SOLID TUMOR RULES (MULTIPLE PRIMARY AND HISTOLOGY RULES)
2017-2018 NAACCR WEBINAR SERIES

Q&A

• Please submit all questions concerning webinar content through the Q&A panel.
• Reminder:
• If you have participants watching this webinar at your site, please collect their names and emails.
• We will be distributing a Q&A document in about one week. This document will fully answer questions asked during the webinar and will contain any corrections that we may discover after the webinar.
FABULOUS PRIZES

SPEAKERS

- Carol Hahn Johnson, BS, CTR (Retired), Consultant
- Lois Dickie, CTR, NCI SEER
AGENDA

• Overview
• Breast
  • Multiple Primary Rules
  • Histology Rules
  • Quiz
• Lung
  • Multiple Primary rules
  • Histology rules
  • Quiz
• Q&A
SINQ AND ASK A SEER REGISTRAR

- Both tools may be accessed at seer.cancer.gov/registrars
- SEER Inquiry System aka: SINQ
  - Submission of questions to SINQ limited to SEER Registries only
  - Anyone can search SINQ
  - Remember answers are based on year of diagnosis and coding rules in place at that time
  - Remember, questions may be very specific to a case and may not apply to yours. Not all answers are general

SINQ AND ASK A SEER REGISTRAR

- Ask A SEER Registrar (AASR)
  - Anyone can submit questions
  - This database is NOT searchable
  - Common questions submitted to AASR will be added to SINQ
  - Many of the questions we receive are very specific and will not be added to SINQ
SUBMITTING QUESTIONS TO AASR

• ALWAYS INCLUDE:
  • Dates for all procedures and pathology/cytology reports
  • Primary site(s)
  • Final path diagnosis
  • Previous history of malignancy if known
  • Use standard abbreviations
• Do Not ask “what if” questions
  • Incomplete information will result in sending the questions back for clarification

2018 ICD-O UPDATE AND THE SOLID TUMOR RULES

• Changes listed in the 2018 ICD-O update have been incorporated into the solid tumor rules
• Includes terminology from CAP Protocols
• 2018 Solid Tumor Rules instruct users to reference the 2018 ICD-O update, current ICD-O-3 manual along with the solid tumor histology tables and rules
IMPORTANCE OF THE SOLID TUMOR RULES

• Before a case can be staged:
  • Need to determine primary site
  • Number of primaries
  • Histologic type
• Reminder: AJCC does NOT determine number of primaries and does not determine histology
• Code histology per the Solid Tumor Rules. Do Not change histology to stage the case

FUTURE EDUCATIONAL PRODUCTS

• 2018 Solid Tumor Rules
  • August 29-30, 2018 at 2pm ET
  • See the NAACCR Education and Training Calendar for registration information.
  • https://www.naaccr.org/education-training-calendar/
FUTURE EDUCATIONAL PRODUCTS

• NCRA on-line training modules
  • Free on NCRA website
  • Modules will be offered for General Instructions and all revised site rules
  • Length of modules will run between 15 to 30 minutes
  • May be accessed as needed
  • First module ETA late summer/early fall 2018

FUTURE EDUCATIONAL PRODUCTS

• SEER*Educate
  • Site specific modules with coding exercises will be offered
    • Date of availability TBD
    • CE’s will be available
REVIEW OF SOLID TUMOR MANUAL

BREAST

POP QUIZ 1

Microscopic:
Histologic Type: Ductal Carcinoma In-Situ
Architectural pattern(s): Comedo, Cribiform, Micropapillary, solid
Tumor Grade: Histologic Grade: 2 Nuclear Grade: II
POP QUIZ 1

• What histology would be assigned?

• 8500/2

  • Breast Histology Coding Rules, Coding Histology in a Single Tumor
    • Note 2: Subtypes/variant, architecture, pattern and features ARE NOT CODED. The majority of in situ tumors will be coded to DCIS 8500/2
    • Stop at rule H2. Code the histology when only one histology is present

POP QUIZ 2

• A patient present for a needle core biopsy of a tumor in her left breast. Pathology shows:

  • Infiltrating moderately differentiated duct carcinoma, grade 2 of 3, with tubule formation and focal areas with features of invasive micro papillary carcinoma. (Nottingham score = 6) present in all three cores.
POP QUIZ 2

• What histology code would be assigned?
  • 8500/3 Ductal Carcinoma

• Breast Histology Coding Rules, Coding Histologies in a Single Tumor
  • Note 2 b (bullet 4): Do not code histology )NOS/NST, subtype/variant or specific) when documented with...
    • Features (of): NOTE: Only code features when there is a specific code for the NOS with features in Table 3 or the ICD-O and all updates

QUESTIONS?

QUIZ 1
POPC QUIZ 3

- A patient present with a tumor in the upper lobe of his right lung and another tumor in the lower lobe of his right lung. A biopsy of the upper lobe lung is positive for non-small cell carcinoma. A biopsy of the lower lobe is positive for squamous cell carcinoma.
POP QUIZ 3

• How many primaries? – 1
  • Rule M7 Abstract a single primary when separate/non-contiguous tumors are on the same row in Table 3 in the Equivalent Terms and Definitions. Timing is irrelevant.
  • Table 3

<table>
<thead>
<tr>
<th>Non-small cell carcinoma 8046</th>
<th>All histologies other than small cell. Small cell includes:</th>
</tr>
</thead>
</table>
| Example: A biopsy of LUL lesion is diagnosed as non-small carcinoma 8046. Subsequent resection shows adenocarcinoma 8140/3. Adenocarcinoma is a subtype/variant of non-small cell carcinoma. When a histology is not listed as small cell carcinoma in column 3, it is a subtype/variant of non-small cell. | Atypical carcinoid 8249
Combined large cell neuroendocrine carcinoma 8013
Combined small cell carcinoma 8045
Large cell neuroendocrine carcinoma 8013
Small cell carcinoma/ neuroendocrine tumors (NET Tumors) 8041
Typical carcinoid 8240 |

• What histology would be assigned to each primary?
  • Squamous Cell Carcinoma 8070/3 – Rule H12

POP QUIZ 4

• A patient present with a tumor in the upper lobe of his right lung and another tumor in the lower lobe of his right lung. A biopsy of the upper lobe lung is positive for adenocarcinoma. A biopsy of the lower lobe is positive for acinar adenocarcinoma.
POP QUIZ 4

• How many primaries? – 1
  • Rule M7 Abstract a **single primary** when separate/non-contiguous tumors are on the **same row** in **Table 3** in the Equivalent Terms and Definitions. Timing is irrelevant.
    • NOTE 2: The same row means that tumors are
      • The same histology (same four-digit ICD-O code) OR
      • One is the preferred term (column 1) and the other is a synonym for the preferred term (column 2) or
      • A NOS (column 1/column 2) and the other is subtype/variant of that NOS (column 3)

• What histology would be assigned to each primary?
  • Acinar Adenocarcinoma 8551/3 Rule H12

QUESTIONS?

QUIZ 2
REVIEW OF CASE SCENARIOS
COMING UP....

• Coding Pitfalls
  • 09/06/2018

• Collecting Cancer Data: Lung (new season!)
  • 10/04/2018

FABULOUS PRIZES WINNERS
CE CERTIFICATE QUIZ/SURVEY

• Phrase

• Link


CAROL JOHNSON CJJOHNSON1231@OUTLOOK.COM
LOIS DICKIE DICKIELO@MAIL.NIH.COM
JIM HOFFERKAMP JHOFFERKAMP@NAACCR.ORG
ANGELA MARTIN AMARTIN@NAACCR.ORG