Message From the President

Antoinette Stroup, PhD
NAACCR President
nan.stroup@rutgers.edu

Hafa Adai![1]

The dog days of summer are nearly over, but it’s not too late to hit the beach or squeeze in one more trip to enjoy the outdoors and soak up the sun! [ahem: insert your favorite PSA here for sunscreen, floppy hat, mosquito repellent, etc.] Although dog days of summer have become synonymous with hot, lazy days, our community has stayed active and busy and I invite you to learn more by reading this issue of the Narrative.

I would like to take this opportunity to thank everyone who was instrumental in the success of the NAACCR 2018 Annual Conference in Pittsburgh, Pennsylvania, including our fabulous host, Wendy Aldinger and the staff at the Pennsylvania Cancer Registry. I would also like to thank the NAACCR staff, Sharon Winters from the University of Pittsburgh Medical Center, Venue West, the Program Committee, and Sponsors and Exhibitors. I’d like to also recognize the NAACCR Professional Development Steering Committee, Isaac Hands of the Kentucky Cancer Registry, and others who helped to organize our first ever Hack-a-Thon. All the events and contributions by the membership and your willingness to share and present your important work either through courses, posters, special meetings, or presentations is what truly makes the conference!

Finally, I would like to send a huge “Congratulations!” the two recipients of the 2018 Constance Percy Award:

Winny Roshala from the Greater California Cancer Registry and

Jennifer Ruhl from the National Cancer Institute’s Surveillance Research Program.
Congratulations also goes to the recipient of the **2018 Calum S. Muir Award**: Michel Coleman of the London School of Hygiene & Tropical Medicine, for his outstanding leadership and far reaching contributions to the field of cancer registration and surveillance. [See More.]

ICYMI[2]: You can see [photos from the conference on Flickr](https://www.flickr.com) and you can view and download the final program abstracts and poster and oral presentations [here](https://www.naaccr.org/)

As a reminder, please watch your emails for ongoing NAACCR Listserv announcements for all things 2018, including updated data changes and implementation timelines and tools. If you are not already on the NAACCR Listserv distribution list and you want to subscribe, please go to [https://www.naaccr.org/listserv/#Subscribing](https://www.naaccr.org/listserv/#Subscribing) for more details. You can also receive these announcements through our social media platforms on Facebook and [Twitter @NAACCR, Inc.](https://twitter.com/NAACCR) – be sure to like and follow us to receive updates.

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1 “Hafa Adai” is pronounced ha-fa-day and means “Hello” in my native Chamorro language.

2 In Case You Missed It

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**Message From the Executive Director**

*Betsy A. Kohler, MPH, CTR*
*NAACCR Executive Director*
*bkohler@naaccr.org*

NAACCR has been participating in discussions with standard setters regarding the progress of the 2018 implementation schedule. As you all know there have been numerous delays and postponements of tools necessary for vendors to complete their software modifications for coding of 2018 cases. We have been chasing a moving target for a long time. Within the last few weeks NCI/SEER and CDC/NPCR have made several decisions to try to alleviate the burden on central registries caused by these delays. NAACCR supports the efforts of both agencies in their efforts to achieve these goals.

**Highlights include:**

- AJCC TNM 8 will **not be required** for any 2018 cases by SEER or NPCR
- Summary Stage 2018 will be required by NPCR
- EOD will be required by SEER and tools will be available to derive Summary Stage 2018
- The Call for Data in the fall of 2018 will be in NAACCR v16
- The NAACCR EDITS Metafile will include limited staging edits
For more specific requirements please see: https://www.naaccr.org/2018-implementation/

In other news, NAACCR is discussing co-hosting the International Association of Cancer Registries conference in 2019 in Vancouver. Once again this will provide NAACCR members with an excellent opportunity to learn about cancer surveillance in other areas of the world. Once details are finalized, we will be establishing program committee(s) to coordinate the sessions with IACR. We anticipate the time frame for submitting abstracts for the conference will be the same as last year (closing in mid-January). We hope you are looking forward to a truly international cancer surveillance learning opportunity.

