2007 Multiple Primary and Histology Coding Rules

NCI SEER
for
NAACCR 2006 Conference

Regina, Saskatchewan
June 15, 2006
# Timeline

<table>
<thead>
<tr>
<th>2003 – 2006</th>
<th>Rules Development</th>
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<tbody>
<tr>
<td>Sep 2004 – May 2005</td>
<td>Beta Test 1, 2, 3, 4, 5</td>
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<tr>
<td>Jan – Jun 2005</td>
<td>NAACCR Registry Operations Committee</td>
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<tr>
<td>Jan – Jun 2005</td>
<td>CoC Disease Site Teams</td>
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<tr>
<td>Jun 2005</td>
<td>CoC Quality Integration Committee</td>
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<tr>
<td>May 2005 – Jan 2006</td>
<td>Statistical Impact Meetings</td>
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<tr>
<td>June 30, 2005</td>
<td>Decision to Delay Implementation</td>
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<tr>
<td>Sep 2005</td>
<td>Train the Trainers I</td>
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<tr>
<td>Mar – Apr 2006</td>
<td>Field Studies and Reliability Study</td>
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<tr>
<td>May 2006</td>
<td>CoC Quality Integration Committee</td>
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<tr>
<td>Jul 2006</td>
<td>Final Rules</td>
</tr>
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<td>Aug 2006</td>
<td>Train the Trainers II</td>
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<tr>
<td>Nov – Dec 2006</td>
<td>Web Broadcasts and Web Self Instruction</td>
</tr>
<tr>
<td>January 1, 2007</td>
<td>Implementation</td>
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</table>
Problem Identification

• 25 year old rules
• Site-specific exceptions
• Training was difficult
• Impossible to flowchart
Problem Identification

- ICD-O-3 new terms and new codes
- Multiple histologic terms on path report
  - Biology of disease
  - Electron microscopy
  - Immunohistocytocchemistry
  - Cytogenetics
- Non-standard use of nomenclature
- Multiple tumors in an organ site/system
Problem Identification

- Quality Improvement Studies
- Registrar and Researcher Inquiries
- SINQ and I&R
SEER Histology Committee

• Established July 2002
• Initial Focus
  – Histology Rules
    • Complex histologies
    • Combination histologies
    • Mixed histologies
    • Multiple histologic terms
    • Cell lineage
  – Multiple Primary Rules
Other groups identify same problem

- NPCR Data Completeness & Quality Audits
- December 2002 – NAACCR
  - Review of Definition for Multiple Primary Cancers in the U.S. Workshop Report
- December 2003 – NAACCR
  - Creation of a Record Consolidation Test File Report
- International Agency for Research on Cancer
  - 2004 International Rules for Multiple Primary Cancers
    - World Health Organization
    - International Association of Cancer Registries
    - European Network of Cancer Registries
NAACCR Recommendations - Dec 2002

- Review SEER multiple primary rules
- Clarify definitions
- Prioritize rules
- Flow chart sequence or hierarchy of rules
- Develop site-specific rules
- Revise timing rules
- Create a multiple tumor indicator
- Involve clinicians in rules development
NAACCR Recommendations - Dec 2002

- Follow step-wise approach
  - Start with breast, colon, and melanoma
- Special attention to breast multiple tumors
- Special attention to breast histology groups
- Develop training materials
- SEER will take the lead
- Expand SEER histology committee to incorporate multiple primary rules issues
NAACCR Test File Highlights – Dec 2003

• Over count some cancers
• Under count some cancers
• Problem Sites
  – Buccal Cavity and Pharynx
  – Digestive System
  – Respiratory System
  – Melanoma
  – Breast
  – Urinary System
Multiple Primary/Histology Committee

ICD-O-3
Editors

Specialty Clinicians

8 Site Subcommittees
Editing Subcommittee
Education Subcommittee

Project Committee
NPCR  CoC  SEER  AJCC
Statistics Canada  NAACCR  NCRA
15 Central registry representatives
Physician members and Ad Hoc Specialists

SEER

CoC Clinical Advisors

Specialty Pathologists
Surveillance Partners

Communication

Collaboration

Accountability

Oversight
Surveillance Partners

National Coordinating Council for Cancer Surveillance (NCCCS)

NAACCR Implementation Oversight Board (IOB)

