

This document shows the changes that were made to the SSDI manual and the Grade manual for the SEER*RSA version 3.1 release on October 1, 2023

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Table 1: New SSDIs, Version 3.1

Data Item # and Description	Schema(s)	Comments
3964: Brain Primary Tumor Location	09721: Brain (2023+)	This data item distinguishes between the pons and other subsites that are coded under brain stem (C717), diagnosis years 2024+ only
1975: Derived Summary Grade	All Schemas	This will be a derived data item based on the highest grade between grade clinical and grade pathological for 2018+. This derivation will take place at the central registry level only. No registrar input needed for this data item

Table 2: Changes to Schemas

Schema	Applicable Years	Comments
NET Stomach Version 9	2024+	<p>AJCC's NET Stomach, Version 9, will be used with 2024+ diagnosis.</p> <p>There are now two EOD NET Stomach schemas in SEER*RSA</p> <ul style="list-style-type: none"> • EOD NET Stomach 8th: 2018-2023 (Schema ID: 00290) • EOD NET Stomach V9: 2024+ (Schema ID: 09290) <p>Software will automatically take you to the correct NET Stomach schema based on the date of diagnosis</p>
NET Duodenum Version 9	2024+	<p>AJCC's NET Duodenum, Version 9, will be used with 2024+ diagnosis.</p> <p>There are now two EOD NET Duodenum schemas in SEER*RSA</p> <ul style="list-style-type: none"> • EOD NET Duodenum 8th: 2018-2023 (Schema ID: 00301) • EOD NET Duodenum V9: 2024+ (Schema ID: 09301) <p>Software will automatically take you to the correct NET Duodenum schema based on the date of diagnosis</p>
NET Ampulla of Vater Version 9	2024+	<p>AJCC's NET Ampulla of Vater, Version 9, will be used with 2024+ diagnosis.</p> <p>There are now two EOD NET Ampulla of Vater schemas in SEER*RSA</p> <ul style="list-style-type: none"> • EOD NET Ampulla of Vater 8th: 2018-2023 (Schema ID: 00302) • EOD NET Ampulla of Vater V9: 2024+ (Schema ID: 09302) <p>Software will automatically take you to the correct NET Ampulla of Vater schema based on the date of diagnosis</p>
NET Jejunum and Ileum Version 9	2024+	<p>AJCC's NET Jejunum and Ileum, Version 9, will be used with 2024+ diagnosis.</p> <p>There are now two EOD NET Jejunum and Ileum schemas in SEER*RSA</p> <ul style="list-style-type: none"> • EOD NET Jejunum and Ileum 8th: 2018-2023 (Schema ID: 00310) • EOD NET Jejunum and Ileum V9: 2024+ (Schema ID: 09310) <p>Software will automatically take you to the correct NET Jejunum and Ileum schema based on the date of diagnosis</p>

Schema	Applicable Years	Comments
NET Appendix Version 9	2024+	<p>AJCC’s NET Appendix, Version 9, will be used with 2024+ diagnosis.</p> <p>There are now two EOD NET Appendix schemas in SEER*RSA</p> <ul style="list-style-type: none"> • EOD NET Appendix 8th: 2018-2023 (Schema ID: 00320) • EOD NET Appendix V9: 2024+ (Schema ID: 09320) <p>Software will automatically take you to the correct NET Appendix schema based on the date of diagnosis</p>
NET Colon and Rectum Version 9	2024+	<p>AJCC’s NET Colon and Rectum, Version 9, will be used with 2024+ diagnosis.</p> <p>There are now two EOD NET Colon and Rectum schemas in SEER*RSA</p> <ul style="list-style-type: none"> • EOD NET Colon and Rectum 8th: 2018-2023 (Schema ID: 00330) • EOD NET Colon and Rectum V9: 2024+ (Schema ID: 09330) <p>Software will automatically take you to the correct NET Colon and Rectum schema based on the date of diagnosis</p>
NET Pancreas Version 9	2024+	<p>AJCC’s NET Pancreas, Version 9, will be used with 2024+ diagnosis.</p> <p>There are now two EOD NET Pancreas schemas in SEER*RSA</p> <ul style="list-style-type: none"> • EOD NET Pancreas 8th: 2018-2023 (Schema ID: 00340) • EOD NET Pancreas V9: 2024+ (Schema ID: 09340) <p>Software will automatically take you to the correct NET Pancreas schema based on the date of diagnosis</p> <p>Histology 8272 with primary sites for Pancreas (C250-C259) is currently in the Pancreas Schema and is not eligible for AJCC staging.</p> <p>For NET Pancreas Version 9, this histology will be moved to the NET Pancreas Schema and will be eligible for AJCC staging.</p>

