Volume 15 Issue 1

Mississippi Gancer Registry

Newsletter

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UNIVERSITY OF MISSISSIPPI MEDICAL CENTER







Educational Gorner

Angel Davis, CTR, RHIT MCR Data Quality Analyst – Trainer

#### HEAD & NECK TUMORS: Squamous Cell Carcinoma

#### Use of 8070 vs 8085/8086

To use histology 8085 or 8086 you must have a statement of "Squamous cell carcinoma HPV-positive" or "Squamous cell carcinoma HPV-negative".

#### OR

Results from an HPV VIRAL DETECTION TEST to use 8085 or 8086.

The following tests identify the actual HPV virus:

- Viral DNA by ISH test
- Viral DNA by PCR test
- ISH E6/E7 RNA test
- PT-PCR E6/E7 RNA test

#### \*\*DO NOT USE A p16 TEST TO CODE 8085 or 8086\*\*

NOTE: If you have a statement that states "Squamous Cell Carcinoma HPV+" or "Squamous Cell Carcinoma HPV-" AND the pathology reports states p16+/p16- with no other testing completed, use histology 8070.

Reference: 2019-2020 NAACCR Webinar Series: Base of Tongue/ Head and Neck 2019



#### AJCC 8<sup>th</sup> Edition Helpful Tips

**<u>NX</u>** – Page 9 Note: The use of NX should be minimized. Page 15 Note: Clinical nodal category cN0 may be assigned based solely on physical examination. Imaging to assess regional lymph nodes is not required to assign clinical stage.

**No designation of MX** – The absence of any clinical history or physical findings suggestive of metastases in a patient who has not undergone any imaging is sufficient to assign the clinical M0 category (cM0).

<u>No designation of pM0</u> – Biopsy or other pathological information is required to assign the pathological M1 category. Patients with a negative biopsy of a suspected metastatic site are classified as clinical M0 (cM0).

Incidental Tumor Finding – In the case where a cancerous tumor is found during another procedure or when cancer is not suspected, the clinical stage would be cT (blank) cN (blank) cM (blank) Stage 99.

**<u>pM1</u>** – A patient may be staged as both clinical and pathological Stage IV if there is: (a) confirmatory microscopic evidence of a distant metastatic site during the diagnostic workup, which is categorized as pM1, and (b) T and N may be categorized only clinically. Example: cT3 cN1 pM1 clinical Stage IV and cT3 cN1 pM1 pathological Stage IV.

**Unresectable tumor and assignment of pathological stage** – If the highest T and N categories or the M1 category of the tumor are confirmed microscopically, even if a primary tumor technically cannot be removed or if it is unreasonable to remove it, the criteria for pathological staging are considered satisfied without total removal of the primary site.

(m) Suffix – Page 15: The (m) suffix applies to multiple invasive cancers. It is not applicable to multiple foci of in situ cancer or a mixed invasive and in situ cancer.

Reference- NCRA's Webinar: Staging Tricky Tumor: Top Sites by Janet Vogel, CTR



## MCRA Fall Educational Workshop

#### September 17, 2020

For more information contact: Angel Davis, CTR , adavis6@umc.edu



### Minimum Resources Required to Abstract

#### Grade

Beginning with cases diagnosed in 2018 grade information will be collected in three fields; Clinical Grade, Pathological Grade, and Post-Therapy Grade. Within the Grade Manual you will find definitions for the three new grade data items, coding instructions, and the site/ histology specific grade tables. The Grade manual is available at <u>https://</u> <u>www.naaccr.org/SSDI/Grade-Manual.pdf?v=1527859766</u>.

#### Summary Stage 2018

The 2018 version of Summary Stage applies to every site and/or histology combination, including lymphomas and leukemias. Summary Stage uses all information available in the medical record; in other words, it is a combination of the most precise clinical and pathological documenta-tion of the extent of disease. The Summary Stage 2018 manual is available at <a href="https://seer.cancer.gov/tools/ssm/">https://seer.cancer.gov/tools/ssm/</a>.

#### 2018 Solid Tumor Coding Manual

Use the 2018 Solid Tumor coding rules to determine the number of primaries to abstract and the histology to code for cases diagnosed 2018 and forward. The Solid Tumor coding rules replace the <u>2007 Multiple</u> <u>Primary and Histology (MP/H) Rules</u>. The manual is available at <u>https://seer.cancer.gov/tools/solidtumor/</u>. The <u>change log</u> contains updates made to the FINAL module sections. This does not include changes made to the drafts.

#### CoC 2018 STORE Manual

The STORE Manual has replaced the FORDS Manual. The STORE is now available at <u>https://www.facs.org/quality-programs/cancer/ncdb/</u>registrymanuals/cocmanuals.

#### Site Specific Data Items (SSDI)

Site Specific Data Items (SSDI) are similar to the Site Specific Factors (SSF) collected with Collaborative Stage. These data items are specific to certain site/histology combinations. For example, the SSDI's for breast will be used to collect information such as estrogen receptor status, progesterone receptor status, Her2 status, Nottingham grade, and additional information related to primary tumors of the breast. The information collected in these data items are specific to breast. The SSDI manual is available at <a href="https://apps.naaccr.org/ssdi/list/">https://apps.naaccr.org/ssdi/list/</a>.

# SEER Hematopoietic and Lymphoid Neoplasm Database

This provides data collection rules for hematopoietic and lymphoid neoplasms for 2010+.The SEER Hematopoietic and Lymphoid Neoplasm manual is available at <u>https://seer.cancer.gov/tools/heme/</u> <u>Hematopoietic Instructions and Rules.pdf</u>.

#### **AJCC Cancer Staging Manual**

Cases with a diagnosis date of 01/01/2018 and forward should be staged using AJCC 8th Edition Cancer Staging Manual. The 3rd printing 2018 Edition is now available.

 Please visit <u>https://cancerstaging.org/references-tools/</u> <u>deskreferences/Pages/8EUpdates.aspx#</u> for all 8th Edition updates and corrections. For all other information, visit <u>https://</u> <u>cancerstaging.org/Pages/default.aspx</u>.

### **Cancer Registry and Surveillance Webinar Series**

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4/2/20- Melanoma

Denise Harrison, CTR and Louanne Currence, CTR

5/7/20- Central Nervous System

Denise Harrison, CTR and Louanne Currence, CTR

6/11/20- Esophagus Tonya Brandenburg, CTR Kentucky Cancer Registry

٠ For more information contact: Angel Davis, CTR, RHIT-adavis6@umc.edu

https://www.naaccr.org/

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### **CTR Exam 2020**

**Testing Dates and Deadlines** 

March 6 - March 27, 2020; application deadline: January 31, 2020

June 26 - July 17, 2020; application deadline: May 29, 2020

October 16 - November 6, 2020; application deadline: September 11, 2020

For more information, visit

http://www.ctrexam.org/



### North Mississippi Medical Center has a CTR position available.

Anyone interested can apply at: http://apps.nmhs.net/employment/browse jobs2.asp

Candidates will need to select Oncology Service Line (department) and Tupelo (location).



G.V. (SONNY) Montgomery VA Medical Center welcomes

> Angela L. Brooks, RHIT, CTR as their new Cancer Registrar.

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### **Cancer Surveillance: Keystone of Progress**

June 21 - 26

Philadelphia, PA



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We acknowledge the Centers



for Disease Control