National Program of Cancer Registries
Comparative Effectiveness Research Data Set

2011 CER Restricted Access Data Dictionary

Version Date July 2014

Centers for Disease Control and Prevention (CDC)
National Center for Chronic Disease Prevention and Health Promotion
Division of Cancer Prevention and Control
Cancer Surveillance Branch

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Overview

The purpose of this document is to define data standards for data items included in the combined CDC's National Program of Cancer Registries (NPCR) Cancer Surveillance System (CSS) and the CDC Comparative Effectiveness Research (CER) data set. Some of these variables are routinely collected through NPCR and are defined by the North American Association of Central Cancer Registries (NAACCR). In addition, there were other non-NAACCR standard data items that were collected solely through the CER Project, funded by the American Recovery and Reinvestment Act of 2009. The CER project included the collection of non-NAACCR standard data items for four cancers: Breast, Chronic Myeloid Leukemia (CML), Colon, and Rectum. This data set includes NPCR + CER data from ten specialized registries: Alaska, California*, Colorado, Florida*, Idaho, Louisiana, New Hampshire, North Carolina, Rhode Island, and Texas which were funded to participate in the CER data collection activities. Each variable summary in this data dictionary contains a description, rationale, coding information, notes, and a reference section in addition to considerations for use for some variables. Please note the coding information included in this document focuses on the CER cancers. However, a reference section is provided for more information on additional sites/histologies not provided in this document. All data items were collected as defined in the protocol and data dictionary for cases diagnosed January 1, 2011, through December 31, 2011.

*California and Florida cases were collected from catchments areas (specified below with FIPS codes) and not from the entire state.

California
Alpine = 003
Amador = 005
Calaveras = 009
El Dorado = 017
Nevada = 057
Placer = 061
Sacramento = 067
San Joaquin = 077
Sierra = 091
Solano = 095
Sutter = 101
Yolo = 113
Yuba = 115

Florida
Broward = 011
Hillsborough = 057
Miami-Dade = 086
Orange = 095
Palm Beach = 099

Cautions for Use

- The suppression rule is <16 cases for the time period based on rate stability. When the numbers of cases used to compute the incidence rates are small, those rates tend to have poor reliability. Therefore, to discourage misinterpretation and misuse of counts, rates, and trends that are unstable because of the small number of cases or deaths, these statistics are not shown in tables and figures if the counts are less than 16 for the time period. A count of less than approximately 16 in a numerator results in a standard error of the rate that is approximately 25% or more as large as the rate itself. Equivalently, a count of less than approximately 16 results in the width of the 95% confidence interval around the rate being at least as large as the rate itself. These relationships were derived under the assumption of a Poisson process and with the standard population age distribution close to the observed population age distribution.

- Another important reason for employing a cell suppression threshold value is to protect the confidentiality of patients whose data are included in a report by reducing or eliminating the risk of identity disclosure. The cell suppression threshold value of 16 is recommended to protect patient confidentiality given the low level of geographic and clinical detail provided. More information can be found at:

    1. Federal Committee on Statistical Methodology. Report on Statistical Disclosure Limitations Methodology (Statistical Working Paper 22). Washington, DC: Office of Management and Budget; 2005. Available at http://www.fcsm.gov/working-papers/spwp22.html.
    2. Doyle P, Lane JI, Theeuwes JM, Zayatz LM. Confidentiality, Disclosure, and Data Access: Theory and Practical Applications for Statistical Agencies. Amsterdam: Elsevier Science; 2001.

- Note that data are submitted to NPCR CSS each year and the additional CER data items were collected for 2011 diagnosed cases only. CER cases may be underreported in this first CSS + CER data set but subsequent files should improve upon that underreporting.

- Stage at diagnosis, or the extent to which the cancer has spread at the time it was originally diagnosed, is recorded using the Collaborative Stage Data Collection System to derive AJCC TNM 7th Edition and Summary Stage 2000.

- At least 97% of the registry's records passed a set of single-field and inter-field computerized edits. Computerized edits are computer programs that test the validity and logic of data components. For example, if (a) a patient received a diagnosis of cancer in 2011, (b) the patient's age was reported as 80 years, and (c) the patient's year of birth was reported as 1942, a computerized edit could, without human intervention, identify these components as incompatible. The computerized edits applied to the data in this report are incorporated into NAACCR standards (http://www.naaccr.org) and into the EDITS software designed and maintained by CDC (http://www.cdc.gov/cancer/npcr/tools/edits/).

Section I: Record ID and Demographics

Record Type

Alternate Name	Item #	Length	Source of Standard	Column #
I10_RecordType	10	1	NAACCR	1-1

Description

Generated field that identifies which of the seven NAACCR data exchange record types is being used in a file of data exchange records. A file should have records of only one type.

Codes

I **I**ncidence-only record type (nonconfidential coded data)
Length = 3339

C **C**onfidential record type (incidence record plus confidential data)
Length = 5564

A Full case **A**bstract record type (incidence and confidential data plus text summaries; used for reporting to central registries)
Length = 22824

U Correction/**U**pdate record type (short format record used to submit corrections to data already submitted)
Length = 1543

M Record **M**odified since previous submission to central registry (identical in format to the "A" record type)
Length = 22824

L Pathology **L**aboratory

Considerations for Use

This variable would normally not be used in any analysis.

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Patient ID Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
PID	20	8	Reporting Registry	42-49

Description
Unique number assigned to an individual patient by the central registry. The central registry will assign this same number to all of the patient's subsequent tumors (records). Each central registry will assign their unique Patient ID Number. NPCR assigns a new unique number to each Patient ID Number prior to data release for confidentiality reasons. In combination with state at diagnosis, this should uniquely identify a person.

Rationale
Provides the central registry with a unique identification number that will link all records (multiple tumors) for the same patient.

Considerations for Use
None noted.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Registry ID

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I40_RegistryID	40	10	NAACCR	30-39

Description
A unique code that represents the ten specialized central cancer registries as the data transmission source.

Rationale
Used to track data submission flow and to resolve transmission issues.

Codes

0000009100	Alaska State Cancer Registry
0000009700	California Cancer Registry
0000008300	Colorado Central Cancer Registry
0000003500	Florida Cancer Data System
0000008100	Cancer Data Registry of Idaho
0000007300	Louisiana Tumor Registry
0000000300	New Hampshire State Cancer Registry
0000002500	North Carolina Central Cancer Registry
0000000600	Rhode Island Cancer Registry
0000007700	Texas Cancer Incidence Reporting System

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

NAACCR Record Version

Alternate Name	Item #	Length	Source of Standard	Column #
I50_RecordVer	50	3	NAACCR	17-19

Description
This item applies only to record types I, C, A, and M. Code the NAACCR record version used to create the record. The correction record (U) has its own record version data item.

Rationale
The NAACCR Layout version is necessary to communicate to the recipient of data in NAACCR form where the various items are found and how they are coded. It should be added to the record when the record is created.

Codes
120 2010 Version 12
121 2011 Version 12.1
122 2012 Version 12.2

Considerations for Use
This variable would normally not be used in any analysis.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Address at Dx – State

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I80_StateDx	80	2	CoC	145-146

Description
USPS abbreviation for the state in which the patient resides at the time the reportable tumor is diagnosed. If the patient has multiple primaries, the state of residence may be different for each tumor.

Codes (in addition to USPS abbreviations)
US Resident of United States, NOS (state/commonwealth/territory/possession unknown)

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

County at Dx

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I90_CountyDx	90	3	FIPS/SEER	156-158

Description
Code for the county of the patient's residence at the time the tumor was diagnosed. For U.S. residents, standard codes are those of the FIPS publication "Counties and Equivalent Entities of the United States, Its Possessions, and Associated Areas." If the patient has multiple tumors, the county codes may be different for each tumor.

Note
See Appendix A for standard FIPS county codes.

Codes (in addition to FIPS and Geocodes)
999 County unknown

Considerations for Use
County data will be used only in approved analyses and in the following ways: a) used as a linkage variable (linkage to census data, for example) only by the NCHS RDC analyst; b) included as a confounder or other control variable, but no data are presented by county; c) used in geographically aggregated form such as large metropolitan statistical areas (e.g., those with a population of 1 million or larger), multi-county regions, or geographical areas (e.g., Appalachia or IHS Contract Health Services Delivery Areas (CHSDA) counties).

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Address at Dx – Postal Code

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I100_ZipDx	100	9	CoC	147-155

Description
Postal code for the address of the patient's residence at the time the reportable tumor is diagnosed. If the patient has multiple tumors, the postal code may be different for each tumor. For U.S. residents, either the 5-digit or the extended 9-digit ZIP code was used. Blanks follow the 5-digit code if the 4-digit extension is not collected.

Codes (in addition to known US and Canadian or other postal codes)
999999999 Resident of the United States (including its possessions, etc.) and the postal code is unknown

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Census Tract 2010

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I135_CensTrct2010	135	6	NAACCR	428-433

Description

This field is provided for coding census tract of patient's residence at time of diagnosis. Codes are those used by the U.S. Census Bureau for the Year 2010 Census. Census tract codes have a 4-digit basic number and also may have a 2-digit suffix. Census tract numbers range from 0001.01 to 9999.98.

Rationale

Census tract codes allow central registries to calculate incidence rates for geographical areas having population estimates. The Census Bureau provides population data for census tracts. Those rates can be used for general surveillance or special geographical and socioeconomic analysis.

Codes

Census Tract Codes	000100-999998
000000	Area not census tracted
999999	Area census-tracted, but census tract is not available
Blank	Census Tract 2010 not coded

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

GIS Coordinate Quality

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I366_GISCoordindateQuality	366	2	NAACCR	422-423

Description
Code indicating the basis of assignment of latitude and longitude coordinates for an individual record from an address. This data item is helpful in identifying cases that were assigned coordinates based on incomplete information, post office boxes, or rural routes. Codes are hierarchical, with lower numbers having priority.

Rationale
Spatial analysis of cancer data often requires identifying data records with a high degree of geographic precision. Researchers can use this code as a basis for selecting records with a degree of precision that is appropriate to the study.

Codes

00	Coordinates derived from local government-maintained address points, which are based on property parcel locations, not interpolation over a street segment's address range
01	Coordinates assigned by Global Positioning System (GPS)
02	Coordinates are match of house number and street, and based on property parcel location
03	Coordinates are match of house number and street, interpolated over the matching street segment's address range
04	Coordinates are street intersections
05	Coordinates are at mid-point of street segment (missing or invalid building number)
06	Coordinates are address ZIP code+4 centroid
07	Coordinates are address ZIP code+2 centroid
08	Coordinates were obtained manually by looking up a location on a paper or electronic map
09	Coordinates are address 5-digit ZIP code centroid
10	Coordinates are point ZIP code of Post Office Box or Rural Route
11	Coordinates are centroid of address city (when address ZIP code is unknown or invalid, and there are multiple ZIP codes for the city)
12	Coordinates are centroid of county
98	Latitude and longitude are assigned, but coordinate quality is unknown
99	Latitude and longitude are not assigned, but geocoding was attempted; unable to assign coordinates based on available information
Blank	GIS Coordinate Quality not coded

Instructions for Coding: Where multiple codes are applicable, the lower code value was used.

Note
This data item is similar in function to Census Tract Certainty 2000 [365]. The codes for this data item and the census tract data item describe how location information was assigned based on the patient's resident address at the time of diagnosis.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Census Tr Certainty 2010

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I367_CensTrctCert2010	367	1	NAACCR	435-435

Description

Code indicating basis of assignment of census tract for an individual record. Helpful in identifying cases tracted from incomplete information or P.O. Box.

Codes

1	Census tract based on complete and valid street address of residence
2	Census tract based on residence ZIP + 4
3	Census tract based on residence ZIP + 2
4	Census tract based on residence ZIP code only
5	Census tract based on ZIP code of P.O. Box
6	Census tract/BNA based on residence city where city has only one census tract, or based on residence ZIP code where ZIP code has only one census tract
9	Not assigned, geocoding attempted
Blank	Not assigned, geocoding not attempted

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Race 1

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I160_Race1	160	2	SEER/CoC	177-178

Description

Code for the patient's race. Race is coded separately from Spanish/Hispanic Origin [190]. All tumors for the same patient should have the same race codes. If the patient is multiracial, code will be available for RACE 2 through RACE 5 [161-164]. For coding instructions and race code history see the current *SEER Program Coding and Staging Manual*.

Reference to Census 2000 definitions for ethnicity and race: http://www.census.gov/prod/cen2000/doc/sf2.pdf .

Rationale

Because race has a significant association with cancer rates and outcomes, a comparison between areas with different racial distributions may require an analysis of race to interpret the findings. The race codes listed correspond closely to race categories used by the U.S. Census Bureau to allow calculation of race-specific incidence rates. The full coding system should be used to allow accurate national comparison and collaboration, even if the state population does not include many of the race categories.

Codes

01	White
02	Black
03	American Indian, Aleutian, or Eskimo (includes all indigenous populations of the Western hemisphere)
04	Chinese
05	Japanese
06	Filipino
07	Hawaiian
08	Korean
10	Vietnamese
11	Laotian
12	Hmong
13	Kampuchean (Cambodian)
14	Thai
15	Asian Indian or Pakistani, NOS (code 09 prior to Version 12)
16	Asian Indian
17	Pakistani
20	Micronesian, NOS
21	Chamorran
22	Guamanian, NOS
25	Polynesian, NOS
26	Tahitian
27	Samoan
28	Tongan
30	Melanesian, NOS
31	Fiji Islander
32	New Guinean
88	No further race documented
96	Other Asian, including Asian, NOS and Oriental, NOS
97	Pacific Islander, NOS
98	Other
99	Unknown

Blank Race 2-5 not coded

Note
If any race code (for Race 2, 3, 4, and 5) is 88 (no further race documented), then all subsequent race codes also must be 88. If any race equals 99, then all race codes (Race 1, 2, 3, 4, and 5) must be 99.

Considerations for Use
Population data are not available for this variable. For age-adjusted rates by race, "NPCR Race Recode" (pg. 38) should be used. This variable and the IHS Link variable [192] are used to derive the "NPCR Race Recode".

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Race 2

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I161_Race2	161	2	SEER/CoC	179-180

Description

Code for the patient's race. Race is coded separately from Spanish/Hispanic Origin [190]. All tumors for the same patient should have the same race codes. If the patient is multiracial, code will be available for RACE 2 through RACE 5 [161-164]. For coding instructions and race code history see the current *SEER Program Coding and Staging Manual.*

Reference to Census 2000 definitions for ethnicity and race: http://www.census.gov/prod/cen2000/doc/sf2.pdf .

Rationale

Because race has a significant association with cancer rates and outcomes, a comparison between areas with different racial distributions may require an analysis of race to interpret the findings. The race codes listed correspond closely to race categories used by the U.S. Census Bureau to allow calculation of race-specific incidence rates. The full coding system should be used to allow accurate national comparison and collaboration, even if the state population does not include many of the race categories.

Codes

01	White
02	Black
03	American Indian, Aleutian, or Eskimo (includes all indigenous populations of the Western hemisphere)
04	Chinese
05	Japanese
06	Filipino
07	Hawaiian
08	Korean
10	Vietnamese
11	Laotian
12	Hmong
13	Kampuchean (Cambodian)
14	Thai
15	Asian Indian or Pakistani, NOS (code 09 prior to Version 12)
16	Asian Indian
17	Pakistani
20	Micronesian, NOS
21	Chamorran
22	Guamanian, NOS
25	Polynesian, NOS
26	Tahitian
27	Samoan
28	Tongan
30	Melanesian, NOS
31	Fiji Islander
32	New Guinean
88	No further race documented
96	Other Asian, including Asian, NOS and Oriental, NOS
97	Pacific Islander, NOS
98	Other
99	Unknown
Blank	Race 2-5 not coded

Note
If any race code (for Race 2, 3, 4, and 5) is 88 (no further race documented), then all subsequent race codes also must be 88. If any race equals 99, then all race codes (Race 1, 2, 3, 4, and 5) must be 99.

Considerations for Use
Population data are not available for this variable. For age-adjusted rates by race, "NPCR Race Recode" (pg. 38) should be used. This variable and the IHS Link variable [192] are used to derive the "NPCR Race Recode".

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Race 3

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I162_Race3	162	2	SEER/CoC	181-182

Description

Code for the patient's race. Race is coded separately from Spanish/Hispanic Origin [190]. All tumors for the same patient should have the same race codes. If the patient is multiracial, code will be available for RACE 2 through RACE 5 [161-164]. For coding instructions and race code history see the current *SEER Program Coding and Staging Manual.*

Reference to Census 2000 definitions for ethnicity and race: http://www.census.gov/prod/cen2000/doc/sf2.pdf .

Rationale

Because race has a significant association with cancer rates and outcomes, a comparison between areas with different racial distributions may require an analysis of race to interpret the findings. The race codes listed correspond closely to race categories used by the U.S. Census Bureau to allow calculation of race-specific incidence rates. The full coding system should be used to allow accurate national comparison and collaboration, even if the state population does not include many of the race categories.

Codes

01	White
02	Black
03	American Indian, Aleutian, or Eskimo (includes all indigenous populations of the Western hemisphere)
04	Chinese
05	Japanese
06	Filipino
07	Hawaiian
08	Korean
10	Vietnamese
11	Laotian
12	Hmong
13	Kampuchean (Cambodian)
14	Thai
15	Asian Indian or Pakistani, NOS (code 09 prior to Version 12)
16	Asian Indian
17	Pakistani
20	Micronesian, NOS
21	Chamorran
22	Guamanian, NOS
25	Polynesian, NOS
26	Tahitian
27	Samoan
28	Tongan
30	Melanesian, NOS
31	Fiji Islander
32	New Guinean
88	No further race documented
96	Other Asian, including Asian, NOS and Oriental, NOS
97	Pacific Islander, NOS
98	Other
99	Unknown
Blank	Race 2-5 not coded

Note
If any race code (for Race 2, 3, 4, and 5) is 88 (no further race documented), then all subsequent race codes also must be 88. If any race equals 99, then all race codes (Race 1, 2, 3, 4, and 5) must be 99.

