

NPCR Education and Training Series (NETS) Module 4: The Value of Accurate Text in Cancer Registry

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National Program of Cancer Registries
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www.cdc.gov/cancer/npcr



The Value of Accurate Text in Cancer Registry



Using 2007 Multiple Primary and Histology Coding Rules



Purpose of Standardized Data

- Consistency
 - Monitor patient trends
 - Observe referral patterns
 - Allocate resources



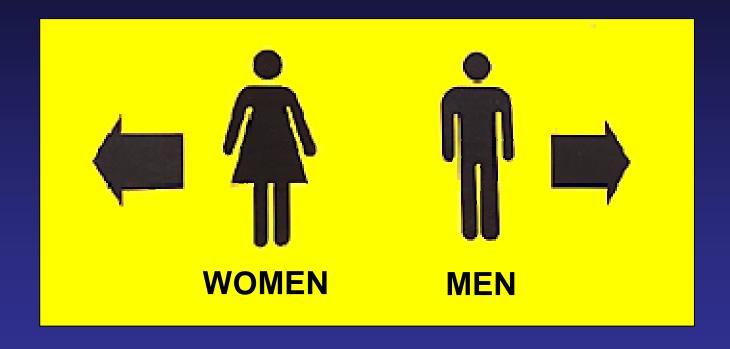
Importance of Standardized Data

Data Collection

- Required data sets
- Research
- Marketing
- Future data requests
- Special studies
- Avoiding "unknowns"



Codes vs. Supporting Text





Resolving Coding Discrepancies

- Compare information
 - Hospital #1 Patient J.R. Race: 01 White
 - Hospital #2 Patient J.R. Race: 02 Black
 - Hospital #3 Patient M.P. C504 2 Left
 - Hospital #4 Patient M.P. C504 1 Right



NAACCR Standards – Supporting Text

- ◆ Standard 3.2.2 Data Text
 - Text information should be:
 - included in the registry's dataset
 - transmitted along with codes when tumor records are shared with other registries.



Ambiguous Terms¹

- Diagnostic of cancer
 - Consistent with
 - Favor (s)
 - Most likely
 - Presumed
 - Probable
 - Suspect (ed)
 - Suspicious (for)
 - Typical (of)



¹ www.seer.cancer.gov

Ambiguous Terms¹

Cases Diagnosed 1/1/1998 or later

- Diagnostic of cancer
 - Appears
 - Comparable with
 - Compatible with
 - Malignant appearing



¹ www.seer.cancer.gov

Ambiguous Terms²

- NOT diagnostic of cancer
 - Equivocal
 - Possible
 - Questionable
 - Suggests
 - Worrisome
 - Cannot be ruled out
 - Rule (d) out
 - Potentially malignant



² www.seer.cancer.gov

Purpose of Text

- Defensive abstracting
- Unusual occurrences
- Edit check verification
- Recoding audits
- Researcher use
- Facility use
- Re-abstraction of historical data



