2018 IMPLEMENTATION UPDATE: 
WHAT’S NEW IN STAGING FOR 2018?
SESSION 2
10/20/17

Q&A

• Please submit all questions concerning webinar content through the Q&A panel.
• A recording of today’s session, the Q&A, and a copy of the slides will be posted to the NAACCR website in about one week.
AGENDA

• Updates to the 2018 Timeline
  • Lori Havener-NAACCR Program Manager of Standards
• AJCC New Data Items
  • Donna M. Gress, RHIT, CTR
• EOD, Summary Stage, SSDI
  • Jennifer Ruhl, SEER, Co-Chair SSDI Task Force
• Standard Setter Updates
  • CoC
  • NCI-SEER
  • CDC-NPCR
  • Canada

2018 IMPLEMENTATIONS AND TIMELINES V1.3

LORI HAVENER, NAACCR
2018 IMPLEMENTATIONS AND TIMELINES

• AJCC 8th Edition Chapter Updates to Histologies (Release 10/13/17)
• New and Revised Prognostic Data Items (Submit to UDS 12/15/17)
• ICD-O-3 Histology Revisions (Release 12/22/17)
• Solid Tumor (MP/H) Rules (Release 12/22/17)
• SEER Hematopoietic and Lymphoid Neoplasm Database (Release 12/22/17)
• SEER Summary Stage 2018 and SEER EOD 2018 (Release 12/22/17)

2018 IMPLEMENTATIONS AND TIMELINES

• Standards Volume II, Version 18 (Release 1/1/18)
• CoC 2018 STORE Manual (Release 1/1/18)
• EDITS (Release 1/1/18)
• 2018 Implementation Guidelines (Release 3/1/18)
2018 IMPLEMENTATIONS AND TIMELINES

• Other Activities for 2018:
  • Cancer registry software development
  • CDC NPCR TNM DLL
  • NCI SEER*RSA (will cover EOD and SS 2018)
  • Hospital and central cancer registry software updates.
• Central Registry Modifications to Manuals
• Education and Training
2018 IMPLEMENTATION INFORMATION

This page is intended to be a source of information for central registries, hospital registries, and software vendors. On this site you will find information concerning new data items, edits, rules for determining multiple primaries and histologies, updates to histology codes, and educational activities. You can expand and close sections below by clicking on the section titles.

STAGE
+ 
ICD-O-3 HISTOLOGY REVISIONS
+ 
MP/H RULES HEMATOPOIETIC RULES
+ 
EDITS
+ 
EDUCATION AND TRAINING
+ 
IMPLEMENTATION GUIDELINES
+ 
IMPLEMENTATION TIMELINE
+ 
CHANGE LOG
+ 

IMPLEMENTATION TIMELINE

2018 IMPLEMENTATIONS AND TIMELINE UPDATE

Version 1.3 – 10/3/17

NAACCR and the standard setting agencies developed the 2018 Implementations and Timelines document to keep the cancer surveillance community abreast of the many activities in 2018. Version 1.3 includes recent updates. All agencies are diligently working to meet the deadlines in the timeline. Please note that there are dependencies in the timeline and if something is delayed it will impact other deadlines.

The V1.3 updates:
- AJCC 8th Edition Chapter Update to Histologies release date.
- New and Revised Prognostic Data Item release date and addition of red text.
- ICD-O-3 Histology Revisions, MP/H Rules, SEER Summary Stage 2018 and SEER EOD 2018 release dates and information.
- SEER Hematopoietic and Lymphoid Neoplasm Database release date.
- Standards Volume II, Version 1.8 release date.

VERSION 18 DATA ITEMS

Version 18 New Data Items – 10/3/17

Above is a list of all of the new data items for 2018, these are in no particular order.