Considerations for Use
Population data are not available for this variable. For age-adjusted rates by race, "NPCR Race Recode" (pg. 38) should be used.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Race 4

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I163_Race4	163	2	SEER/CoC	183-184

Description

Code for the patient's race. Race is coded separately from Spanish/Hispanic Origin [190]. All tumors for the same patient should have the same race codes. If the patient is multiracial, code will be available for RACE 2 through RACE 5 [161-164]. For coding instructions and race code history see the current *SEER Program Coding and Staging Manual.*

Reference to Census 2000 definitions for ethnicity and race: http://www.census.gov/prod/cen2000/doc/sf2.pdf .

Rationale

Because race has a significant association with cancer rates and outcomes, a comparison between areas with different racial distributions may require an analysis of race to interpret the findings. The race codes listed correspond closely to race categories used by the U.S. Census Bureau to allow calculation of race-specific incidence rates. The full coding system should be used to allow accurate national comparison and collaboration, even if the state population does not include many of the race categories.

Codes

01	White
02	Black
03	American Indian, Aleutian, or Eskimo (includes all indigenous populations of the Western hemisphere)
04	Chinese
05	Japanese
06	Filipino
07	Hawaiian
08	Korean
10	Vietnamese
11	Laotian
12	Hmong
13	Kampuchean (Cambodian)
14	Thai
15	Asian Indian or Pakistani, NOS (code 09 prior to Version 12)
16	Asian Indian
17	Pakistani
20	Micronesian, NOS
21	Chamorran
22	Guamanian, NOS
25	Polynesian, NOS
26	Tahitian
27	Samoan
28	Tongan
30	Melanesian, NOS
31	Fiji Islander
32	New Guinean
88	No further race documented
96	Other Asian, including Asian, NOS and Oriental, NOS
97	Pacific Islander, NOS
98	Other
99	Unknown
Blank	Race 2-5 not coded

Note
If any race code (for Race 2, 3, 4, and 5) is 88 (no further race documented), then all subsequent race codes also must be 88. If any race equals 99, then all race codes (Race 1, 2, 3, 4, and 5) must be 99.

Considerations for Use
Population data are not available for this variable. For age-adjusted rates by race, "NPCR Race Recode" (pg. 38) should be used.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Race 5

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I164_Race5	164	2	SEER/CoC	185-186

Description

Code for the patient's race. Race is coded separately from Spanish/Hispanic Origin [190]. All tumors for the same patient should have the same race codes. If the patient is multiracial, code will be available for RACE 2 through RACE 5 [161-164]. For coding instructions and race code history see the current *SEER Program Coding and Staging Manual.*

Reference to Census 2000 definitions for ethnicity and race: http://www.census.gov/prod/cen2000/doc/sf2.pdf .

Rationale

Because race has a significant association with cancer rates and outcomes, a comparison between areas with different racial distributions may require an analysis of race to interpret the findings. The race codes listed correspond closely to race categories used by the U.S. Census Bureau to allow calculation of race-specific incidence rates. The full coding system should be used to allow accurate national comparison and collaboration, even if the state population does not include many of the race categories.

Codes

01	White
02	Black
03	American Indian, Aleutian, or Eskimo (includes all indigenous populations of the Western hemisphere)
04	Chinese
05	Japanese
06	Filipino
07	Hawaiian
08	Korean
10	Vietnamese
11	Laotian
12	Hmong
13	Kampuchean (Cambodian)
14	Thai
15	Asian Indian or Pakistani, NOS (code 09 prior to Version 12)
16	Asian Indian
17	Pakistani
20	Micronesian, NOS
21	Chamorran
22	Guamanian, NOS
25	Polynesian, NOS
26	Tahitian
27	Samoan
28	Tongan
30	Melanesian, NOS
31	Fiji Islander
32	New Guinean
88	No further race documented
96	Other Asian, including Asian, NOS and Oriental, NOS
97	Pacific Islander, NOS
98	Other
99	Unknown
Blank	Race 2-5 not coded

Note
If any race code (for Race 2, 3, 4, and 5) is 88 (no further race documented), then all subsequent race codes also must be 88. If any race equals 99, then all race codes (Race 1, 2, 3, 4, and 5) must be 99.

Considerations for Use
Population data are not available for this variable. For age-adjusted rates by race, "NPCR Race Recode" (pg. 38) should be used.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Spanish/Hispanic Origin

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I190_SpanishOrigin	190	1	SEER/CoC	189-189

Description

Code identifying persons of Spanish or Hispanic origin. This code is used to show the "best guess" as to whether or not the person should be classified as Hispanic for purposes of calculating cancer rates. If the patient has multiple tumors, all records should have the same code.

Reference to Census 2000 definitions for ethnicity and race: http://www.census.gov/prod/cen2000/doc/sf2.pdf .
All information resources to determine the correct code:

- Stated ethnicity in the medical record
- Stated Hispanic origin on the death certificate
- Birthplace
- Information about life history and/or language spoken found during the abstracting process
- Patient's last name [2230] or maiden name [2390] found on a list of Hispanic names

Some registries code the information from the medical record, others code ethnicity based on Spanish names, and others use a combination of methods. Persons of Spanish or Hispanic origin may be of any race, but these categories generally are not used for Native Americans, Filipinos, etc., who may have Spanish names. If a patient has a Hispanic name, but there is reason to believe they are not Hispanic (e.g., the patient is Filipino, or the patient is a woman known to be non-Hispanic who has a Hispanic married name), the code in this field should be 0 (non-Spanish, non-Hispanic). Code 7 was assigned if Hispanic ethnicity is based strictly on a computer list or algorithm (unless contrary evidence is available).

Rationale

See the rationales for the Race 1-5 [160-164]. Ethnic origin has a significant association with cancer rates and outcomes. Hispanic populations have different patterns of occurrence of cancer from other populations that may be included in the "white" category of Race [160].

Codes

0 Non-Spanish; non-Hispanic
1 Mexican (includes Chicano)
2 Puerto Rican
3 Cuban
4 South or Central American (except Brazil)
5 Other specified Spanish/Hispanic origin (includes European; excludes Dominican Republic)
6 Spanish, NOS
Hispanic, NOS
Latino, NOS
There is evidence, other than surname or maiden name, that the person is Hispanic, but he/she cannot be assigned to any of the other categories 1-5.
7 Spanish surname only (Code 7 is ordinarily for central registry use only, hospital registrars may use code 7 if using a list of Hispanic surnames provided by their central registry; otherwise, code 9 'unknown whether Spanish or not' should be used.)
The only evidence of the person"s Hispanic origin is the surname or maiden name and there is no contrary evidence that the person is not Hispanic.
8 Dominican Republic
9 Unknown whether Spanish or not

Considerations for Use

Due to concerns about under-reporting of Hispanics, the NHIA Derived Hisp Origin [191] variable was created to identify Hispanics. Population data are not available for the Spanish/Hispanic Origin variable. For age-adjusted rates by ethnicity, the variable NHIA Derived Hisp Origin [191] should be used.

NAACCR recognizes that available definitions and abstracting instructions for Name--Last [2230] and Name--Maiden [2390] may be inadequate for describing names used in some cultures, including Hispanic cultures. Explicit instructions have not been provided for entering compound names, with or without hyphens or "De." Order of names, use of maternal and paternal names, and use of hyphens can vary across cultures. It is likely that abstracting and coding practice for these items varies across registries. Limitations inherent in these definitions should be kept in mind when using the data.

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

NHIA Derived Hisp Origin

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I191_NHIA	191	1	NAACCR	418-418

Description

The NAACCR Hispanic Identification Algorithm (NHIA) uses a combination of standard variables to directly or indirectly classify cases as Hispanic for analytic purposes. It is possible to separate Hispanic ancestral subgroups (e.g., Mexican) when indirect assignment results from birthplace information but not from surname match. The algorithm uses the following standard variables: Spanish/Hispanic Origin [190], Name--Last [2230], Name--Maiden [2390], Birthplace [250], Race 1 [160], IHS Link [192], and Sex [220].

For greater detail on NHIA, please refer to the technical documentation: http://www.naaccr.org/dat#NHIA .

Rationale

Sometimes, despite best efforts to obtain complete information directly from the medical record, information is not available and is reported to the cancer registry as a missing data item. With regard to Hispanic ethnicity, some cancer registries have found it necessary to rely on indirect methods to populate this data element. Registries often have significant numbers or proportions of Hispanic populations in their jurisdiction.

Codes

0	Non-Hispanic
1	Mexican, by birthplace or other specific identifier
2	Puerto Rican, by birthplace or other specific identifier
3	Cuban, by birthplace or other specific identifier
4	South or Central American (except Brazil), by birthplace or other specific identifier
5	Other specified Spanish/Hispanic origin (includes European; excludes Dominican Republic), by birthplace or other specific identifier
6	Spanish, NOS; Hispanic, NOS; Latino, NOS
7	NHIA surname match only
8	Dominican Republic
Blank	Algorithm has not been run

Considerations for Use

Data for NPCR registries that are published in the United States Cancer Statistics (USCS) use this variable. To analyze the occurrence of cancer within the Hispanic population, this variable should be used. Otherwise, the variable "NHIA Other" (pg. 39) should be used to analyze the occurrence of cancer between the Hispanic and Non-Hispanic populations.

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

IHS Link

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I192_IHS	192	1	NPCR	421-421

Description
This variable captures the results of the linkage of the registry database with the Indian Health Service patient registration database.

Rationale
The IHS linkage identifies cancer cases among American Indians who were misclassified as non-Indian in the registry database in order to improve the quality of cancer surveillance data on American Indians in individual registries and in all registries as a whole. IHS provides medical services to American Indians/Alaska Natives who are members of federally recognized tribes, estimated to be approximately 55% of the American Indian/Alaska Native population.

This variable and the race variables are used to identify cancer incidence data and calculate age-adjusted incidence rates for American Indians.

Codes

0	Record sent for linkage, no IHS match
1	Record sent for linkage, IHS match
Blank	Record not sent for linkage or linkage result pending

Considerations for Use
Normally, cancer registries with one or more IHS Contract Health Service Delivery Area (CHSDA) counties link cancer cases with the IHS patient registration database to identify American Indians/Alaska Natives that were classified in the registry as non-native. The IHS linkage occurred while cases were still being captured by the CER specialized cancer registries. Therefore, not all records were sent for linkage resulting in missing data in this variable. Blank values are also allowed for states without CHSDA counties. Population data are not available for this variable. For age-adjusted rates by race, "NPCR Race Recode" (pg. 38) should be used.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Race – NAPIIA (Derived API)

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I193_NAPIIA	193	2	NAACCR	419-420

Description

NAPIIA is an acronym for NAACCR Asian and Pacific Islander Identification Algorithm. Race – NAPIIA (derived API) recodes some single-race cases with a Race 1 [160] code of 96 to a more specific Asian race category, based on an algorithm that makes use of the birthplace and name fields (first, last, and maiden names). For single-race cases with a Race 1 code other than 96, it returns the Race 1 code. Multiple-race cases (those with information in Race 2 through Race 5, [161-164]) are handled variously; for greater detail please refer to the technical documentation: http://naaccr.org/LinkClick.aspx?fileticket=3HnBhlmhkBs%3D&tabid=92&mid=432 .

Rationale

The use of more specific Asian and Pacific Islander codes enhances surveillance and research activities focused on specific API subgroups.

Codes

01	White
02	Black
03	American Indian, Aleutian, or Eskimo (includes all indigenous populations of the Western Hemisphere)
04	Chinese
05	Japanese
06	Filipino
07	Hawaiian
08	Korean
10	Vietnamese
11	Laotian
12	Hmong
13	Kampuchean (Cambodian)
14	Thai
15	Asian Indian or Pakistani, NOS (code 09 prior to Version 12)
16	Asian Indian
17	Pakistani
20	Micronesian, NOS
21	Chamorran
22	Guamanian, NOS
25	Polynesian, NOS
26	Tahitian
27	Samoan
28	Tongan
30	Melanesian, NOS
31	Fiji Islander
32	New Guinean
96	Other Asian, including Asian, NOS and Oriental, NOS
97	Pacific Islander, NOS
98	Other
99	Unknown
Blank	Algorithm was not run

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

NPCR Race Recode

SAS Alternate Name	Length	Source of Standard
RaceRec	1	Derived based upon NAACCR items #160, #161, and #192

Description
This variable is created from Race 1, Race 2, and the Indian Health Service (IHS) Link variable. If Race1 is white and Race 2 is a specified non-white race, then the value from Race 2 is used. After this check, if Race/ethnicity is still white and there is a positive IHS Link, then Race/Ethnicity is set to American Indian/Alaskan Native.

This race recode variable contains an "other unspecified category". This group is treated as unknown race for the purpose of analyses. Population data are not available for the other and unknown race categories.

Rationale
Population data are not available for Race 1[160] – Race 5 [164].

Code
1 White
2 Black
3 American Indian/Alaska Native
4 Asian/Pacific Islander
5 Other Unspecified
9 Unknown

Considerations for Use
For age-adjusted rates by race, this variable should be used.

NHIA Other

SAS Alternate Name	Length	Source of Standard
Nhiaoth	1	Derived based upon NAACCR item #191

Description
The NHIA Other variable is derived using the NHIA Derived Hispanic Origin variable [191] by dichotomizing Hispanic ethnicity into Non-Hispanic or Hispanic. All of the Hispanic subgroups (1-8) in the NHIA Derived Hispanic Origin variable [191] are collapsed and grouped as Hispanic.

Codes
0 Non-Hispanic
1 Hispanic

Considerations for Use
Use this variable to calculate age-adjusted rates by ethnicity.

Sex

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I220_Sex	220	1	SEER/CoC	192-192

Description
Code for the sex of the patient.

Codes
1 Male
2 Female
3 Other (hermaphrodite)
4 Transsexual
9 Not stated/Unknown

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Age at Diagnosis

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I230_AgeDx	230	3	SEER/CoC	193-195

Description

Age of the patient at diagnosis in complete years. Different tumors for the same patient may have different values.

Codes

000	Less than 1 year old; diagnosed *in utero*
001	1 year old, but less than 2 years
002	2 years old
…	(show actual age in completed years)
101	101 years old
…	
120	120 years old
999	Unknown age

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Year of Birth

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I240_DOB	240	8	SEER/CoC	196-203

Description
Year of birth of the patient.

Code
Blank Unkown year

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Date of Birth Flag

Alternate Name	Item #	Length	Source of Standard	Column #
I241_DOBFlag	241	2	NAACCR	204-205

Description
This flag explains why no appropriate value is in the field, Date of Birth [240].

Rationale
Prior to Version 12 (through 2009 diagnosis), date fields included codes that provided information other than dates. As part of an initiative to standardize date fields, new fields were introduced to accommodate non-date information that had previously been transmitted in date fields.

Codes (See Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions. Use code 12 when date of birth is unknown.)

12	A proper value is applicable but not known (i.e., birth date is unknown)
Blank	A valid date value is provided in item Date of Birth [240], or the date was not expected to have been transmitted

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Birthplace – State

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I252_BirthPlaceState	252	2	NAACCR	442 - 443

Description
USPS abbreviation for the state, commonwealth, U.S. possession; or CanadaPost abbreviation for the Canadian province/territory in which the patient was born. If the patient has multiple primaries, the state of birth is the same for each tumor. This data item became part of the NAACCR transmission record effective with Volume II, Version 13 in order to include country and state for each geographic item and to use interoperable codes.

Rationale
This is a modification of the current item Birthplace [250] item in order to make use of standard codes, rather than using geographic codes that are only used by cancer registries.

Codes
See Appendix B for an alphabetic list of codes (also see Appendix B of the SEER Program Code Manual at http://seer.cancer.gov/tools/codingmanuals/index.html.

Reference
http://www.naaccr.org/Applications/ContentReader/Archive/13/Chap10.html

Birthplace – Country

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I254_BirthPlaceCountry	254	3	NAACCR	444 - 446

Description
Code for the country in which the patient was born. If the patient has multiple tumors, all records should contain the same code. This data item became part of the NAACCR transmission record effective with Volume II, Version 13 in order to include country and state for each geographic item and to use interoperable codes. It supplements the item BIRTHPLACE--STATE [252]. These two data items are intended to replace the use of BIRTHPLACE [250].

Rationale
Place of Birth is helpful for patient matching and can be used when reviewing race and ethnicity. It is an important item in algorithms for imputing race and ethnicity. In addition, adding birthplace data to race and ethnicity allows for a more specific definition of the population being reported. Careful descriptions of ancestry, birthplace, and immigration history of populations studied are needed to make the basis for classification into ethnic groups clear. Birthplace has been associated with variation in genetic, socioeconomic, cultural, and nutritional characteristics that affect patterns of disease. A better understanding of the differences within racial and ethnic categories also can help states develop effective, culturally-sensitive public health prevention programs to decrease the prevalence of high-risk behaviors and increase the use of preventive services.

Codes
See Appendix B for an alphabetic list of codes (also see Appendix B of the SEER Program Code Manual at http://seer.cancer.gov/tools/codingmanuals/index.html.