Purpose of Text

- Defensive abstracting
- Unusual occurrences

Edit check verification



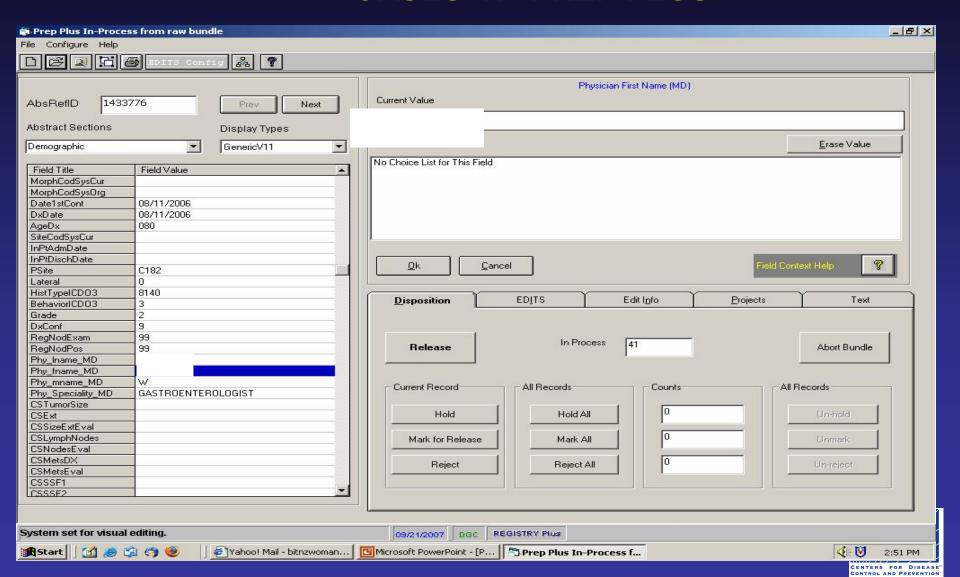
Purpose of Text

- Recoding audits
- Researcher use

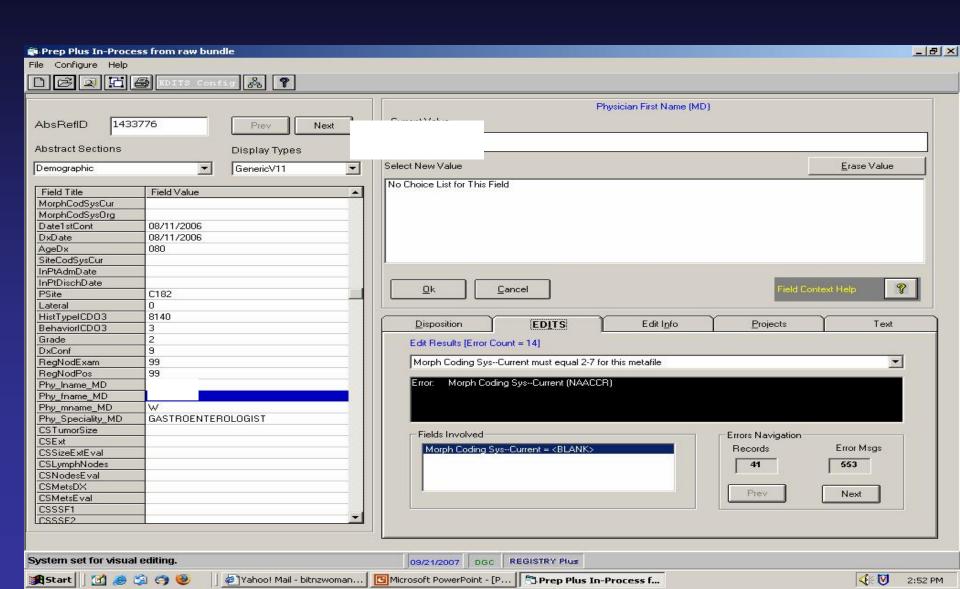
- Facility use
- Re-abstraction of historical data



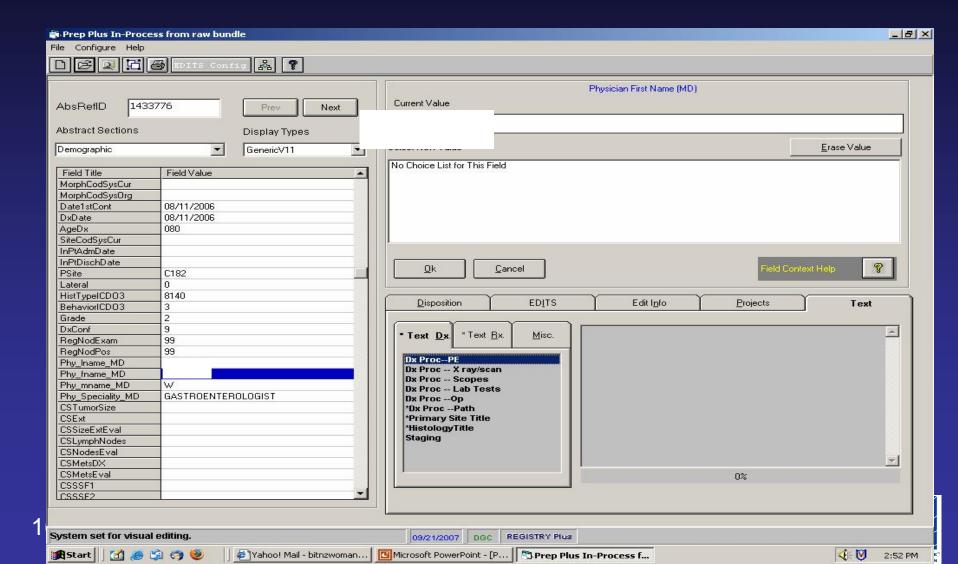
MCR PERFORMS 100% VISUAL REVIEW OF ALL CASES IN "PREP PLUS"



