

## 2014 Data Changes

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## Overview

- New Data Items
- Reportability Clarifications
- New Coding Rules – Grade
- ICD-O-3 Changes
- Collaborative Stage v0205

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## New Data Items for 2014

- No New Data Items

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## Reportability Clarifications

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## Reportability Clarifications

- Positive Urine Cytology is reportable
  - For cases diagnosed 2013 forward
  - Code Primary Site to C68.9 in the absence of any other information
  - **EXCEPTION:** If a subsequent biopsy of a urinary site is negative, **do not** report the case

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## Reportability Clarifications

- NOT Reportable
  - Follicular Lymphoma In Situ
    - SEER SINO @20130042
    - 2012 Hematopoietic Manual under Reportability
  - In situ duct adenocarcinoma of the prostate
  - AIN III (8077) arising in perianal skin (C445)

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New Coding Rules - Grade

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Updated Grade Rules

- New Grade rules in effect for cases diagnosed 2014 and later
- Replaces all old rules for cases diagnosed 2014 and later

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Updated Grade Rules

- Rules are hierarchical
  - Begin at Rule #1 and read down the list. Stop at the first rule that applies
- Rules are broken into two separate sections
  - Solid Tumors
  - Hematopoietic and Lymphoid Neoplasms

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### Updated Grade Rules

- Hematopoietic & Lymphoid Neoplasms
  - No Changes
  - Reminder: Determine the Cell Indicator by applying the “Grade of Tumor Rules” within the current [Hematopoietic and Lymphoid Neoplasm Manual](#)

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### Updated Grade Rules – Solid Tumors

- Solid Tumors
  - New format of rules covering solid tumors
  - Nine consolidated hierarchical rules
    - Rules 1 – 5 are self explanatory and are not covered in this presentation
    - Rules 6 – 9 will be reviewed

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### Updated Grade Rules – Solid Tumors

- Retained the three separate grade systems
  - 2, 3, and 4 grade systems
- Retained Special coding systems for
  - Breast, Kidney Parenchyma, Soft Tissue, and Prostate
  - Specific rules unchanged

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**Updated Grade Rules – Solid Tumors**

Rule 6

- Code the grade form the special grade system if applicable
- If special grade system cannot be applied move to next rule , #7

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**Updated Grade Rules – Solid Tumors**  
**Special Grade Systems Rules**

- There are four special grade systems
  - Breast
  - Kidney Parenchyma
  - Soft Tissue
  - Prostate

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**Special Coding System –  
Breast**

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### Updated Grade Rules – Solid Tumors Special Grade Systems Rules - Breast

- Bloom Richardson (BR)
- No changes
- Rules organized in hierarchical order
- If only a grade is stated (Grade 1 or Grade 3)
  - DO NOT assume stated grade is BR or Nottingham
  - Use the terminology to code grade

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### Special Coding System – Kidney Parenchyma

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### Updated Grade Rules – Solid Tumors Special Grade Systems Rules - Kidney

- Furman Nuclear Grade should be used for Kidney Parenchyma Only.
  - DO NOT Use for Kidney Renal Pelvis

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### Updated Grade Rules – Solid Tumors Special Grade Systems Rules - Kidney

- Fuhrman nuclear grade is a four-grade system based on
  - nuclear diameter and shape,
  - the prominence of nucleoli, and
  - the presence of chromatin clumping in the highest grade.

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### Updated Grade Rules – Solid Tumors Special Grade Systems Rules - Kidney

Description	Grade Code
Grade 1	1
Grade 2	2
Grade 3	3
Grade 4	4

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### Special Coding System – Soft Tissue

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**Updated Grade Rules – Solid Tumors**  
Special Grade Systems Rules – Soft Tissue

- For use in the following sites only:
  - SoftTissue
  - HeartMediastinum
  - Peritoneum
  - Retroperitoneum

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**Updated Grade Rules – Solid Tumors**  
Special Grade Systems Rules – Soft Tissue

- The grading system of the French Federation of Cancer Centers Sarcoma Group (FNCLCC) is the preferred system.
- Record the grade from any three-grade sarcoma grading system the pathologist uses.
- For terms such as "well differentiated" or "poorly differentiated," go to Coding for Solid Tumors #8.