Reference
http://www.naaccr.org/Applications/ContentReader/Archive/13/Chap10.html

*****Please read the following Note before looking at the occupation and industry variables.*****

Note
Reporting facilities were required to submit text documentation for the patient's usual occupation and industry to the state central cancer registry. Any assignment of occupation and industry codes was to be performed by the state registry. The National Institute of Occupational Safety and Health (NIOSH) provides a coding tool that is currently able to read the Occupation/Industry text and assign Census 1990 or Census 2000 Occupation/Industry codes. If resources allowed, the CER specialized registries were to code their Occupation/Industry text to the Census 2000 codes. This process can be time-intensive and requires manual review by trained staff to determine the best code. Because not all specialized registries had the resources to code the occupation and industry, they were either to submit the Occupation/Industry text or the Occupation/Industry code.

Occupation Code – Census

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I270_CENSOCCUPCOD19702000	270	3	Census/NPCR	209-211

Description
Code for the patient's usual occupation, using U.S. Census Bureau codes (2000 Census is preferable) according to coding procedures recommended for death certificates. This data item applies only to patients who are age 14 years or older at the time of diagnosis.

Rationale
Use of the Census Bureau classification system improves consistency of data collected from multiple sources. The Census Bureau occupation classification system is used for coding occupation information from death certificates and from the U.S. Census of Population. The system includes specific coding rules.

Codes
For the 2000 Census codes, see Instructional Manual Part 19: *Industry and Occupation Coding for Death Certificates*, 2000 http://www.cdc.gov/nchs/data/dvs/pt19manB1.pdf . Software for automated coding of occupation and industry is available from the Division of Safety Research, National Institute for Occupational Safety and Health, CDC http://www.cdc.gov/niosh/topics/coding/overview.html . This software is used by some but not all central cancer registries.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Text – Usual Occupation

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I310_Text_Usual_Occupation	310	100	NPCR	217-316

Description
Text area for information about the patient's usual occupation, also known as usual type of job or work. This data item is collected only for patients who are age 14 years or older at the time of diagnosis.

Rationale
Used to identify new work-related health hazards; serves as an additional measure of socioeconomic status; identifies occupational groups in which cancer screening or prevention activities may be beneficial. The data item "usual occupation" is defined identically as on death certificates and conforms to the 1989 revision of the U.S. Standard Certificate of Death.

Note
The patient's usual occupation (i.e., the kind of work performed during most of the patient's working life before diagnosis of this tumor). "Retired" is not recorded. If usual occupation was not available or was unknown, then the patient's current, most recent occupation or any available occupation was recorded.

If later documentation in the patient's record provides an occupation that is more likely to be the usual occupation than what was originally recorded, facility registrars are encouraged to update the abstract with the new information. However, it is not the responsibility of the facility registrars to update abstracts with occupation information provided on death certificates. Comparison with death certificate information should be the function of a central or regional registry.

If the patient was a homemaker and also worked outside the home during most of his/her adult life, then the usual occupation outside the home was recorded; if the patient was a homemaker and did not work outside the home for most of his/her adult life, then "homemaker" was recorded. If the patient was not a student or homemaker and had never worked, "never worked" was recorded as the usual occupation.

If no information is available, then "unknown" was recorded.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Industry Code – Census

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I280_CENSINDCOD19702000	280	3	Census/NPCR	212-214

Description
Code for the patient's usual industry, using U.S. Census Bureau codes (2000 Census is preferable) according to coding procedures recommended for death certificates. This data item applies only to patients who are age 14 years or older at the time of diagnosis.

Rationale
Use of the Census Bureau classification system improves consistency of data collected from multiple sources. The Census Bureau industrial classification system is used for coding industry information from death certificates and from the U.S. Census of Population. The system includes specific coding rules.

Codes
For the 2000 Census codes see Instructional Manual Part 19: *Industry and Occupation Coding for Death Certificates*, 2000 http://www.cdc.gov/nchs/data/dvs/pt19manB1.pdf . Software for automated coding of occupation and industry is available from the Division of Safety Research, National Institute for Occupational Safety and Health, CDC http://www.cdc.gov/niosh/topics/coding/overview.html . This software was used by some but not all central cancer registries.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Text – Usual Industry

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I320_Text_Usual_Industry	320	100	NPCR	317-416

Description
Text area for information about the patient's usual industry, also known as usual kind of business/industry. This data item usually is collected only for patients who are age 14 years or older at the time of diagnosis.

Rationale
Used to identify new work-related health hazards; serves as an additional measure of socioeconomic status; identifies industrial groups or worksite-related groups in which cancer screening or prevention activities may be beneficial. The data item "usual industry" is defined identically as on death certificates and conforms to the 1989 revision of the U.S. Standard Certificate of Death.

Note
Records the primary type of activity carried on by the business/industry at the location where the patient was employed for the most number of years before diagnosis of this tumor. Be sure to distinguish among "manufacturing," "wholesale," "retail," and "service" components of an industry that performs more than one of these components. If the primary activity carried on at the location where the patient worked is unknown, it may be sufficient for facility registrars to record the name of the company (with city or town) in which the patient performed his/her usual industry. In these situations, if resources permit, a central or regional registry may be able to use the employer name and city/town to determine the type of activity conducted at that location.

As noted in the Text--Usual Occupation [310] section, in those situations where the usual occupation is not available or is unknown, the patient's current or most recent occupation is recorded, if available. The information for industry should be based upon the information in occupation. Therefore, if current or most recent occupation rather than usual occupation was recorded, the patient's current or most recent business/industry was recorded.

If later documentation in the patient's record provides an industry that is more likely to be the usual industry than what was originally recorded, facility registrars are encouraged to update the abstract with the new information. However, it is not the responsibility of the facility registrars to update abstracts with industry information provided on death certificates. Comparison with death certificate information should be the function of a central or regional registry.

There should be an entry for Text--Usual Industry if any occupation is recorded. If no information is available regarding the industry in which the reported occupation was carried out, "unknown" was recorded. If the patient was not a student or homemaker and had never worked, then "never worked" was recorded as the usual industry.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Occupation Source

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I290_OccupSource	290	1	NPCR	215-215

Description
Code that best describes the source of occupation information provided on this patient.

Rationale
Occupation information may come from a variety of sources. The most valid and reliable source of occupation information for patients has not yet been determined.

Codes

0	Unknown occupation/no occupation available
1	Reporting facility records
2	Death certificate
3	Interview
7	Other source
8	Not applicable, patient less than 14 years of age at diagnosis
9	Unknown source
Blank	Not collected

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Industry Source

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I300_IndustrySource	300	1	NPCR	216-216

Description
Code that best describes the source of industry information provided on this patient.

Rationale
Industry information may come from a variety of sources. The most valid and reliable source of industry information for patients has not yet been determined.

Codes

0	Unknown industry/no industry available
1	Reporting facility records
2	Death certificate
3	Interview
7	Other source
8	Not applicable, patient less than 14 years of age at diagnosis
9	Unknown source
Blank	Not collected

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Occup/Ind Coding System

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I330_CENSOCCUPINDSYS19702000	330	1	NPCR	417-417

Description
Code that identifies coding system used for occupation and industry.

Codes

3	1990 Census
4	2000 Census
5	2010 Census
9	Unknown coding system
Blank	Not collected

Note
2000 Census codes for occupation and industry are recommended for tumors diagnosed on or after January 1, 2003. The 1990 Census codes are recommended for tumors diagnosed before January 1, 2003. For more information, see the U.S. Bureau of the Census website at: http://www.census.gov/people/io/.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Section II: Cancer Identification

Sequence Number – Central

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I380_SeqNoCntrl	380	2	SEER	528-529

Description
Code indicates the sequence of all reportable neoplasms over the lifetime of the person. Each neoplasm is assigned a different number. Sequence Number 00 indicates that the person has had only one *in situ* or one malignant neoplasm as defined by the Federal reportable list (regardless of central registry reference date). Sequence Number 01 indicates the first of two or more reportable neoplasms, 02 indicates the second of two or more reportable neoplasms, and so on. Because the time period of Sequence Number is a person's lifetime, reportable neoplasms not included in the central registry (those that occur outside the registry catchment area or before the reference date) also are allotted a sequence number. For example, a registry may contain a single record for a patient with a sequence number of 02 because the first reportable neoplasm preceded the central registry's reference date.

Reporting Requirements: Federally Required and State/Province Defined
The Federal standard defining the reportable neoplasms is described in Chapter III, Standards
For Tumor Inclusion and Reportability of NAACCR's *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*. It is assumed that this shared standard is the "minimum" definition of reportability. Individual central cancer registries may define additional neoplasms as reportable.

Numeric codes in the 00-59 range indicate the sequence of neoplasms of *in situ* or malignant behavior (2 or 3) at the time of diagnosis, which NPCR standards require to be reported. Codes 60 to 87 indicate the sequence of non-malignant tumors (as defined in Chapter III) and any other neoplasms that the central registry has defined as reportable. Neoplasms required by NPCR with an *in situ* or malignant behavior at the time of diagnosis are sequenced completely independently of this higher-numbered category.

Rationale
The purpose of sequencing based on the patient's lifetime is to truly identify the 00s, the people who only had one malignant primary in their lifetimes for survival analysis. If a central registry sequences by just what is reported to them, then it will be unclear whether 00 means the person only had one malignant primary in his lifetime or the person had one malignant primary since the central registry started collecting data. The Federally required reportable list has changed throughout the years, so the registry must use the appropriate reportable list for the year of diagnosis. The central registry reference date does not affect Sequence Number-Central.

Codes
In Situ/Malignant as Federally Required based on Diagnosis Year:
00 One primary in the patient's lifetime
01 First of two or more primaries
02 Second of two or more primaries
..
..
59 Fifty-ninth or higher of fifty-nine or more primaries
99 Unspecified or unknown sequence number of federally required *in situ* or malignant tumors.
Sequence number 99 can be used if there is a malignant tumor and its sequence number is unknown.
If there is known to be more than one malignant tumor, then the tumors must be sequenced.

Non-malignant Tumor as Federally Required based on Diagnosis Year or State/Province Defined:

60 One non-malignant tumor or central registry-defined neoplasm
61 First of two or more non-malignant tumor or central registry-defined neoplasms
62 Second of two or more non-malignant tumor or central registry-defined neoplasms
.. ..
88 Unspecified or unknown sequence number for non-malignant tumor or central registry-defined neoplasms. (Sequence number 88 can be used if there is a non-malignant tumor and its sequence number is unknown. If there is known to be more than one non-malignant

The table that follows shows which sequence number series to use by type of neoplasm.

Neoplasm	**SeqNum-Central**
***In Situ*/Malignant as Federally Required based on Diagnosis Year**	**(Numeric Series)**
In Situ (behavior code = 2) (includes VIN III, VAIN III, AIN III)	00 -- 59
Malignant (behavior code = 3)	00 -- 59
Juvenile Astrocytoma, Diagnosis Year 2001+ (*)	00 -- 59
Invasive following *In Situ*--New primary	00 -- 59
Unspecified Federally Required Sequence Number or Unknown	99
Non-malignant Tumor as Federally Required based on Diagnosis Year or State/Province Registry-Defined	
Examples:	
Non-malignant Tumor/Benign Brain	60 -- 87
Borderline Ovarian, Diagnosis Year 2001+	60 -- 87
Other Borderline/Benign	60 -- 87
Skin SCC/BCC	60 -- 87
PIN III	60 -- 87
Unspecified Non-malignant Tumor or Central Registry-Defined Sequence Number	88

*Juvenile astrocytomas are reported as 9421/3.

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Date of Diagnosis

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I390_datedx	390	8	SEER/CoC	530-537

Description
Date of initial diagnosis by a recognized medical practitioner for the tumor being reported whether clinically or microscopically confirmed.

Format
Only valid portions of the date are stored in this dataset. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component is replaced by spaces. If there are no known date components, the fixed-length variable is completely blank.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Date of Diagnosis Flag

Alternate Name	Item #	Length	Source of Standard	Column #
I391_DateDxFlag	391	2	NAACCR	538-539

Description
This flag explains why no appropriate value is in the field, Date of Diagnosis [390].

Rationale
Before Version 12 (through 2009 diagnosis), date fields included codes that provided information other than dates. As part of an initiative to standardize date fields, new fields were introduced to accommodate non-date information that had previously been transmitted in date fields.

Codes (See Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions.)

12	A proper value is applicable but not known. (e.g., date of diagnosis is unknown)
Blank	A valid date value is provided in item Date of Diagnosis [390], or the date was not expected to have been transmitted

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Date of 1st Contact

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I580_Date1Contact	580	8	CoC	745-752

Description

Date of first patient contact, as inpatient or outpatient, with the reporting facility for the diagnosis and/or treatment of the tumor. The date may represent the date of an outpatient visit for a biopsy, x-ray, scan, or laboratory test.

When pathology-specimen-only tumors are collected (Type of Reporting Source 3), the date of specimen collection from the pathology report is used as the Date of 1st Contact. If a pathology-specimen-only case is followed by patient contact with a facility for diagnosis and/or treatment of the respective tumor, the Date of 1st Contact is changed to reflect the date the patient first registered at that facility. Central registries, however, retain the earlier date in their consolidated files, as that shows the patient's first recorded contact with the healthcare system for this disease.

When death certificate only (Type of Reporting Source 7) tumors are collected, the date of death should be used as the Date of 1st Contact. When Autopsy Only (Type of Reporting Source 6) tumors are collected, the date of death should be used as the Date of 1st Contact.

Date of 1st Contact is one of several data items that can be used to measure the time interval to the Date of Diagnosis, Date of First Course Treatment, and/or Date of Last Contact/Death.

Format

The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date are stored in this dataset. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component is replaced by spaces. If there are no known date components, the fixed-length variable is completely blank.

Considerations for Use

This data item is facility specific and central registries do not usually consolidate it. For example, a patient will have one Date of 1st Contact when they went to one medical center for a biopsy and a different date when they went to a different hospital for the resection and a different date when they went to another facility for chemo. The instructions in the NAACCR Volume II indicate that the earliest date should be recorded. The abstractors were advised to follow the NAACCR instructions. However, it is unsure how this item has been consolidated by the CER specialized registries

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Date of 1st Contact Flag

Alternate Name	Item #	Length	Source of Standard	Column #
I581_Date1stContactFlag	581	2	NAACCR	753-754

Description
This flag explains why no appropriate value is in the field Date of 1st Contact [580].

Rationale
Before Version 12 (through 2009 diagnosis), date fields included codes that provided information other than dates. As part of an initiative to standardize date fields, new fields were introduced to accommodate non-date information that had previously been transmitted in date fields.

Codes (See Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions.)

12	A proper value is applicable but not known (e.g., date of 1st contact is unknown)
Blank	A valid date value is provided in item Date of 1st Contact [580], or the date was not expected to have been transmitted

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Primary Site

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I400_Site	400	4	SEER/CoC	540-543

Description
Code for the primary site of the tumor being reported using ICD-O-3.

Codes

Breast	
C50.0	Nipple Areola
C50.1	Central portion of breast
C50.2	Upper-inner quadrant of breast
C50.3	Lower-inner quadrant of breast
C50.4	Upper-outer quadrant of breast
C50.5	Lower-outer quadrant of breast
C50.6	Axillary tail of breast Tail of breast, NOS
C50.8	Overlapping lesion of breast Inner breast Lower breast Midline of breast Outer breast Upper breast
C50.9	Breast, NOS Mammary gland

Chronic Myeloid Leukemia (CML)	
C42.1	Bone marrow

Colon	
C18.0	Cecum Ileocecal valve Ileocecal junction
C18.1	Appendix
C18.2	Ascending colon Right colon
C18.3	Hepatic flexure of colon

C18.4	Transverse colon
C18.5	Splenic flexure of colon
C18.6	Descending colon Left colon
C18.7	Sigmoid colon Sigmoid, NOS Sigmoid flexure of colon Pelvic colon
C18.8	Overlapping lesion of colon
C18.9	Colon, NOS Large intestine (excludes rectum, NOS C20.9 and rectosigmoid junction C19.9) Large bowel, NOS

Rectum

C19.9	Rectosigmoid junction Rectosigmoid, NOS Rectosigmoid colon Colon and rectum Pelvirectal junction
C20.9	Rectum, NOS Rectal ampulla

Reference

World Health Organization. ICD-O: *International Classification of Diseases for Oncology*, *Third* Edition. Geneva: World Health Organization; 2000. (Originally published in 1976.)

Breast Cancer

SAS Alternate Name
Breast_f

Description
All male and female breast cancer cases.

Codes
1 Breast cancer case
. Other

Chronic Myeloid Leukemia (CML)

SAS Alternate Name
CML_f

Description
All male and female CML cases.

Codes
1 CML cancer case
. Other

Colon Cancer

SAS Alternate Name
Colon_f

Description

All male and female colon cancer cases defined by the following ICD-O 3 and histology codes.

ICD-O-3 [400]: C18.0, C18.1, C18.2, C18.3, C18.4, C18.5, C18.6, C18.7, C18.8, C18.9

For histologies refer to variable Histologic Type ICD-O-3 [522].

Note

C18.1 is the code for appendix which depending on focus of study can be removed or kept as appropriate.

Codes

1 Colon cancer case

. Other

Rectal Cancer

SAS Alternate Name
Rectal_f

Description
All male and female rectal cancer cases.

Codes
1 Rectal cancer case
. Other

Laterality

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I410_Laterality	410	1	SEER/CoC	544-544

Description
Code for the side of a paired organ, or the side of the body on which the reportable tumor originated. This applies to the primary site only.