Schema	Applicable Years	Comments
Vulva Version 9	2024+	<p>AJCC's Vulva, Version 9, will be used with 2024+ diagnosis.</p> <p>There are now two EOD Vulva schemas in SEER*RSA</p> <ul style="list-style-type: none"> • EOD Vulva 8th: 2018-2023 (Schema ID: 00500) • EOD Vulva V9: 2024+ (Schema ID: 09500) <p>Software will automatically take you to the correct Vulva schema based on the date of diagnosis</p> <p>Note: For Schema ID 09500 only (2024+), new SSDI: p16 p16 is not applicable for cases diagnosed 2018-2023</p> <p>Histology 8041 with primary sites for Vulva (C510-C519) is currently in the Merkel Cell Schema For Vulva Version 9, this histology will be moved to the Vulva Schema and will be eligible for AJCC staging</p> <p>Histologies 8982, 9064 with primary sites for Vulva (C510-C519) are currently in the Soft Tissue Abdomen and Thoracic Schema and are not eligible for AJCC staging. For Vulva Version 9, these histologies will be moved to the Vulva Schema and will be eligible for AJCC staging.</p>

Table 3: Changes to SSDI Manual (General Instructions), Version 3.1

Manual Section	Page	Original Text	Updated Text
None			

Table 4: Changes to current SSDIs, Version 3.1

Schema ID Name	Data Item # and Description	Original Text	Updated Text
<u>SEER Registries Only: Head and Neck Schemas</u>	3700: SEER Site-Specific Fact 1		<p><u>For SEER Registries Only</u></p> <p>Note: This data item has changed from a one digit field to a two digit field, along with updated instructions.</p> <p>Older data has been converted to the new format (no registrar input needed)</p> <p>See SEER*RSA or the SEER Manual for the revised coding instructions and codes.</p> <p>Reminder: Any questions regarding this data item are to be sent to Ask SEER Registrar</p>

Schema ID Name	Data Item # and Description	Original Text	Updated Text
00200: Colon and Rectum	3823: Circumferential Resection Margin	<p>Note 3: The following guidelines were developed for the coding of surgery codes in relation to CRM. These guidelines were confirmed by the CAP Cancer Committee</p> <ul style="list-style-type: none"> • For Colon primaries, surgery of primary site must be coded as 30-80 <ul style="list-style-type: none"> ○ If surgery of primary site is 00-29, then CRM must be coded as XX.7 • For Rectal primaries, surgery of primary site must be coded as 27, 30-80 <ul style="list-style-type: none"> ○ If surgery of primary site is 00-26 or 28, then CRM must be coded as XX.7 	<p>Note 3: The following guidelines were developed for the coding of surgery codes in relation to CRM. These guidelines were confirmed by the CAP Cancer Committee.</p> <ul style="list-style-type: none"> • For Colon primaries, surgery of primary site must be a surgical resection <ul style="list-style-type: none"> ○ If surgery of primary site is not a surgical resection (i.e. polypectomy), then CRM must be coded as XX.7 • For Rectal primaries, surgery of primary site must be coded as excisional biopsy, transanal excision or surgical resection <ul style="list-style-type: none"> ○ For excisional biopsy, or transanal procedures, only the peritonealized portion of the rectum is where you can get the CRM <ul style="list-style-type: none"> ▪ If the non-peritonealized portion of the rectum is involved or it's unknown if the peritonealized portion of the rectum is involved, code XX.7. If surgery of primary site is not one of these, then CRM must be coded as XX.7 ▪ If surgery of primary site is not an excisional biopsy, transanal excision or surgical resection, code XX.7 <p>Note: The specific surgery codes were removed since there are different surgery codes now based on the year of diagnosis</p>