Note: the UDS WG is still reviewing the new data items, some data item numbers could change.
THANK YOU!
PLEASE SUBMIT QUESTIONS IN THE Q&A

AJCC NEW DATA ITEMS
DONNA M. GRESS, RHIT, CTR
NEW AJCC STAGE DATA ITEMS

- All new AJCC 8th edition stage data items
  - Separate from pre-2018 clinical and pathologic stage items
  - Three sets of stage items
    - Clinical
    - Pathological
    - Posttherapy

- Different data items for AJCC 7th and 8th
  - No conversions between 7th and 8th will take place
  - Abstracting 2018 cases before software release
    - 8th edition may not be entered into 7th data items
    - Must note 8th stage in comments until new software received

FORMAT FOR T, N, M, AND STAGE GROUP

- Facilitates communication with physicians & researchers
  - Use same language as AJCC
  - No more registry shorthand and storage codes
  - Examples from registrar questions & physicians
    - c2 c2a c0
    - Tc2 Nc2a Mc0
    - cTc2 cNc2a cMc0

- Length changed from 4 to 15 characters

- Use format specified in AJCC staging manual
  - ypTis(DCIS)
  - pN0(mol+)
  - cM1b(0)
  - 3C
SEPARATE STAGE CLASSIFICATIONS

- Collect clinical, pathological, posttherapy staging separately
- Emphasizes differences between p and yp stage
  - Timing and criteria
  - Staging rules
- Cannot easily determine whether p or yp in pre-2018 data
  - Descriptor y not always coded
  - Cannot depend on systemic therapy codes
  - All coded therapy is NOT neoadjuvant
- Pathological stage ONLY in Path T, N, M, stage group
- Postneoadjuvant therapy stage ONLY in NEW Post Therapy items

POSTNEOADJUVANT THERAPY STAGE CLASSIFICATION

- Timeframe – Postneoadjuvant therapy / posttherapy staging
  - Starts after completion of systemic/radiation therapy
  - Does not use any information from clinical staging
  - Evaluates residual or remaining tumor after neoadjuvant therapy
  - Documents response to treatment

- Criteria – Postneoadjuvant therapy / posttherapy staging
  - Must meet standard neoadjuvant therapy guidelines
  - Not all radiation and/or systemic therapy meets this criteria
  - Not all surgical procedures qualify as definitive surgical resection
**POSTNEOADJUVANT THERAPY STAGE CLASSIFICATION**

- **Post Therapy T – ypT**
  - Evaluates primary tumor
  - Reflects remaining tumor size and/or extension

- **Post Therapy N – ypN**
  - Identifies absence or presence of node metastasis
  - Describes extent of nodal involvement

- **Post Therapy M – cM or pM**
  - Remains same as that assigned in clinical stage
  - May be cM or pM

- **Post Therapy Stage Group**
  - Assigned according to ypT ypN and c/pM

**DESCRIPTOR DATA ITEM**

- Descriptor data item prior to 2018
  - Category suffix: (m)
  - Stage prefix: y
  - Stage group info for lymphoma: E, S

- Identified issues with descriptor data item
  - Confusing to mix disparate concepts in one data item
  - Poor compliance and inconsistent usage
  - Alter for 2018 by creating new items or merging into existing

- Transformation for 2018
  - Developed new suffix data items for T and N
  - Shifted stage prefix to new yp stage data items
  - Incorporated E into stage group, S no longer used
NEW DATA ITEMS FOR DESCRIPTOR – T SUFFIX

- T suffix – 3 new data items
  - cT suffix
  - pT suffix
  - ypT suffix

- T suffix coding

<table>
<thead>
<tr>
<th>code</th>
<th>label</th>
<th>description</th>
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</thead>
<tbody>
<tr>
<td>m</td>
<td>(m)</td>
<td>Multiple synchronous tumors</td>
</tr>
<tr>
<td></td>
<td></td>
<td>OR</td>
</tr>
<tr>
<td></td>
<td></td>
<td>For thyroid differentiated and anaplastic only, Multifocal tumor</td>
</tr>
<tr>
<td>s</td>
<td>(s)</td>
<td>For thyroid differentiated and anaplastic only, Solitary tumor</td>
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<tr>
<td>blank</td>
<td>blank</td>
<td>No information available; not recorded</td>
</tr>
</tbody>
</table>