Codes
0 Not a paired site
1 Right: origin of primary
2 Left: origin of primary
3 Only one side involved, right or left origin unspecified
4 Bilateral involvement at time of diagnosis, lateral origin unknown for a single primary; or both ovaries involved simultaneously, single histology; bilateral retinoblastomas; bilateral Wilms tumors
5 Paired site: midline tumor
9 Paired site, but no information concerning laterality

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Grade

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I440_Grade	440	1	SEER/CoC	555-555

Description
Code for the grade or degree of differentiation of the reportable tumor. For lymphomas and leukemias, field also is used to indicate T-, B-, Null-, or NK-cell origin.

Codes
See the grade tables on page 67 of ICD-O-3. See also the most recent CoC *FORDS* manual and *SEER Program Code Manual*, for site specific coding rules and conversions.

1 Grade I Well differentiated
Differentiated, NOS

2 Grade II Moderately differentiated
Moderately well differentiated
Intermediate differentiation

3 Grade III Poorly differentiated

4 Grade IV Undifferentiated
Anaplastic

5 T-cell

6 B-cell
Pre-B
B-precursor

7 Null cell
Non T-nonB

8 NK (natural killer) cell

9 Grade/differentiation unknown, not stated, or not applicable

References
World Health Organization. ICD-O: *International Classification of Diseases for Oncology*, *Third* Edition. Geneva: World Health Organization; 2000. (Originally published in 1976.)

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Grade Path Value

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I441_GradePathValue	441	1	AJCC	556-556

Description

Describes the actual grade according to the grading system in Grade Path System [449]. The grade described in the pathology report is not converted for this data item. This field identifies how the original grade of the primary tumor, not a metastatic site, was described in the medical record. The terms *well, moderately,* or *poorly differentiated, low/high,* or *anaplastic* are not converted in this field. The histologic grade/differentiation is coded in priority over a nuclear or architectural grade. If grade is described in the medical record as a fraction (x/y), this data field is the numerator. In other words, this field is the first or upper number of a grade expressed in two parts.

Examples Synoptic report states grade ii of iii. *Code Grade Path Value as 2.*
Final pathologic diagnosis listed as grade 1/4. *Code Grade Path Value as 1.*
Microscopic description reports high grade III of III. *Code Grade Path Value as 3.*

Grading systems such as Bloom-Richardson for breast or Gleason for prostate or WHO grade are not recorded in this field. These grading systems are coded in a Collaborative Stage site-specific factor in their respective schemas. This field is blank for lymphomas and hematopoietic malignancies.

Rationale

This data item records grade specified in Grade Path System. This does not replace Grade [440].

Codes (Refer to the most recent version of *FORDS* for additional instructions.)

1	Recorded as Grade I or 1
2	Recorded as Grade II or 2
3	Recorded as Grade III or 3
4	Recorded as Grade IV or 4
Blank	No Two, Three or Four System Grade is available; unknown

References

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Grade Path System

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I449_GradePathSystem	449	1	AJCC	557-557

Description

Indicates whether a two, three or four grade system is used. The grade described in the pathology report is not converted for this data item. This field identifies how the original grade of the primary tumor, not a metastatic site, was described in the medical record. The terms *well, moderately,* or *poorly differentiated, low/high,* or *anaplastic* are not converted in this field. The histologic grade/differentiation is coded in priority over a nuclear or architectural grade. If grade is described in the medical record as a fraction (x/y), this data field is the numerator. In other words, this field is the first or upper number of a grade expressed in two parts.

Examples Synoptic report states grade ii of iii. *Code Grade Path Value as 2.*
Final pathologic diagnosis listed as grade 1/4. *Code Grade Path Value as 1.*
Microscopic description reports high grade III of III. *Code Grade Path Value as 3.*

Grading systems such as Bloom-Richardson for breast or Gleason for prostate or WHO grade are not recorded in this field. These grading systems are coded in a Collaborative Stage site-specific factor in their respective schemas. This field is blank for lymphomas and hematopoietic malignancies.

Rationale

This item is used to show whether a two, three or four grade system is used. This is the grade system stated in the path report; it is not converted. This item is used in conjunction with Grade Path Value [441] and is abstracted in addition to Grade Differentiation [440].

Codes (Refer to the most recent version of *FORDS* for additional instructions.)

Code	Description
2	Recorded as Grade II or 2
3	Recorded as Grade III or 3
4	Recorded as Grade IV or 4
Blank	No 2, 3, or 4 grade system available Unknown

References

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Diagnostic Confirmation

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I490_DxConf	490	1	SEER/CoC	562-562

Description
Code for the best method of diagnostic confirmation of the cancer being reported at any time in the patient's history.

Rationale
Diagnostic confirmation is useful to calculate rates based on microscopically confirmed cancers. Full incidence calculations must also include tumors that are only confirmed clinically. The percentage of tumors that are not microscopically confirmed is an indication of whether case finding is including sources outside of pathology reports.

Codes
1 Positive histology
2 Positive cytology
3 Positive histology PLUS –
positive immunophenotyping AND/OR positive genetic studies
(Used only for hematopoietic and lymphoid neoplasms M-9590/3-9992/3)
4 Positive microscopic confirmation, method not specified
5 Positive laboratory test/marker study
6 Direct visualization without microscopic confirmation
7 Radiography and/or other imaging techniques without microscopic confirmation
8 Clinical diagnosis only (other than 5, 6, or 7)
9 Unknown whether or not microscopically confirmed; death certificate only

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Type of Reporting Source

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I500_TypeRptSrc	500	1	SEER	563-563

Description

This variable codes the source documents used to abstract the majority of information on the tumor being reported. This may not be the source of original case finding (for example, if a case is identified through a pathology laboratory report review and all source documents used to abstract the case are from the physician's office, code this item 4). Reports from health plans (e.g.; Kaiser, Veterans Administration, military facilities) in which all diagnostic and treatment information is maintained centrally are expected to be at least as complete as reports for hospital inpatients and are, therefore, included in that group. Sources coded with '2' usually have complete information on the cancer diagnosis, staging, and treatment. Sources coded with '8' include, but are not limited to, outpatient surgery and nuclear medicine services.

Rationale

The code in this field can be used to explain why information may be incomplete on a tumor. For example, death certificate only cases have unknown values for many data items, so one may want to exclude them from some analyses. The field also is used to monitor the success of non-hospital case reporting and follow-back mechanisms. All population-based registries have some death certificate-only cases where information is not available from any other source, but too high a percentage can imply both shortcomings in case-finding and that followback to uncover missed reports was not complete.

Codes

1 Hospital inpatient; Managed health plans with comprehensive, unified medical records
2 Radiation Treatment Centers or Medical Oncology Centers (hospital-affiliated or independent)
3 Laboratory only (hospital-affiliated or independent)
4 Physician's office/private medical practitioner (LMD)
5 Nursing/convalescent home/hospice
6 Autopsy only
7 Death certificate only
8 Other hospital outpatient units/surgery centers

Considerations for Use

Codes are assigned in the following priority order: 1, 2, 8, 4, 3, 5, 6, 7. This prioritizes laboratory reports over nursing home reports.

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Histologic Type ICD-O-3

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I522_HistTypeICDO3	522	4	SEER/CoC	550-553

Description
Codes for the histologic type of the tumor being reported using ICD-O-3.

Codes
The histology codes for breast, colon, rectum, and CML are noted below, and their labels are included in Appendix D.

SITE/Histology Table for Detailed Treatment Data

Site	ICD-0-3 Site Code	Histology	Behavior	Gender	Dx Year
*Breast	C50.0-C50.9	All except 9050-9055, 9140, and 9590-9992	Insitu, Malignant	Male and Female	2011
**Colon Rectum	C18.0-18.9 C19.9, C20.9	All except 9050-9055, 9140, and 9590-9992	Insitu, Malignant	Male and Female	2011
Chronic Myeloid Leukemia	C42.1	Include 9863, 9875, 9876, 9945, and 9946	Malignant	Male and Female	2011

* The CSv2 Manual provides directions to access a list of inclusion histology codes.
**Colon and Rectum are each divided into separate schemas in the CSv2 Manual and the sections of each provide directions to access a list of histology codes.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Behavior Code ICD-O-3

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I523_BehavICDO3	523	1	SEER/CoC	554-554

Description
Code for the behavior of the tumor being reported using ICD-O-3. Juvenile astrocytoma is coded as borderline in ICD-O-3; North American registries report as 9421/3.

Codes
0 Benign

1 Uncertain whether benign or malignant
Borderline malignancy
Low malignant potential
Uncertain malignant potential

2 Carcinoma in situ
Intraepithelial
Noninfiltrating
Noninvasive

3 Malignant, primary site

6 Malignant, metastatic site
Malignant, secondary site

9 Malignant, uncertain whether primary or metastatic stie

Reference
World Health Organization. ICD-O: *International Classification of Diseases for Oncology, Third* Edition. Geneva: World Health Organization; 2000. (Originally published in 1976.)

Site Coding Sys – Current

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I450_SiteCodSysCur	450	1	NAACCR	558-558

Description
Code that best describes how the primary site currently is coded. If converted, this field shows the system to which it is converted.

Codes
4 ICD-O, Second Edition
5 ICD-O, Third Edition

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Morph Coding Sys – Current

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I470_MorphCodSysCur	470	1	NAACCR	560-560

Description
Code that best describes how morphology is currently coded. If converted, this field shows the system it is converted to.

Codes
8 ICD-O, Third Edition, plus 2008 WHO hematopoietic/lymphoid new terms effective 1/1/2010

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Primary Payer at Dx

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I630_PrimaryPayerDX	630	2	CoC	778-779

Description
Primary payer/insurance carrier at the time of initial diagnosis and/or treatment.

Rationale
This item is used in financial analysis and as an indicator for quality and outcome analyses.

Codes
01 Not insured
02 Not insured, self-pay
10 Insurance, NOS
20 Private Insurance: Managed care, HMO, or PPO
21 Private Insurance: Fee-for-Service
31 Medicaid
35 Medicaid -- Administered through a Managed Care plan
60 Medicare/Medicare, NOS
61 Medicare with supplement, NOS
62 Medicare -- Administered through a Managed Care plan
63 Medicare with private supplement
64 Medicare with Medicaid eligibility
65 TRICARE
66 Military
67 Veterans Affairs
68 Indian/Public Health Service
99 Insurance status unknown

Considerations for Use
Cancer registries collect insurance information using the data item Primary Payer at Diagnosis. This item is ambiguously defined as the "primary payer at diagnosis and/or treatment". As such, one cannot be certain what information is being captured in this field. Insurance may change between diagnosis and treatment. In this event, the code(s) reported to the central registry would depend on if/what information was recorded in the medical record, what facility (ies) reported the case, what point in time they cared for the patient, and how multiple codes were consolidated by the central registry.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Section III: First Course Treatment

FIRST COURSE OF THERAPY

For all diseases (including benign and borderline malignancy intracranial & CNS tumors) except leukemia and hematopoietic diseases

Definitions

Active Surveillance: See Watchful Waiting

Cancer tissue: Proliferating malignant cells; an area of active production of malignant cells. Cancer tissue includes primary tumor and metastatic sites where cancer tissue grows. Cells in fluid such as pleural fluid or ascitic fluid are not "cancer tissue" because the cells do not grow and proliferate in the fluid.

Disease recurrence: For solid tumors, see the *Multiple Primary and Histology Coding Rules* manual and for hematopoietic and lymphoid neoplasms see the *Hematopoietic and Lymphoid Neoplasm Case Reportability and Coding* manual and the Hematopoietic database to determine disease recurrence.

First course of therapy: All treatments administered to the patient after the original diagnosis of cancer in an attempt to destroy or modify the cancer tissue. See below for detailed information on timing and treatment plan documentation requirements.

Palliative treatment: The World Health Organization describes palliative care as treatment that improves the quality of life by preventing or relieving suffering. Palliative therapy is also part of the first course of therapy when the treatment destroys or modifies cancer tissue. Palliative therapy may also be part of the first course of therapy if it destroys proliferating cancer tissue.

Example: The patient was diagnosed with stage IV cancer of the prostate with painful boney metastases. The patient starts radiation treatment intended to shrink the tumor in the bone and relieve the intense pain. The radiation treatments are palliative because they relieve the bone pain; the radiation is also first course of therapy because it destroys proliferating cancer tissue.

Surgical Procedure: Any surgical procedure coded in the fields Surgery of Primary Site, Scope of Regional Lymph Node Surgery, or Surgery of Other Regional or Distant Sites.

Treatment: Procedures that destroy or modify primary (primary site) or secondary (metastatic) cancer tissue.

Treatment failure: The treatment modalities did not destroy or modify the cancer cells. The tumor either became larger (disease progression) or stayed the same size after treatment.

Watchful waiting: A treatment option for patients with slow, indolent diseases, such as prostate cancer. The physician closely monitors the patient and delays treatment until the patient becomes symptomatic or exhibits other signs of disease progression, such as rising PSA. Also referred to as Active Surveillance.

Treatment Timing
Use the following instructions **in hierarchical order**.

1. The **documented** first course of therapy (treatment plan) from the medical record is recorded. First course of therapy ends when the treatment plan is **completed**. (No matter how long it takes to complete the plan).

   Example 1: First course of treatment for childhood leukemia typically spans two years from induction, progressing to consolidation, and then to maintenance.

   Example 2: The first course of therapy for a breast cancer patient is surgery, chemotherapy, and radiation. The patient completes surgery and chemotherapy. Bone metastases are diagnosed before the radiation was started. The physician says that the patient will start the radiation treatment as planned. Code the radiation as first course of therapy since it

was given in agreement with the treatment plan and the treatment plan was not changed as a result of disease progression.

2. First course of therapy ends when there is documentation of disease progression, recurrence, or treatment failure.

   Example 1: The documented treatment plan for sarcoma is pre-operative (neoadjuvant) chemotherapy, followed by surgery, then radiation or chemotherapy depending upon the pathology from surgery. Scans show the tumor is not regressing after pre-operative chemotherapy. Plans for surgery are cancelled, radiation was not administered, and a different type of chemotherapy is started. Code only the first chemotherapy as first course. Do not code the second chemotherapy as first course because it is administered after documented treatment failure.

   Example 2: The documented treatment plan for a patient with locally advanced breast cancer includes mastectomy, chemotherapy, radiation to the chest wall and axilla, and hormone therapy. The patient has the mastectomy and completes chemotherapy. During the course of radiation therapy, the liver enzymes are rising. Workup proves liver metastases. The physician stops the radiation and does not continue with hormone therapy (the treatment plan is altered). The patient is placed on a clinical trial to receive Hercepton for metastatic breast cancer. Code the mastectomy, chemotherapy, and radiation as first course of treatment. Do not code the Hercepton as first course of therapy because it is administered after documented disease progression.

3. When there is **no documentation** of a treatment plan or progression, recurrence or a treatment failure, first course of therapy ends one year after the date of diagnosis. Any treatment given after one year is second course of therapy in the absence of a documented treatment plan or a standard of treatment.

Coding Instructions

1. All treatment fields are coded to 00 (Not done) when the physician decides to do **watchful waiting/active surveillance** for a patient who has prostate cancer. The first course of therapy is no treatment. When the disease progresses or the patient becomes symptomatic, any prescribed treatment is second course.

2. Treatment is coded as first course of therapy if the patient refuses treatment but changes his/her mind and the prescribed treatment is implemented less than one year from the date of diagnosis, AND there is no evidence of disease progression.

3. The first course of therapy is **no treatmen**t when the patient **refuses** treatment. The treatment fields to are coded to Refused.

   a. The refused codes are retained even if the patient later changes his/her mind and decides to have the prescribed treatment
      i. more than one year after diagnosis
         OR
      ii. when there is evidence of disease progression before treatment is implemented.

4. All treatment that was started and administered, whether completed or not, is recorded.

   Example: The patient completed only the first dose of a planned 30-day chemotherapy regimen. Chemotherapy is coded as administered.

5. When a patient has multiple primaries and the treatment given for one primary also affects/treats the other primary, the treatment is recorded for both primaries.

   Example 1: The patient had prostate and bladder cancer. The bladder cancer was treated with a TURB. The prostate cancer was treated with radiation to the prostate and pelvis. The pelvic radiation includes the regional lymph nodes for the bladder. The radiation is coded as treatment for both the bladder and prostate cases.

Example 2: The patient had a hysterectomy for ovarian cancer. The pathology report reveals a previously unsuspected microinvasive cancer of the cervix. The hysterectomy is coded as surgical treatment for both the ovarian and cervix primaries.

6. When a patient has multiple primaries and the treatment affects only one of the primaries, the treatments are coded only for the site that is affected.

   Example: The patient has colon and tonsil primaries. The colon cancer is treated with a hemicolectomy and the tonsil primary is treated with radiation to the tonsil and regional nodes. The radiation is not coded for the colon and the hemicolectomy is not coded for the tonsil.

7. When a patient is diagnosed with an unknown primary, the treatment given as first course is coded even if the correct primary is identified later.

   Example: The patient is diagnosed with metastatic carcinoma, unknown primary site. After a full course of chemotherapy, the primary site is identified as prostate. The chemotherapy is coded as first course of treatment.
      a. Treatment added to the plan when the primary site is discovered is not coded as first course. This is a change in the treatment plan.

   Example: The patient is diagnosed with metastatic carcinoma, unknown primary site. After a full course of chemotherapy, the primary site is identified as prostate and hormonal treatment is started. The chemotherapy is coded as first course of treatment. The hormone therapy is second course because it was not part of the initial treatment plan.

