Alabama Department of Public Health

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Alabama Statewide Cancer Registry

The Alabama Statewide Cancer Registry (ASCR) welcomes the new program director, Aretha Bracy.

Ms. Bracy has a long history with the Alabama Department of Public Health (ADPH). Her work began over ten (10) years ago in Family Health Services (FHS), with the Alabama Child Death Review System (ACDRS). The ACDRS is a program to prevent child deaths through statistical analysis, education, advocacy efforts, and local community involvement.

Aretha is excited to be a part of the ASCR. "During my short time here, I have observed the intricate program operations and experienced the Call for Data process. Because of your diligence and timely submissions, we do anticipate that we will meet our goal to receive Gold certification for our 2016 NAACCR 24-month data submission.

As I continue to learn the operations of the cancer registry, I look forward to working with you in the near future." - *Aretha*

Alabama Statewide Cancer Registry

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The Alabama Statewide Cancer Registry will be hosting the following webinars at 9:00 a.m. at the Cullman County Health Department in Cullman, Alabama. Please contact Diane Hadley as soon as possible if you plan to attend any webinar in Cullman. The exact dates of these webinars are to be determined.

Also, the Alabama Statewide Cancer Registry offers the NAACCR Webinars Via LCMS. Please contact Kandice Abernathy for instructions on how to register.

- February 2019 — Collecting Cancer Data: Colon
- March 2019 —Boot Camp
- April —Collecting Cancer Data: Hematopoietic and Lymphoid Neoplasms

"Once you choose hope, anything's possible" - *Christopher Reeve*

Ask a SEER Registrar:

Question

Reportability/Histology--Colon: Is tubular adenoma with high grade dysplasia and focal invasion from a pathology report of a colon biopsy reportable?; if so, what is the histology code?

Answer

Tubular adenoma with high grade dysplasia and **focal invasion is reportable**. Assign the histology code and behavior as 8210/3 (Adenocarcinoma in tubular adenoma).

NAACCR Guidelines for ICD-O-3 Implementation discuss the term high grade dysplasia (without invasion). High grade dysplasia and related terms are under review and study for consideration as a reportable neoplasm. Registries should check with their state reporting legislation to see if included in the reporting requirements.

Remember:

High Grade Dysplasia with no mention of invasion or in situ is not reportable to the ASCR.

Non-Hospital Facilities: Text Documentation

Coding Pitfalls in Context of Text Documentation:

- Text documentation is a requirement for abstracting.
- We all make abstracting and coding mistakes.
- Our abstracts are not just a bunch of codes.
- Explains the continuum of cancer care.
- Helps identify missing information.
- Helps improve abstract quality.
- Improves overall data quality.
- Not everything gets coded.
- Text documentation is a valuable resource.

D. I. K. W.
Data Information Knowledge Wisdom

Purpose and Use of Text Documentation

Purpose: Describe the patient's continuum of care from presentation symptoms to diagnosis, from work-up to staging, from treatment to progression and any care post-treatment until the end of life whether due to cancer or not.

Text documentation helps reinforce critical data items and helps identify where abstractors and coders have problems or do not understand certain new (and older) concepts, instructions, etc. Your text documentation should tell a story.

Who uses text and how do they use it?

- New Registrar Learning to Abstract
- Hospital Registrar and Physicians
- Central Registry and Data Quality
- Clinical Research and Other Data Users
- Epidemiologist and Use of Text
- Feedback to Individual
- Feedback for Training

Text documentation should always include the following components:

- Date(s) –include date(s) references –this allows the reviewer to determine event chronology
- Date(s) –note when date(s) are estimated [i.e. Date of DX 3/15/2014 (est.)]
- Location –include facility/physician/other location where the event occurred (test/study/ treatment/other)
- Description –include description of the event (test/study/treatment/other) –include positive/ negative results
- Details –include as much detail as possible – document treatment plan even if treatment is initiated as planned
- Include "relevant-to-this-person/cancer" information only
- DO EDIT your text documentation
- DO NOT REPEAT INFORMATION from section to section
- DO USE NAACCR Standard Abbreviations
- DO NOT USE non-standard or stylistic shorthand

When information is missing or incomplete in the Medical Record – document Information is not there.

FOLLOW-BACK COORDINATOR

As Follow-Back Coordinator,

I want to thank all of my facilities for your hard work and timely response when reporting cancer cases.