**Highlights From the Program Manager of Standards**

*Lori Havener, CTR*

*NAACCR Program Manager of Standards*

*lhavener@naaccr.org*

**Standards Volume II, Version 18**

The NAACCR [Data Standards and Data Dictionary](https://www.naaccr.org), Version 18 was released March 2, 2018. There have been several changes since the initial release of the Data Standards and Data Dictionary, Version 18. All of the changes since the release are documented in the change log that is available on the same website as the Data Standards and Data Dictionary. The change log identifies the date of the change, the data item number, data item name, the field that was changed, the change that was made and a column for notes.

**XML Data Exchange Standard by 2020**

Reminder: The NAACCR Board approved changing its Standards Volume II data exchange format from fixed-width to an Extensible Markup Language file format (XML) by 2020. The NAACCR [Plan to Implement XML](https://www.naaccr.org) is posted on the NAACCR website.

**Standards Volume II, Version 20:**

It seems irrational to think about 2020 when we are all diligently working to implement 2018, but the deadlines to propose new data items for 2020 is October 1, 2018...just 3 months away.

**NAACCR 2020 Implementation Timeline**

<table>
<thead>
<tr>
<th>Activity</th>
<th>NAACCR Deadlines</th>
<th>Considerations/suggestions to meet NAACCR deadlines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proposed requests-for-change (new and changed data items) submitted to the Change Management Board (CMB)</td>
<td>October 1, 2018</td>
<td>1. Complete request-for-change forms for new and changed data items; submit to the Change Management Board by October 1, 2018.</td>
</tr>
<tr>
<td>Requests-for-change final review/approval by CMB and other groups as needed (e.g., UDS)</td>
<td>December 31, 2018</td>
<td>1. Coordinate with CMB to ensure communication with stakeholders. 2. Final requests are submitted to the UDS WG by</td>
</tr>
<tr>
<td>Activity</td>
<td>NAACCR Deadlines</td>
<td>Considerations/suggestions to meet NAACCR deadlines</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Convene NAACCR 2019 Implementation Guidelines Task Force</td>
<td>April 1, 2019</td>
<td>1. Materials for NAACCR Standards Volume II must be in final format for the Task Force to develop the implementation guidelines.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Final versions of mapping and/or conversions.</td>
</tr>
<tr>
<td>UDS Work Group reviews and updates Standards Volume II (Jan – April)</td>
<td>May 2019</td>
<td>1. Assumes completion of all requests for changes to existing data items and requests of new data items.</td>
</tr>
<tr>
<td>UDS Work Group reviews and updates Standards Volume II (Jan – April)</td>
<td>May 2019</td>
<td>1. Assumes completion of all requests for changes to existing data items and requests of new data items.</td>
</tr>
<tr>
<td>Finalize NAACCR Standards Volume II and submit to NAACCR Board for</td>
<td>June 1, 2019</td>
<td>1. UDS final approval at May 2019 UDS meeting.</td>
</tr>
<tr>
<td>review/approval</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NAACCR Standards Volume II Released</td>
<td>July 1, 2019</td>
<td></td>
</tr>
<tr>
<td>NAACCR 2019 Implementation Guidelines Released</td>
<td>September 1, 2019</td>
<td>1. EDITS Work Group will have begun development of edits metafile by February 2019.</td>
</tr>
<tr>
<td>Education and training</td>
<td>Ongoing as material becomes available</td>
<td>1. For 2020 implementation: develop and implement educational materials by summer 2019.</td>
</tr>
<tr>
<td>Implementation</td>
<td>January 1, 2020</td>
<td></td>
</tr>
</tbody>
</table>

**NAACCR Research and Data Use Update**

![Recinda Sherman, MPH, PhD, CTR](image)

*Recinda Sherman, MPH, PhD, CTR*

*NAACCR Program Manager of Data Use and Research*

*rsherman@naaccr.org*

This summer is once again filled with heat waves and devastating fires across much of North America and Europe. French heat wave expert Robert Vautard recently said, “In many places, people are preparing for the past or present climate. But this summer is the future.” Without belittling the serious threats of climate change, it is easy to see that Dr. Vautard’s words also apply to other current, complex conditions, including our work in cancer surveillance.
As cancer researchers, we are comfortable with the non-static nature of our registry data and understand this trade-off is a result of striving for as timely and high quality data as possible. But we are less comfortable with reporting changes, particularly large-scale changes as we are experiencing now. Quite rationally, we worry about the impact on the quality of data collection—possibly rendering some data irrelevant for surveillance and research. But this, too, is a trade-off aimed at increasing the future relevancy of our data. As the medical field moves forward, we cannot remain rooted in an historical approach to data collection. And our work must now, of course, include additional data quality assessment-focused evaluation of the impact of the 2018 changes.

