adaptive therapy
03	2-D therapy	10	MR-guided online adaptive therapy
04	Conformal or 3-D conformal therapy	88	Not Applicable
05	Intensity modulated therapy	98	Other, NOS
06	Stereotactic radiotherapy or radiosurgery, NOS	99	Unknown

Dose Per Fraction – Phase I, II, or III

Records the dose per fraction (treatment session) delivered to the patient a particular phase of radiation during the first course of treatment. The unit of measure is centiGray (cGy). This data item is required for CoC-accredited facilities as of 01/01/2018.

Code	Description
00000	Radiation therapy was not administered
00001-99997	Record the actual Phase I dose delivered in cGy
99998	Not applicable, brachytherapy or radioisotopes administered to the patient
99999	Regional radiation therapy was administered but dose is unknown, it is unknown whether radiation therapy was administered. Death Certificate only.

Number of Fractions – Phase I, II, or III

Records the total number of fractions (treatment sessions) delivered to the patient in the phase of radiation during the first course of treatment. This data item is required for CoC-accredited facilities as of 01/01/2018.

Code	Description
000	Radiation therapy was not administered to the patient.
001-998	Number of fractions administered to the patient during the first phase of radiation therapy.
999	Phase I Radiation therapy was administered, but the number of fractions is unknown; It is unknown whether radiation therapy was administered.

Phase Total Dose – Phase I, II, or III

Identifies the total radiation dose delivered to the patient in a phase of radiation treatment during the first course of treatment. The unit of measure is centiGray (cGy). This data item is required for CoC-accredited facilities as of 01/01/2018.

Code	Description
000000	No therapy administered
000001-999997	Record the actual total dose delivered in cGy
999998	Not applicable, radioisotopes administered to the patient
999999	Radiation therapy was administered, but the dose is unknown; it is unknown whether radiation therapy was administered

Date Radiation Ended

Records the date Radiation treatment ended. This data item is required for cases diagnosed 01/01/2018 and later.

Radiation Treatment Discontinued Early

This field is used to identify patients/tumors whose radiation treatment course was discontinued earlier than initially planned. That is the patients/tumors received fewer treatment fractions (sessions) than originally intended by the treating physician. This data item is required for CoC-accredited facilities as of cases diagnosed 01/01/2018 and later.

Code	Description
00	No radiation treatment
01	Radiation treatment completed as prescribed
02	Radiation treatment discontinued early – toxicity
03	Radiation treatment discontinued early - contraindicated due to other patient risk factors (comorbid conditions, advanced age, progression of tumor prior to planned radiation etc.)
04	Radiation treatment discontinued early – patient decision
05	Radiation discontinued early – family decision
06	Radiation discontinued early – patient expired
07	Radiation discontinued early – reason not documented
99	Unknown if radiation treatment discontinued; Unknown whether radiation therapy administered

Number of Rad Phases to this Volume

Identifies the total number of phases administered to the patient during the first course of treatment. This data item is required for CoC-accredited facilities as of cases diagnosed 01/01/2018 and later.

Code	Description
00	No radiation treatment
01	1 phase
02	2 phases
03	3 phases
04	4 or more phases
99	Unknown number of phases; Unknown if radiation therapy administered

Total Dose – All Phases

Identifies the total radiation dose delivered to the patient in all phases of radiation treatment during the first course of treatment. The unit of measure is centiGray (cGy). This data item is required for CoC-accredited facilities as of 01/01/2018.

Code	Description
000000	No therapy administered
000001-999997	Record the actual total dose delivered in cGy
999998	Not applicable, radioisotopes administered to the patient
999999	Radiation therapy was administered, but the dose is unknown; it is unknown whether radiation therapy was administered

NAACCR Radiation webinar

Go to NAACCR 2018 Implementation web site and click on Education and Training:

<https://www.naacr.org/2018-implementation/#Education>

There is an excellent webinar on coding Radiation treatment presented by Robin Billet

Revised Breast surgery codes

SEER added a couple of SEER Notes:

Code 23 is a re-excision of the biopsy site for gross or microscopic residual disease

New SEER Note: Assign code 23 for lumpectomy and additional margin excision during the same procedure.

Code 43 is Reconstruction, NOS

New SEER Note: Assign code 43 for a simple mastectomy with tissue expanders and acellular dermal matrix/AlloDerm. The tissue expander indicates preparation for reconstruction. The acellular dermal matrix/AlloDerm is not coded because, while they often accompany an implant procedure, they are not the principle element of reconstructive procedures. The principle elements would be tissue from the patient and/or prosthetics (e.g., gel implants).

STORE Manual

Still waiting for its release....