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**Updated Grade Rules – Solid Tumors**  
Special Grade Systems Rules – Soft Tissue

- In some cases, especially for needle biopsies, grade may be specified only as "low grade" or "high grade."
  - The numeric grade takes precedence over "low grade" or "high grade"

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Updated Grade Rules – Solid Tumors  
Special Grade Systems Rules – Soft Tissue

Description	Grade Code
Specified as Grade 1 [of 3]	2
Specified as Grade 2 [of 3]	3
Specified as Grade 3 [of 3]	4
Grade stated as low grade, NOS	2
Grade stated as high grade, NOS	4

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Special Coding System –  
Prostate

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Updated Grade Rules – Solid Tumors  
Special Grade Systems Rules – Prostate

- Gleason Score 5 and 6 has been reclassified
  - Now considered Grade 1 (Well Differentiated)
- Gleason Score 7 has been reclassified, again
  - Now considered Grade 2 (Moderately Differentiated)

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## Updated Grade Rules – Solid Tumors Special Grade Systems Rules - Prostate

Gleason score	Prostate	
	Grade Code	AJCC 7th
2	1	G1
3	1	G1
4	1	G1
5	1	G1
6	1	G1
7	2	G2
8	3	G3
9	3	G3
10	3	G3



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If none of these systems apply,  
return to Grade rule sets and  
continue with Rule #7

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## Updated Grade Rules – Solid Tumors

### Rule 7

- Use the Two-, Three-, or Four- grade system
  - Captured in 7a, 7b, and 7c respectfully

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## Updated Grade Rules – Solid Tumors

### Rule 7a: Two-grade system

Term	Description	Grade Code	Exception for Breast and Prostate Grade Code
1/2, I/II	Low grade	2	1
2/2, II/II	High grade	4	3

NOTE: In transitional cell carcinoma for bladder, the terminology “high grade TCC” and “low grade TCC” are coded in the two-grade system

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## Updated Grade Rules – Solid Tumors

### Rule 7b: Three-grade system

Term	Description	Grade Code	Exception for Breast and Prostate Grade Code
1/3	Low grade	2	1
2/3	Intermediate grade	3	2
3/3	High grade	4	3

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## Updated Grade Rules – Solid Tumors

### Rule 7c: Four-grade system

Term	Description	Grade Code
1/4	Grade I; Well differentiated	1
2/4	Grade II; Moderately differentiated	2
3/4	Grade III; Poorly differentiated	3
4/4	Grade IV; Undifferentiated	4

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## Updated Grade Rules – Solid Tumors

### Rule 8

- Terminology: use the 'Description' column or the 'Grade' column to code grade. Breast & Prostate use the same grade code with a few noted exceptions.

See Table – next couple slides

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## Updated Grade Rules – Solid Tumors

Description	Grade	Assigned Grade Code	Exception for Breast and Prostate Grade Code
Differentiated, NOS	I	1	
Well differentiated	I	1	
Only stated as 'Grade I'	I	1	
Fairly well differentiated	II	2	
Intermediate differentiation	II	2	
Low grade	I-II	2	1
Mid differentiated	II	2	
Moderately differentiated	II	2	
Moderately well differentiated	II	2	
Partially differentiated	II	2	

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## Updated Grade Rules – Solid Tumors

Description	Grade	Assigned Grade Code	Exception for Breast and Prostate Grade Code
Partially well differentiated	I-II	2	1
Relatively or generally well differentiated	II	2	
Only stated as 'Grade II'	II	2	
Medium grade, intermediate grade	II-III	3	2
Moderately poorly differentiated	III	3	
Moderately undifferentiated	III	3	
Poorly differentiated	III	3	
Relatively poorly differentiated	III	3	
Relatively undifferentiated	III	3	
Slightly differentiated	III	3	
Dedifferentiated	III	3	
Only stated as 'Grade III'	III	3	
High grade	III-IV	4	3
Undifferentiated, anaplastic, not differentiated	IV	4	
Only stated as 'Grade IV'	IV	4	
Non-high grade		9	

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Updated Grade Rules – Solid Tumors

Rule 9

- Use Code 9 (Unknown) if no description fits or grade is unknown prior to neoadjuvant therapy

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ICD-O-3 Changes

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ICD-O-3 Changes

- Effective with cases diagnosed January 1, 2014 and later
- 36 New terms added
  - 21 malignant (/3) terms
  - 1 borderline (/1) term of CNS
  - 14 benign (/0) or uncertain malignancy (/1) terms