So, welcome to Summer! However, some things don’t change. We are not individual researchers working in silos. We have the expertise and camaraderie of the entire NAACCR community that will be collaborating on and sharing knowledge on these issues. So it won’t be stress-free, but it won’t be lonely. Welcome to the Future!

The summer also means release of the current CiNA Monographs. The current CiNA volumes are available here: https://www.naaccr.org/cancer-in-north-america-cina-volumes/. These include Vol 1 (combined incidence), Vol 2 (registry-specific incidence), and Vol 3 (registry-specific mortality) for diagnosis years 2011-2015 as well as the update to Vol 4 (Survival) for diagnosis years 2007-2013. We have also updated the Top 5 Cancer link: https://www.naaccr.org/top-5-cancers/ for 2011-2015.

These volumes represent a great deal of work by the CiNA Editorial Committee. An enormous amount of appreciation goes to Glenn Copeland from the Michigan Cancer Surveillance Program, who has spearheaded the CiNA Monograph publication effort for many years. Glenn will be retiring and, not only will he be missed, but this means we are looking for a replacement editor. Please let me know if you or one of your colleagues would be interested in working on the CiNA volumes.

Summer also means the release of updated CiNA Datasets for Researchers and the CiNA Public Use File as well as our on-line interactive data query systems available for 2011-2015 here: https://www.naaccr.org/interactive-data-on-line/. A few changes this year, the U.S. 2000 Standard Population is now auto-filled, but if you need to use a different standard for age-adjustment the others are still available in the drop-down (1996 & 1991 Canadian, 1970 U.S., and the European and World Standards are available for the maps and 2011 & 1996 Canadian are available for Fast Stats). And Puerto Rico is now included in the interactive Cancer Maps!

### NAACCR Education and Training Program Update

**Jim Hofferkamp, BA, CTR**  
NAACCR Program Manager of Education & Training  
jhofferkamp@naaccr.org

If you like to stay busy (and I do), it’s a great time to be involved with the NAACCR Education and Training Program!

This summer we had two free webinars as part of the 2018 Implementation Webinar Series. The first was presented by Donna Hansen and covered the new Grade data items. The second was on the radiation codes and was presented by Robin Billet. Attendance for each of these was about 2000 participants! We have a third webinar scheduled for August 30th that will cover the 2018 Solid Tumor Rules. We are very fortunate to have the authors of the Solid Tumor Rules, Carol Johnson and Lois Dickie, presenting the webinar.
To see a recording of the Grade or Radiation webinar or to register for the upcoming Solid Tumor webinar see the Education and Training section of the 2018 Implementation page https://www.naaccr.org/2018-implementation/.

We are wrapping up the 2017-2018 NAACCR Webinar Series on September 6th with our annual Coding Pitfalls webinar. We are extremely fortunate to have Denise Harrison, CTR join us as a Co-Host. Many of you may recognize Denise from presentations she has done at NCRA or from workshops she presented with April Fritz. Some of you may know her as the Department Chair of the Cancer Registry Program at the Santa Barbara City College. This year during the Coding Pitfalls webinar we will be working through a 2018 Breast case and a 2018 Colon case applying the Solid Tumor Rules, 8th edition AJCC, EOD, Summary Stage, and treatment codes.

The 2018-2019 webinar series starts on October 4th. The topic of our first webinar is Lung. With all of the changes for 2018, we felt we only had time to focus on two topics related to lung malignancy. For this webinar we are going to limit the subject matter to staging (AJCC, EOD, Summary Stage 2018, SSDIs) and applying the new radiation fields.

Our co-host for the Lung webinar is Wilson Apollo, MS, CTR, RTT. Wilson is a CTR, radiation therapist, and an accomplished educator. You may have seen his NCRA webinar on radiation coding or his presentation on the new radiation codes at the NCRA Annual Conference this year. Wilson will go over common radiation techniques used to treat lung cancer patients and how to assign the new radiation codes when these techniques are used.