NAACCR Cancer Registration Steering Committee (CRSC)
Surveillance Partner Activities

- Rules Development
- Beta Testing
- Communication
- Education
Surveillance Partners

- American Cancer Society (ACS)
- American College of Surgeons (ACoS)/Commission on Cancer (CoC)
- Centers for Disease Control and Prevention (CDC)/National Program of Cancer Registries (NPCR)
- National Cancer Institute (NCI)/SEER Program (SEER)
- National Cancer Registrars Association (NCRA)
- North American Association of Central Cancer Registries (NAACCR)
Timeline fast-forward
Formal Review

• MP/H Site Subcommittees Review
• MP/H Full Committee Review
• ACoS/CoC Disease Site Teams
• CBTRUS
• NAACCR
  – Uniform Data Standards Committee
  – Registry Operations Committee
Formal Review

- ACoS/CoC Quality Integration Committee
- Statistical Review
  - NCI: DCCPS and DCEG
- Canadian Cancer Registries Review Team
  - Provincial representation
  - Worked real cases
  - Evaluated impact
MP/H Rules Field Studies

- Hospital-based Study – 319 cases
- Central Registry-based Study – 925 cases
- Web-based Reliability Study – 6,220 cases
- Total = 7,464 cases
MP/H Rules Field Studies

- 5 participating state/regions
  - 2 SEER only
  - 3 SEER/NPCR
  - 7 hospitals
- 9 cancer site/site groups
- Field Study Manual
- Data collection software
- 6 hours web-cast training
2006 SEER Hospital-based Study

- Re-abstract study (limited data items)
- Time study
- Code new data items
  - 3 MP/H data items
  - 2 ambiguous term data items
- Data collection: March 6-28, 2006
- Analysis: April 2-June 30, 2006
2006 Central Registry-based Study

- Tumor matching and case consolidation
- No time study
- No new data items
- Data collection: March 6-28, 2006
- Analysis: April 2-June 30, 2006
Field Study Learning Curve

Result: Abstract 3-4 cases before registrar is comfortable using rules
2006 Web-based Reliability Study

- DIFFICULT CASES !!!
- On-line registration
- No training
- 2 cancer sites per participant
- 10 cases per cancer site/site group
- 90 cases total
Is this a multiple primary?

Agreement with preferred answer

Overall 83.4%
Is this a multiple primary?

Agreement with preferred answer

Bladder, RP, Ureter  67.4%
Breast  89.0%
Brain  89.4%
Colon  85.4%
Head and Neck  82.8%
Is this a multiple primary?

<table>
<thead>
<tr>
<th>Agreement with preferred answer</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Kidney</td>
<td>91.1%</td>
</tr>
<tr>
<td>Lung</td>
<td>84.9%</td>
</tr>
<tr>
<td>Melanoma</td>
<td>75.7%</td>
</tr>
<tr>
<td>All other</td>
<td>84.5%</td>
</tr>
</tbody>
</table>
Histology

Agreement with preferred answer

<table>
<thead>
<tr>
<th>Primary</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary 1</td>
<td>72.9%</td>
</tr>
<tr>
<td>Primary 2</td>
<td>80.1%</td>
</tr>
<tr>
<td>Primary 3</td>
<td>97.2%</td>
</tr>
<tr>
<td>Primary 4</td>
<td>98.9%</td>
</tr>
</tbody>
</table>
## Site-specific Histology?

<table>
<thead>
<tr>
<th>Tumor Site</th>
<th>Agreement with Preferred Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bladder, RP, Ureter</td>
<td>79.8%</td>
</tr>
<tr>
<td>Breast</td>
<td>74.7%</td>
</tr>
<tr>
<td>Brain</td>
<td>69.6%</td>
</tr>
<tr>
<td>Colon</td>
<td>59.4%</td>
</tr>
<tr>
<td>Head and Neck</td>
<td>73.1%</td>
</tr>
</tbody>
</table>
## Site-specific Histology?