The 2017 Death Clearance forms will be mailed February 2019. Once received, please complete and return the form as soon as possible. The form can be returned via mail, fax, or emailed to me at Cassandra.Glaze@adph.state.al.us.

Important fields that need to be completed on the forms are:

- Fields that have the (*) are required such as the **date of diagnosis, primary site, and histology.**
- If the patient was referred to your facility from another facility, please include the information under the demographic section on the form.
- If there is no more information on the patient, please write that on the form. **PLEASE DO NOT RETURN THE FORM BLANK.**
- If you will abstract the case, please circle YES. IF you will not abstract the case please select NO and explain the reason why.

Solid Tumor Manual Coding Rules

Solid Tumor Manual Coding Rules:

Resource: SOLID TUMOR MANUAL ◦ https://seer.cancer.gov/tools/solidtumor/. Registrars, use this website in order to have the most up-to-date information for the Solid Tumor Rules. Problem Sentence to Download the Solid Tumor Rules will need to be taken out. It would be better to use the link from the website due to all of the updates that occur.

The **purpose** of these rules is to determine **multiple primaries** and to code **histology**. The Solid Tumor Rules are **not used** to determine case reportability, casefinding, stage, or tumor grade.

Note: The rules do not apply to hematopoietic primaries (lymphoma and leukemia) of any site. Use the Hematopoietic & Lymphoid Neoplasm Coding Manual and Database for histologies M9590-M9992.

The following files were updated on January 22, 2019:

- Complete 2018 Solid Tumor Manual (PDF, 5.7 MB)
- General Instructions (PDF, 647 KB)
- Head & Neck (PDF, 1.0 MB)
- Colon (PDF, 935 KB)
- Lung (PDF, 929 KB)
- Breast (PDF, 1.2 MB)
- Kidney (PDF, 863 KB)
- Urinary Sites (PDF, 1.8 MB)
- Malignant CNS and Peripheral Nerves (PDF, 1.1 MB)
- Non-Malignant CNS Tumors (PDF, 1.1 MB)

SMALL HOSPITAL COORDINATOR

I want to thank all small hospitals for their hard work, and timely responses.

Reminders:

- Text is required for tumor data, procedures, and treatment including dates.
- Please format dates in text field's mm/dd/yyyy. Example: 06/15/2018
- Please note in text: age, sex, and race of patient as well if they had a history of cancer or other diagnosis.
- Please fill out all text fields with detailed information from the pathology or cytology report.

If you have any questions or concerns, please contact Kandice Abernathy via telephone or email.

Registry Plus Software Upgrades:

ASCR is preparing for the Abstract Plus and WebPlus upgrades.

The generic build for Abstract Plus 3.7 has been released. We are in the process of customization and the potential date for upgrade to V18 Abstract Plus 3.7 will be Feb 15, 2019.

The tentative date for releasing the Web Plus V18 upgrade will be the end of February, 2019.

The NAACCR V18c edit metafile is planned to be released in Spring, 2019.

Please check your emails periodically for the Abstract Plus upgrade and Web Plus upgrade. We will provide instructions and software support. If you have any questions, please feel free to contact Farzana Salimi.

NAACCR Webinar, Collecting Cancer Data: Lung

Question: Please discuss the use of predominant. When can this be used?

Answer: Predominant is listed as a modifier that should not be used to assign a histology. See page 31 of the Lung Solid Tumor Manual. In our example, "adenocarcinoma, predominantly papillary", we would code to 8140/3 adenocarcinoma.

NAACCR Webinar, Collecting Cancer Data: Breast

Question: H4 is an invasive ductal with insitu with portion of Paget's. Do we ignore Paget's?

Answer: *Comment from SEER:* Yes, ignore the tem "portion of". Code this case to 8500/3.

Abstract Plus Users Important News!!!

Alabama Statewide Cancer Registry New Fields for 2018 and forward diagnosed cases in Version 18.

There will be new Display Types to abstract cases according to year of diagnosis.