Schema ID Name	Data Item # and Description	Original Text	Updated Text
09210: Anus (2023+) 09520: Cervix (2021+)	3956: p16	Note 3: This data item must be based on testing results for p16 overexpression. A statement of a patient being HPV positive or negative is not enough to code this data item Testing for HPV by DNA, mRNA, antibody, or other methods should not be coded in this data item Do not confuse p16 with HPV 16, which is a specific strain of virus	Note 3: This data item must be based on testing results for p16 overexpression. Testing for HPV by DNA, mRNA, antibody, or other methods should not be coded in this data item Do not confuse p16 with HPV, which is a specific strain of virus. A statement of a patient being HPV positive or negative is not enough to code this data item.
00480: Breast	3922: Response to Neoadjuvant Therapy	Code 9: Not documented in medical record Response to neoadjuvant therapy not assessed or unknown if assessed	Code 9: Not documented in medical record Response to neoadjuvant therapy not assessed or unknown if assessed Unknown if neoadjuvant therapy done
00480: Breast	3922: Response to Neoadjuvant Therapy	Note 1: Clinician statement of Response to Neoadjuvant Therapy ("treatment effect") must be used to code this data item. Note 2: The clinician's statement may be based on pathology reports, imaging, and other clinical findings. Note 3: Code 1 is to be used only when the physician states the response is "total" or "complete."	Note 1: A statement from the managing physician for Response to Neoadjuvant Therapy ("treatment effect") must be used to code this data item. Note 2: This data item should not be coded based on the pathological, radiological or imaging findings. This data item should only be coded based on the managing physician's overall interpretation of the results. Note 3: Code 1 is to be used only when the managing physician states the response is "total" or "complete."
09500: Vulva (2024+)	3956: p16		p16 is now applicable for Vulva cases, for Version 9 only (2024+)

Schema ID Name	Data Item # and Description	Original Text	Updated Text
00528, 00530, 00541, 00542: Cervix Sarcoma and Corpus Schemas	3899: Number of Examined Para-aortic Nodes	<p>Note 4: For the following</p> <ul style="list-style-type: none"> • Code 00 when no lymph nodes are examined by FNA, core biopsy or removal of lymph node(s) (e.g., sentinel lymph node biopsy or lymph node dissection) <ul style="list-style-type: none"> ○ If a lymph node dissection is done and only pelvic lymph nodes are assessed, or only “nodes” are documented without specifying pelvic or para-aortic, code to 00 	<p>Note 4: For the following</p> <ul style="list-style-type: none"> • Code to 00 when no lymph nodes are removed (including FNA, core biopsy, sentinel lymph node biopsy or lymph node dissection) and there is no mention of para-aortic nodes <ul style="list-style-type: none"> ○ Para-aortic nodes are not routinely examined unless there is suspected involvement ○ If lymph nodes are removed and only pelvic lymph nodes are assessed, or only "nodes" are documented, code to 00
00528, 00530, 00541, 00542: Cervix Sarcoma and Corpus Schemas	3900: Number of Examined Pelvic Nodes	<p>Note 4: For the following</p> <ul style="list-style-type: none"> • Code 00 when no lymph nodes are examined by FNA, core biopsy or removal of lymph node(s) (e.g., sentinel lymph node biopsy or lymph node dissection) <ul style="list-style-type: none"> ○ If a lymph node dissection is done and only “nodes” are documented without specifying pelvic or para-aortic, assume they are pelvic 	<p>Note 4: For the following</p> <ul style="list-style-type: none"> • Code 00 when no lymph nodes are removed (including FNA, core biopsy, sentinel lymph node biopsy or lymph node dissection) <ul style="list-style-type: none"> ○ If lymph nodes are removed and only "nodes" are documented without specifying pelvic or para-aortic, assume they are pelvic nodes