First Course for Leukemia and Hematopoietic Diseases

Leukemia

Leukemia is grouped or typed by how quickly the disease develops and worsens. **Chronic** leukemia gets worse **slowly**; **acute** leukemia, **quickly**.

Leukemias are also grouped by the **type** of **white blood cell** that is affected: **lymphoid** leukemia and **myeloid** leukemia.

Definitions

Consolidation: Repetitive cycles of chemotherapy given immediately after the remission.

Induction: Initial intensive course of chemotherapy.

Maintenance: Chemotherapy given for a period of months or years to maintain remission.

Remission: The bone marrow shows normal cellular characteristics (is normocellular), with less than 5% blasts, no signs or symptoms of the disease, no signs or symptoms of central nervous system leukemia or other extramedullary infiltration, and all of the following laboratory values are within normal limits: white blood cell count and differential, hematocrit/hemoglobin level, and platelet count.

Treatment for leukemia is divided into **three phases:**

1. Remission induction (chemotherapy and/or biologic response modifiers)

2. CNS prophylaxis or consolidation (irradiation to brain, chemotherapy)

3. Remission continuation or maintenance (chemotherapy or bone marrow transplants)

Coding First Course of Therapy for Leukemia and Hematopoietic Diseases

1. If a patient **has** a partial or complete **remission** during the first course of therapy
   a. All therapy that is "remission-inducing" is coded as first course

b. All therapy that is "consolidation" is coded as first course
c. All therapy that is "remission-maintaining" is coded as first course
Note: Treatment given after the patient relapses (is no longer in remission) is not recorded as first course and is recorded as subsequent therapy.

2. Some patients do not have a remission. A change in the treatment plan indicates a failure to induce remission. If the patient does not have a remission:
    a. Treatment given in an attempt to induce a remission is recorded
    b. Treatment administered after the change in treatment plan is not recorded as first course and is recorded as subsequent therapy.

Other Hematopoietic

All treatments are recorded as described above. The following treatments are coded as "other" in Other Treatment even though they do not "modify, control, remove, or destroy proliferating cancer tissue." Guidelines in the Abstracting and Coding Guide for the Hematopoietic Diseases are used to identify treatments. Some examples of "other" treatment include:

Example 1: **Phlebotomy** may be called blood removal, blood-letting, or venisection.

Example 2: **Transfusions** may include whole blood, RBCs, platelets, plateletpheresis, fresh frozen plasma (FFP), plasmapheresis, and cryoprecipitate.

Example 3: **Aspirin** (also known as ASA, acetylsalicylic acid, or by a brand name) is used as a treatment for essential thrombocythemia.

a. Aspirin therapy is recorded only if it is given to thin the blood for symptomatic control of thrombocythemia. The following guidelines are used to determine whether aspirin is administered for thinning of blood for thrombocythemia rather than for pain control or cardiovascular protection:

    i. Aspirin treatment for essential thrombocythemia is low dose, approximately 70-100 mg/day
    ii. The dosage for pain control is approximately 325-1000 mg every 3-4 hours.
    iii. Cardiovascular protection is usually one baby aspirin per day.

Date of Initial Rx – SEER

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1260_DateRxSEER	1260	8	SEER	1436-1443

Description
Date of initiation of the first course therapy for the tumor being reported, using the SEER definition of first course. See also Date of 1st Crs RX – COC [1270].

SEER and CoC have historically defined first course treatment differently. The differences affect representation of the date first course treatment begins and the instructions for determining what constitutes first course treatment. The difference between these two definitions is that CoC defines the date the physician decides not to treat the patient as the date of initial treatment, while SEER considers such a decision to be no treatment and the date field is left blank, and the corresponding date flag value is '11'. The SEER and CoC definitions of treatment to be included as "first course" have become increasingly congruent, differing now primarily in their "fall-back" recommendations that apply when no treatment plan is recorded, no standard facility practice applies, no protocol applies, no physician is able to provide assistance, and no record of treatment failure or recurrence of disease is available. In that extreme instance, CoC recommends a 4-month cutoff for the beginning of first-course treatment, and SEER applies a 1-year cutoff for completion of first course of therapy.

Clarification of NPCR Required Status
Central registries funded by NPCR are required to collect either Date of Initial RX – SEER [1260] or Date of 1st Crs RX – COC [1270]. The CER specialized registries were instructed to follow the SEER rules for determining first course of therapy.

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date are stored in this dataset. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component is replaced by spaces. If there are no known date components, the fixed-length variable is completely blank.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Date of Initial Rx Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1261_DateRxSEERFlag	1261	2	NAACCR	1444-1445

Description
This flag explains why there is no appropriate value in the field, Date of Initial RX – SEER [1260].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information.

Codes (See Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions.)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if therapy was administered)
11	No proper value is applicable in this context (e.g., therapy was not administered)
12	A proper value is applicable but not known (e.g., therapy was administered and date is unknown)
Blank	A valid date value is provided in item Date of Initial RX – SEER [1260], or the date was not expected to have been transmitted

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Date of 1st Crs Rx – COC

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1270_DateRxCoC	1270	8	CoC	1446-1453

Description
Date of initiation of the first therapy for the cancer being reported, using the CoC definition of first course. The date of first treatment includes the date a decision was made not to treat the patient.

SEER and CoC have historically defined first course treatment differently. The differences affect representation of the date first course treatment begins and the instructions for determining what constitutes first course treatment. The difference between these two definitions is that CoC defines the date the physician decides not to treat the patient as the date of initial treatment, while SEER considers such a decision to be no treatment and the date field is left blank, and the corresponding date flag value is '11'. The SEER and CoC definitions of treatment to be included as "first course" have become increasingly congruent, differing now primarily in their "fall-back" recommendations that apply when no treatment plan is recorded, no standard facility practice applies, no protocol applies, no physician is able to provide assistance, and no record of treatment failure or recurrence of disease is available. In that extreme instance, CoC recommends a 4-month cutoff for the beginning of first-course treatment, and SEER applies a 1-year cutoff for completion of first course of therapy.

Clarification of NPCR Required Status
Central registries funded by NPCR are required to collect either Date of Initial RX – SEER [1260] or Date of 1st Crs RX – COC [1270]. The CER specialized registries were instructed to follow the SEER rules for determining first course of therapy.

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date are stored in this dataset. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component is replaced by spaces. If there are no known date components, the fixed-length variable is completely blank.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Date of 1st Crs Rx Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1271_DateRxCoCFlag	1271	2	NAACCR	1454-1455

Description
This flag explains why no appropriate value is in the field, Date of 1st Crs RX [1270].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information.

Codes (See Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions.)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown whether treatment was administered)
11	No proper value is applicable in this context (e.g., autopsy only case)
12	A proper value is applicable but not known (e.g., treatment administered but date is unknown)
Blank	A valid date value is provided in item Date of 1st Crs RX [1270], or the date was not expected to have been transmitted

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

RX Date – Surgery

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1200_RXDateSurgery	1200	8	CoC	1456-1463

Description
Date the **first** surgery of the type described under Surgery of Primary Site, Scope of Regional Lymph Node Surgery, or Surgery of Other Regional Site(s), Distant Site(s) or Distant Lymph Nodes was performed. As an example, if surgery of another regional site occurred before the surgery of the primary site, the date in this field reflects the date the surgery of the other regional site was performed. See also RX Summ – Surg Prim Site [1290], RX Summ – Scope Reg LN Sur [1292], and RX Summ – Surg Oth Reg/Dis [1294].

Rationale
The dates on which different treatment modalities were started are used to evaluate whether the treatments were part of first-course therapy and to reconstruct the sequence of first-course treatment modes.

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date are stored in this dataset. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component is replaced by spaces. If there are no known date components, the fixed-length variable is completely blank.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

RX Date – Surgery Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1201_RXDtSurgeryFl	1201	2	NAACCR	1464-1465

Description
This flag explains why no appropriate value is in the field, RX Date – Surgery [1200].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information.

Codes (See Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions.)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any surgical procedure was performed).
11	No proper value is applicable in this context (e.g., no surgical procedure was performed; autopsy only case).
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., surgery was performed but the date is unknown).
Blank	A valid date value is provided in item Date-Surgery [1200], or the date was not expected to have been transmitted.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Summ – Surg Primary Site

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1290_RxSummSurgPrimSite	1290	2	SEER/CoC	1567-1568

Description
Site-specific code for the type of surgery to the primary site performed as part of the first course of treatment. This includes treatment given at all facilities as part of the first course of treatment.

Codes (In addition to the site-specific codes; refer to the most recent *FORDS* and SEER Program Code manual for additional instructions.)

00 None
No surgical procedure of primary site. Diagnosed at autopsy.

10-19 Site-specific code; tumor destruction
Tumor destruction, no pathologic specimen produced. Refer to Appendix E for the correct site-specific code for the procedure.

20-80 Site-specific codes; resection
Refer to Appendix E for the correct site-specific code for the procedure.

90 Surgery, NOS
A surgical procedure to the primary site was done, but no information on the type of surgical procedure is provided.

98 Site specific codes; special
Special code. Refer to Appendix E for the correct site-specific code for the procedure.

99 Unknown
Patient record does not state whether a surgical procedure of the primary site was performed and no information is available. Death certificate only.

Reference
Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Rx Summ – Scope Reg LN Sur

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1292_RxSummScopeRegLNSur	1292	1	SEER/CoC	1569-1569

Description
Describes the removal, biopsy, or aspiration of regional lymph node(s) at the time of surgery of the primary site or during a separate surgical event at all facilities.

Rationale
In evaluating quality-of-care and treatment practices, it is important to identify the removal, biopsy, or aspiration of regional lymph node(s) at the time of surgery of the primary site or during a separate surgical event.

Codes (Refer to the most recent *FORDS* and *SEER Program Code Manual* for additional instructions.)
0 None
1 Biopsy or aspiration of regional lymph node, NOS
2 Sentinel lymph node biopsy
3 Number of regional lymph nodes removed unknown, not stated; regional lymph nodes removed, NOS
4 1 to 3 regional lymph nodes removed
5 4 or more regional lymph nodes removed
6 Sentinel node biopsy and code 3, 4, or 5 at same time or timing not noted
7 Sentinel node biopsy and code 3, 4, or 5 at different times
9 Unknown or not applicable

Note
One important use of registry data is the tracking of treatment patterns over time. To compare contemporary treatment to previously published treatment based on former codes, or to data unmodified from pre-1998 definitions, the ability to differentiate surgeries in which four or more regional lymph nodes are removed is desirable. However, it is very important to note that the distinction between codes 4 and 5 is made to permit comparison of current surgical procedures with procedures coded in the past when the removal of fewer than 4 nodes was not reflected in surgery codes. It is not intended to reflect clinical significance when applied to a particular surgical procedure. It is important to avoid inferring, by data presentation or other methods, that one category is preferable to another within the intent of these items.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011,* Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Rx Summ – Surg Oth Reg/Dis

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1294_RxSummSurgOthRegDis	1294	1	SEER/CoC	1570-1570

Description
Records the surgical removal of distant lymph nodes or other tissue(s)/organ(s) beyond the primary site.

Rationale
The removal of non-primary tissue documents the extent of surgical treatment and is useful in evaluating the extent of metastatic involvement.

Codes (Refer to the most recent *FORDS* and *SEER Program Code Manual* for additional instructions.)
0 None; diagnosed at autopsy
1 Non-primary surgical procedure performed
2 Non-primary surgical procedure to other regional sites
3 Non-primary surgical procedure to distant lymph node(s)
4 Non-primary surgical procedure to distant site
5 Any combination of codes 2, 3, or 4
9 Unknown; death certificate only

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011,* Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Reason for No Surgery

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1340_ReasonNoSurg	1340	1	SEER/CoC	1576-1576

Description
Records the reason that no surgery was performed on the primary site.

Rationale
This data item provides information related to the quality of care and describes why primary site surgery was not performed.

Codes
0 Surgery of the primary site was performed.
1 Surgery of the primary site was not performed because it was not part of the planned first-course treatment.
2 Surgery of the primary site was not recommended/performed because it was contraindicated due to patient risk factors (comorbid conditions, advanced age, etc.).
5 Surgery of the primary site was not performed because the patient died prior to planned or recommended surgery.
6 Surgery of the primary site was not performed; it was recommended by the patient's physician, but was not performed as part of the first-course therapy. No reason was noted in the patient's record.
7 Surgery of the primary site was not performed; it was recommended by the patient's physician, but this treatment was refused by the patient, the patient's family member, or the patient's guardian. The refusal was noted in the patient record.
8 Surgery of the primary site was recommended, but it is unknown if it was performed. Further followup is recommended.
9 It is unknown if surgery of the primary site was recommended or performed. Death certificate-only cases and autopsy-only cases.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Rx Date – Radiation

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1210_RXDateRad	1210	8	CoC	1486-1493

Description
Records the date on which radiation therapy began at any facility that is part of the first course of treatment.

Rationale
The dates on which different treatment modalities were started are used to evaluate whether the treatments were part of first-course therapy and to reconstruct the sequence of first-course treatment modes.

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date are stored in this dataset. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component is replaced by spaces. If there are no known date components, the fixed-length variable is completely blank.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Date – Radiation Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1211_RXDtRadiationFl	1211	2	NAACCR	1494-1495

Description
This flag explains why no appropriate value is in the field, RX Date – Radiation [1210].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information.

Codes (See Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions.)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown whether any radiation therapy administered).
11	No proper value is applicable in this context (e.g., no radiation therapy administered; autopsy only case).
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., radiation therapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., radiation therapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow-up).
Blank	A valid date value is provided in item RX Date – Radiation [1210], or the date was not expected to have been transmitted.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Summ – Radiation

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1360_RxSummRadiation	1360	1	SEER	1580-1580

Description
Codes for the type of radiation therapy performed as part of the first course of treatment.

Note
Radiation to brain and central nervous system for leukemia and lung cases is coded as radiation in this field.

Codes
0 None
1 Beam radiation
2 Radioactive implants
3 Radioisotopes
4 Combination of 1 with 2 or 3
5 Radiation, NOS--method or source not specified
7 Patient or patient's guardian refused*
8 Radiation recommended, unknown if administered*
9 Unknown if radiation administered

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Summ – Surg/Rad Seq

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1380_RxSummSurgRadSeq	1380	1	SEER/CoC	1582-1582

Description

Codes for the sequencing of radiation and surgery given as part of the first course of treatment. See also RX Summ – Surg Prim Site [1290], RX Summ – Scope LN Surg [1292], RX Summ – Surg Oth Reg/Dis [1294], and RX Summ – Radiation [1360].

Codes

0 No radiation and/or no surgery; unknown if surgery and/or radiation given
2 Radiation before surgery
3 Radiation after surgery
4 Radiation both before and after surgery
5 Intraoperative radiation
6 Intraoperative radiation with other radiation given before or after surgery
9 Sequence unknown, but both surgery and radiation were given

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Reason for No Radiation

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1430_ReasonforNoRad	1430	1	CoC	1592-1592

Description

Code the reason the patient did not receive radiation treatment as part of first course of therapy. See also RX – Regional RX Modality [1570].

Codes

0 Radiation therapy was administered.
1 Radiation therapy was not administered because it was not part of the planned first-course treatment.
2 Radiation therapy was not administered because it was contraindicated due to patient risk factors (comorbid conditions, advanced age, etc).
5 Radiation therapy was not administered because the patient died prior to planned or recommended treatment.
6 Radiation therapy was not administered; it was recommended by the patient's physician, but was not administered as part of the first-course therapy. No reason was noted in the patient's record.
7 Radiation therapy was not administered; it was recommended by the patient's physician, but this treatment was refused by the patient, the patient's family member, or the patient"s guardian. The refusal was noted in the patient record.
8 Radiation therapy was recommended, but it is unknown if it was administered.
9 It is unknown if radiation therapy was recommended or administered. Death-certificate-only and autopsy-only cases.

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Date – Chemo

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1220_RXDateChemo	1220	8	CoC	1516-1523

Description
Date of initiation of chemotherapy that is part of the first course of treatment. See also RX Summ – Chemo [1390].

Rationale
The dates on which different treatment modalities were started are used to evaluate whether the treatments were part of first-course therapy and to reconstruct the sequence of first-course treatment modes.

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date are stored in this dataset. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component is replaced by spaces. If there are no known date components, the fixed-length variable is completely blank.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Date – Chemo Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1221_RXDtChemoFl	1221	2	NAACCR	1524-1525

Description
This flag explains why no appropriate value is in the field, RX Date – Chemo [1220].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information.

Codes (See Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions.)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if chemotherapy administered).
11	No proper value is applicable in this context (e.g., no chemotherapy administered; autopsy only case).
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow-up).
Blank	A valid date value is provided in item RX Date – Chemo [1220], or the date was not expected to have been transmitted.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Summ – Chemo

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1390_RxSummChemo	1390	2	SEER/CoC	1585-1586

Description
Codes for chemotherapy given as part of the first course of treatment or the reason chemotherapy was not given. Includes treatment given at all facilities as part of the first course.

Codes (Refer to the most recent version of *FORDS* for additional instructions.)
00 None, chemotherapy was not part of the planned first course of therapy.
01 Chemotherapy, NOS.
02 Chemotherapy, single agent.
03 Chemotherapy, multiple agents.
82 Chemotherapy was not recommended/administered because it was contraindicated due to patient risk factors (i.e., comorbid conditions, advanced age).
85 Chemotherapy was not administered because the patient died prior to planned or recommended therapy.
86 Chemotherapy was not administered. It was recommended by the patient's physician, but was not administered as part of first-course therapy. No reason was stated in the patient record.
87 Chemotherapy was not administered; it was recommended by the patient's physician, but this treatment was refused by the patient, the patient's family member, or the patient's guardian. The refusal was noted in the patient record.
88 Chemotherapy was recommended, but it is unknown if it was administered.
99 It is unknown whether a chemotherapeutic agent(s) was recommended or administered because it is not stated in patient record; death certificate-only cases.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011,* Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Rx Date – Hormone

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1230_RXDateHormone	1230	8	CoC	1526-1533

Description
Date of initiation for hormone therapy that is part of the first course of treatment. See also RX Summ – Hormone [1400].