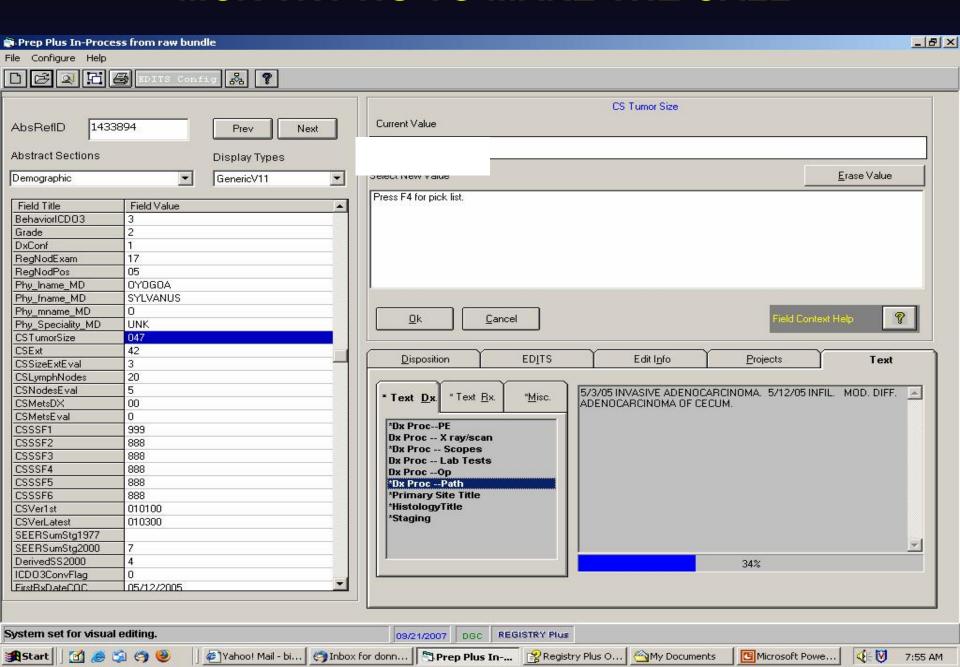
MCR CHECKING THE ERRORS

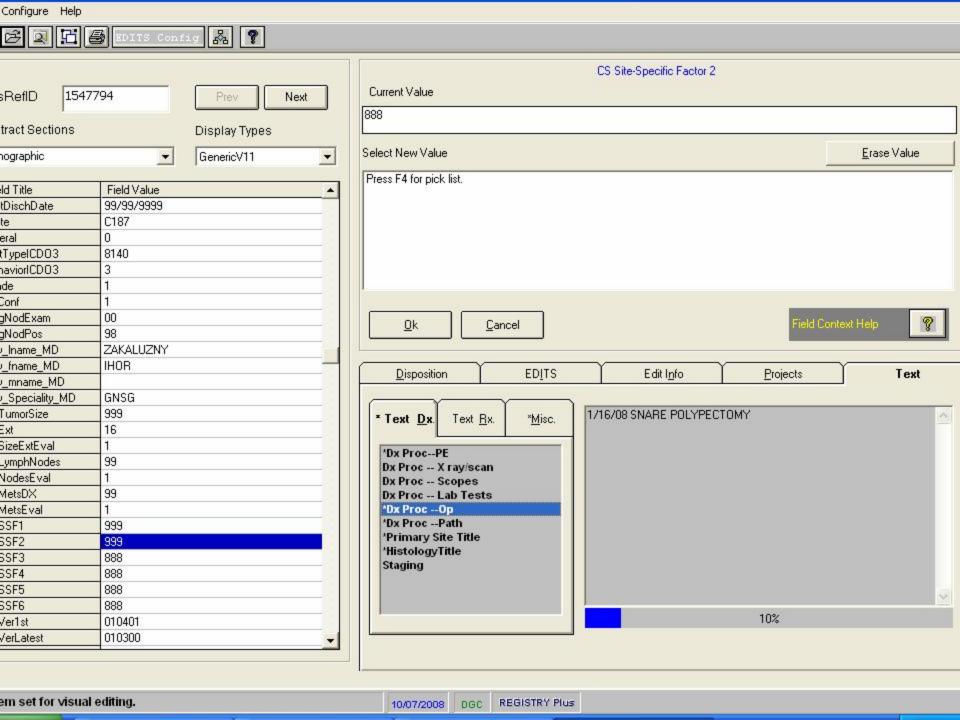


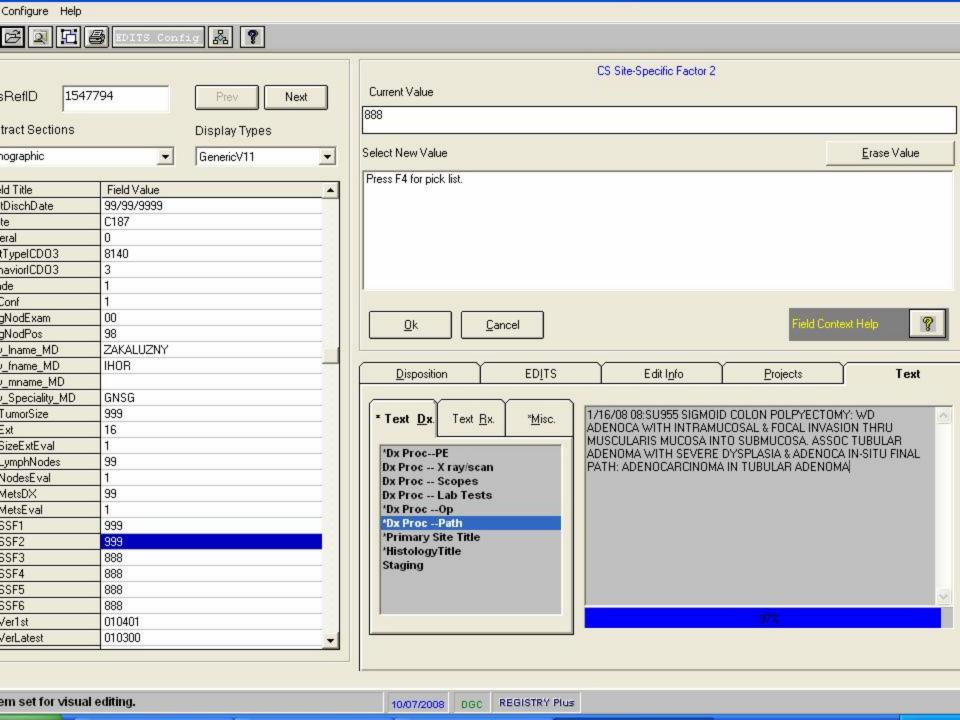
LOOKING FOR TEXT FIELDS IN PREP PLUS



MCR TRYING TO MAKE THE CALL







Validating Codes with Text

- What is important?
- Defines who, what, when and where
- Example:
 - Description of code(s)
 - 2/10/07 Date of diagnosis
 - ♦ BF 40 y/o black, non-Hispanic female
 - C504 Upper outer quadrant of breast
 - ♦ /2 Behavior code for in situ
 - 8500 Histology code infil ductal ca



Supporting Text

- Date of birth (year)
- Sex
- Race
- Hispanic origin
- Tumor markers
- Primary site
- Laterality
- Histology/behavior
- Grade/differentiation



Supporting Text

- ◆ Tumor size
- CS Extension
- CS LNS
- Regional LNS positive and examined
- CS Mets at Dx
- ♦ Site-specific factors 1–6
- Operative reports
- Treatment modalities
- Follow-up and recurrence



- Patient demographic codes:
 - Race code: 02
 - Hispanic code: 0
 - Sex code: 2
- Patient demographic text: "B/F, non Hispanic"



- Cancer ID and stage codes
 - Primary site: C341
 - Histology: 8140
 - Behavior: /3
 - Grade: 2
 - Tumor size: 020
 - Laterality: 1
 - Regional LNs positive: 00
 - Regional LNs examined: 03



- Cancer ID and stage pathology text
 - 8/7/2007: Lobectomy of the right upper lobe lung reveals a moderately differentiated invasive adenocarcinoma measuring 2cm in greatest diameter. Three hilar lymph nodes are removed and are negative for carcinoma. Margins are negative.



Abbreviated text :

 8/7/2007: Lobectomy RUL lung: mod diff inv adenoca. TS 2cm. 3 hilar LN removed, neg for ca. Margins neg.



