

OCISS Newsletter

Ohio Cancer Incidence Surveillance System

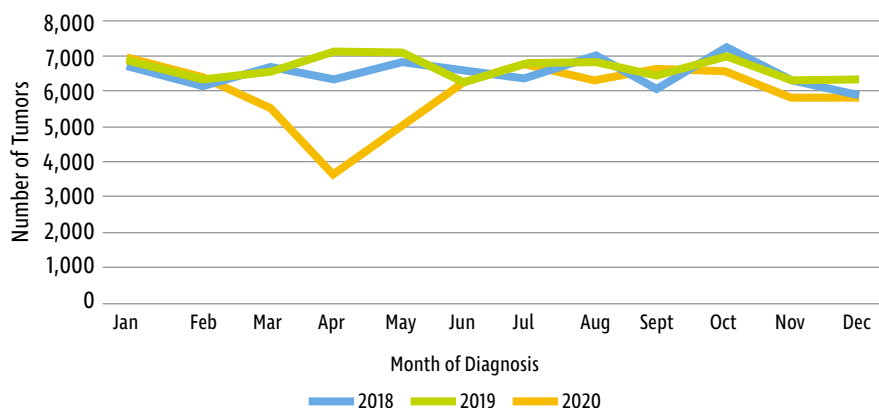
OCISS Updates

Annual Call for Data

OCISS recently submitted its Annual Call for Data to the Centers for Disease Control and Prevention (CDC) and the North American Association of Central Cancer Registries (NAACCR) for diagnosis years 1996-2020. We will receive confirmation on data quality and completeness from both entities in the spring. Thank you for all you do to submit accurate and complete data to OCISS!

OCISS anticipates a decrease in the overall number of cases for diagnosis year 2020. OCISS usually expects about 75,000 new tumors for each diagnosis year. For diagnosis year 2020, we are seeing about 71,000 new tumors, with a drop in diagnoses for March-April of 2020 (see graph below). We believe that this is related to the COVID-19 pandemic, and we are interested in further analyses to see the impact of the pandemic on cancer data.

Number of Tumors by Months of Diagnosis



Inside this issue:

OCISS Updates	1
New Cancer Publications	2
OCISS Data Use by Researchers	3
Cancer Registrar Training Opportunities	3
NAACCR Webinar Summaries	4
Coding Pitfalls	4
Breast Part 1 and 2	5
OCISS Staff Coding Tips	5
OCISS Contact Information	6

Cancer Reporting in 2023

Data collection requirements for diagnosis year 2023 have recently been released by national standard setters. Please note, at this time, **OCISS cannot accept cases diagnosed in 2023 or v23 format**. OCISS will be upgrading Web Plus to v23 in 2023 to accept these cases and files. We have heard from the CDC that Web Plus v23 should be available in early 2023. We will keep you posted about our timelines and progress. We appreciate your patience as we complete this software conversion.

For hospitals with their own software, OCISS shared the v23 reporting information with all the hospital software vendors in October (Ohio's XML User Dictionary and Ohio's v23 Edit Metafile). We received confirmation from the software vendors that they have the necessary materials to develop v23 for hospitals. We ask that you keep us posted on your v23 software

conversion and notify OCISS of any delays in reporting. For more information about the standard changes for v23, please see [NAACCR's reference page](#). Please contact Kaitlin Kruger (Kaitlin.Kruger@odh.ohio.gov) with any questions that you may have.

NAACCR v23 Reporting Changes

There are several changes in NAACCR v23 that will impact OCISS reporters. There will be an **additional surgery of primary site field** introduced in v23 – Surgery Primary Site 2023. Only one Surgery Primary Site field will need to be completed depending on the year of diagnosis. The new surgery field will need to be completed for all cases diagnosed 2023 and later. The old surgery field will be completed for cases diagnosed prior to 2023. Additionally, the **date flag fields** have been retired and will be removed from edits and the forms in Web Plus. We are asking everyone to please take special care in reporting dates moving forward. Also, OCISS will continue to require the **OH Tobacco History** field in v23. OCISS will provide additional information when we begin collecting 2023 diagnoses. For more information on reporting changes in v23 and updated reporting manuals, please see [NAACCR's reference page](#).

Hospital Quality Reports

This past December, OCISS generated data quality reports for each reporting hospital to review the completeness, quality and timeliness of hospital data. These reports have been shared with the primary hospital contacts to use as a resource and to provide a summary of their reporting. We encourage you to share your hospital's report with your registry staff and/or your hospital administration as you see fit. For additional information on your hospital's reporting, please contact Kaitlin Kruger (Kaitlin.Kruger@odh.ohio.gov). We appreciate the work you and your staff do each day. OCISS could not do what we do without all of you!

Modified Records Update

OCISS began collecting modified records from hospitals with their own proprietary software in v22. OCISS has

been processing and evaluating the M records and we appreciate your patience and willingness to adapt to this new reporting method. We will continue to collect M records in v23. Please remember that we are requiring all hospitals with their own software to send M records. The schedule for reporting M records is quarterly if you report more than 250 abstracts per diagnosis year (January, April, July, October) or semi-annually if you report fewer than 250 abstracts per diagnosis year (January and October). If you have any questions on M record reporting, please contact Kaitlin Kruger (Kaitlin.Kruger@odh.ohio.gov).