Rationale
The dates on which different treatment modalities were started are used to evaluate whether the treatments were part of first-course therapy and to reconstruct the sequence of first-course treatment modes.

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date are stored in this dataset. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component is replaced by spaces. If there are no known date components, the fixed-length variable is completely blank.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Date – Hormone Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1231_RXDtHormoneFl	1231	2	NAACCR	1534-1535

Description
This flag explains why no appropriate value is in the field, RX Date – Hormone [1230].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information.

Codes (See Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions.)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any hormone therapy administered).
11	No proper value is applicable in this context (e.g., no hormone therapy administered; autopsy only cases).
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., hormone therapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., hormone therapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow-up).
Blank	A valid date value is provided in item RX Date-Hormone [1230], or the date was not expected to have been transmitted.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Summ – Horm

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1400_RxSummHorm	1400	2	SEER/CoC	1587-1588

Description
Records whether systemic hormonal agents were administered as first-course treatment at any facility, or the reason they were not given. Hormone therapy consists of a group of drugs that may affect the long-term control of a cancer's growth. It is not usually used as a curative measure.

Rationale
Systemic therapy may involve the administration of one or a combination of agents. This data item allows for the evaluation of the administration of hormonal agents as part of the first course of therapy.

Codes (Refer to the most recent *FORDS* and the *SEER Program Code Manual* for additional instructions.)

00 None, hormone therapy was not part of the planned first course of therapy.
01 Hormone therapy administered as first course therapy.
82 Hormone therapy was not recommended/administered because it was contraindicated due to patient risk factors (i.e., comorbid conditions, advanced age).
85 Hormone therapy was not administered because the patient died prior to planned or recommended therapy.
86 Hormone therapy was not administered. It was recommended by the patient's physician, but was not administered as part of first-course therapy. No reason was stated in the patient record.
87 Hormone therapy was not administered. It was recommended by the patient's physician, but this treatment was refused by the patient, the patient's family member, or the patient's guardian. The refusal was noted in the patient record.
88 Hormone therapy was recommended, but it is unknown if it was administered.
99 It is unknown whether a hormonal agent(s) was recommended or administered because it is not stated in the patient record. Death certificate-only cases.

Note
Information on endocrine surgery and/or endocrine radiation is coded in the field, RX Summ – Transplnt/Endocr [3250].

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011,* Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Rx Date – BRM

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1240_RXDateBRM	1240	8	CoC	1536-1543

Description
Date of initiation for immunotherapy (a.k.a. biological response modifier) that is part of the first course of treatment. See also RX Summ – BRM [1410].

Rationale
The dates on which different treatment modalities were started are used to evaluate whether the treatments were part of first course of therapy and to reconstruct the sequence of first-course treatment modes.

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date are stored in this dataset. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component is replaced by spaces. If there are no known date components, the fixed-length variable is completely blank.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Date – BRM Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1241_RXDtBRMFl	1241	2	NAACCR	1544-1545

Description
This flag explains why no appropriate value is in the field, RX Date – BRM [1240]. This data item was first available in Volume II Version 12 (effective January 2010).

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information.

Codes (See Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions.)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if immunotherapy administered).
11	No proper value is applicable in this context (e.g., no immunotherapy administered; autopsy only case).
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., immunotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., immune therapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow-up).
Blank	A valid date value is provided in item RX Date BRM [1240], or the date was not expected to have been transmitted.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Summ – BRM

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1410_RxSummBRM	1410	2	SEER/CoC	1589-1590

Description
Records whether immunotherapeutic (biologic response modifiers) agents were administered as first-course treatment at all facilities or the reason they were not given. Immunotherapy consists of biological or chemical agents that alter the immune system or change the host's response to tumor cells.

Rationale
Systemic therapy may involve the administration of one or a combination of agents. This data item allows for the evaluation of the administration of immunotherapeutic agents as part of the first course of therapy.

Codes (Refer to the most recent *FORDS* and the *SEER Program Code Manual* for additional instructions.)

00 None, immunotherapy was not part of the planned first course of therapy.
01 Immunotherapy administered as first course therapy.
82 Immunotherapy was not recommended/administered because it was contraindicated due to patient risk factors (i.e., comorbid conditions, advanced age).
85 Immunotherapy was not administered because the patient died prior to planned or recommended therapy.
86 Immunotherapy was not administered. It was recommended by the patient's physician, but was not administered as part of first-course therapy. No reason was stated in the patient record.
87 Immunotherapy was not administered. It was recommended by the patient's physician, but this treatment was refused by the patient, the patient's family member, or the patient's guardian. The refusal was noted in the patient record.
88 Immunotherapy was recommended, but it is unknown if it was administered.
99 It is unknown whether an immunotherapeutic agent(s) was recommended or administered because it is not stated in patient record; death certificate-only cases.

Note
Information on bone marrow transplants and stem cell transplants are coded in the field, RX SUMM – Transplnt/Endocr [3250].

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Rx Date – Other

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1250_RXDateOther	1250	8	CoC	1546-1553

Description
Date of initiation for other treatment that is part of the first course of treatment at any facility. See RX Summ – Other [1420].

Rationale
The dates on which different treatment modalities were started are used to evaluate whether the treatments were part of first-course therapy and to reconstruct the sequence of first-course treatment modes.

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date are stored in this dataset. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component is replaced by spaces. If there are no known date components, the fixed-length variable is completely blank.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Date – Other Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1251_RXDtOtherFl	1251	2	NAACCR	1554-1555

Description
This flag explains why no appropriate value is in the field, RX Date – Other [1250].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information.

Codes (See Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions.)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if other therapy administered).
11	No proper value is applicable in this context (e.g., no other treatment administered; autopsy only case).
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., other therapy administered but the date is unknown).
Blank	A valid date value is provided in item RX Date-Other [1250], or the date was not expected to have been transmitted.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Summ – Other

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1420_RxSummOther	1420	1	SEER/CoC	1591-1591

Description
Identifies other treatment given at all facilities that cannot be defined as surgery, radiation, or systemic therapy according to the defined data items in this manual. Treatment for reportable hematopoietic diseases can be supportive care, observation, or any treatment that does not meet the usual definition in which treatment modifies, controls, removes, or destroys proliferating cancer tissue. Such treatments include phlebotomy, transfusions, and aspirin.

Rationale
Information on other therapy is used to describe and evaluate the quality-of-care and treatment practices.

Codes (Refer to the most recent *FORDS* for additional coding instructions.)
0 None
1 Other
2 Other Experimental
3 Other-Double Blind
6 Other-Unproven
7 Refusal
8 Recommended
9 Unknown; unknown if administered

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Rad – Regional Rx Modality

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1570_RadRegRxModality	1570	2	CoC	1607-1608

Description
Records the dominant modality of radiation therapy used to deliver the clinically most significant regional dose to the primary volume of interest during the first course of treatment.

Rationale
Radiation treatment frequently is delivered in two or more phases that can be summarized as regional and boost treatments. To evaluate patterns of radiation oncology care, it is necessary to know which radiation resources were employed in the delivery of therapy. For outcomes analysis, the modalities used for each of these phases can be very important.

Codes
00 No radiation treatment
20 External beam, NOS
21 Orthovoltage
22 Cobalt-60, Cesium-137
23 Photons (2-5 MV)
24 Photons (6-10 MV)
25 Photons (11-19 MV)
26 Photons (> 19 MV)
27 Photons (mixed energies)
28 Electrons
29 Photons and electrons mixed
30 Neutrons, with or without photons/electrons
31 IMRT
32 Conformal or 3-D therapy
40 Protons
41 Stereotactic radiosurgery, NOS
42 Linac radiosurgery
43 Gamma Knife
50 Brachytherapy, NOS
51 Brachytherapy, Intracavitary, Low Dose Rate (LDR)
52 Brachytherapy, Intracavitary, High Dose Rate (HDR)
53 Brachytherapy, Interstitial, Low Dose Rate (LDR)
54 Brachytherapy, Interstitial, High Dose Rate (HDR)
55 Radium
60 Radio-isotopes, NOS
61 Strontium -- 89
62 Strontium -- 90
80 Combination modality, specified
98 Other, NOS
99 Unknown

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Summ – Systemic/Sur Seq

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1639_RxSummSysSurSe	1639	1	CoC	1616-1616

Description
Records the sequencing of systemic therapy (RX Summ – Chemo [1390], RX Summ – Hormone [1400], RX Summ – BRM [1410], and RX Summ – Transplnt/Endocr [3250]) and surgical procedures given as part of the first course of treatment. See also RX Summ – Surg Prim Site [1290], RX Summ – Scope LN Surg [1292], and RX Summ – Sug Oth Reg/Dis [1294].

Rationale
The sequence of systemic therapy and surgical procedures given as part of the first course of treatment cannot always be determined using the date on which each modality was started or performed. This data item can be used to more precisely evaluate the time of delivery of treatment to the patient.

Codes
0 No systemic therapy and/or surgical procedures; unknown if surgery and/or systemic therapy given
2 Systemic therapy before surgery
3 Systemic therapy after surgery
4 Systemic therapy both before and after surgery
5 Intraoperative systemic therapy
6 Intraoperative systemic therapy with other therapy administered before or after surgery
9 Sequence unknown, but both surgery and systemic therapy given

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Summ – Transplnt/Endocr

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3250_RxSummTransEndocr	3250	2	CoC	1583-1584

Description
Identifies systemic therapeutic procedures administered as part of the first course of treatment at all facilities. If none of these procedures were administered, then this item records the reason they were not performed. The therapeutic procedures include bone marrow transplants, stem cell harvests, surgical and/or radiation endocrine therapy.

Rationale
This data item allows the evaluation of patterns of treatment, which involve the alteration of the immune system or change the patient's response to tumor cells but do not involve the administration of antineoplastic agents.

Codes (Refer to the most recent *FORDS* for additional instructions.)

00 No transplant procedure or endocrine therapy was administered as part of first course therapy; diagnosed at autopsy.
10 Bone marrow transplant procedure was administered, but the type was not specified.
11 Bone marrow transplant--autologous.
12 Bone marrow transplant--allogeneic.
20 Stem cell harvest and infusion.
30 Endocrine surgery and/or endocrine radiation therapy.
40 Combination of endocrine surgery and/or radiation with a transplant procedure. (combination of codes 30 and 10, 11, 12 or 20).
82 Hematologic transplant and/or endocrine surgery/radiation was not recommended/administered because it was contraindicated due to patient risk factors (i.e., comorbid conditions, advanced age).
85 Hematologic transplant and/or endocrine surgery/radiation was not administered because the patient died prior to planned or recommended therapy.
86 Hematologic transplant and/or endocrine surgery/radiation was not administered. It was recommended by the patient's physician, but was not administered as part of first-course therapy. No reason was stated in the patient record.
87 Hematologic transplant and/or endocrine surgery/radiation was not administered; it was recommended by the patient's physician, but this treatment was refused by the patient, the patient's family member, or the patient's guardian; refusal noted in patient record.
88 Hematologic transplant and/or endocrine surgery/radiation was recommended, but it is unknown if it was administered.
99 It is unknown whether hematologic transplant and/or endocrine surgery/radiation was recommended or administered because it is not stated in patient record; death certificate-only cases.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Rx Summ – Treatment Status

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1285_RXSummTreatStatus	1285	1	SEER/CoC	1566-1566

Description
This data item is a summary of the status for all treatment modalities. It is used in conjunction with Date of Initial RX – SEER [1260] and/or Date of 1st Crs RX – CoC [1270] and each modality of treatment with their respective date field to document whether treatment was given or not given, whether it is unknown if treatment was given, or whether treatment was given on an unknown date. Also indicates active surveillance (watchful waiting).

Rationale
This field will document active surveillance (watchful waiting) and eliminate searching each treatment modality to determine whether treatment was given.

Codes
0 No treatment given
1 Treatment given
2 Active surveillance (watchful waiting)
9 Unknown if treatment was given

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Rx Coding System – Current

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1460_RXCodingSysCur	1460	2	NAACCR	1593-1594

Description
Code describing how treatment for this tumor now is coded.

Codes
00 Treatment data not coded/transmitted (i.e., all treatment fields [items 1200-1450 and 1500-1645] blank)
06 Treatment data coded according to *FORDS* manual
07 Treatment data coded according to 2010 *SEER Manual*
99 Other coding, including partial or nonstandard coding

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Chemo 1 NSC Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9751_Chemo1NSCNum	9751	6	CDC/NPCR-CER	804
N9751_Chemo1NSCNum	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
Breast, CML, Colon, Rectum

Description
Cancer Site
Breast, CML, Colon, Rectum

Description
NSC number (*see below for description of NSC numbers) for the first chemotherapy agent administered or planned **as all or part of the first course** of treatment at any facility.

Original agent NSC numbers were coded using the most current SEER*Rx (http://seer.cancer.gov/tools/seerrx/). Treatment given or planned at all facilities **as all or part of the first course** of therapy was included.

SEER*Rx allows you to look up the treatment category for over 1600 drugs and the individual treatment categories for the drugs in over 700 regimens. The SEER*Rx screen provides information on generic name, brand name, NSC number, drug category and subcategory, cancer sites where the drug is used, and other details, including whether or not the drug should be coded as treatment. Patient's medical records and available pharmacy data sets should be included as potential sources for obtaining this data.

*Please note that the term "NSC" [number] refers to (part of) the acronym of the Cancer Chemotherapy National Service Center (CCNSC)). The NSC number is a National Service Center assigned number from the National Cancer Institute (NCI). This number is assigned to a drug during its investigational phase, prior to the adoption of a United States Adopted Name (USAN). A full list of NSC codes is maintained in SEER*Rx.

**During the creation of the analytic data set, whenever possible, project staff converted NSC numbers to agent names using information provided by NCI's SEER*Rx program and SAS programs designed specifically for this purpose. For this reason, we recommend that an analyst including specific agent information in their analysis use the name variables (N9751_Chemo1NSCNum through N9756_Chemo6NSCNum), which have already been converted in a consistent and appropriate manner across the full data set for all agent NSC numbers that had a match in SEER*Rx or in the list that collaborators were provided during the course of data collection. However, agent name should not be used by itself to determine if a specific *treatment* was given. There may be some agents in which an NSC number appears, but there is no matching agent name. For instance, some coded NSC numbers were entered incorrectly and no corresponding agent name exists for the number, and some patients may have been part of a clinical trail in which complete identifying agent information was unknown.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
The NSC codes are 6 digit numbers, as found in the SEER*Rx database, with a leading 0 where necessary.

NSC Number (enter the actual number)

000000 Chemotherapy was not planned to be administered OR no additional chemotherapy agents were planned

999996 Patient was enrolled in a clinical trial that included chemotherapy and it is **known** that the patient was assigned to receive the placebo

999997 Patient was enrolled in a clinical trial that included chemotherapy and it is **not known** if the patient was assigned to receive the actual chemotherapy agent or the

999998 Chemotherapy was planned and/or administered, but the agent NSC code was unknown or was not assigned in SEER*Rx. In these cases, the code "999998" was a temporary code while a permanent code was obtained. If the record stated that the agent was recommended and the patient refused without specifying which agent was recommended, the code "999998" is a permanent code.

999999 Unknown if chemotherapy therapy planned OR not required for this primary site/histology

Example 1

Regimen

If the chart states that the patient's first course of treatment was "FLOX regimen," SEER*Rx returned a screen that shows the FLOX regimen consists of 5-fluorouracil (code as chemotherapy), folinic acid -- generic name leucovorin (this is an ancillary agent, and therefore is not collected), and oxaliplatin (code as chemotherapy). Each chemotherapy drug name's corresponding NSC number was obtained and entered in the Chemo_NSC data fields in order:

Chemotherapy Agent #1 NSC Number would correspond to 5-fluorouracil (entry = 027640)
Chemotherapy Agent #2 NSC Number would correspond to oxaliplatin (entry = 266046)
Chemotherapy Agent #3, #4, #5, and #6 NSC Number would correspond to "No additional chemotherapy documented" (entry = 000000)

Example 2

Single Agent

If the chart states that the patient's first course of treatment was a single chemotherapeutic agent, SEER*Rx will list that agent's NSC number.

Chemotherapy Agent #1 NSC Number would correspond to the agent's NSC number as listed in SEER*RX and Chemotherapy Agent #2, Agent #3, #4, #5, and #6 NSC Number would correspond to "No additional chemotherapy documented" (entry = 000000)

Chemo 2 NSC Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9752_Chemo2NSCNum	9752	6	CDC/NPCR-CER	850
N9752_Chemo2NSCNum	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
Breast, CML, Colon, Rectum

Description
See description listed for Chemo 1 NSC Number in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding listed for Chemo 1 NSC Number in this data dictionary.

Chemo 3 NSC Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9753_Chemo3NSCNum	9753	6	CDC/NPCR-CER	1300
N9753_Chemo3NSCNum	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 NSC Number in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 NSC Number in this data dictionary.

Chemo 4 NSC Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9754_Chemo4NSCNum	9754	6	CDC/NPCR-CER	1346
N9754_Chemo4NSCNum	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 NSC Number in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 NSC Number in this data dictionary.