Schema ID Name	Data Item # and Description	Original Text	Updated Text
00528, 00530, 00541, 00542: Cervix Sarcoma and Corpus Schemas	3899: Number of Examined Para-aortic Nodes 3900: Number of Examined Pelvic Nodes	Code X9: <ul style="list-style-type: none"> • Not documented in medical record • Cannot be determined, indeterminate if examined para-aortic nodes present • No lymph node dissection performed • Para-aortic lymph nodes not assessed or unknown if assessed 	Code X9: <ul style="list-style-type: none"> • Not documented in medical record • Cannot be determined, indeterminate if examined para-aortic nodes present • Para-aortic lymph nodes not assessed or unknown if assessed <p>Note: “No lymph node dissection performed” was removed</p>
00528, 00530, 00541, 00542: Cervix Sarcoma and Corpus Schemas	3901: Number of Positive Para-aortic Nodes 3902: Number of Positive Pelvic Nodes	Note 6: Code X9 if no lymph node dissection is performed. <ul style="list-style-type: none"> • If only a FNA or core biopsy is done and it is positive, then code X6 • If only a FNA or core biopsy is done and it is negative, then code X9 • Code X9 when no lymph nodes are removed 	Note 6: Code X9 if no lymph nodes are removed <ul style="list-style-type: none"> • If only a FNA or core biopsy is done and it is positive, then code X6 • If only a FNA or core biopsy is done and it is negative, then code X9
00528, 00530, 00541, 00542: Cervix Sarcoma and Corpus Schemas	3901: Number of Positive Para-aortic Nodes 3902: Number of Positive Pelvic Nodes	Code X9: <ul style="list-style-type: none"> • Not documented in medical record • Cannot be determined, indeterminate if positive pelvic nodes present • No lymph node dissection performed • Pelvic lymph nodes not assessed or unknown if assessed 	Code X9: <ul style="list-style-type: none"> • Not documented in medical record • Cannot be determined, indeterminate if positive pelvic nodes present • No lymph nodes removed • Pelvic lymph nodes not assessed or unknown if assessed

Schema ID Name	Data Item # and Description	Original Text	Updated Text
00600: Kidney Parenchyma	3864: Invasion Beyond Capsule	<p>Note 3: Perinephric/sinus fat invasion should be confirmed microscopically and is invasion into fat by tumor cells, with or without desmoplastic reaction, and vascular invasion into perinephric/sinus soft tissue.</p> <ul style="list-style-type: none"> Synonyms include: renal hilum, renal sinus fat, medial invasion 	<p>Note 3: Perinephric/sinus fat invasion should be confirmed microscopically and is invasion into fat by tumor cells, with or without desmoplastic reaction, and vascular invasion into perinephric/sinus soft tissue.</p> <ul style="list-style-type: none"> Synonyms include renal sinus fat, medial invasion Do not code invasion of renal hilum in this data item. Invasion of the renal hilum is invasion of vessels, nerves, lymphatics, and/or ureter before they enter the kidney parenchyma. If the only information you have is that the renal hilum is involved, code to 9 (unknown)
09721: Brain (2023+) and 09722: CNS Other (2023+)	3816: Brain Molecular Markers		<p>Codes 10-23 added to incorporate new terms for histologies 9385/3, 9396/3, 9421/1, 9430/3, 9500/3 based on the WHO CNS Blue Book, released 2022</p> <p>Code 85 updated to include all histologies that are applicable for this data item</p> <ul style="list-style-type: none"> If not one of these histologies, code to 85

Table 5: Changes to Grade Manual, Version 3.1

Grade Table #	Schemas	Original Text	Updated Text
General Instructions	All		General instructions regarding coding Autopsy grading added to manual Included in section: "General Instructions for the Time Frames for Grade"
13	Corpus Carcinoma and Carcinosarcoma	None	The following note was added to all Grade tables for this schema. Note number may be different depending on the grade table Note 3: For endometrioid carcinomas only <ul style="list-style-type: none"> If "low grade" is documented, code 2 (FIGO Grade 2) If "high grade" is documented, code 3 (FIGO Grade 3)