Close Out

OCISS will begin the close out survey process for cancer cases diagnosed or treated by hospitals in calendar year 2022. The Close Out 2021 survey will be available and shared in early 2023. This survey is required for all hospitals, even those with incomplete 2021 reporting. The survey will also ask for information about when your facility will be converting to NAACCR v23, if applicable. This information will be used to plan Ohio's release of Web Plus v23.

Hospital Contact Lists

We have posted information on the Web Plus home page with points of contact for each of our hospital reporters. We hope you find this information useful. We will be confirming reporter information and Web Plus user accounts in early 2023 and will update the contact lists as changes are received.

Annual Report to the Nation

The national standard setters have released an update for the Annual Report to the Nation on the Status of Cancer. This report is an update of rates for new cases, deaths, and trends for the most common cancers in the United States through 2019. This is a joint effort between the American Cancer Society (ACS), CDC, NAACCR, and the National Cancer Institute (NCI). OCISS data is included in these analyses. You can access the report at either the [American Cancer Society](#) or [National Cancer Institute](#) websites.

New Cancer Publications

New Breast Cancer Report

The Ohio Department of Health (ODH) has released *Breast Cancer in Ohio 2022* (October 2022). This report provides Ohio-specific information on breast cancer, including incidence and mortality, trends, stage at diagnosis, survival, anatomical site, histology, hormone receptor and HER2 status, treatment, risk factors, signs and symptoms, early detection, and genetic counseling. The report can be found by visiting [Breast Cancer in Ohio 2022](#) on the ODH page.

Stage at Diagnosis for Selected Types of Cancer in Ohio 2022

ODH has posted a new report (October 2022) focusing on cancer incidence by stage at diagnosis for four selected cancers (cervix, colon and rectum, female breast, and lung and bronchus) and includes official screening recommendations. Information about other types of cancer for which screening tests are available is also provided. Please see [Stage at Diagnosis for Selected Types of Cancer in Ohio 2022](#) on the ODH website.

Cancer Stats & Facts

ODH developed a series of one-page fact sheets throughout 2022 to increase cancer awareness. New fact sheets for breast cancer and stage at diagnosis highlight major findings from recently released reports on these topics. These fact sheets and previous cancer awareness fact sheets can be found on the [Cancer Stats and Facts](#) page of the ODH website.

OCISS Data Use by Researchers

The ODH Institutional Review Board (IRB) is composed of a group of individuals from various state agencies who review any research involving human subjects that uses any state data. OCISS provides data for many ongoing research projects that have ODH IRB approval. For more information, please see the ODH [IRB site](#). Since the last OCISS newsletter, there have been no new IRB-approved studies using OCISS data.

Cancer Registrar Training Opportunities

Below are some important, upcoming conferences and training events in 2023:

Ohio Health Information Management Association (OHIMA) 2023 Annual Meeting & Trade Show

HIM Without Limits

March 20-22, 2023

Hilton Columbus at Easton, Columbus Ohio

Visit [OHIMA 23 Save the Date](#) for more information.



National Cancer Registrars Association (NCRA) Annual Educational Conference

Sailing Towards New Horizons

May 7-10, 2023

San Diego, California

More information can be found on the [2023 NCRA Annual Conference](#) page.

North America Association of Central Cancer Registries (NAACCR) Annual Conference

June 20-22, 2023

The Roosevelt New Orleans, Louisiana

See the [2023 NAACCR Annual Conference](#) page for more information.

Ohio Cancer Registrars Association (OCRA) 53rd Annual Educational State Meeting

September 21-22, 2023

North Canton, Ohio

More information can be found by visiting [OCRA's events page](#).

American Health Information Management Association (AHIMA) Convention and Exhibit 2023

October 8-11, 2023

Baltimore Convention Center, Baltimore, Maryland

See the [AHIMA education and events page](#) for more information.

NAACCR Webinar Summaries

NAACCR hosts monthly webinars that provide three continuing education credits. OCISS makes these available in Web Plus (contact Kaitlin Kruger at Kaitlin.Kruger@odh.ohio.gov, or 614-728-2304 if you need access) and through the Fundamental Learning Collaborative for the Cancer Surveillance Community (FLccSC) platform. To create a user account in FLccSC, visit the [FLccSC student page](#), click "New Users-Register here," and complete the registration form. Under "How do you categorize yourself?" please select "Ohio Student." For FLccSC questions please contact Jeremy Laws (Jeremy.Laws@odh.ohio.gov 614-644-9101).

The following are abstracting highlights and tips from recent NAACCR webinars. **NOTE:** Some webinars cover topics in more depth than may be needed for all cancer reporters and may include data that are not collected by OCISS.

Coding Pitfalls (September 2022 Webinar)

This webinar focused on updated staging, date of diagnosis, histology, and treatment fields.