For more information on upcoming NAACCR webinars or to subscribe for the 2018-2019 NAACCR webinar series see our website at https://www.naaccr.org/cancer-registry-surveillance-webinar-series/.

We are also gearing up for another CTR Prep and Review Webinar Series. Our first session will be August 21, 2018. If you or one of your staff will be taking the exam anytime soon, please take a look at what we have to offer!

https://www.naaccr.org/ctr-exam-preparation-review/. If you have not done so, please see the NAACCR Education and Training Calendar. Here we list upcoming training events related to 2018 implementation presented by NAACCR and our partner organizations!

https://www.naaccr.org/education-training-calendar/.

If you have any questions about upcoming training events, please contact Angela Martin or myself!

Angela Martin
amartin@naaccr.org

Jim Hofferkamp
jhofferkamp@naaccr.org

NAACCR 2018 Education and Training Calendar

Angela Martin, CTR
NAACCR Trainer/Project Coordinator
amartin@naaccr.org
NAACCR recently developed an online calendar listing not only NAACCR training opportunities but also lists resources from the larger cancer surveillance community. Please see the An Update from the NAACCR Education Committee article to learn more.

For more information about NAACCR education and training opportunities or to register online, go to the Education and Training tab on the NAACCR website (naaccr.org), or contact Jim Hofferkamp (jhofferkamp@naaccr.org).

**Virtual Pooled Registry Update**

**Castine Clerkin, MS, CTR**  
NAACCR Program Manager of Virtual Pooled Registry  
cclerkin@naaccr.org

Summer is surely in full swing! It was great to see so many of you at the NAACCR Conference and I hope everyone is finding time for a well-deserved vacation.

As reported in the April 2018 *NAACCR Narrative*, the Virtual Pooled Registry Cancer Linkage System (VPR-CLS) will serve as the secure, online portal through which all VPR requests will be managed. Phase I of the VPR-CLS development, which
includes initial registry linkage and release of match counts, will be ready for testing in August 2018. Investigators from the Childhood Cancer Survivor Study and staff from 37 registries (thank you!) have volunteered to participate in this testing, which will include the following:

- Online researcher application for initial linkage
- Review/approval by the Research Review Committee (your peers)
- Secure transmission of the standardized and edited cohort file to registries
- Registry linkage using Match*Pro and a standard, pre-specified configuration file
- Upload of the registry match count reports (to be compiled and shared with the study investigators)
- Feedback on areas for system improvement

Over the next 3-5 months, we will continue development of Phase 2 VPR-CLS functionality to facilitate the streamlined IRB/Registry application for release of individual-level data on matched cases. Testing of Phase II functionality is anticipated to occur near the end 2018.

On another note, a third test of the hashed (encrypted) inter-registry matching process is currently underway. This test includes data from six large registries, both with contiguous (CT, NJ, and NY) and non-contiguous state borders (IA, GA, LA). We are excited to evaluate how the software performs and better understand the degree of duplicate cases and multiple primaries across registries.

NCI remains committed to identifying dedicated funds and appropriate mechanisms to support ongoing registry participation in VPR minimal risk linkage studies. I’d like to thank registries that completed the recent survey about current linkage fees and use of these funds. This information will help inform the amount of funding registries will need to participate in the VPR without compromising their ability to comply with other registry priorities.

As always, I welcome all VPR-related comments and questions.

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2018 Solid Tumor General Instructions

Lois A. Dickie, CTR
National Institute of Health

The final **2018 Solid Tumor General Instructions** have been posted and may now be used *only* for those sites updated for 2018 and diagnosed 1/1/2018 forward. The exception is Cutaneous Melanoma and Other Sites; the 2007 Multiple Primary and Histology Coding General Instructions still apply to these two site groups. DO NOT USE the 2018 General Instructions for Cutaneous Melanoma tumors AND tumors covered in Other Sites. Using the 2018 Solid Tumor General Instructions for these site groups will result in histology coding errors.