NEW DATA ITEMS FOR DESCRIPTOR – N SUFFIX

- N suffix – 3 new data items
  - cN suffix
  - pN suffix
  - ypN suffix

- N suffix coding

<table>
<thead>
<tr>
<th>code</th>
<th>label</th>
<th>description</th>
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</thead>
<tbody>
<tr>
<td>sn</td>
<td>(sn)</td>
<td>Sentinel node procedure without resection of nodal basin</td>
</tr>
<tr>
<td>f</td>
<td>(f)</td>
<td>FNA or core needle biopsy without resection of nodal basin</td>
</tr>
<tr>
<td>blank</td>
<td>blank</td>
<td>No suffix needed or appropriate; not recorded</td>
</tr>
</tbody>
</table>
GRADE

- Grade data unusable in many sites by AJCC experts
  - Inconsistent grading systems used
  - Data coding rules conflicted with physician guidance

- AJCC specifies grading system for each disease site

- Three new grade data items
  - Grade data item for each stage classification
  - Incorporates both AJCC and standard registry coding
  - Prioritizes AJCC specified grade
  - Provides standard registry grade when AJCC is not applicable
  - Grade tables specific for each disease site
  - Replaces SSF grade data items

GRADE FOR EACH STAGE CLASSIFICATION

- Grade needed for each stage classification
  - Document even if grade not needed for stage group
  - Critical to provide information for each, not always the same
  - Follows same timeframe and criteria rules as stage

- Grade data items
  - Grade clinical – all patients if cancer known prior to treatment
  - Grade pathological – primary treatment is surgical resection
  - Grade posttherapy – neoadjuvant followed by surgical resection

- Patients will have only 1 or 2 grades coded, never all 3
### 3-GRADE AND 4-GRADE SYSTEMS

<table>
<thead>
<tr>
<th></th>
<th>Definitions</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>G1: Well differentiated</td>
</tr>
<tr>
<td>2</td>
<td>G2: Moderately differentiated</td>
</tr>
<tr>
<td>3</td>
<td>G3: Poorly differentiated, undifferentiated</td>
</tr>
<tr>
<td>9</td>
<td>Grade cannot be assessed (GX); Unknown Not applicable</td>
</tr>
</tbody>
</table>

### BREAST GRADE

<table>
<thead>
<tr>
<th></th>
<th>Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>G1: Low combined histologic grade (favorable), SBR score of 3–5 points</td>
</tr>
<tr>
<td>2</td>
<td>G2: Intermediate combined histologic grade (moderately favorable); SBR score of 6–7 points</td>
</tr>
<tr>
<td>3</td>
<td>G3: High combined histologic grade (unfavorable); SBR score of 8–9 points</td>
</tr>
<tr>
<td>L</td>
<td>Nuclear Grade I (Low) (in situ only)</td>
</tr>
<tr>
<td>M</td>
<td>Nuclear Grade II (interMediate) (in situ only)</td>
</tr>
<tr>
<td>H</td>
<td>Nuclear Grade III (High) (in situ only)</td>
</tr>
<tr>
<td>A</td>
<td>Well differentiated</td>
</tr>
<tr>
<td>B</td>
<td>Moderately differentiated</td>
</tr>
<tr>
<td>C</td>
<td>Poorly differentiated</td>
</tr>
<tr>
<td>D</td>
<td>Undifferentiated, anaplastic</td>
</tr>
<tr>
<td>9</td>
<td>Grade cannot be assessed (GX); Unknown Not applicable</td>
</tr>
</tbody>
</table>
NEW STAGE ITEMS

