CS Parking Lot: What is it, What’s in it, and Why Should I Care?

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CS PARKING LOT
WHAT IS IT?
Purpose and History of CS Mapping Team’s “Parking Lot” (1)

- “Parking Lot” -- an on-line holding area for all outstanding content issues
  - Originally text-based list of issues in MS Word developed by Mapping Team while working on CS V0203

- Merged into Squish System in early 2011
  - Interactive database
  - Developed by IMS for SEER Program
  - Customized for CS

- All issues reported since release of CS V0202 have been entered into Squish
Purpose and History of CS Mapping Team’s “Parking Lot” (2)

- Squish system supports tracking of issues through the review and resolution process:
  - Assignment to Mapper
  - Posting of proposed solution
  - Discussion by Mapping Team
  - Keying of changes into underlying XML
  - Proofreading
  - Closing of issue with documentation for release notes

- Issues are reported by CS teams, CAnswer Forum, vendors, and other CS users
Current CS Mapping Efforts – V0204

- New version, V0204, is scheduled for release in late 2011, effective for 2012 cases
- Mapping Team deadline for changes to CS schemas for V0204 is July 1, 2011
  - Includes time for review by Mapping Team, keying of changes into XML tables, and proofreading
  - Focus is on corrections related to stage derivation
  - Issues not completed by July 1 will not be included in release
  - Problems discovered during testing phase can still be corrected by Mapping Team after July 1
- Any issues not addressed in V0204 will stay in Squish system and be part of parking lot issues
CS PARKING LOT/SQUISH
WHAT’S IN IT?
What’s In It?

- As of June 3, 2011, there were 299 issues in Squish that were
  - non-conversion program related
  - not duplicates
  - not resolved
  - not included in V0203 released in 2010
- 216 were entered based on V0203
- 83 were held over from prior versions (or version is not recorded)
- These 299 issues comprised the pool of issues available to be resolved in V0204 and beyond
Limitations of These Numbers (1): Lack of Precision

- Note that a single entry in Squish may contain more than one issue or typo to be resolved
- A single entry in Squish may affect multiple schemas
Limitations of These Numbers (2): Varying Degrees of Complexity

- **EXAMPLE 1:** Simplest typo: ‘Gastrointestinal’ misspelling on Colon schema index page

- **EXAMPLE 2:** Most complex issue: Issue #221, for Merkel Cell schemas; modifying mapping to reflect clinical and pathological criteria for nodes; incorporating AJCC errata for node categories; incorporating contiguous and secondary nodal basins and bidirectional drainage
  - Affects four schemas
  - Requires changes to notes and codes for 12 tables
# Issues in Pool, by Status and Type (6/3/11)

<table>
<thead>
<tr>
<th>Status</th>
<th>Typo</th>
<th>Content Issue</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Closed and Implemented</td>
<td>96</td>
<td>66</td>
<td>162</td>
</tr>
<tr>
<td>Closed No Action Necessary</td>
<td>1</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td>Closed Implement in Subsequent Version</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Keying Reviewed</td>
<td>1</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Keyed but Needs Review</td>
<td>5</td>
<td>10</td>
<td>15</td>
</tr>
<tr>
<td>Ready for Keying</td>
<td></td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>Ready for Mapping Review</td>
<td>2</td>
<td>22</td>
<td>24</td>
</tr>
<tr>
<td>In Progress</td>
<td>3</td>
<td>68</td>
<td>72</td>
</tr>
<tr>
<td>Curator*</td>
<td></td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>108</td>
<td>191</td>
<td>299</td>
</tr>
</tbody>
</table>

*Eight (8) issues overall required curator input

V0204 will most likely include resolution to all typos and content issues that are ‘Ready for Keying’ by mid-June (status shown in blue)
# Issues in Pool, by Issue Type and ‘Affects Stage Output?’ (6/3/11)

<table>
<thead>
<tr>
<th>Issue Type</th>
<th>Affects Stage Output—No or Blank</th>
<th>Affects Stage Output—Yes</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Typos</td>
<td>108</td>
<td></td>
<td>108</td>
</tr>
<tr>
<td>Content Issues</td>
<td>149</td>
<td>42</td>
<td>191</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>257</td>
<td>42</td>
<td>299</td>
</tr>
</tbody>
</table>

Forty two of the issues in the pool for V0204 and beyond were labeled as affecting stage.

<table>
<thead>
<tr>
<th>Status</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Closed and Implemented</td>
<td>26</td>
</tr>
<tr>
<td>Closed No Action Necessary</td>
<td>1</td>
</tr>
<tr>
<td>In Progress</td>
<td>5</td>
</tr>
<tr>
<td>Keyed but Needs Review</td>
<td>3</td>
</tr>
<tr>
<td>Ready for Keying</td>
<td>4</td>
</tr>
<tr>
<td>Ready for Mapping Review</td>
<td>3</td>
</tr>
</tbody>
</table>
46 Schemas With Content Issues that Affect Stage to Varying Degrees