Chemo 5 NSC Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9755_Chemo5NSCNum	9755	6	CDC/NPCR-CER	1624
N9755_Chemo5NSCNum	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 NSC Number in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 NSC Number in this data dictionary.

Chemo 6 NSC Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9756_Chemo6NSCNum	9756	6	CDC/NPCR-CER	1670
N9756_Chemo6NSCNum	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 NSC Number in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 NSC Number in this data dictionary.

Chemo 1 Num Doses Planned

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9761_Chemo1NumDosesPlan	9761	2	CDC/NPCR-CER	810

Cancer Site
Breast, CML, Colon, Rectum

Description
For the first chemotherapy agent, this item records the total **number** of chemotherapy doses **planned** to be delivered to the patient **as all or part of the first course of treatment** at any facility.

Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
Record the total number of chemotherapy doses planned.

00	Chemotherapy was not planned OR no additional chemotherapy agents were planned
01-96	Actual number of chemotherapy doses planned*
97	97 or more chemotherapy doses planned
98	Chemo was planned and/or administered, but number doses is unknown
99	Unknown if chemotherapy planned OR not required for this primary site/histology

*For doses 1-9, use a leading 0.

*If the agent is given via a prescription to be taken at home and/or self-administered, the total number of doses **planned** should be coded "98." For example, Gleevec would be coded "98."*

Example
Patient's first course of therapy is consistent with the FLOX treatment protocol for stage II and III colon cancer. FLOX consists of FULV regimen (5-FU, 500 mg/m^2 iv bolus weekly x 6; LV, 500 mg/m^2 iv weekly x 6, each 8 week cycle x 3) with oxaliplatin 85 mg/m^2 iv administered on weeks 1, 3, and 5 of each 8 week cycle x 3.

Drug	Dose	Schedule (D= Day #)	# of Cycles	Total # Doses Planned	Total Dose
5-FU	500 mg/m2	Weekly x 6 weeks (i.e., D 1, 8, 15, 22, 29, 36)	3	6 x 3 = 18	14,490 mg
Folinic Acid/ Leucovorin*	500 mg/m2	Weekly x 6 weeks (i.e., D 1, 8, 15, 22, 29, 36)	Not Applicable	Not Applicable	Not Applicable
Oxaliplatin	85 mg/m2	Week 1, 3, and 5 (D 1, 15, 29)	3	3 x 3 = 9	1232 mg

*Folinic Acid/Leucovorin is considered an ancillary agent, no information related to it will be collected.

In the above example, for this set of variables, the relevant coding would be:

Chemotherapy Agent #1 Planned Number of Doses is **18** (corresponding to the 5-FU, which is also the corresponding chemotherapy agent collected in variable Chemo1NSC previously)

Chemotherapy Agent #2 Planned Number of Doses is **09** (corresponding to the oxaliplatin, which is also the corresponding chemotherapy agent collected in variable Chemo2NSC previously)

Chemotherapy Agent #3 Planned Number of Doses will be coded **00**, no additional chemo agent Received doses given

Chemotherapy Agent #4 Planned Number of Doses will be coded **00**, no additional chemo agent received doses given

Chemotherapy Agent #5 Planned Number of Doses will be coded **00**, no additional chemo agent received doses given

Chemotherapy Agent #6 Planned Number of Doses will be coded **00**, no additional chemo agent received doses given

Chemo 2 Number Doses Planned

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9762_Chemo2NumDosesPlan	9762	2	CDC/NPCR-CER	856

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Number Doses Planned in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Number Doses Planned in this data dictionary.

Chemo 3 Number Doses Planned

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9763_Chemo3NumDosesPlan	9763	2	CDC/NPCR-CER	1306

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Number Doses Planned in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Number Doses Planned in this data dictionary.

Chemo 4 Number Doses Planned

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9764_Chemo4NumDosesPlan	9764	2	CDC/NPCR-CER	1352

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Number Doses Planned in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Number Doses Planned in this data dictionary.

Chemo 5 Number Doses Planned

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9765_Chemo5NumDosesPlan	9765	2	CDC/NPCR-CER	1630

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Number Doses Planned in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Number Doses Planned in this data dictionary.

Chemo 6 Number Doses Planned

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9766_Chemo6NumDosesPlan	9766	2	CDC/NPCR-CER	1676

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Number Doses Planned in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Number Doses Planned in this data dictionary.

Chemotherapy 1 Planned Dose

Chemotherapy 1 Planned Dose Unit

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9771_Chemo1PlanDose	9771	6	CDC/NPCR-CER	812
I9781_Chemo1PlanDoseUnit	9781	2	CDC/NPCR-CER	818

Cancer Site
Breast, CML, Colon, Rectum

Description
For the first chemotherapy agent, this item records the planned **total dose** to be delivered to the patient **as all or part of the first course** of treatment at any facility (note that this is the total dosage, not the total *number* of doses.)

Total dose for a given agent is the sum of each dose planned for that agent. All doses planned were added into a single total value; the per dose rate or individual dose value were not recorded.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
Record the overall total chemotherapy dose planned, including the units (when dose volume is less than 6 digits, use leading zeros)

Chemo1PlanDose Enter Dose Volume (as numbers)		**Chemo1PlanDoseU** Select Units	
######	Chemotherapy dose planned	00	Chemo was not planned OR no additional chemotherapy agents were planned
000000	Chemotherapy was not planned OR no additional chemotherapy agents were planned	01	Mg
999998	Chemotherapy was planned and/or administered, but the dose planned is unknown	02	Grams
		07	Other (please specify in chemo text field)
999999	Unknown if chemotherapy planned or not required for this primary site/histology	98	Chemo was planned and/or administered, but dose planned unk
		99	Unk if chemo planned or not required for this primary site/histology

*If the agent is given via a prescription to be taken at home and/or self-administered, the **planned** dose and units should be coded "999998" and "98." For example, Gleevec would be coded "999998" and "98."*

For more information regarding chemo dose, see Appendix F: Chemotherapy Example.

Chemotherapy 2 Planned Dose

Chemotherapy 2 Planned Dose Unit

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9772_Chemo2PlanDose	9772	6	CDC/NPCR-CER	858
I9782_Chemo2PlanDoseUnit	9782	2	CDC/NPCR-CER	864

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Planned Dose and Planned Dose Units in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Planned Dose and Planned Dose Units in this data dictionary.

Chemotherapy 3 Planned Dose

Chemotherapy 3 Planned Dose Unit

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9773_Chemo3PlanDose	9773	6	CDC/NPCR-CER	1308
I9783_Chemo3PlanDoseUnit	9783	2	CDC/NPCR-CER	1314

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Planned Dose and Planned Dose Units in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Planned Dose and Planned Dose Units in this data dictionary.

Chemotherapy 4 Planned Dose

Chemotherapy 4 Planned Dose Unit

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9774_Chemo4PlanDose	9774	6	CDC/NPCR-CER	1354
I9784_Chemo4PlanDoseUnit	9784	2	CDC/NPCR-CER	1360

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Planned Dose and Planned Dose Units in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Planned Dose and Planned Dose Units in this data dictionary.

Chemotherapy 5 Planned Dose

Chemotherapy 5 Planned Dose Unit

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9775_Chemo5PlanDose	9775	6	CDC/NPCR-CER	1632
I9785_Chemo5PlanDoseUnit	9785	2	CDC/NPCR-CER	1638

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Planned Dose and Planned Dose Units in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Planned Dose and Planned Dose Units in this data dictionary.

Chemotherapy 6 Planned Dose

Chemotherapy 6 Planned Dose Unit

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9776_Chemo6PlanDose	9776	6	CDC/NPCR-CER	1678
I9786_Chemo6PlanDoseUnit	9786	2	CDC/NPCR-CER	1684

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Planned Dose and Planned Dose Units in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Planned Dose and Planned Dose Units in this data dictionary.

Chemo 1 Number Doses Received

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9791_Chemo1NumDosesRecvd	9791	2	CDC/NPCR-CER	820

Cancer Site
Breast, CML, Colon, Rectum

Description
For the first chemotherapy agent, this item records the total **number** of chemotherapy doses delivered to the patient **as all or part of the first course of treatment** at any facility. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
Record the total number of chemotherapy doses received.

00	Chemotherapy was not received OR no additional chemotherapy agents were received
01-96	Actual number of chemotherapy doses received*
97	97 or more chemotherapy doses received
98	Chemotherapy was received, but the number of doses is unknown
99	Unknown if chemotherapy received or not required for this primary site/histology

*For doses 1-9, use a leading 0.

*If the agent is given via a prescription to be taken at home and/or self-administered, the total number of doses **received** should be coded "99." For example, Gleevec would be coded "99."*

Example
Patient's first course of therapy is consistent with the FLOX treatment protocol for stage II and III colon cancer. FLOX consists of FULV regimen (5-FU, 500 mg/m^2 iv bolus weekly x 6; LV, 500 mg/m^2 iv weekly x 6, each 8 week cycle x 3) with oxaliplatin 85 mg/m^2 iv administered on weeks 1, 3, and 5 of each 8 week cycle x 3.

Patient became too ill to finish third cycle (as planned), and missed the last two doses of 5-FU and LV, and the last dose of oxaliplatin.

Drug	Dose	Schedule (D=Day #)	# of Cycles	Total # Doses Received	Total Dose Received
5-FU	500 mg/m2	Weekly x 6 weeks (i.e., D 1, 8, 15, 22, 29, 36)	3	6 x 3 = 18 less 2 doses = **16 total**	12,880 mg
Folinic Acid/ Leucovorin*	500 mg/m2	Weekly x 6 weeks (i.e., D 1, 8, 15, 22, 29, 36)	Not Applicable	Not Applicable	Not Applicable
Oxaliplatin	85 mg/m2	Week 1, 3, and 5 (D 1, 15, 29)	3	3 x 3 = 9 less 1 dose = **8 total**	1095 mg

*Folinic Acid/Leucovorin is considered an ancillary agent, no information related to it will be collected.

In the above example, for this set of variables, the relevant coding would be:

Chemotherapy Agent #1 Received Number of Doses is **16** (corresponding to the 5-FU, which is also the corresponding chemotherapy agent collected in variable Chemo1NSC and Chemo1PlanDose previously)

Chemotherapy Agent #2 Received Number of Doses is **08** (corresponding to the oxaliplatin, which is also the corresponding chemotherapy agent collected in variable Chemo2NSC and Chemo2PlanDose previously)

Chemotherapy Agent #3 Received Number of Doses will be coded **00**, no additional chemo agent Received doses given

Chemotherapy Agent #4 Received Number of Doses will be coded **00**, no additional chemo agent received doses given

Chemotherapy Agent #5 Received Number of Doses will be coded **00**, no additional chemo agent received doses given

Chemotherapy Agent #6 Received Number of Doses will be coded **00**, no additional chemo agent received doses given

Chemo 2 Number Doses Received

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9792_Chemo2NumDosesRecvd	9792	2	CDC/NPCR-CER	866

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Number Doses Received in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Number Doses Received in this data dictionary.

Chemo 3 Number Doses Received

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9793_Chemo3NumDosesRecvd	9793	2	CDC/NPCR-CER	1316

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Number Doses Received in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Number Doses Received in this data dictionary.

Chemo 4 Number Doses Received

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9794_Chemo4NumDosesRecvd	9794	2	CDC/NPCR-CER	1362

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Number Doses Received in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Number Doses Received in this data dictionary.

Chemo 5 Number Doses Received

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9795_Chemo5NumDosesRecvd	9795	2	CDC/NPCR-CER	1640

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Number Doses Received in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Number Doses Received in this data dictionary.

Chemo 6 Number Doses Received

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9796_Chemo6NumDosesRecvd	9796	2	CDC/NPCR-CER	1686

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Number Doses Received in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Number Doses Received in this data dictionary.

Chemo 1 Received Dose

Chemo 1 Received Dose Unit

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9801_Chemo1RecvdDose	9801	6	CDC/NPCR-CER	822
I9811_Chemo1RecvdDoseUnit	9811	2	CDC/NPCR-CER	828

Cancer Site
Breast, CML, Colon, Rectum

Description
For the first chemotherapy agent, this item records the **total dose** actually delivered to the patient **as all or part of the first course** of treatment at any facility. (Note that this is the total dosage received, not the total *number* of doses.) Total dose for a given agent is the sum of each dose given for that agent. All doses received were added into a single total value; the per dose rate or the individual dose value were not recorded.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Coding
Record the overall total chemotherapy dose received, including the units (when dose volume is less than 6 digits, use leading zeros)

Chemo1RcvDose Enter Dose Volume (as numbers)		**Chemo1RcvDoseU** Select Units	
######	Chemotherapy dose received	00	Chemo was not received OR no additional chemotherapy agents were received
000000	Chemotherapy was not received OR no additional chemo agents were received	01	Mg
999998	Chemotherapy was received, but the dose Received is unknown	02	Grams
		07	Other (please specify in chemo text field, item # XX)
999999	Unknown if chemotherapy received OR not required for this primary site/histology	98	Chemo received, but dose recd unk
		99	Unk if chemo received OR not required for this primary site/histology

*If the agent is given via a prescription to be taken at home and/or self-administered, the **received** dose and units should be coded "999999" and "99." For example, Gleevec would be coded "999999" and "99."*

For more information regarding chemo dose, see Appendix F.

Chemo 2 Received Dose

Chemo 2 Received Dose Unit

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9802_Chemo2RecvdDose	9802	6	CDC/NPCR-CER	868
I9812_Chemo2RecvdDoseUnit	9812	2	CDC/NPCR-CER	874

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Received Dose and Received Dose Units in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Received Dose and Received Dose Units in this data dictionary.

Chemo 3 Received Dose

Chemo 3 Received Dose Unit

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9803_Chemo3RecvdDose	9803	6	CDC/NPCR-CER	1318
I9813_Chemo3RecvdDoseUnit	9813	2	CDC/NPCR-CER	1324

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Received Dose and Received Dose Units in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Received Dose and Received Dose Units in this data dictionary.

Chemo 4 Received Dose

Chemo 4 Received Dose Unit

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9804_Chemo4RecvdDose	9804	6	CDC/NPCR-CER	1364
I9814_Chemo4RecvdDoseUnit	9814	2	CDC/NPCR-CER	1370

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Received Dose and Received Dose Units in this data dictionary.

Note
If there as more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Received Dose and Received Dose Units in this data dictionary.

Chemo 5 Received Dose

Chemo 5 Received Dose Unit

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9805_Chemo5RecvdDose	9805	6	CDC/NPCR-CER	1642
I9815_Chemo5RecvdDoseUnit	9815	2	CDC/NPCR-CER	1648

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Received Dose and Received Dose Units in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Received Dose and Received Dose Units in this data dictionary.

Chemo 6 Received Dose

Chemo 6 Received Dose Unit

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9806_Chemo6RecvdDose	9806	6	CDC/NPCR-CER	1688
I9816_Chemo6RecvdDoseUnit	9816	2	CDC/NPCR-CER	1694

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Received Dose and Received Dose Units in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Received Dose and Received Dose Units in this data dictionary.

Chemo 1 Start Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9821_Chemo1StartDate	9821	8	CDC/NPCR-CER	830

Cancer Site
Breast, CML, Colon, Rectum

Description
For the first chemotherapy agent, this item records the date for the first day of the first cycle that the patient started chemotherapy **as all or part of the first course** of treatment at any facility. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
Record the first date the patient received the first cycle of chemotherapy **as all or part of the first course** of treatment.

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Example
Patient's first course of therapy is consistent with the FLOX treatment protocol for stage II and III colon cancer. FLOX consists of FULV regimen (5-FU, 500 mg/m^2 iv bolus weekly x 6; LV, 500 mg/m^2 iv weekly x 6, each 8 week cycle x 3) with oxaliplatin 85 mg/m^2 iv administered on weeks 1, 3, and 5 of each 8 week cycle x 3. **Patient's first treatment was on May 24, 2010.**
Patient became too ill to finish third cycle (as planned), and missed the last two doses of 5-FU and LV, and the last dose of oxaliplatin. Last day chemotherapy administered was October 4, 2010 for 5-FU and LV (patient missed October 11 and 18 planned treatments) and September 27 for oxaliplatin (patient missed October 11 planned treatment). See chart for full listing of how dates correspond to 3 cycles, 8 weeks each:

Cycle 1:
Week 1 (Day 1): May 24, 2010 Start 5-FU, LV; oxaliplatin
Week 2 (Day 8): May 31, 2010 Continue 5-FU, LV
Week 3 (Day 15): June 7, 2010 Continue 5-FU, LV; oxaliplatin
Week 4 (Day 22): June 14, 2010 Continue 5-FU, LV
Week 5 (Day 29): June 21, 2010 Continue 5-FU, LV; oxaliplatin
Week 6 (Day 36): June 28, 2010 Continue 5-FU, LV
Week 7 (Day 43): July 5, 2010 No chemo agents scheduled
Week 8 (Day 50): July 12, 2010 No chemo agents scheduled

Cycle 2:
Week 1 (Day 1): July 19, 2010 Start 5-FU, LV; oxaliplatin
Week 2 (Day 8): July 26, 2010 Continue 5-FU, LV
Week 3 (Day 15): August 2, 2010 Continue 5-FU, LV; oxaliplatin
Week 4 (Day 22): August 9, 2010 Continue 5-FU, LV
Week 5 (Day 29): August 16, 2010 Continue 5-FU, LV; oxaliplatin
Week 6 (Day 36): August 23, 2010 Continue 5-FU, LV
Week 7 (Day 43): August 30, 2010 No chemo agents scheduled
Week 8 (Day 50): September 6, 2010 No chemo agents scheduled

Cycle 3:
Week 1: September 13, 2010 Start 5-FU, LV; oxaliplatin
Week 2: September 20, 2010 Continue 5-FU, LV
Week 3: September 27, 2010 Continue 5-FU, LV; oxaliplatin

Week 4: October 4, 2010 Continue 5-FU, LV
Week 5: October 11, 2010 Continue 5-FU, LV; oxaliplatin -- Patient became too ill to finish third cycle and missed this treatment
Week 6: October 18, 2010 Continue 5-FU, LV -- Patient became too ill to finish third cycle and missed this treatment
Week 7: October 25, 2010 No chemo agents scheduled
Week 8: November 1, 2010 No chemo agents scheduled

In the above example, for this variable, the relevant coding would be:
Chemotherapy Agent #1 Start Date is **20100524**
Chemotherapy Agent #2 Start Date is **20100524**
Chemotherapy Agent #3, #4, #5, and #6 State Date is **Blank**

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date are stored in this dataset. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component is replaced by spaces. If there are no known date components, the fixed-length variable is completely blank.