Tips for Assigning Stage

- Begin with Chapter 1 of The American Joint Commission on Cancer (AJCC) Manual 8th Edition.
- Uncertainty rules found in chapter 1 do not apply to cancer registry data, because the AJCC Manual is written for physicians.
- If the information needed to assign the stage group is not available, it should be assigned as unknown.
- For clear instructions on how to document unknown stage, refer to the [AJCC Curriculum for Registrars](#).

Date of Diagnosis, Ambiguous Cytology Clarification

The following scenario illustrates the application of ambiguous terminology.

Scenario:

01-01-2022 Cytology "suspicious" for cancer
02-15-2022 Pathology positive for adenocarcinoma

Question: What is the date of diagnosis?

Answer: 01-01-2022

Rational: The date of a suspicious cytology may be used as the date of diagnosis when followed by a definitive pathology diagnosis. See p. 2 of the SEER Coding and Staging Manual 2022 [SEER Coding and Staging Manual 2022 Summary of Changes](#) for more information.

Tips for Assigning Histology

When coding histology:

- Refer to the [2022 Solid Tumor Rules](#), [2023 Revision STR](#) Histology Rules or the [Hematopoietic and Lymphoid Database](#), and apply the relevant histology rules.
- Refer to the ICD-O 3.2 Coding Tables found on the [ICD-O 3 Implementation Guidelines 2023](#).
 - If not found in the above, consult the [ICD-O 3.0 Manual](#).
- Consult the SEER Inquiry System (SINQ) or [ask a SEER registrar](#).

Breast Part 1 (October 2022 Webinar)

Two webinars in 2022 focused on the breast primary site. The first one highlighted treatment, surgery codes, lymph node-related data items, systemic treatment, and radiation.

New Surgery Code Nomenclature

The Commission on Cancer (CoC) has initiated new surgery codes for 2022-2023 breast cases. An alpha character has been added in front of the number and a zero has been added at the end.

Example: Surgery code 20 is now documented as A200.

Retrospective corrections for cases diagnosed in 2022 are not necessary. See the Breast section of the [STORE Manual 2023](#) for further instructions.

Sentinel Nodes Positive/Examined

Record the number of lymph nodes positive examined during a sentinel node procedure. *Non-sentinel* nodes are included in the count ONLY if they are removed during the sentinel node procedure. See the NAACCR Data Dictionary [Item# 834](#) for further rationale.

Surgical Procedure/Other Site

"Surgical procedure of other site" describes the surgical removal of distant lymph nodes or other tissues or organs beyond the primary site. Do NOT code removal of *uninvolved* contralateral breast in this data field [Item# 1294](#). See p.245 of the [STORE Manual 2023](#) for more information.

Breast Part 2 (November 2022 Webinar)

The second breast webinar focused on SSDIs and staging.

Partial Mastectomy verses Lumpectomy/Excisional Biopsy

When is a partial mastectomy coded as 20 (A200) partial mastectomy, NOS vs. Lumpectomy 22 (A220)?

Use the "NOS" surgical codes only when there is very limited information available regarding the procedure, and a more definitive surgical code cannot be used.

- Review the body of the operative report to sort out which procedure is done.
- For codes 00 through 79, the response positions are **hierarchical**.
- Last-listed responses take precedence over responses written above.

These instructions can be found in [Appendix C](#) of the SEER Program Coding and Staging Manual.

Breast Conserving/Preserving Surgery Codes

When a patient has a procedure such as a lumpectomy *with reconstruction*, code ONLY the procedure, (lumpectomy A220). When a patient has a lumpectomy and an *additional margin excision* during that procedure, it is ONLY coded to a lumpectomy, A220. These and other breast surgery code changes can be found beginning on p. 219 of the [STORE Manual 2023](#).

OCISS Staff Coding Tips

LCIS Reportability to OCISS

Lobular Carcinoma In Situ (LCIS) is reportable to OCISS, while LCIS alone is not reportable to CoC. The decision not to collect LCIS was made to align STORE with the AJCC 8th Edition. See the AJCC 8th Edition and [STORE Manual 2023](#) (p. 45) for more information. Additionally, consult the NAACCR Reportability Guidelines for a comparison of reportability between NPCR, CoC, and SEER. *Note: SEER and NPCR require reporting of LCIS.*

For CoC facilities, reporting LCIS to OCISS would result in a *class of case 34 or 36*, depending on the facility's relationship to the patient's diagnosis and therapy (see [STORE 2023](#) p.120 for more on *class of case*). This is like other non-CoC reportable but OCISS (NPCR) reportable cases like VIN3, VAIN3, AIN3; and Adenomatous polyp, high grade dysplasia (8210/2) of stomach and small intestine for 2022 and forward.

Questions or suggestions for the OCISS Newsletter? Please contact Jeremy Laws (Jeremy.Laws@odh.ohio.gov, 614-644-9101) or email the general OCISS inbox (OCISS@odh.ohio.gov) with subject line "OCISS Newsletter."

OCISS Contact Information

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