# CANCER REPORTING IN CALIFORNIA: ABSTRACTING AND CODING PROCEDURES FOR HOSPITALS

California Cancer Reporting System Standards, Volume I

*Changes And Clarifications – 9th Edition*

*June 2009 (Amended June 22, 2009)*

<table>
<thead>
<tr>
<th>SECTION</th>
<th>CHANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>III.2.9</td>
<td>Race and Ethnicity</td>
</tr>
<tr>
<td></td>
<td>Added instruction: #9. Code as white (01) when the race is described as white (01) but the place of birth is Hawaii.</td>
</tr>
<tr>
<td>III.3.3</td>
<td>Date of Diagnosis</td>
</tr>
<tr>
<td></td>
<td>Added: Beginning in 2009, use the actual date of diagnosis and treatment for an in utero diagnosis. In the past, these dates were assigned to the date the baby was born.</td>
</tr>
<tr>
<td>III.2.14</td>
<td>Patient, No Contact Flag</td>
</tr>
<tr>
<td></td>
<td>Added clarification that cases coded to codes 1, 2, 3 and 4 should not be contacted for research studies.</td>
</tr>
<tr>
<td>III.3.12.1</td>
<td>License Numbers</td>
</tr>
<tr>
<td></td>
<td>Added: For handling a nine-character number, drop the third zero after O2 for osteopaths.</td>
</tr>
<tr>
<td>IV.3.1</td>
<td>DxRx Report Facility ID (1-5)</td>
</tr>
<tr>
<td></td>
<td>Added: If a reporting facility does not have its' own pathology lab and utilizes an independent pathology lab, record the number for the pathology lab, not the reporting facility number. If you do not have the number for the pathology lab, use one of the following numbers:</td>
</tr>
<tr>
<td></td>
<td>996001 UNSPEC LAB CALIF (pathology lab within California)</td>
</tr>
<tr>
<td></td>
<td>996002 UNSPEC LAB NONCALIF (pathology lab outside of California)</td>
</tr>
</tbody>
</table>
V.3.5  Grade and Differentiation

Added: Do not use FIGO grade to code differentiation. FIGO grade is completely different from FIGO stage. If the only grade provided is a FIGO grade, code grade to 9, unknown.

V.3.5.8  Bloom-Richardson Grade for Breast Cancer

Added: Nottingham to references of Bloom-Richardson (Nottingham) scores

VI.1.1  Special Situations

Added: In Utero Diagnoses and Treatment

Beginning in 2009, use the actual date of diagnosis and treatment for an in utero diagnosis. In the past, these dates were assigned to the date the baby was born.

VI.1.3.2  Dates

Added: In Utero Diagnoses and Treatment

Beginning in 2009, use the actual date of diagnosis and treatment for an in utero diagnosis. In the past, these dates were assigned to the date the baby was born.

VI.2.1  Surgery of the Primary Site

Deleted: Tumor Embolization

Added: Do not code pre-surgical embolization of hypervascular tumors with particles, coils or alcohol. These pre-surgical embolizations are typically performed to make the resection of the primary tumor easier. Examples where pre-surgical embolization is used include meningiomas, hemangiomas, paragangliomas, and renal cell metastases in the brain.

VI.3.3  Radiation - Regional RX Modality

Added: Radioembolization is embolization combined with injection of small radioactive beads or coils into an organ or tumor. Code Radiation Modality as brachytherapy, code 50, when tumor embolization is performed using a radioactive agent or radioactive seeds.
VI.3.4 Radiation - Boost RX Modality

Added: Radioembolization is embolization combined with injection of small radioactive beads or coils into an organ or tumor. Code Radiation Modality as brachytherapy, code 50, when tumor embolization is performed using a radioactive agent or radioactive seeds.

VI.4.2 Chemotherapy Codes

Added: Code chemoembolization as 01, 02, or 03 depending on the number of chemotherapeutic agents involved.

VI.8.1 Other Therapy Codes

Added: Apply code 1, Other Cancer Directed Therapy for the following:

- Embolization using alcohol as an embolizing agent or for
- Embolization to a site other than the liver where the embolizing agent is unknown.

VII.2.6.1 Last Type of Tumor Follow-Up

Deleted code 16 - SSDI Match

VII.2.6.2 Last Type of Patient Follow-Up

Added code 16 – SSDI Match

Appendix F:

Updated the Hospital lists to version 1.9.2.00 dated 5/20/2009

Appendix K:

Added the revised comprehensive ICD-9-CM Casefinding and Supplementary ICD-9-CM Code Lists to be used to identify cases diagnosed October 1, 2008 and forward. Amended by SEER 6/22/09: Use these lists to identify cases diagnosed January 1, 2009 and forward. Do not apply the lists to earlier cases.

Appendix Q:

C22.0 Deleted statement to code chemoembolization to code 10, local tumor destruction

C77.0 Added to code 25: Excisional biopsy of a single lymph node.

C70.0 – C72.9 Added clarification for codes 20, 40 and 55 (as referenced in DSQC Memo 2008-03)

Appendix S:

Added: DSQC Memos 2008-01 – 2008-06 and DSQC Memo 2009-01