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### ICD-O-3 Changes

- Of the 36 new terms
  - 5 are “preferred” terms
    - 3 are malignant terms
  - There are many new “related” and “synonyms” terms

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### ICD-O-3 Changes

Examples of new preferred terms

- 8150/3 Pancreatic endocrine tumor, malignant (C25.\_)
  - 8150/3 Islet cell tumor, NOS (C25.\_)
- 8244/3 Mixed adenoneuroendocrine carcinoma
  - 8244/3 Composite carcinoid

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### ICD-O-3 Changes

Examples of new preferred terms

- 8154/3 Mixed pancreatic endocrine and exocrine tumor, malignant (C25.\_)
  - Mixed islet cell and exocrine adenocarcinoma (C25.\_)

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### ICD-O-3 Changes

- For detailed listing of the changes
  - Journal of Registry Management
    - Fall 2013 – Article by April Fritz
  - NAACCR website
    - Guidelines for ICD-O-3 Update Implementation
  - CCR PAQC Data Alert 2013-017

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### Collaborative Stage v0205 Changes

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### Collaborative Stage v0205

- CS 02.05 Changes
  - New Notes - 7
  - Updated Notes - 38
  - New Codes - NONE
  - Updated Code Descriptions - 59
- Discontinued SSF's
  - 109 SSF's in 61 schemas are no longer required by CCR and SEER
  - CoC still requires these SSF's to be reported

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Collaborative Stage v0205 Changes  
Part 1 Section 1 and Section 2

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New Instruction  
Part 1-Section2

- Recording Lab Tests and Tumor Markers in SSF's
  - (NEW) Note 1 – Timing for Recording Laboratory Tests
    - Unless stated otherwise, record only tests results obtained:
      - A. before any cancer-directed treatment is given, **and**
      - B. no earlier than approximately three months before diagnosis.

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Clarification Part 1-Section2

- Intrahepatic Bile Ducts, Perihilar Bile Ducts
  - SSF 10 (Tumor Growth Pattern)
    - Added clarification that information can be obtained from radiology, surgery, or pathology reports

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**Clarification** Part 1-Section2

**Bismuth-Corlette classification**  
of perihilar cholangiocarcinomas

1 2 3A 3B 4

M. Srinivas  
Radiopaedia.org

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**Clarification** Part 1-Section2

- Esophagus and Esophagus GE Junction
  - CS Regional Lymph Nodes and CS Mets at Diagnosis
    - Information added to Part 1 Section 2 and notes were added clarifying regional nodes.
    - Some nodal chains in this large area are partially regional and partially distant

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**Clarification** Part 1-Section2

- Prostate
  - SSF 7 & SSF 8
    - Revised coding information to include TURB

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**Clarification** Part 1-Section2

- Prostate
- CS SSF 8 and SSF 10
  - Example for Gleason 4 has been corrected to reflect correct code for Gleason Score
    - Gleason Score 4 (SSF 8) is to be coded 999
      - *(assume a number in the range 2 to 5 is a pattern and code the total score to 999)*

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**Clarification** Part 1-Section2

- Prostate
- CS SSF 8 and SSF 10
  - Example for Gleason 7 has been updated to provide a rationale for the code
    - Gleason Score 7 (SSF 8) is to be coded 007
      - *(assume a number in the range 6-10 is a score and code as stated)*

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**Clarification** Part 1-Section2

- Brain, CNS Other, Intracranial Gland
- SSF 1 (WHO Grade Classification)
  - Clarified that a WHO grade can only be assigned from pathologic review of tissue
    - Code the WHO grade as documented in the pathology report
    - **Do not** convert terminology such as well-, moderately-, or poorly differentiated to code this field.

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**Clarification** Part 1-Section2

- Prostate
- CS Extension (Clinical Extension)
  - Clarification added to Notes 3A, 3B, 3C, and codes 100 – 240 that only physical exam is used to determine an inapparent tumor versus apparent tumor unless the managing clinician/urologist considers the imaging reliable for staging

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**Collaborative Stage v0205 Changes**  
**Part 2 – Site Specific Schemas**

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**CS Clarifications and Corrections**  
**New Instruction**

- Bladder
  - SSF 2 (Size of Metastasis in Lymph Nodes)
    - Note 1 has been added indicating common iliac nodes are excluded when determining size of metastasis in lymph nodes.

