

OCISS Newsletter



OCISS Updates

NAACCR v 18

We are unable to provide a date for when NAACCR v18 software will be available. The NAACCR Data Dictionary has been finalized and new required data tables have been released <http://datadictionary.naacccr.org/>; Web Plus has not yet been updated, however, and edit sets have not been released. We will provide updates, as available.

As previously communicated, please give priority to finishing up abstraction and data submission for diagnosis year 2017 (as well as any remaining data for 2016). You will note that you cannot upload a file or release abstracts with a diagnosis date of January 1, 2018 or later. We added an edit to prevent any 2018 data from being submitted to OCISS at this time.

New File Upload Manual

The Web Plus manual for file uploading has been updated and is available on the ODH Website at <http://www.odh.ohio.gov/health/cancer/ocisshs/reporting1.aspx>. Updates include: 1) generating the data quality report; 2) checking the status of file updates; and 3) dealing with unusual occurrences. Information is also provided on how to label files. We ask that you include the name of the reporting facility in the file name. You can include the full facility name, an abbreviation, initials or even the OCISS Reporting Source ID – whatever works best for you. This is important as OCISS receives many files and sometimes we get files from different facilities but with the same file name. Thanks to those who are already doing this.

Death Data

In our October newsletter, we let you know that there would be some changes to the content and format of death data OCISS would be posting to Web Plus. Since then, some of you have contacted OCISS to let us know that you need additional information that is not in these new files – for example, cause of death. The file that OCISS is posting is the standard monthly file that ODH’s Bureau of Vital Statistics (VS) releases. You will need to work directly with VS if these data do not meet your needs; VS can be contacted at vitaldata@odh.ohio.gov.

Reporting Requirements

In follow-up to questions raised at the Ohio Cancer Registrars Association Annual Meeting regarding reporting of treatment data to OCISS, OCISS had a conference call in December with registrars from a few hospitals to learn about their process of reporting treatment data to OCISS. Since then we have reached out to other states to understand their timeline for collecting treatment data and their process for receipt and processing of update records. We are still collecting , compiling and evaluating this information.

OCISS Data Evaluation, 1996-2015

OCISS submitted data for cancers diagnosed from 1996-2015 to both the Centers for Disease Control and Prevention (CDC) and the North American Association of Central Cancer Registries (NAACCR) in November 2017. We have since received notification from CDC that OCISS data met CDC’s National Program of Cancer Registries (NPCR) National Data Completeness and Quality Standard and, as a result, OCISS is recognized as a CDC NPCR Registry of Distinction! OCISS data were deemed to be over 98 percent complete; we had no cases with missing age, sex, or county of residence; only 1.4 percent of cases had missing race; and 2.4 percent of cases were identified only by death clearance. We have not yet received a report from NAACCR. Thank you for all the work you do to report timely, complete, and accurate data to OCISS to allow us to accomplish these goals and achieve these recognitions!

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Abstracting Tips from NAACCR Webinars

NAACCR Webinars are posted in [Web Plus](#). Each provides three hours of continuing education (CE) credit. CEs are available for three years after the live session is presented. NAACCR's *site-specific* webinars that cover Category A topics meet the Category A requirements for CTR continuing education (*source: NCRA's "Category A FAQ"* and email communication from NAACCR). This includes the boot camp and coding pitfalls webinars. The following are abstracting highlights from the last few months of NAACCR webinars. Please refer to the specific webinars for more information.

NOTE: The information regarding abstraction of cases diagnosed on or after January 1, 2018 is current as of the date of the NAACCR webinar. Please keep in mind that at this time not all manuals for abstracting 2018 cases are finalized. Please refer to the finalized manuals for definitive guidance in abstracting your 2018 cases.

