

OHIO CANCER  
INCIDENCE  
SURVEILLANCE  
SYSTEM

## OCISS Newsletter



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## OCISS Updates

**Cancer Reporting**

OCISS converted to NAACCR v 18 and can now receive cancer reports diagnosed on or after January 1, 2018. We cannot thank you enough for your patience with this system upgrade.

For those who have your own cancer registry software and upload files in Web Plus, our edits metafile is available on the ODH website and can also be accessed in Web Plus. The new edits metafile is *OCISS Edits SMF NAACCR v 18B (OCISS:Vs18B Abstracts)*. You can upload either a NAACCR v 16 or NAACCR v 18 file. For those who directly enter data in Web Plus, you will notice changes in the data entry screens. Please refer to the *OCISS Web Plus NAACCR v 18 Cheat Sheet* that is available both on the ODH website and in Web Plus to help with the data entry process. Please contact us with any questions in using the new system.

**OCISS Data**

OCISS data were recently updated in the Ohio Public Health Information Warehouse. Data are now available for diagnosis years 1996-2016. A new report was added to allow users to generate counts of invasive cancer by zip code – a frequent request of hospitals. The report can be customized to include specific zip codes by year and by primary site. The warehouse is available here: <http://publicapps.odh.ohio.gov/EDW/DataBrowser/Browse/StateLayoutLockdownCancers>. Please contact OCISS with any questions on accessing or using the public warehouse.

**Audits**

OCISS has started text to code audits on hospital cases diagnosed in 2017. It has been a few years since an audit has been done and it will be very similar to the last one we did. We anticipate sending out results in the late June/early July timeframe.

**Death Clearance**

OCISS has started death clearance for diagnosis year 2017. We anticipate sending out follow-back information to hospitals (via Web Plus) in May. Letters will be sent to non-hospital reporters in this same timeframe. You all did a wonderful job on death clearance last year. Our death clearance only percent was the lowest ever – 1.63%!

**OCISS Data Evaluation, 1996-2016**

OCISS submitted 24-month data for cancers diagnosed from 1996-2016 to both the Centers for Disease Control and Prevention (CDC) and the North American Association of Central Cancer Registries (NAACCR) in November 2018; we submitted 12-month data (2017) in January 2019. We have since received notification from CDC that OCISS data met CDC's Advanced 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. This is the first time OCISS met this standard! Both our 24-month AND 12-month data met data quality metrics for completeness, quality and timeliness. (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!

**Retirement**

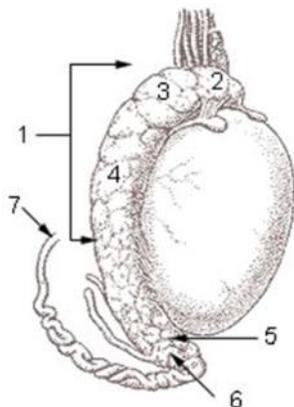
Barb Warther, OCISS Operations Supervisor, retired from OCISS on March 29, 2019. Barb worked in the cancer registry field since 1982 and has been at the Ohio Department of Health for close to 17 years. She has been a champion for improving the quality and completeness of Ohio's cancer incidence data. Barb will be greatly missed here at OCISS for her expertise and leadership. We are working to backfill Barb's position – a very tall task!

## Abstracting Tips from NAACCR Monthly and 2019 Training Webinars

Once a month NAACCR hosts webinars regarding various topics for cancer registry. Each webinar provides three hours of continuing education (CE) credit, which are available for three years after the live session is presented. The site-specific webinars cover topics that meet the Category A requirements for CTR continuing education (via NCRA's "Category A FAQ" and email communication from NAACCR). Topics and webinars also include coding boot camp and coding pitfalls which cover the basics of cancer abstracting. The following are abstracting highlights and tips from the last few months of NAACCR webinars. Please refer to the specific webinars for more information; they are posted on the [Web Plus](#) homepage.

### Testis Webinar (January 2019 webinar)

The testicles (also known as testes or testis) are part of the male reproductive system. These two golf ball size glands are held in a sac (scrotum) below the penis. The testicles have a firm, slightly spongy feel. At the top and outside edge is a rubbery, tube-like structure called the epididymis. The firmness of the testicle should be the same throughout and the size of the testicles should be about the same.



1. Epididymis
2. Head of epididymis
3. Lobules of epididymis
4. Body of epididymis
5. Tail of epididymis
6. Duct of epididymis
7. Deferent duct (ductus deferens or vas deferens)

**Each testicle is considered a separate site unless bilateral involvement is stated to be metastatic from one side to the other.**

#### Keywords:

*Leydig cells* — secrete testosterone

*Tunica albuginea* — a dense capsule encasing each testis; inhibits direct extension of tumor

*Rete (ree' tee) testis* — network of efferent ducts, analogous to the pelvis of the kidney

*Epididymis* — storage vessel for sperm; long, coiled tube external to testis

*Vas deferens (ductus deferens)* — muscular extension of epididymis, which carries sperm to the urethra

Coding the primary site for testes is based on whether the testis is descended or not. The ICD-O-3 terms include undescended testis (C62.0), descended testis (C62.1) and testis, NOS (C62.9). In the United States, virtually all undescended testis are corrected by surgery after birth, so the primary site of C62.0 is extremely rare.

#### References:

<https://www.urologyhealth.org/urologic-conditions/testicular-cancer>

<https://training.seer.cancer.gov/testicular/anatomy/>

<https://training.seer.cancer.gov/testicular/abstract-code-stage/codes.html>

## Colon Webinar (February 2019 webinar)

The following changes and notable points are for the new *2018 Solid Tumor Rules* for the colon.