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### CS Clarifications and Corrections

- Colon
  - CS Lymph Nodes
    - Note 5 corrected to reference code 220
    - Code 210: Added periappendiceal lymph nodes as a regional chain for cecal primaries

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### CS Clarifications and Corrections

- Esophagus
  - CS Extension
    - Added Note 4 describing the different possible meaning of the phrase “through the muscularis propria” and how to apply this to the extension codes

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### CS Clarifications and Corrections

- Esophagus
  - SSF #1 (Clinical Assessment of Regional Lymph Nodes)
    - Added Note 1 describing “clinically evident lymph nodes”

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### CS Clarifications and Corrections

- HemRetic
  - CS Extension
    - Added Note 2 indicating not to code lymph node involvement for the histologies listed in code 100
    - If there is lymph node involvement for any of these histologies, ignore this information and:
      - Code 100 for localized disease, or
      - Code 800 for systemic disease

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### CS Clarifications and Corrections

- Kidney Parenchyma
  - CS Extension
    - Code 750 clarified Liver and Spleen involvement

750	Liver from right kidney Spleen from left kidney Stomach
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### CS Clarifications and Corrections

- Lung
  - SSF 1 (Separate Tumor Nodules – Ipsilateral Lung)
    - Note 4 added to clarify that in situ tumors are to be coded 000 for SSF1

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### CS Clarifications and Corrections

- Mycosis Fungoides
  - CS Tumor Size
    - Note added to clarify that size of tumor only is coded, not size of patches, papules, or plaques

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### CS Clarifications and Corrections

- Nasopharynx
  - CS Lymph Nodes
    - Level IV nodes have been removed from the description for code 130 and are listed for code 650 only.
    - Level V nodes (NOS) added to the definition of code 115

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### CS Clarifications and Corrections

- Oropharynx
  - CS Extension
    - Codes 150 and 500 updated to specify coding for tonsillar involvement

150	Invasive tumor confined to one of the following subsites: Anterior wall including vallecula One lateral wall (including tonsillar pillar/fossa, palatine tonsil, tonsil, NOS) ← Posterior wall
500	Base of tongue (including lingual tonsil) ← Buccal mucosa (inner cheek) Floor of mouth Gum (gingiva)

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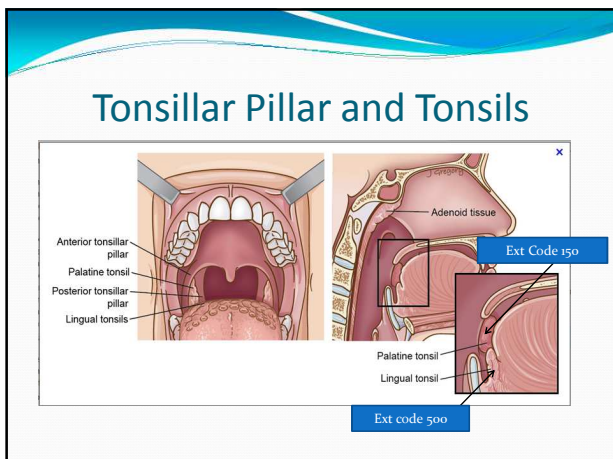
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### CS Clarifications and Corrections

- Pancreas Body Tail
  - Two Notes added for clarification regarding how to code mesenteric, NOS and porta hepatic lymph nodes.
  - Notes 3 & 4 (identical) added in both CS Lymph Nodes and CS Mets at Diagnosis

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### CS Clarifications and Corrections

- Prostate
  - CS Tumor Size/Ext Eval
    - Note 2 expanded to add clarification on how to correctly use the CS Tumor Size/Ext Eval codes for this site
    - Note 4 (0204) was removed and remaining notes renumbered

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### CS Clarifications and Corrections

- Prostate
  - CS Extension
    - Note 7 added to address incidental finding of prostate cancer on prostatectomy performed for other reasons
    - Note 4 in 0205 was Note 3E in 0204
      - Notes renumbered beginning with note 4

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### CS Clarifications and Corrections

- Prostate
  - CS SSF 9 (Gleason Primary Pattern Value on Prost), CS SSF 10 (Gleason Score on Prost)
    - Code 999 definition modified to include “no residual disease”

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- Questions

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