<table>
<thead>
<tr>
<th>Appendix</th>
<th>CysticDuct</th>
<th>IntracranialGland</th>
<th>MerkelCellVulva</th>
<th>SalivaryGland</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>BileDuctsDistal</td>
<td>Gallbladder</td>
<td>Lung</td>
<td>MycosisFungoides</td>
<td>Skin</td>
<td></td>
</tr>
<tr>
<td>BileDuctsIntraHepatic</td>
<td>GISTAppendix</td>
<td>LymphomaOcularAdnexa</td>
<td>NETColon</td>
<td>SoftTissue</td>
<td></td>
</tr>
<tr>
<td>Bone</td>
<td>GISTColon</td>
<td>MelanomaBuccalMucosa</td>
<td>NETRectum</td>
<td>SubmandibularGland</td>
<td></td>
</tr>
<tr>
<td>Breast</td>
<td>GISTEsophagus</td>
<td>MelanomaChoroid</td>
<td>ParotidGland</td>
<td>Testis</td>
<td></td>
</tr>
<tr>
<td>CarcinoidAppendix</td>
<td>GISTPeritoneum</td>
<td>MelanomaConjunctiva</td>
<td>Peritoneum</td>
<td>TongueBase</td>
<td></td>
</tr>
<tr>
<td>Colon</td>
<td>GISTRectum</td>
<td>MelanomaSkin</td>
<td>PeritoneumFemaleGen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conjunctiva</td>
<td>GistSmallIntestine</td>
<td>MerkelCellPenis</td>
<td>Prostate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CorpusCarcinoma</td>
<td>GistStomach</td>
<td>MerkelCellScrotum</td>
<td>Rectum</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CorpusSarcoma</td>
<td>HeartMediastinum</td>
<td>MerkelCellSkin</td>
<td>Retroperitoneum</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
CS PARKING LOT
WHY SHOULD YOU CARE?
Why care?

- Releases will change data
  - Re-derivation of stage outputs will be required
- Code conversions and case review will be required
  - Number of conversions in V0204 is unknown at this time
  - Case review will be required for V0204
V0204, Manual Review Required

- As of 6/6/11, only six (6) issues identified needing manual review
  1. Skin and Scrotum schemas, SSF12 (High-Risk Factors)
  2. BileDuctsIntrahepatic, CS Extension code 750
  4. CorpusSarcoma, histologies 8950 and 8951 (Mullerian or Mesodermal mixed tumor), recode with CorpusCarcinoma schema (affects about 1000 cases/yr in the US)
  5. MerkelCellVulva, CS Lymph Nodes and CS Mets at DX, selected codes
  6. Bone, SSFs 1 and 2 (2nd and 3rd dimensions of size), code 998

- All issues are low volume
Examples of Issues Still Pending, not in V0204 (1)

- Pre- and Post-Surgical Staging
  - These data items put on hold indefinitely.

- Review all SSFs for genetic tests and make them more consistent (does not affect stage)

- Review all Pancreas schemas for possible over-staging (affects stage)

- Identify correct evaluation codes for all schemas where T, N, or M derived from a combination of Extension, Nodes, and Mets tables (affects stage)
Examples of Issues Still Pending, Not in V0204 (2)

- For Lung, priority of tumor size or location for staging tumors in main bronchus or carina (affects staging)
- For Lung, possible incorrect staging when no primary tumor is found but pleural effusion present (affects staging)
- Review Esophagus regional lymph nodes by segment (affects staging)
YOU Should Report Issues

- Software issues should be reported to Joseph D. Rogers at CDC:
  - jrogers@cdc.gov

- Schema content and coding issues should be reported to CAnswer Forum—an anyone with web access can register and post questions
  - [http://cancerbulletin.facs.org/forums/content.php](http://cancerbulletin.facs.org/forums/content.php)
  - Questions are in writing
  - Status can be tracked
  - Questions are referred from Forum to CS Mapping Team when needed
CAForum and CSv2 Technical Advisory Panel (CTAP) Workflow

- CTAP has disease-specific teams of volunteers, with CS Mapping Team members participating (e.g., Breast team, Head and Neck team)

- CAnswer Forum questions are automatically sent to appropriate CTAP team
  - CTAP team collaborates to create consensus answer
  - When needed, CTAP team forwards question to Mapping Team, Education Team, IT Team, or CS Edits Workgroup for consultation
  - Answer is posted on CAnswer Forum

- CAnswer Forum answers automatically sent to questioner and are publicly available to registered users
Reliability Study

- Will be conducted September 2011
- Goal of 2000 participants
- Hosted on SEER Reliability website, with online data entry
- 19 total schemas, 40 cases, 10 cases for each participant
- Extensive demographic information will be collected to support data analysis by type and length of registrar experience

The CS teams encourage you to strongly support participation by central registry staff
Vendor Survey

- Collaborative Stage Work Group Vendor Survey opened in May
- **Purpose**
  - To assist CS Work Group in formulating timeline for future releases
  - To help find balance between necessary schema updates and needs of registry community
- **Survey site:**
- Only aggregate information will be released
- **Software providers are urged to participate!**
Active Mapping Team Members as of June 2011

Donna M. Gress, RHIT, CTR, AJCC, Team Lead

Iris Chilton, CHIM, CTR, Alberta Health Services – Cancer Care

Elaine Collins, MA, RHIA, CTR, Minnesota Cancer Surveillance System

April Fritz, RHIT, CTR, A. Fritz and Associates

Peter Kim, Northrop Grumman under contract to CDC’s NPCR

Mary Mroszczyk, BS, CTR, Massachusetts Cancer Registry

Lynn Ries, MS, under contract to NCI’s SEER Program

Jennifer Ruhl, RHIT, CCS, CTR, NCI’s SEER Program

Jennifer Seiffert, MLIS, CTR, Northrop Grumman under contract to CDC’s NPCR

Colleen Sherman, RHIA, CTR, New York State Cancer Registry

Leon Sun, MD, PhD, NCI’s SEER Program

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