GIST and Soft Tissue Sarcomas (January 2018 webinar)

- ◇ GIST and Thymomas, if malignant (i.e. noted to have multiple foci, metastasis or positive lymph nodes), **continue** to be assigned a behavior code 3 and are therefore reportable to OCISS.
 - ⇒ Do not determine reportability of GIST based on AJCC staging, as AJCC staging forms are used on all GISTs, whether benign or malignant.
 - ⇒ Pleomorphic dermal sarcoma is a reportable skin cancer, histology 8802/3.
- ◇ For cases diagnosed on or after January 1, 2018, there are several **new** histology terms added to existing ICD-O-3 codes for sarcoma. The full list of updated ICD-O-3 histology revisions can be downloaded from NAACCR's 2018 Implementation website: <https://www.naacr.org/2018-implementation/#Histology>.
- ◇ **New** grade data items (clinical, pathological, and post-therapy) will be collected for cases diagnosed on or after January 1, 2018. See the grade manual from NAACCR's 2018 Implementation website (link above).
- ◇ AJCC TNM Staging—
 - ⇒ In the AJCC 8th edition, used for cases diagnosed on or after January 1, 2018, soft tissue sarcoma was expanded into six chapters. There is an important errata for chapter 41 "Soft tissue sarcoma of the trunk and extremities" where breast should be part of that chapter. Please visit AJCC's 8th edition updates and corrections page for the latest errata: <https://cancerstaging.org/references-tools/deskreferences/Pages/8EUpdates.aspx>.
 - ⇒ GIST, bone, and soft tissue sarcoma (chapters 16, 27 and 28 of AJCC 7th edition, respectively) are disease sites with an exception that allows the use of clinical N in the pathologic N category when NO lymph nodes are examined microscopically and the case qualifies for pathologic staging. This exception **continues** in AJCC 8th edition (chapters 38-45).
- ◇ Summary Stage—
 - ⇒ GIST summary staging is based on the anatomic location of the tumor for Summary Stage 2000 (i.e. GIST of the stomach uses the stomach chapter), but GIST will have its own chapter in Summary Stage 2018 (use for cases diagnosed on or after January 1, 2018).
 - ⇒ Primary sarcoma of the breast is staged in the breast chapter for Summary Stage 2000, but there will be a **new** breast sarcoma scheme for Summary Stage 2018.
- ◇ Site Specific Data Items (SSDIs)—
 - ⇒ Collaborative Stage Site Specific Factors that will be collected as SSDIs for cases diagnosed on or after January 1, 2018 include: mitotic count, KIT gene immunohistochemistry and primary tumor location for GIST tumors, percent necrosis post neoadjuvant chemotherapy for bone cancers, and sarcoma grade and bone invasion for soft tissue sarcomas.

Stomach and Esophagus (February 2018 webinar)

- ◇ This webinar includes practice on coding the new grade (clinical, pathological, and post-therapy) data items that will replace the current grade item for cases diagnosed on or after January 1, 2018.
- ◇ **General tip:** the terms “proximal” and “distal” are in reference to the incisors. Proximal designates towards the incisors while distal is away from the incisors.
- ◇ The schema discriminator for stomach (CS site-specific factor 25) currently follows AJCC 7th edition where tumors centered in the EG junction or in the proximal 5 cm of the stomach and which involve the cardia are staged using the esophagus schema. In AJCC 8th edition the 5 cm measurement has been shortened to 2 cm, and this information will be collected as the SSDI “Schema Discriminator 1” for 2018 and later cases.
 - ◇ SSDI “Schema Discriminator 1” will be used to determine the appropriate Summary Stage 2018 chapter for C16.0 (cardia / EG junction) primary site cancers.
- ◇ For **both** AJCC 7th and 8th edition, the number of regional lymph nodes involved with esophageal or stomach cancer needs to be *known* in order to assign cN and pN. Physician’s statement about the number of nodes may be used if information not found on pathology report.
- ◇ Stomach: for **both** AJCC 7th and 8th edition, please pay attention to the asterisk note below the T category table about the distinction between T3 and T4 based on perforation of the serosa (visceral peritoneum).
- ◇ Esophagus: the Histology and Topography Code Supplement for AJCC 8th Edition, available on [AJCC’s website](#), will facilitate the selection of the correct table to reference in assigning stage. The use of this supplement was demonstrated in the webinar.

