

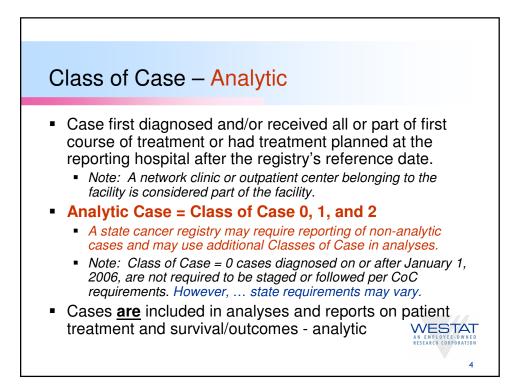


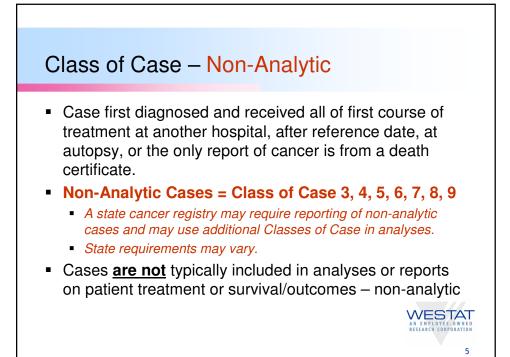
- **Coding Structure** used to describe the nature of involvement of the facility in the care of the patient.
- Hospital Reporters always code this data item
  - Commission on Cancer Required
  - MCR Required for Hospitals
- Non-Hospital Reporters required to code as available
  - Class of Case = 7 for Labs
  - Class of Case = 2 for XRT
  - As available physicians, ambulatory surgery, etc.

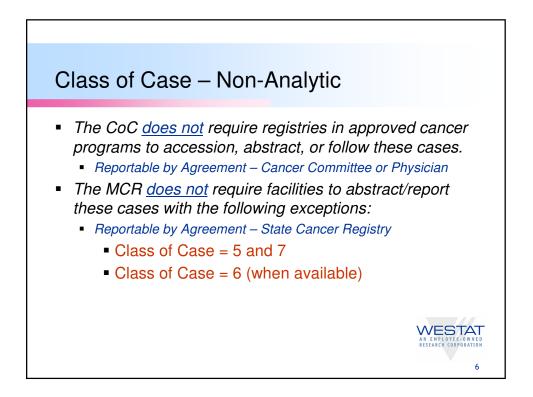
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- Must provide dates and text
- MCR will assign codes







## Reportable by Agreement Cases

- Reportable by Agreement may Include:
  - Non-analytic Class of Case = 3, 4, 5, 6, 7, 8, or 9
  - State Cancer Registry Requirement COC = 5, 7
  - Cancer Committee Decision or Physician Agreement COC = 6
- Examples:
  - Patients seen in consultation to confirm diagnosis/treatment plan.
  - Patients receiving transient care therapy started elsewhere.
  - Carcinoma in situ of the cervix (CIS) and intraepithelial neoplasia, grade III of cervix or prostate (CIN III, PIN III)

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- Note: VINIII, VAIN III, and AIN III are reportable to MCR
- Primary skin tumors (C44.\_)
  - Histology codes 8000–8110.