- **CLINICAL STAGE**
  - Clin T  Clin T suffix
  - Clin N  Clin N suffix
  - Clin M
  - Clin Grade
  - Clin Stage Group
  - Staged by

- **PATHOLOGICAL STAGE**
  - Path T  Path T suffix
  - Path N  Path N suffix
  - Path M
  - Path Grade
  - Path Stage Group
  - Staged by

- **POSTTHERAPY STAGE**
  - Post Therapy T  Post T suffix
  - Post Therapy N  Post N suffix
  - Post Therapy M
  - Post Therapy Grade
  - Post Therapy Stage Group
  - Staged by

THANK YOU!
PLease submit questions in the Q&A
EXTENT OF DISEASE (EOD) 2018

- EOD is a data collection system
  - EOD Primary Tumor
  - EOD Regional Nodes
  - EOD Mets
- EOD schemas available in SEER*RSA (~120)
  - Note: There will not be a separate EOD manual. EOD schemas only available in SEER*RSA
    - EOD general coding instructions will be included in the SEER Coding Manual
**EXENT OF DISEASE (EOD) 2018**

- The following EOD data items will be derived:
  - Derived EOD 2018 T
  - Derived EOD 2018 N
  - Derived EOD 2018 M
  - Derived EOD 2018 Stage Group

- **Note**: These derivations will only be available at the central registry level

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**SUMMARY STAGE 2018**
SUMMARY STAGE 2018

- Summary Stage 2000 updated based on changes in AJCC editions: 6, 7, 8
- Same code structure
- New/revised schemas
- General coding instructions available on SEER website
- Will be available in two formats:
  - SEER*RSA (individual schemas)
  - Stand alone document (coding instructions and schemas)

SUMMARY STAGE 2018

- Derived from EOD OR manually assigned
  - Derived SS2018 (from EOD)
  - Directly Assigned SS2018
SITE-SPECIFIC DATA ITEMS (SSDI’s)

WHAT IS AN SSDI?

• Site-Specific Data Item
  • Previously called site-specific factors
  • Now have own data item/data number
  • NAACCR “custodian” of these data items
  • Site-Specific Data Item (SSDI) taskforce responsible for:
    • Developing/updating data items
**TYPES OF SSDI’S**

- Schema Discriminators: used when primary site and/or histology are not enough to get to right schema
- Required for Staging: Used in addition to T, N, or M to get a stage group
- Other types of data items

**SCHEMA ID**

- Automatically assigned (no registrar input)
  - Based on primary site/histology/schema discriminators (when needed)
- Schema ID determines
  - Summary Stage chapter
  - SSDIs appropriate for that chapter
  - AJCC ID (which defines cases eligible for TNM staging)
THANK YOU!!!

PLEASE SUBMIT QUESTIONS IN THE Q&A

STANDARD SETTER UPDATES

• Commission on Cancer
  • Kathleen Thoburn
    • Manager, Information & Data Standards - National Cancer Data Base
• NCI-SEER
  • Serban Negoita
    • Chief of the Data Quality, Analysis, and Interpretation Branch (DQAIB).
• CDC-NPCR
  • Mary Lewis
    • Public Health Advisor – Centers for Disease Control and Prevention, National Program of Cancer Registries
• Canada
  • Mary Jane King
COMMISSION ON CANCER
2018 STAGING REQUIREMENTS

For cases diagnosed January 1, 2018 and later, CoC will be requiring:

- Required Stage Groups

- Newly collected when appropriate for the tumor being abstracted:
  - AJCC TNM Clin T Suffix [#1030]
  - AJCC TNM Path T Suffix [#1032]
  - AJCC TNM Post Therapy T Suffix [#1033]
  - AJCC TNM Clin N Suffix [#1034]
  - AJCC TNM Path N Suffix [#1035]
  - AJCC TNM Post Therapy N Suffix [#1036]

COMMISSION ON CANCER
2018 STAGING REQUIREMENTS

For cases diagnosed January 1, 2018 and later, CoC will be requiring:

- Other New Stage-associated Data Items
  - RX Date Regional LN Resection [#682]
  - RX Date Regional LN Resection Flag [#683]
  - Date SLN Biopsy (for breast and melanoma only) [#832]
  - Date SLN Biopsy Flag (for breast and melanoma only) [#833]
  - SLN Examined (for breast and melanoma only) [#834]
  - SLN Positive (for breast and melanoma only) [#835]
COMMISSION ON CANCER
STAGING DATA ITEMS NO LONGER COLLECTED

For cases diagnosed January 1, 2018 and later, CoC will no longer be collecting:

- TNM Path T [# 880]
- TNM Path N [# 890]
- TNM Path M [# 900]
- TNM Path Stage Group [# 910]
- TNM Path Descriptor [# 920]
- TNM Path Staged By [# 930]
- TNM Clin T [# 940]
- TNM Clin N [# 950]
- TNM Clin M [# 960]
- TNM Clin Stage Group [# 970]
- TNM Clin Descriptor [# 980]
- TNM Clin Staged By [# 990]

COMMISSION ON CANCER
STAGING DATA ITEMS NO LONGER COLLECTED

For cases diagnosed January 1, 2018 and later, CoC will no longer be collecting:

- CS Site-Specific Factors [# 2861-2880, 2890-2930]
- CS Version Input Original
- CS Version Derived
- CS Version Input Current
- NO COLLABORATIVE STAGE DATA ITEMS SHOULD HAVE VALUES
Need for Extent of Disease (EOD) Stage for Cancer Surveillance

- NCI SEER mandates the collection of cancer stage data in the population to:
  - report and monitor trends in cancer incidence and outcomes;
  - support and promote research for all types of cancer;
  - support DHHS-wide cancer control initiatives, including Healthy People 2020;
- Public Health Surveillance must maintain a system that will:
  - enable and ensure ongoing continuity of staging trends over time reflecting the combination of clinical and pathologic information;
  - permit staging of the most comprehensive set of patients for all cancer sites;
- AJCC TNM must be modified routinely to appropriately support clinical care of cancer patients;
- Patients, researchers and the public will benefit the most if the two system are harmonized and work synergistically;
### Significant Differences Between AJCC 8 and EOD & SS 2018

<table>
<thead>
<tr>
<th>AJCC TNM 8</th>
<th>EOD &amp; SS 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uses patient eligibility criteria based on primary site, histology, tumor behavior, age, etc.</td>
<td>Covers all reportable cancer cases</td>
</tr>
<tr>
<td>Requires separate reporting of clinical and pathological stage; requires eligibility rules for clinical and pathological staging</td>
<td>Does not use the concepts of clinical and pathological stage but rather focuses on the concept of combined stage</td>
</tr>
<tr>
<td>Specific categories for post therapy and post neoadjuvant therapy</td>
<td>Does not record separately stage pre/post therapy</td>
</tr>
<tr>
<td>Categorizes patients using 91 schemas (chapters)</td>
<td>Categorizes patients using approximately 120 schemas</td>
</tr>
<tr>
<td>Definitions of T,N,M categories</td>
<td>Frequently uses similar but more granular (specific) definitions than AJCC TNM</td>
</tr>
</tbody>
</table>