- Procedure: 30 Lobectomy
- Primary site: C341 RUL lung
- Histology: 8140 adenoca
- Behavior: /3 malignant
- Grade: 2 MD
- Tumor size: 020 2cm
- Laterality: 1 rt
- Regional LNS positive: 00 00/03
- Regional LNS examined: 03 00/03
- Margins: 0 margins neg.



Facility-specific Documentation

- Facility-specific information
 - Medical record number: 548528
 - Date of admission: 8/3/2007
 - Date of discharge: 8/8/2007
 - Hospital number: 625007- Medical Center
 - Class of case: 1 Dx and tx here
 - Insurance: 60 Medicare



- First course treatment information
 - Surgery primary site: 22 Lumpectomy
 - Scope LNS surgery: 2 SLN Bx
 - Chemotherapy: 87 Refused
 - Radiation therapy: 7 Refused
 - Date hormone tx: 07/10/07
 - Hormone therapy: 01 Administered



- Follow-up and recurrence
 - Type last tumor follow-up: 01 Readmit
 - Vital status: 1 Alive
 - Recurrence type: 00 None/disease-free



NAACCR-Approved Abbreviations³

- Adenoca: Adenocarcinoma
- Ant: Anterior
- Bil: Bilateral
- Ca: Carcinoma
- Cont: Continue
- Dz: Disease
- Dx: Diagnosis
- Exc: Excision



³ www.naaccr.org

NAACCR-Approved Abbreviations

- ◆ Lg Large
- Mets Metastatic, Metastases
- ◆ Rx Treatment
- ♦ Sx Symptoms
- **♦** Tx − Treatment
- ♦ W/ With
- ♦ W/O Without
- ♦ W/U Workup



NAACCR-Approved Symbols

- @ At
- / Comparison
- Less than, decrease
- = Equals
- Series of the series of the
- Negative
- + Positive
- x Times



Context-Sensitive Abbreviations

- Use carefully
 - AP Anteroposterior; Abdominal perineal
 - BM Bone marrow; Bowel movement
 - CA Carcinoma; Calcium
 - MIN Minimum; Minute
 - ML Middle lobe; Milliliter
 - MM Multiple myeloma; Millimeter
 - PAP Papillary; Papanicolaou smear
 - PT Patient; Physical therapy
 - RT Right; Radiation therapy
 - SCC Small cell carcinoma; Squamous cell carcinoma

◆ Codes

• Race	01
Sex	2
Primary site	C343
Histology/Behavior	8070/3
• Grade	3
Surgery	30
Chemotherapy	03
Follow-up cancer status	1



- **♦** Text
 - Race: black
 - Sex: female
 - Primary site: upper outer quadrant breast
 - Histology: ductal carcinoma, in situ
 - Laterality: left
 - Surgery: lumpectomy
 - Hormone: hormone therapy administered
 - Cancer status: no evidence of this tumor



- Required fields with text
 - Primary site: C341 lung right upper lebe RUL lung
 - Histology: 8140 adenocarcinema
 - Behavior: /3 malignant
 - Grade: 2 moderately differentiated
 - Tumor size: 020 TS 2cm in size
 - Laterality: 1 right Rt
 - Regional LNS positive: 00 none
 - Regional LNS examined: 03 three



Final abstract

- Codes and text provide information on the patient and the patient's disease
- Either should derive the same outcome
- Text should be concise and pertinent
- Use only approved abbreviations
- Codes provide universal language for data retrieval



Helpful Hints for Abstracting

- Document the information that led to the assignment of a particular code
 C619 – Prostate gland
- Document in the appropriate area in the abstract
- Do not duplicate information
- Document what you know; do not make assumptions



Visual Editing

- Self-editing
 - Reread your abstract without the supporting documents
- Central registry editing
 - Visual editing
 - Major versus minor errors
 - Major error: 8140 instead of 8500
 - Minor error: Colon CS ext 15 instead of 14



Visual Editing

- Can improve abstracting skills and improve data quality through
 - Self-editing
 - Central registry editing
 - Departmental editing



Summary

Provide text for all required fields using approved abbreviations to support codes being documented within the abstract.

Perform visual editing of the abstract to validate the correct use of the codes and text provided.



IN CLOSING:

C.Y.A.



C.Y.A. MEANS:

C= COVER

Y= YOUR

A= ABSTRACT

DOCUMENT...DOCUMENT...DOCUMEN



For information about CDC's
Cancer Prevention and Control Programs
and the
National Program of Cancer Registries

Please visit

www.cdc.gov/cancer/npcr