**The final 2018 Solid Tumor Colon Rules** have been posted and now may be used for cases diagnosed 1/1/2018 forward. **IMPORTANT INFORMATION:** Major changes have been made to the 2018 Colon rules regarding new tumors in anastomosis sites and histology coding in polyps. The editors of the 2018 Colon rules strongly recommend you read the Colon Terms & Definitions, M rules, and H rules as they provide detailed information and coding instructions for the rules specific to anastomosis recurrence and polyyp histology.

Final Solid Tumor Colon Rules may be accessed at the following link: [https://seer.cancer.gov/tools/solidtumor/](https://seer.cancer.gov/tools/solidtumor/)

Educational modules are being developed for each revised set of site rules and an email notice will be sent once they are available. Please direct questions concerning the colon rules to [Ask a SEER Registrar](mailto:Ask a SEER Registrar).
The final 2018 Solid Tumor Lung Rules have been posted and now may be used for cases diagnosed 1/1/2018 forward. **IMPORTANT INFORMATION:** Major changes have been made to the 2018 Lung rules regarding histology coding. These comprehensive changes reflect the WHO 4th Ed Tumors of Lung and the 2018 Lung CAP Protocol. The editors of the 2018 Lung rules strongly recommend you read the Lung Terms & Definitions AND the Lung H Rules as they provide detailed instructions for coding lung histologies.

Final Solid Tumor Lung Rules may be accessed at the following link: [https://seer.cancer.gov/tools/solidtumor/](https://seer.cancer.gov/tools/solidtumor/)

Educational modules are being developed for each revised set of site rules and an email notice will be sent once they are available. Please direct questions concerning the breast rules to Ask a SEER Registrar.

Lois A. Dickie, CTR  
Public Health Analyst  
National Institute of Health  
Division of Cancer Care and Population Sciences  
Statistical Research Branch  
SEER Program  
505-401-8170

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**Annual Conference Updates**

*Monica Thornton*  
*Administrative Assistant*  
*mthornton@naaccr.org*

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**2018 Conference Materials are Now Posted**

- [2018 Final Abstract Program](#)  
- [2018 Poster Presentations](#)  
- [2018 Oral Presentations](#)  
- [2018 CE Form](#)  
- [2018 Annual Conference Photos](#)

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**2019 Conference Information**

Vancouver, British Columbia, Canada  
JW Marriot Parq Vancouver  

June 8-15, 2019  
Single/Double Room Rate: $199 U.S.
2020 Conference Information

Philadelphia, Pennsylvania

June 21-26, 2020
Single/Double Room Rate: $209 U.S.

NAACCR Annual Conference Poster Awards

Susan T. Gershman, MS, MPH, PhD, CTR
Massachusetts Cancer Registry

Chair, Poster Review Committee

Thanks to all the poster authors and judges who participated in the 2018 NAACCR Annual Conference Poster Awards. There were two awards for Registry Operations and three awards for Data Use. And the winners:

Registry Operations

- **First Place**: Implementation of Natural Language Processing Applied to Pathology Reports (Cheryl Moody, California Cancer Reporting and Epidemiologic Surveillance Program).
- **Second Place**: Doing less with more! Finding creative solutions for file storage and processing of Meaningful Use CDA Files (Diane Ng, Westat).

Data Use

- **First Place**: Stage at diagnosis by health insurance status among adolescent and young adult cancer patients in California (Yi Chen, California Cancer Reporting and Epidemiologic Surveillance Program).
- **Second Place**: Producing Cancer Statistics at the Census Tract Level: A Louisiana Story (Lauren Maniscalco, Louisiana Tumor Registry).
- **Third Place**: Characteristics and survival of children with acute leukemia with Down syndrome or other birth defects in New York (Baozhen Qiao, New York State Cancer Registry).


NAACCR 2018 Student Presentation Awards

Jeannette Jackson-Thompson, MA, MSPH, PhD
Missouri Cancer Registry and Research Center

Member, Student Award Team

Congratulations to NAACCR’s eighth annual Student Award Program recipients. We would also like to thank all students who took part in the program, details of which are outlined later in this article, by submitting abstracts and giving oral or poster presentations.