### Stage and Prognostic Factors Data Collection Requirements for Cases Diagnosed Year 2018

<table>
<thead>
<tr>
<th>Data Items</th>
<th>NCI-Funded Central Registry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reporting facility accredited by CoC</td>
<td>Reporting facility not accredited by CoC</td>
</tr>
<tr>
<td>EOD 2018</td>
<td>Required;</td>
</tr>
<tr>
<td>No recommendation; accepted if available in the exchange record;</td>
<td>Required;</td>
</tr>
<tr>
<td>Summary Stage - manually assigned</td>
<td>No recommendation; accepted if available in the exchange record;</td>
</tr>
<tr>
<td>No recommendation; accepted if available in the exchange record;</td>
<td>No recommendation; accepted if available in the exchange record;</td>
</tr>
<tr>
<td>AJCC New Data Items</td>
<td>No recommendation; accepted if available in the exchange record;</td>
</tr>
<tr>
<td>No recommendation; accepted if available in the exchange record;</td>
<td>No recommendation; accepted if available in the exchange record;</td>
</tr>
<tr>
<td>Schema Discriminators and Site Specific Data Items - required for staging</td>
<td>Required;</td>
</tr>
<tr>
<td>Site Specific Data Items - not required for staging</td>
<td>Required by SEER from CoC-accredited hospitals;</td>
</tr>
<tr>
<td>All items accepted if available in the exchange record;</td>
<td>Certain items will be required for special surveillance projects;</td>
</tr>
</tbody>
</table>
Extent of Disease, Summary Stage 2018, and Derived Variables

- EOD 2018
  - EOD Primary Tumor
  - EOD Regional Nodes
  - EOD Metts

- EOD 2018 (required by SEER registries from reporting facilities)

- Summary Stage 2018 (required by SEER registries)

- SS 2018
  - Summary Stage 2018 (also required by SEER registries)

Extent of Disease and Summary Stage 2018 Variables

- AIIC 8th ed.
  - AIIC 8th ed.

- Required by SEER registries from reporting facilities

- Available for registries not using EOD

- Summary Stage 2018 (required by SEER registries)
### Proposed Staging Requirements for 2018 Diagnoses

<table>
<thead>
<tr>
<th>Proposed Staging Requirements</th>
<th>Central Registry Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>NPCR Only</strong></td>
</tr>
<tr>
<td>SS2018 (directly coded)</td>
<td>Required for all cases</td>
</tr>
<tr>
<td>AJCC TNM 8th ed. Clin and Path T, N, M, and Stage Groups (directly coded) and NPCR Derived Clin and Path Stage Groups</td>
<td>Required from CoC facilities only</td>
</tr>
<tr>
<td>EOD and Derived TNM Items and Derived SS2018</td>
<td>Voluntary</td>
</tr>
</tbody>
</table>
Description of changes: AJCC TNM 8th Edition

• Directly-coded AJCC TNM 8th Edition stage for **ALL cases**:
  - CoC Accredited Facilities
  - As available from other sources – e.g. hospitals, radiation/medical oncology treatment centers, laboratories, physicians, outpatient centers, etc
  - CoC Facility Indicator on summary record to indicate reported from a CoC facility

Description of changes: Extent of Disease 2018

• Extent of Disease 2018 (EOD), Derived EOD TNM 8th T, N, M and Derived Stage Group and Derived Summary Stage 2018:
  - Dually-funded Registries
    - Entire State – Mandatory to report EOD – Ex: Louisiana
    - Specific Geographic Regions – Voluntary to report EOD – Ex: Michigan
    - Voluntary for NPCR-only funded registries
  - Evaluate ease of data collection, quality of data and usefulness of variables
Rationale for changes: AJCC TNM 8th Edition

• Data collection issue for non-CoC accredited facilities
• States can concentrate on CoC-accredited facilities and voluntary reporting by non-CoC facilities
• Anticipate higher quality of complete stage data meeting needs of data users

Rationale for changes: Extent of Disease 2018

• Ease of use
• Potential implementation in variety of registry settings
• Use 2018 as trial period from dual-funded registries and other volunteers
• Valuable experience/information for NPCR data collection beyond 2018
The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

Go to the official federal source of cancer prevention information: 
www.cdc.gov/cancer

Follow DCPC Online!
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Divison of Cancer Prevention and Control
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Q&A

PLEASE SUBMIT QUESTIONS THROUGH THE Q&A OR
THE 2018 IMPLEMENTATION FORUM HTTPS://WWW.NAACCR.ORG/2018-IMPLEMENTATION/
THANK YOU!