2018ASCRHosp/RepFacility – Diagnosis Date 2018 and forward

2017-2016ASCRHosp/RepFacility – Diagnosis Date 2016 and 2017

ASCR-All Fields – Diagnosis Date 2015 and older

New Fields – 2018 Diagnosis Date and forward, new fields that will be included in Version 18 Abstract Plus update:

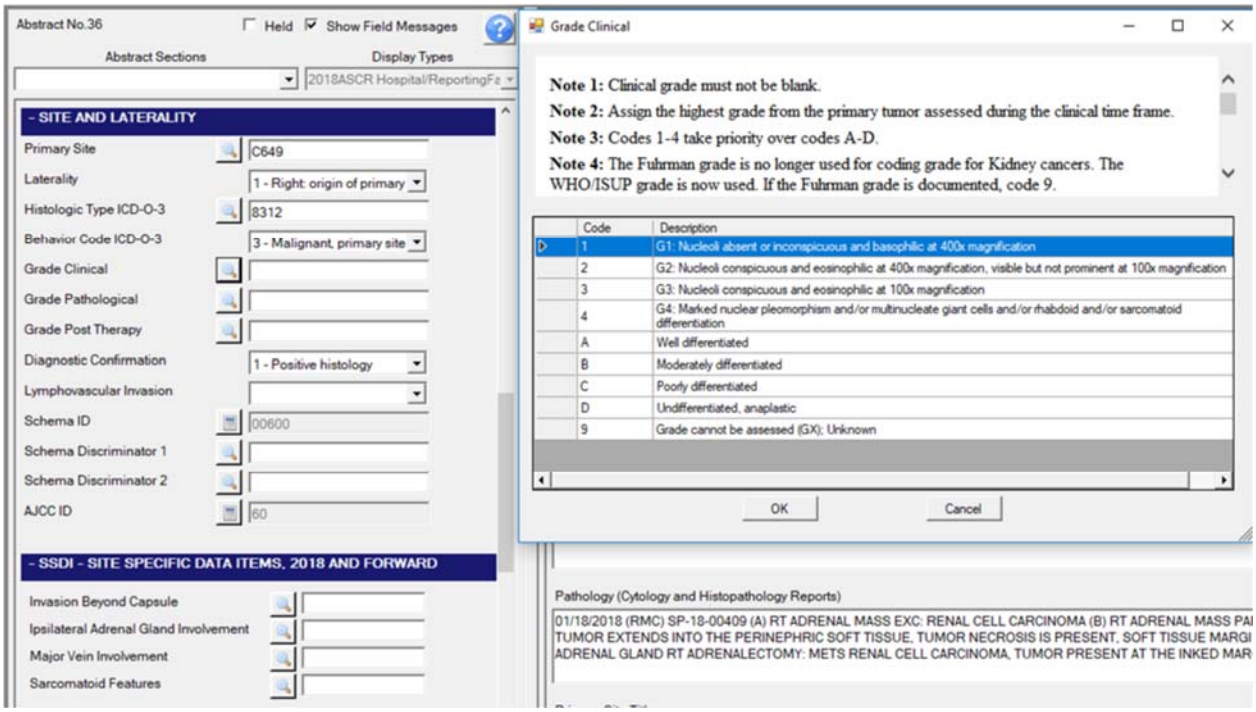
- **Clinical Grade, Pathological Grade and Post Therapy Grade**
- **Site Specific Data Items**
- **Directly Coded Stage 2018**

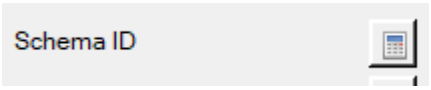
Let's take a look at the new fields in Abstract Plus Version 18

Clinical Grade
Pathological Grade
Post Therapy Grade

Use Search Icon – Read Notes in order to choose correct Codes. Scroll down in the notes box to see all rules.

Example:

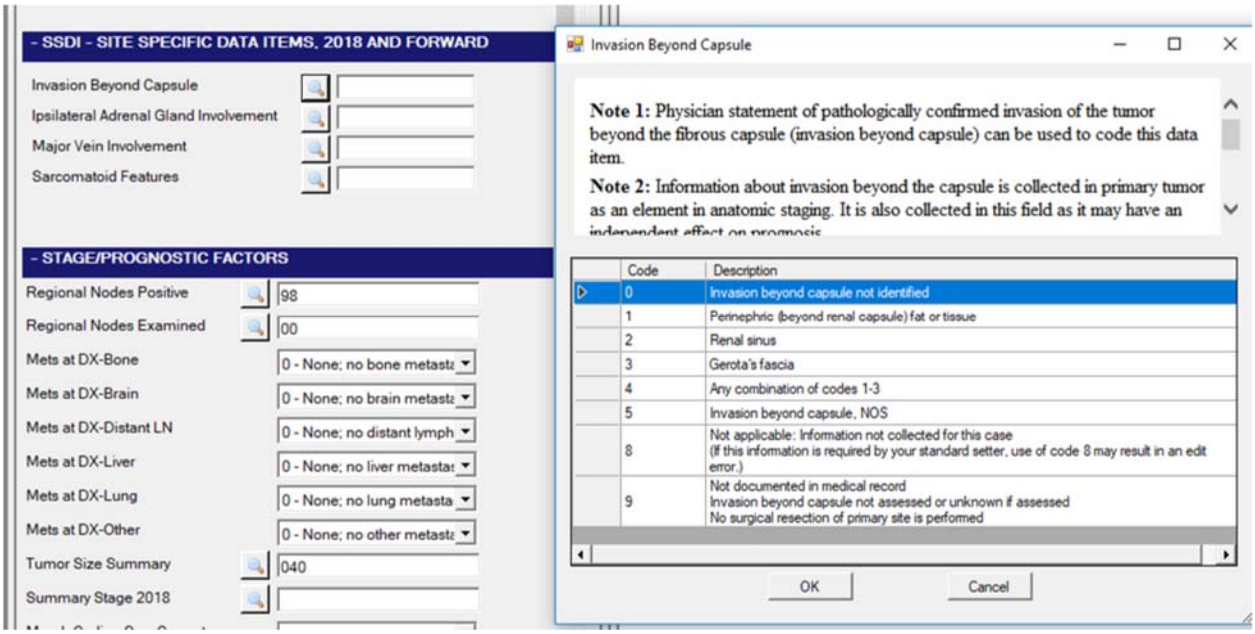




Site Specific Data Items – Click on Schema ID Calculator

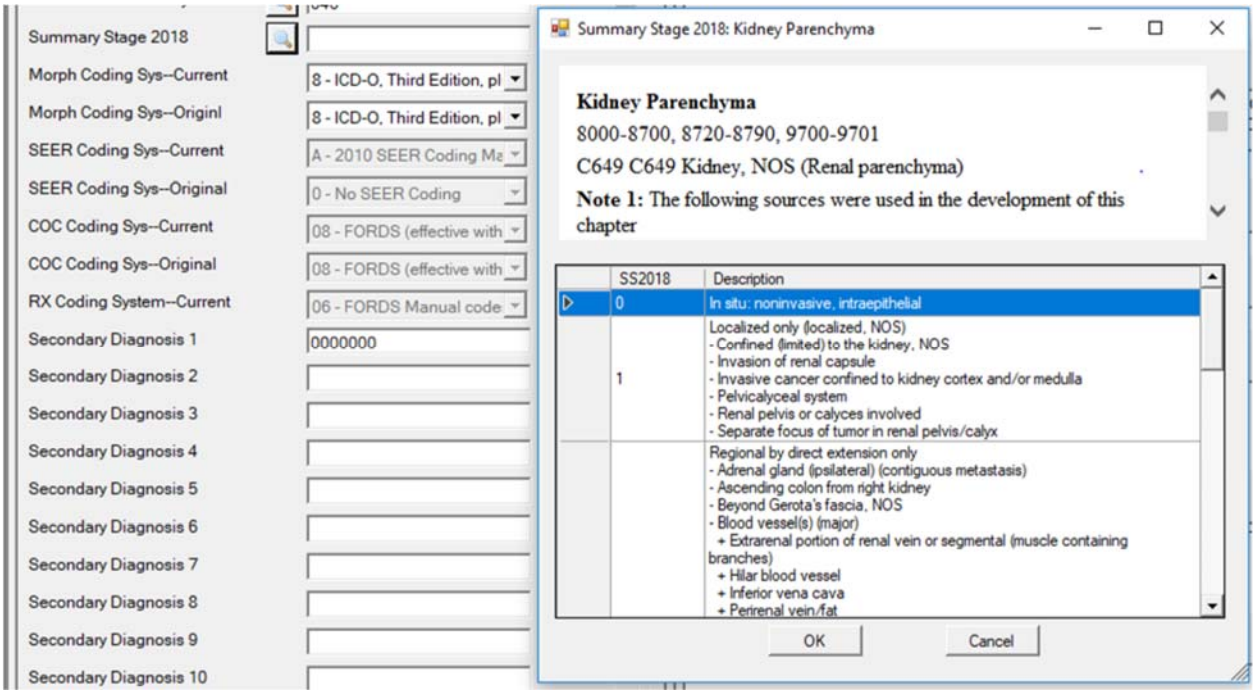
The SSDI Calculator will list the necessary Site Specific Data Items for a 2018 + diagnosed case according to Primary Site.