Abstracting and Coding Boot Camp (March 2018 webinar)

- ◇ This boot camp covered the new grade data items (clinical grade, pathological grade, and post-therapy grade), ICD-O-3 histology revisions, sentinel and regional lymph node data items, new radiation treatment data items, and AJCC T and N suffix data items that will be collected for cases diagnosed on or after January 1, 2018.
 - ⇒ Review of this webinar is highly recommended as an introduction to these new data items. The webinar contains many pop quizzes and demonstrations of how to utilize the new manuals (ICD-O-3, Grade, SSDI).
 - ⇒ NAACCR plans to offer free, definitive training on some of the new manuals by late May 2018.
- ◇ Grade— the latest 2018 Grade Manual can be downloaded from: <https://www.naacccr.org/2018-implementation/#SSDIGRADE>. Use the grade table to navigate to the correct grade table for primary site/histology. There are clarification notes for each of the grade items (clinical, pathological and post-therapy).
- ◇ ICD-O-3— the latest 2018 ICD-O-3 Coding Guidelines and tables are downloadable from: <https://www.naacccr.org/2018-implementation/#Histology>. The guidelines include detailed instructions on how to use the 2018 ICD-O-3 Update Tables and this was also demonstrated in the webinar.
- ◇ There are several new radiation data items, and new STORE codes for radiation treatment modality and external beam radiation planning technique.
 - ⇒ See [NAACCR v18 Data Dictionary items #1501-1533](#) for full description, rationale, and codes.
- ◇ There are also new AJCC TNM clinical, pathological, and post-therapy T and N suffix data items.
 - ⇒ See [NAACCR v18 Data Dictionary items #1031-1036](#) for full description, rationale, and codes.
- ◇ Date of Sentinel Lymph Node Biopsy, Sentinel Lymph Node Examined and Positive are new data items on breast and melanoma cases ONLY that CoC facilities will need to report to NCDB. These data items will not be required by OCISS.
- ◇ Date Regional Lymph Node Dissection is another new data item for CoC facilities, but is required for ALL primary sites. For breast and melanoma cases, this is where date of regional lymph node dissection is recorded if a separate procedure was done after sentinel lymph node biopsy. This new data item also will not be required by OCISS.



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2018 Implementation Updates

- ICD-O-3 histology revisions, draft Grade and site specific data items (SSDI) manuals and 2018 Solid Tumor Coding Rules have been linked on the NAACCR 2018 Implementation Page: <https://www.naaccr.org/2018-implementation/>.
- Summary Stage 2018 coding exercises are available for free in [SEER*Educate](#). Draft of the Summary Stage 2018 manual is referenced by the exercises.
- AJCC 8th Edition webinars, past and future, for registrars and physicians are available: <https://cancerstaging.org/CSE/general/Pages/articles.aspx>.
- NAACCR made available a master events, training and educational calendar that will be frequently updated: <https://www.naaccr.org/education-training-calendar/>.

ODH Cancer Publications Update

The Ohio Department of Health (ODH) recently released several reports on the OCISS Cancer Data and Statistics webpage, available at: <http://www.odh.ohio.gov/health/cancer/ocisshs/newrpts1.aspx>.

1. *Ohio Annual Cancer Report, 2018*. This report provides a summary of cancer incidence data for 2015, the most recent and complete year of OCISS data now available to the public, along with cancer mortality data for 2015 and cancer trends for 2006-2015.
2. *Liver and Intrahepatic Bile Duct Cancer in Ohio, 2010-2014*. Completed in collaboration with The Ohio State University, this report includes Ohio-specific information on liver and intrahepatic bile duct (IBD) cancer, which has been increasing in both Ohio and the United States. This new report features cancer incidence and mortality data and trends by race, sex and age group; cancer incidence and mortality by county of residence; stage at diagnosis; histology; relative survival statistics; risk factors; as well as signs and symptoms of liver and IBD cancer.
3. *County Cancer Profiles*. An updated series of county-level profiles was posted to the website featuring 2010-2014 cancer data on incidence, mortality, stage at diagnosis, and associated health behaviors.

We would like to express our appreciation to cancer registrars and others reporting cancer cases in Ohio in making these reports possible.

Calendar of Events / Save the Date

May 4, 2018 | 10 a.m.—2 p.m.

Ohio Cancer Survivorship Resource Summit

LifeCare Alliance Event Center, 670 Harmon Ave, Columbus, OH 43223

May 20-23, 2018 | New Orleans, Louisiana

National Cancer Registrars Association 44th Annual Educational Conference

Details and registration: <http://www.ncra-usa.org/Conference/2018-Annual-Conference>

June 9-16, 2018 | Pittsburgh, Pennsylvania

NAACCR 2018 Annual Conference

Details and registration: www.naaccr.org/naaccr-2018-annual-conference/