Five awards were handed out in 2018, three for oral and two for poster presentations. Each awardee received a certificate and a gift card. Awardees are listed below along with their placement, amount awarded, presentation title and affiliation(s).
Oral Presentation Awards

First place ($150): Nosayaba (Nosa) Osazuwa-Peters, BDS, MOPH, CHES, PhD (2018); “Nonclinical factors associated with head and neck cancer survivorship among patients with metastatic disease.” When his abstract was submitted, Nosa was an instructor in the St. Louis University School of Medicine Department of Otolaryngology – Head and Neck and a PhD candidate at St. Louis University College for Public Health and Social Justice.

Second place ($100): Eric Stewart; “Improved cancer reporting efficiency and reduced paper waste: Lessons learned from an electronic reporting portal recruitment effort.” Eric has been a Data Collection Specialist with the Cancer Registry of Greater California since 2014. He is pursuing a Master of Public Health degree from the University of California, Berkeley (Fall 2019).

Third place ($50): Fran Maguire, MPH, PhD (2018) (center); “Disparities in systemic therapy use in advanced-stage non-small cell lung cancer (NSCLC) by source of health insurance.” Fran is on the staff of the UC Davis California Cancer Reporting and Epidemiological Surveillance (CalCARES) program that manages day-to-day operations of the California Cancer Registry. At the time of abstract submission, she was a PhD candidate at the University of California, Davis. (Note: Two other CalCARES staff members, Yi Chen and Cheryl Moody, BA, CTR, received 2018 awards. Ye (pictured left) received a first-place award in the “research and data use” category (open to all participants) for his poster titled “Stage at diagnosis by health insurance status among adolescent and young adult cancer patients in California” while Cheryl (pictured right) received a first-place award in the “registry operations” category for her poster “Natural Language Processing (NLP) – California’s Experience.”)

Poster Presentation Awards

First place ($150): Amy Klapheke, MPH (on left, with Student Award Team (SAT) member Jeannette Jackson-Thompson, MSPH, PhD); “Depressive symptoms and health-related quality of life in older women with gynecological cancer: A population-based analysis using the Surveillance, Epidemiology, and End Results – Medicare Health Outcomes Survey.” Amy is a research scientist with the Cancer Registry of Greater California, Public Health Institute and a PhD candidate in Epidemiology at the University of California, Davis (December 2018).

Second place ($100): Todd Norwood, MSA; “Lifestyle-related risk factors for cancer and associations with social determinants of health: Case study of the Cancer Risk Factors Atlas of Ontario in Toronto.” Todd is a staff scientist at Cancer Care Ontario and a PhD candidate in Epidemiology at the University of Toronto Dalla Lana School of Public Health (PhD 2020).

Summary

The eighth year of the Student Award Program continued to be a learning process for NAACCR, the SAT and participating students. We were encouraged by the level of interest and the quality of submissions and presentations. We were
impressed that one advisor accompanied his student to the conference and would encourage more advisors and mentors to attend.

We used the set of criteria first developed in 2011 and slightly tweaked since then, with each criterion weighted to reflect its relative importance, to obtain a total score. Each presentation was evaluated by three judges who did not have a conflict of interest with any presentation they evaluated. The three-member Student Award Team (NAACCR staff member Castine Clerkin, MC, CTR (team lead); Christina Lisella, RHIA, CTR from the host Pennsylvania Cancer Registry; and Jeannette Jackson-Thompson, MSPH, PhD) reviewed all scores, followed procedures outlined above and reached consensus on awardees.

An important lesson to help inform the 2019 Student Award Program is that the SAT must be proactive and timely in publicizing the Student Award Program in various venues, including the local/regional universities around the host site for the NAACCR Annual Conference. Students who participated in the program appreciated the opportunity to share their work; more publicity earlier may increase participation and further our goal of increasing data usage, improving registry operations and bringing more young people into NAACCR.

While the deadline for submitting student abstracts for the 2019 NAACCR Annual Conference in Vancouver, British Columbia (8-15 June 2019) is months away, the Fall 2018 semester will soon start. It is time to start thinking about the 2019 Student Award Program!

Acknowledgments

On behalf of the SAT, I would like to acknowledge the efforts of the Student Abstract Review Committee and Student Award Program judges. We are grateful to them for donating their time and using their expertise to help ensure the success of the 2018 Student Award Program. I would like to acknowledge the assistance of NAACCR staff for, among other things, printing certificates, ensuring gift cards were sent to awardees and providing support to the above-mentioned committees. Finally, I want to thank my fellow SAT members, Castine Clerkin and Christina Lisella.