Use Search Icon – Read Notes in order to choose correct Codes. Scroll down in the notes box to see all rules.



Summary Stage 2018

Use Search Icon – Read Notes in order to choose correct Codes. Scroll down in the notes box to see all rules.



Abstract Plus Users

Everyone has been anxiously awaiting updating to Version 18 for cases with a diagnosis date of 2018 and forward. We are getting ever so close to releasing this to everyone.

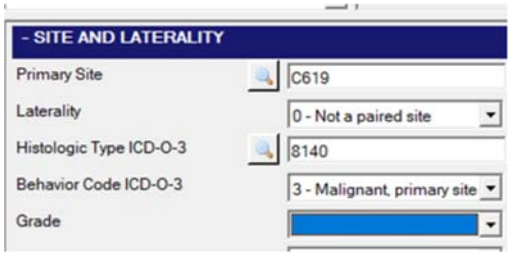
In order for this update to go as smoothly as possible please read carefully the instructions below.

As we all know 2018 Diagnosed Cases and forward will have new fields that will take the place of some of the old fields.

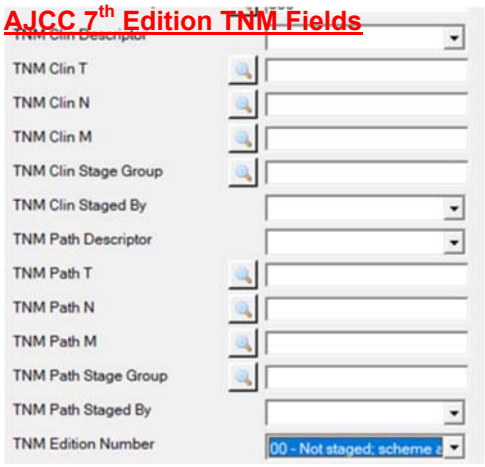
Prior to updating Abstract Plus to Version 18 – 2018 diagnosed cases only, that were first abstracted in Abstract Plus Version 16, please follow instructions below.

Take out data in the old fields listed in RED below and make them blank. Type information that you would like to retain from the old fields that are listed below into TEXT fields.

GRADE



AJCC 7th Edition TNM Fields



CS Site Specific Factors (all CS Fields must be blank)

Directly Coded Summary Stage 1977 and 2000

The ASCR welcomes back, Katelynn Thompson. Katelynn previously served as a student intern and clerical aide with the ASCR. She is now the Abstraction and Data Coordinator with the registry. She is a graduate of Alabama State University with a degree in Health Information Management. In her spare time, Katelynn enjoys spending time with family and doing lots of shopping. She is very excited to be continuing her journey with the ASCR.

Resources

New manuals, education, and updates are available for 2018. For a complete and accurate list of what is available, refer to https://www.naaccr.org/2018-implementation/#Education.

NAACCR Site Specific Data Items (SSDI)/ Grade can be found at https://apps.naaccr.org/ssdi/list/.

- SSDI Manual
- SSDI Manual Appendix A
- SSDI Manual Appendix B
- Grade Manual
- Change Log

Just for Fun

Crack Chicken Spaghetti Bake

INGREDIENTS

- 1 (16 oz.) package spaghetti
- 2 (10.75 oz.) cans cream of chicken soup
- 2 (8 oz.) packages velveeta cheese, cubed
- 1 cup low-sodium chicken broth
- 1 (1.5 oz.) package dry ranch mix
- 3 cups cooked chicken, shredded or cubed
- 1/3 cup bacon bits
- 2 cups sharp cheddar cheese, grated

Kosher salt and freshly ground pepper, to taste

PREPARATION

1. Bring a large pot of salted water to boil and cook pasta according to package directions. Drain and set aside.
2. Preheat oven to 350° F and lightly grease a 9x13-inch baking dish with non-stick spray.
3. Combine chicken soup, velveeta and chicken broth in a medium saucepan over medium heat, stirring until melted and smooth. Whisk in ranch dry mix and salt and pepper.
4. Place drained pasta and shredded chicken in greased baking dish and pour cheese sauce over the top. Toss together until everything is evenly coated, then top with cheddar cheese and bacon bits.
5. Place baking dish in oven and bake for 30-35 minutes, or until cheese is melted and bubbly, and dish is heated through.

Recipe adapted from plain chicken