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<tr>
<th>Tissue Type</th>
<th>Agreement with preferred answer</th>
</tr>
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<tbody>
<tr>
<td>Kidney</td>
<td>77.2%</td>
</tr>
<tr>
<td>Lung</td>
<td>81.8%</td>
</tr>
<tr>
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<td>71.1%</td>
</tr>
<tr>
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<td>69.7%</td>
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*SEER*
Opportunities for Improvement

- Code according to new rules
- Code final diagnosis
- Using charts and tables
- Highlight equivalent terms and definitions
- Rationale for new data items
- “multifocal” and “multicentric”
- "within two months" to "within 60 days"
MP/H Rules Manual

- Electronic manual in PDF
- Available July 5, 2006
  - SEER website
  - ACOS/CoC Cancer Programs website
  - NPCR website
  - NAACCR website
- Referenced by FORDS Manual
- Incorporated into 2007 SEER Program Coding and Staging Manual
MP/H Rules and Documentation

- Terms and Definitions
- Histology charts
- Combination/mixed histology tables
- Text, matrix, and flowchart
  - Multiple Primary Rules
  - Histology Coding Rules
- Technical minutes – full committee
- Statistical review summary
MPH RULES!
The 2007 Multiple Primary and Histology Coding Rules

The final version of the rules will be available for cases diagnosed starting in 2007.

The 2007 Multiple Primary and Histology Coding Rules present the first site-specific multiple primary and histology rules developed to promote consistent and standardized coding by cancer registrars. This project was sponsored by the National Cancer Institute's SEER Program. In January 2003, the Multiple Primary and Histology Coding Committee (Histology Committee) was formed to tackle problems identified in existing rules. The Histology Committee was a diverse group with membership from all but two SEER regions, the American College of Surgeons (ACS) Commission on Cancer (CoC), the American Joint Committee on Cancer (AJCC), the Centers for Disease Control and Prevention (CDC) National Program of Cancer Registries (NPCR), the National Cancer Registrars Association (NCRA), North American Association of Central Cancer Registries (NAACCR), 15 central registry representatives, and Statistics Canada. Physician guidance by specialty pathologists and clinicians was integral to the review and revision process. Regular consultation with the editors of ICD-0-3 clarified ICD-0-3 codes and ensured that the rules reflect the ICD-0-3 intent and purpose.

The 2007 Multiple Primary and Histology Coding Rules contain site-specific rules for lung, breast, colon, melanoma of the skin, head and neck, kidney, renal pelvic/ureter/bladder, and malignant brain. A separate set of rules addresses the specific and general rules for all other sites. The multiple primary rules guide and standardize the process of determining the number of primaries. The histology rules contain detailed histology coding instructions. For example, grouping histologic terms, differentiating between general (NOS) terms and specific histologic types and subtypes, and identifying mixed and combination codes are covered. The Histology Committee also developed three new data items that complement these rules.

The rules will be available in three formats: flowchart, matrix, and text. The different formats were developed to meet the needs of different learning styles. The rules are identical in each of the three formats. Using all three formats is not recommended. It is best to choose one format. Do not combine old rules with the new.

Web-based cancer registry education will be available on the SEER training website. Multiple primary and histology issues are covered in several modules, and continuing education units can be requested from the National Cancer Registrars Association. Recorded training webcasts will be available for viewing and provide another option for mass training of registrars who cannot attend an in-person workshop. The rules will be available in a stand-alone manual and also in the 2007 SEER Coding and Staging Manual.

Histology Committee Membership
Training

• September 8-9, 2005: Train the Trainers I
• August 24-25, 2006: Train the Trainers II
• Fall Association Meetings
• November 2006 – Web casts begin
• December 2006 – Web-based self instruction
• 2007 Spring Association Meetings
• 2007 NCRA – Training breakouts
• 2007 NAACCR – Training breakouts
Train the Trainers

- Train the Trainers Workshops – Part I & II
- Nearly 100 Trainers have been trained
  - 49 States and the District of Columbia
  - Canada, Puerto Rico, Palau
  - Commission on Cancer Staff
  - Vendor contractors
- 22 additional NPCR Trainers
- Quarterly telephone/video conferences
- [https://seer.cancer.gov/mphrules](https://seer.cancer.gov/mphrules) - Trainers Only
Welcome to the Multiple Primaries & Histology Trainers Portal

by admin — last modified Sep 06, 2005 03:23 AM

This is your trainers' website. You can download the most current versions of presentations and exercises from this site. Please do not share access to this website with anyone who has not attended the September 2005 training.
MP/H Rules Web Portal

http://seer.cancer.gov/tools/mphrules
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