Jeannette Jackson-Thompson, MA, MSPH, PhD
Member, Student Award Team

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New Colorectal Cancer Screening Guideline Published


The new guideline recommends that adults start regular screening for colorectal cancer at age 45. The guideline was changed based on new data showing increasing rates of colorectal cancer in younger populations.
By updating the guideline, the American Cancer Society hopes it will save more lives by finding colorectal cancer early, detecting polyps and removing them before they become cancerous and improving the success of treating colorectal cancer as a result of earlier detection.

Additional information about the new guideline can be found at cancer.org/coloncancer.

**Summary of Breast and Colon Site Specific Data Item (SSDI) Changes for Cancer Registrars**

Summer 2018 NAACCR Narrative

The Breast and Colon changes outlined below take effect with cases diagnosed 1/1/2018 and forward. These changes were published in April, 2018 by SEER at https://seer.cancer.gov/tools/staging*

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<table>
<thead>
<tr>
<th>Previous field name [SSF’s]</th>
<th>Current field name – 2018 [SSDi’s]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carcinoembryonic Antigen (CEA) Lab Value</td>
<td>CEA Pretreatment Lab Value</td>
</tr>
<tr>
<td>Carcinoembryonic Antigen (CEA)</td>
<td>CEA Pretreatment Interpretation</td>
</tr>
<tr>
<td>Circumferential Resection Margin (CRM)</td>
<td>Circumferential Resection Margin (CRM)</td>
</tr>
<tr>
<td>KRAS</td>
<td>KRAS</td>
</tr>
<tr>
<td>Microsatellite Instability [MSI]</td>
<td>Microsatellite Instability [MSI]</td>
</tr>
<tr>
<td>Perineural Invasion</td>
<td>Perineural Invasion</td>
</tr>
<tr>
<td>Tumor Deposits</td>
<td>Tumor Deposits</td>
</tr>
</tbody>
</table>

*Previously collected as CS SSF #2 – page 87
*Previously collected as CS SSF #1 – page 89
*Previously collected as CS SSF #6 – page 91
*Previously collected as CS SSF #9 – page 94
*Previously collected as CS SSF #7 – page 96
*Previously collected as CS SSF #8 – page 98
*Previously collected as CS SSF #4 – page 100

*The order of the data collected has changed, and some previously collected data fields are no longer collected for 01/01/2018 and forward diagnoses. There are a number of new data fields being collected for breast primaries.

* There has been an addition of the use of the ‘X’ character for coding certain SSDI fields. All current SSDI for breast with the exception of Estrogen Receptor Summary, Progesterone Receptor Summary, HER2 IHC Summary, HER2 ISH Summary, HER2 Overall Summary, Multigene Signature Method, Oncotype Dx Risk Level – DCIS, Oncotype Dx Risk Level – Invasive, and Response to Neoadjuvant therapy employ the use of the ‘X’ character as needed.
* The order of the data collected has changed, and some previously collected data fields are no longer collected for 01/01/2018 and forward diagnoses.

* There has been an addition of the use of the ‘X’ character for coding certain SSDI fields.

* The ‘X’ character may be used when coding Tumor Deposits, ie: Code X1 100 or more Tumor Deposits, X2 Tumor Deposits identified, number unknown, X8 Not applicable, X9 Not documented in medical record. See page 100 for detailed coding explanations.

* The ‘X’ character may also be used when coding the Circumferential Resection Margin (CRM), ie: Code XX.0 when margins described as greater than 100mm, code XX.7 when there is no surgical resection of the primary site, code XX.9 when – not documented in the medical record, CRM is not evaluated (assessed), Unknown if CRM is evaluated (assessed). See page 91 for detailed coding explanations.

* The ‘X’ character may also be used when coding CEA Pretreatment Lab Value. See page 87.


In the Available Resources section

- Click on Site-Specific Data Item Manual (PDF).
• Click on the PDF Adobe Acrobat Reader Toolbar icon (at the far right of the menu options at the bottom of the page)

This will allow you to easily search through the document using the Edit/Find feature or the microscope option on the left menu toolbar.

• It is highly recommended that you also save this document to your resources folder or desktop.