- Rectum and rectosigmoid are now included under the colon rules; they were previously included in Other Sites. This is for cases diagnosed 1/1/2018 and later per the STORE manual.
- Histologies previously coded to 8263, tubulopapillary carcinoma; 8780, mucinous or colloid adenocarcinoma/carcinoma; and 8490, signet ring cell adenocarcinoma/carcinoma will be coded to 8140, adenocarcinoma under the new histology coding rules. Check table 1 for the full list (located in the *2018 Solid Tumor Rules* colon chapter, pages 58-60).
- High grade and severe dysplasia are no longer considered the same as carcinoma in situ (CIS). Code CIS only if the pathologist expressly states CIS.

## 2018 Coding Bootcamp (March 2019 webinar)

This webinar was helpful to understand some of the major changes for coding cases diagnosed on or after 1/1/2018. The webinar covered topics such as medical terminology and coding basics such as class of case, sequence number, and treatment.

The *2018 Solid Tumor Rules* have charts to decide the correct histology to code. They help determine which histology terms are deemed equivalent when looking at specific histologies and their subtypes and variants. The *2018 Solid Tumor Rules* are available here: <https://seer.cancer.gov/tools/solidtumor/>.

The new STORE manual, replacing the FORDS manual, has updated instructions for coding and abstracting cancer cases. The manual can help with coding fields such as regional nodes and class of case. The STORE manual can be found here: <https://www.facs.org/quality-programs/cancer/ncdb/registrymanuals/cocmanuals>

### Coding Regional Nodes

Regional nodes positive is **cumulative**. Record the total number of regional lymph nodes removed and found to be positive by pathologic examination. The number of regional nodes positive is **cumulative** from *all* procedures that remove lymph nodes in the first course of treatment.

### Coding Class of Case

Class of Case can be tricky. It's very important to determine if the diagnostic facility is truly an outside facility or if the facility is affiliated with your facility. When a record states that an initial diagnosis was made at an outside facility, as in a physician's office or pathology lab, and your facility is delivering ALL of a patient's treatment, this *does not automatically* classify the outside diagnosis as a class of case 00. If the physician, including a radiologist, is on staff or has privileges at your hospital, that is considered the SAME facility. In such cases, code 00 would *not* be the proper classification. Code to 10, 11, or 12, as appropriate.

OCISS Note: If you are not reporting information on initial diagnosis at an affiliated facility, please contact OCISS so we can reach out to them to do this reporting.

### Coding Site Specific Information

Collaborative Stage Site Specific Factors (SSFs) are being replaced for cases diagnosed 1/1/2018 or later by the Site Specific Data Items (SSDIs). The manual for these fields is located at: <https://www.naacrr.org/SSDI/SSDI-Manual.pdf?v=1553017451>. It is important that you refer to the manual for these new fields.

OCISS Note: OCISS will be collecting a limited number of SSDIs as follows:

*Brain*—Brain Molecular Markers

*Breast*—Estrogen Receptor Summary, Estrogen Receptor Total Allred Score, HER2 Overall Summary, Progesterone Receptor Summary, Progesterone Receptor Total Allred Score

*Colon*—Microsatellite Instability

*Liver*—Fibrosis Score

*Melanoma*—Breslow Tumor Thickness, Lactate Dehydrogenase (LDH) Pretreatment Lab Value

*Prostate*—Prostatic Specific Antigen (PSA)



[www.odh.ohio.gov](http://www.odh.ohio.gov)  
(use Google Chrome)



## Resources to Code Histology for 2018 Cases

There have been multiple ICD-O-3 errata and updates published since 2000 and there is no website that contains all of the ICD-O-3 updates made between 2000 thru 2018. The updates were so extensive that the United States created the Multiple Primary and Histology (MP/H) Rules in 2007, then later the Hematopoietic and Lymphoid Neoplasm Rules in 2010. WHO plans to release ICD-O-3.2 in summer 2019. There will not be an ICD-O-4; the next major revision will be ICD-O-5. Due to these many changes, we no longer recommend using the International Agency for Research on Cancer (IARC) website to find histology codes. Below we have listed multiple locations and resources that you can use to determine the best and/or correct histology.

ICD-O-3 Manual – use your current printed manual (the purple book)

ICD-O-3 Errata & 2011 Updates: <http://www.who.int/classifications/icd/updates/icd03updates/en/>

ICD-O-3 Updates for 2018: <https://seer.cancer.gov/icd-o-3/>

2018 Solid Tumor Rules: <https://seer.cancer.gov/tools/solidtumor>

Hematopoietic Database On Line: <https://seer.cancer.gov/seertools/hemelymph/>

2018 Site-Specific Grade Instructions: <https://www.naaccr.org/SSDI/Grade-Manual.pdf>

2018 SEER Site/Type Validation List: <https://seer.cancer.gov/icd-o-3/>

## ODH Releases New Cancer Publication

The Ohio Department of Health (ODH) recently released *Ohio Annual Cancer Report 2019*. This report provides a summary of cancer incidence data for 2016, the most recent and complete year of OCISS data now available to the public, along with cancer mortality data for 2016 and cancer trends for 2007-2016.

ODH's published cancer reports can be found on the Cancer Data and Statistics website, available at:

<https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/ohio-cancer-incidence-surveillance-system/data-statistics/data-statistics>

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

### NCRA's 45th Annual Educational Conference

May 19 – 22, 2019

Denver, Colorado

Details: <http://www.ncra-usa.org/Conference/2019-Annual-Conference>

### NAACCR/IACR Combined Annual Conference

June 8 – 13, 2019

Vancouver, British Columbia

Details: <https://www.naaccr.org/naaccr-iacr2019/>

### OCRA Education and Annual Meeting

September 19 & 20, 2019

Perrysburg, Ohio

Details: <http://ohio-ocra.org/annualmtg/annualmtg.html>

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