

'tis the season!



Mississippi Cancer Registry

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Helpful Breast Staging Tips

INCORRECT	CORRECT
pTis pNX cM0 Stage 99	pTis cN0 cM0 Stage 0
cTis cNX cM0 stage 99	cTis cN0 cM0 Stage 0
cT(anything) cNX Stage 99	cT (anything) cN0 Stage? (Review physical exam. If a patient is being seen for breast cancer, there should be a mention of regional lymph nodes. If there is not mention we assume the lymph nodes are negative. If there were palpable lymph nodes, the physician would document that. Rather than unknown clinical stage, assume cN0)
Unknown Clinical Grade may be able to be staged	Look at grid for staging Clinical with no grade (see page 2)
LVI on in situ cases should not be 9	LVI for in situ cases should always be a 0
Surgery Code 40 or 50	these codes should not be used, its either the patient did not have contra-lateral breast removed or they did have it removed during surgery (41 or 42) (51 or 52) if no reconstruction mentioned
Surgery Code 41, 42, 51, or 52 but patient had re-construction	If patient had reconstruction it will never be a 41 or 42, or a 51 or 52 surgical code
Axillary LN Dissection	If axillary In dissection is done during a mastectomy, code should be bumped up to a MRM surgical code
Sequence #'s	Please check sequence # on all cases, we are finding a lot of errors with it coded an 01 but should be an 02, and the first primary has not been changed to an 01

Timing Rules for Laboratory Values

Laboratory values refer to any tests based on blood, urine, ascites, or spinal fluid (most will be blood).

All laboratory values must be done no earlier than approximately 3 months before diagnosis **AND**

Unless instructions for a specific laboratory tests state otherwise, record only tests results obtain

Before any cancer directed treatment is given

If multiple laboratory results are available, record the highest laboratory value.

Source: NAACCR 2022 Updates Webinar: Jennifer Ruhl

For questions please contact Angel Davis—
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New Year, New Codes – What's New with Reportability:

Implementation Guidelines for ICD-O-3.2 Update

Effective for cases diagnosed January 1, 2022, forward, use of implementation guideline is **REQUIRED** for determining reportability & accurate coding.

<http://www.naaccr.org/icdo3/>

Major changes apply to behavior code & reportable terminology for GI high grade dysplasias and Low Grade Appendiceal Mucinous Neoplasm (LAMN).

Beginning 01/01/2022 code LAMN 8480/2 when the behavior code is stated to be in situ/non-invasive or behavior is not indicated.

Beginning 01/01/2022 Serrated dysplasia, high grade 8213/2 is reportable for stomach (C16.0–C16.9) & small intestines (C17.0-C17.3; C17.8-C17.9) **ONLY**.

There are 12 NEW ICD-O-3 codes and terms for example:

8044/3 Small cell carcinoma, large cell variant - **Ovary only** (C56.9)

Resources for Coding Histology:

Solid Tumor Rules

Hematopoietic Database

ICD-O-3.2 & all updates

ICD-O-3.2 Annotated table

Source: NAACCR 2022 Updates Webinar: Lois Dickie

For questions contact Angel Davis—
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Abstracting Resources



AJCC Cancer Staging Manual

Cases with a diagnosis date of 01/01/2018 and forward should be staged using AJCC 8th Edition Cancer Staging Manual. The 3rd printing 2018 Edition is now available.

Please visit <https://cancerstaging.org/references-tools/deskreferences/Pages/8EUpdates.aspx#> for all 8th Edition updates and corrections. For all other information, visit <https://cancerstaging.org/Pages/default.aspx>.

Summary Stage 2018

The 2018 version of Summary Stage applies to every site and/or histology combination, including lymphomas and leukemias. Summary Stage uses all information available in the medical record; in other words, it is a combination of the most precise clinical and pathological documentation of the extent of disease. The Summary Stage 2018 manual is available at <https://seer.cancer.gov/tools/ssm/>.

Site Specific Data Items (SSDI)

Site Specific Data Items (SSDI) are similar to the Site Specific Factors (SSF) collected with Collaborative Stage. These data items are specific to certain site/histology combinations. For example, the SSDI's for breast will be used to collect information such as estrogen receptor status, progesterone receptor status, Her2 status, Nottingham grade, and additional information related to primary tumors of the breast. The information collected in these data items are specific to breast. The SSDI manual is available at <https://apps.naaccr.org/ssdi/list/>.

Grade

Beginning with cases diagnosed in 2018 grade information will be collected in three fields; Clinical Grade, Pathological Grade, and Post-Therapy Grade. Within the Grade Manual you will find definitions for the three new grade data items, coding instructions, and the site/histology specific grade tables. The Grade manual is available at <https://www.naaccr.org/SSDI/Grade-Manual.pdf?v=1527859766>.

SEER Hematopoietic and Lymphoid Neoplasm Database

This provides data collection rules for hematopoietic and lymphoid neoplasms for 2010+. The SEER Hematopoietic and Lymphoid Neoplasm manual is available at

https://seer.cancer.gov/tools/heme/Hematopoietic_Instructions_and_Rules.pdf.

2018 Solid Tumor Coding Manual

Use the 2018 Solid Tumor coding rules to determine the number of primaries to abstract and the histology to code for cases diagnosed 2018 and forward. The Solid Tumor coding rules replace the 2007 Multiple Primary and Histology (MP/H) Rules. The manual is available at <https://seer.cancer.gov/tools/solidtumor/>. The **change log** contains updates made to the FINAL module sections. This does not include changes made to the drafts.

CoC 2018 STORE Manual

The STORE Manual has replaced the FORDS Manual. The STORE is now available at <https://www.facs.org/quality-programs/cancer/ncdb/registrymanuals/cocmanuals>.

Upcoming Webinars

LUNG 2022

- * Guest Host: Vicki Hawhee, Med, CTR
- * 1/06/2022

Data Item Relationships

- * Guest Host: Jennifer Ruhl, CTR
- * 2/03/2022

FLccSC

Fundamental Learning Collaborative for the Cancer Surveillance Community:

The FlccSC site is up and running. If you have not yet registered you can do so at the link below. The MS FLccSC site will stay updated with current news, webinars and educational opportunities. You do not want to miss out!

mss.fcslms.med.miami.edu



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