Chemo 2 Start Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9822_Chemo2StartDate	9822	8	CDC/NPCR-CER	876

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Start Date in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Start Date in this data dictionary.

Chemo 3 Start Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9823_Chemo3StartDate	9823	8	CDC/NPCR-CER	1326

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Start Date in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Start Date in this data dictionary.

Chemo 4 Start Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9824_Chemo4StartDate	9824	8	CDC/NPCR-CER	1372

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Start Date in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Start Date in this data dictionary.

Chemo 5 Start Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9825_Chemo5StartDate	9825	8	CDC/NPCR-CER	1650

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Start Date in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Start Date in this data dictionary.

Chemo 6 Start Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9826_Chemo6StartDate	9826	8	CDC/NPCR-CER	1696

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 Start Date in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 Start Date in this data dictionary.

Chemo 1 Start Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9831_Chemo1StartDateFlag	9831	2	CDC/NPCR-CER	838

Cancer Site
Breast, CML, Colon, Rectum

Description
This flag explains why no appropriate value is in the field, Chemo 1 Start Date [9821].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any chemotherapy agent administered)
11	No proper value is applicable in this context (e.g., no chemotherapy agent administered)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow up).
Blank	A valid date value is provided in item Chemo 1 Start Date [9821], or the date was not expected to have been transmitted

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Chemo 2 Start Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9832_Chemo2StartDateFlag	9832	2	CDC/NPCR-CER	884

Cancer Site
Breast, CML, Colon, Rectum

Description
This flag explains why no appropriate value is in the field, Chemo 2 Start Date [9822].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any chemotherapy agent administered)
11	No proper value is applicable in this context (e.g., no chemotherapy agent administered)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow up).
Blank	A valid date value is provided in item Chemo 2 Start Date [9822], or the date was not expected to have been transmitted

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Chemo 3 Start Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9833_Chemo3StartDateFlag	9833	2	CDC/NPCR-CER	1334

Cancer Site
Breast, CML, Colon, Rectum

Description
This flag explains why no appropriate value is in the field, Chemo 3 Start Date [9823].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any chemotherapy agent administered)
11	No proper value is applicable in this context (e.g., no chemotherapy agent administered)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow up).
Blank	A valid date value is provided in item Chemo 3 Start Date [9823], or the date was not expected to have been transmitted

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Chemo 4 Start Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9834_Chemo4StartDateFlag	9834	2	CDC/NPCR-CER	1380

Cancer Site
Breast, CML, Colon, Rectum

Description
This flag explains why no appropriate value is in the field, Chemo 4 Start Date [9824].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any chemotherapy agent administered)
11	No proper value is applicable in this context (e.g., no chemotherapy agent administered)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow up).
Blank	A valid date value is provided in item Chemo 4 Start Date [9824], or the date was not expected to have been transmitted

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Chemo 5 Start Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9835_Chemo5StartDateFlag	9835	2	CDC/NPCR-CER	1658

Cancer Site
Breast, CML, Colon, Rectum

Description
This flag explains why no appropriate value is in the field, Chemo 5 Start Date [9825].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any chemotherapy agent administered)
11	No proper value is applicable in this context (e.g., no chemotherapy agent administered)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow up).
Blank	A valid date value is provided in item Chemo 5 Start Date [9825], or the date was not expected to have been transmitted

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Chemo 6 Start Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9836_Chemo6StartDateFlag	9836	2	CDC/NPCR-CER	1704

Cancer Site
Breast, CML, Colon, Rectum

Description
This flag explains why no appropriate value is in the field, Chemo 6 Start Date [9826].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any chemotherapy agent administered)
11	No proper value is applicable in this context (e.g., no chemotherapy agent administered)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow up).
Blank	A valid date value is provided in item Chemo 6 Start Date [9826], or the date was not expected to have been transmitted

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Chemo 1 End Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9841_Chemo1EndDate	9841	8	CDC/NPCR-CER	840

Cancer Site
Breast, CML, Colon, Rectum

Description
For the first chemotherapy agent, this item records the date for the last day of the last cycle that the patient received chemotherapy **as all or part of the first course** of treatment at any facility. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
Record the last date that the patient received chemotherapy **as all or part of the first course** of treatment

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy end date should be left blank and the corresponding date flag should be coded "12."

Example
Patient's first course of therapy is consistent with the FLOX treatment protocol for stage II and III colon cancer. FLOX consists of FULV regimen (5-FU, 500 mg/m^2 iv bolus weekly x 6; LV, 500 mg/m^2 iv weekly x 6, each 8 week cycle x 3) with oxaliplatin 85 mg/m^2 iv administered on weeks 1, 3, and 5 of each 8 week cycle x 3. **Patient's first treatment was on May 24, 2010.**
Patient became too ill to finish third cycle (as planned), and missed the last two doses of 5-FU and LV, and the last dose of oxaliplatin. Last day chemotherapy administered was October 4, 2010 for 5-FU and LV (patient missed October 11 and 18 planned treatments) and September 27 for oxaliplatin (patient missed October 11 planned treatment). See chart for full listing of how dates correspond to 3 cycles, 8 weeks each:

Cycle 1:
Week 1 (Day 1): May 24, 2010 Start 5-FU, LV; oxaliplatin
Week 2 (Day 8): May 31, 2010 Continue 5-FU, LV
Week 3 (Day 15): June 7, 2010 Continue 5-FU, LV; oxaliplatin
Week 4 (Day 22): June 14, 2010 Continue 5-FU, LV
Week 5 (Day 29): June 21, 2010 Continue 5-FU, LV; oxaliplatin
Week 6 (Day 36): June 28, 2010 Continue 5-FU, LV
Week 7 (Day 43): July 5, 2010 No chemo agents scheduled
Week 8 (Day 50): July 12, 2010 No chemo agents scheduled

Cycle 2:
Week 1 (Day 1): July 19, 2010 Start 5-FU, LV; oxaliplatin
Week 2 (Day 8): July 26, 2010 Continue 5-FU, LV
Week 3 (Day 15): August 2, 2010 Continue 5-FU, LV; oxaliplatin
Week 4 (Day 22): August 9, 2010 Continue 5-FU, LV
Week 5 (Day 29): August 16, 2010 Continue 5-FU, LV; oxaliplatin
Week 6 (Day 36): August 23, 2010 Continue 5-FU, LV
Week 7 (Day 43): August 30, 2010 No chemo agents scheduled
Week 8 (Day 50): September 6, 2010 No chemo agents scheduled

Cycle 3:
Week 1: September 13, 2010 Start 5-FU, LV; oxaliplatin
Week 2: September 20, 2010 Continue 5-FU, LV

Week 3: September 27, 2010 Continue 5-FU, LV; oxaliplatin
Week 4: October 4, 2010 Continue 5-FU, LV
Week 5: October 11, 2010 Continue 5-FU, LV; oxaliplatin -- Patient became too ill to finish third cycle and missed this treatment
Week 6: October 18, 2010 Continue 5-FU, LV -- Patient became too ill to finish third cycle and missed this treatment
Week 7: October 25, 2010 No chemo agents scheduled
Week 8: November 1, 2010 No chemo agents scheduled

In the above example, for this variable, the relevant coding would be:
Chemotherapy Agent #1 End Date is **20101004**
Chemotherapy Agent #2 End Date is **20100927**
Chemotherapy Agent #3, #4, #5, and #6 End Date is **Blank**

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date are stored in this dataset. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component is replaced by spaces. If there are no known date components, the fixed-length variable is completely blank.

Chemo 2 End Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9842_Chemo2EndDate	9842	8	CDC/NPCR-CER	886

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 End Date in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 End Date in this data dictionary.

Chemo 3 End Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9843_Chemo3EndDate	9843	8	CDC/NPCR-CER	1336

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 End Date in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 End Date in this data dictionary.

Chemo 4 End Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9844_Chemo4EndDate	9844	8	CDC/NPCR-CER	1382

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 End Date in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 End Date in this data dictionary.

Chemo 5 End Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9845_Chemo5EndDate	9845	8	CDC/NPCR-CER	1660

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 End Date in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 End Date in this data dictionary.

Chemo 6 End Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9846_Chemo6EndDate	9846	8	CDC/NPCR-CER	1706

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Chemo 1 End Date in this data dictionary.

Note
If there was more than one chemotherapy agent planned, the order in which they were entered as agent 1, agent 2, or agent 3, etc., is unimportant as all of the agent's information was consistently entered in the same order across all chemotherapy fields (i.e., the same chemo agent is entered as agent 1 across NSC, chemo number doses, chemo total dose, and chemo date fields).

Codes
See coding information listed for Chemo 1 End Date in this data dictionary.

Chemo 1 End Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9851_Chemo1EndDateFlag	9851	2	CDC/NPCR-CER	848

Cancer Site
Breast, CML, Colon, Rectum

Description
This flag explains why no appropriate value is in the field, Chemo 1 End Date [9841].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any chemotherapy agent administered)
11	No proper value is applicable in this context (e.g., no chemotherapy agent administered)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow up).
Blank	A valid date value is provided in item Chemo 1 End Date [9841], or the date was not expected to have been transmitted

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Chemo 2 End Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9852_Chemo2EndDateFlag	9852	2	CDC/NPCR-CER	894

Cancer Site
Breast, CML, Colon, Rectum

Description
This flag explains why no appropriate value is in the field, Chemo 2 End Date [9842].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Rationale
Prior to *NAACCR Standards for Cancer Registries, Volume II: Data Standards and Data Dictionary, Fifteenth Edition,* Version 12 (through 2009 diagnosis), date fields included codes that provided information other than dates. As part of an initiative to standardize date fields, new fields were introduced to accommodate non-date information that had previously been transmitted in date fields. The non-standard data items for the CDC/NPCR-CER project dates fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any chemotherapy agent administered)
11	No proper value is applicable in this context (e.g., no chemotherapy agent administered)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow up).
Blank	A valid date value is provided in item Chemo 2 End Date [9842], or the date was not expected to have been transmitted

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Chemo 3 End Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9853_Chemo3EndDateFlag	9853	2	CDC/NPCR-CER	1344

Cancer Site
Breast, CML, Colon, Rectum

Description
This flag explains why no appropriate value is in the field, Chemo 3 End Date [9843].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any chemotherapy agent administered)
11	No proper value is applicable in this context (e.g., no chemotherapy agent administered)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow up).
Blank	A valid date value is provided in item Chemo 3 End Date [9843], or the date was not expected to have been transmitted

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Chemo 4 End Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9854_Chemo4EndDateFlag	9854	2	CDC/NPCR-CER	1390

Cancer Site
Breast, CML, Colon, Rectum

Description
This flag explains why no appropriate value is in the field, Chemo 4 End Date [9844].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any chemotherapy agent administered)
11	No proper value is applicable in this context (e.g., no chemotherapy agent administered)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow up).
Blank	A valid date value is provided in item Chemo 4 End Date [9844], or the date was not expected to have been transmitted

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Chemo 5 End Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9855_Chemo5EndDateFlag	9855	2	CDC/NPCR-CER	1668

Cancer Site
Breast, CML, Colon, Rectum

Description
This flag explains why no appropriate value is in the field, Chemo 5 End Date [9845].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any chemotherapy agent administered)
11	No proper value is applicable in this context (e.g., no chemotherapy agent administered)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow up).
Blank	A valid date value is provided in item Chemo 5 End Date [9845], or the date was not expected to have been transmitted

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Chemo 6 End Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9856_Chemo6EndDateFlag	9856	2	CDC/NPCR-CER	1714

Cancer Site
Breast, CML, Colon, Rectum

Description
This flag explains why no appropriate value is in the field, Chemo 6 End Date [9846].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions)

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any chemotherapy agent administered)
11	No proper value is applicable in this context (e.g., no chemotherapy agent administered)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., chemotherapy administered but date is unknown).
15	Information is not available at this time, but it is expected that it will be available later (e.g., chemotherapy is planned as part of the first course of therapy, but had not been started at the time of the most recent follow up).
Blank	A valid date value is provided in item Chemo 6 End Date [9846], or the date was not expected to have been transmitted

If the agent is given via a prescription to be taken at home and/or self-administered, the chemotherapy start date should be left blank and the corresponding date flag should be coded "12."

Chemotherapy Completion Status

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9859_ChemoComplStat	9859	1	CDC/NPCR-CER	1716

Cancer Site
Breast, CML, Colon, Rectum

Description
This data item is used to code the completion status of chemotherapy for the first course of treatment. The chemotherapy must be part of the **first course of treatment**. Chemotherapy not completed occurs only in the situation where chemotherapy was terminated prematurely. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data.

Codes
Code indicating whether or not the patient's chemotherapy was completed as outlined in the initial treatment plan.

0 No chemo treatment
1 Treatment completed as planned
2 Chemo not completed as planned, patient health/complications
3 Chemo not completed as planned, patient expired
4 Chemo not completed as planned, patient/family choice
5 Chemo not completed as planned, cytopenia
6 Chemo not completed as planned, other reason
7 Chemo treatment extends beyond the end of data collection for this project
8 Chemotherapy administered, unknown if completed
9 Unknown if Chemo therapy given or not required for this primary site/histology

If the agent is given via a prescription and/or self-administered, the chemotherapy completion status should be coded "8." For example, Gleevec should be coded "8."

Hormone 1 NSC Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9861_Hormone1NSCNum	9861	6	CDC/NPCR-CER	2050
N9861_Hormone1NSCNum	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
Breast, CML, Colon, Rectum

Description
NSC number (*see below for description of NSC numbers) for the first hormonal agent administered or planned **as all or part of the first course** of treatment at any facility. Code original agent NSC numbers using the most current SEER*Rx (http://seer.cancer.gov/tools/seerrx/). Include treatment given or planned at all facilities **as all or part of the first course** of therapy. SEER*Rx allows you to look up the treatment category for over 1600 drugs and the individual treatment categories for the drugs in over 700 regimens. The SEER*Rx screen provides information on generic name, brand name, NSC number, drug category and subcategory, cancer sites where the drug is used, and other details, including whether or not the drug should be coded as treatment. Patient's medical records and available pharmacy data sets should be included as potential sources for obtaining this data.

*Please note that the term "NSC" [number] refers to (part of) the acronym of the Cancer Chemotherapy National Service Center (CCNSC). The NSC number is a National Service Center assigned number from the National Cancer Institute (NCI). This number is assigned to a drug during its investigational phase, prior to the adoption of a United States Adopted Name (USAN). A full list of NSC codes is maintained in SEER*Rx.

**During the creation of the analytic data set, whenever possible, project staff converted NSC numbers to agent names using information provided by NCI's SEER*Rx program and SAS programs designed specifically for this purpose. For this reason, we recommend that an analyst including specific agent information in their analysis use the name variables (N9861_Hormone1NSCNum and N9862_Hormone2NSCNum), which have already been converted in a consistent and appropriate manner across the full data set for all agent NSC numbers that had a match in SEER*Rx or in the list that collaborators were provided during the course of data collection. However, agent name should not be used by itself to determine if a specific *treatment* was given. There may be some agents in which an NSC number appears, but there is no matching agent name. For instance, some coded NSC numbers were entered incorrectly and no corresponding agent name exists for the number, and some patients may have been part of a clinical trail in which complete identifying agent information was unknown.

Codes
The NSC codes are entered as 6 digit numbers, as found in the SEER*Rx database, with a leading 0 where necessary.

######	NSC Number (enter the actual number)
000000	Hormonal therapy was not planned to be administered OR no additional hormonal therapy agents were planned
999998	Hormone therapy was planned, but the agent NSC code was unknown or was not assigned in SEER*Rx. In these cases, the code "999998" was a temporary code while a permanent code was obtained. If the record stated that the agent was recommended and the patient refused without specifying which agent was recommended, the code "999998" is a permanent code.
999999	Unknown if hormonal therapy was planned or not required for this primary site/histology

Example
If the chart states that patient's first course of treatment included Tamoxifen, SEER*Rx returned a screen that displays information on Tamoxifen. The corresponding NSC number was obtained and entered in the data fields using the following pattern:

Hormonal Agent #1 NSC Number would correspond to Tamoxifen (entry = 180973)

Hormonal Agent #2 NSC Number would correspond to “No additional hormonal therapy documented” (entry = 000000)

As noted in the *FORDS* manual and the *SEER* manual, when coding hormone:

- Prednisone is recorded as hormonal therapy when administered as one of the treatment agents used in combination with chemotherapy, such as MOPP (mechlorethamine, vincristine, procarbazine, prednisone) or COPP (cyclophosphamide, vincristine, procarbazine, prednisone) whether it affects cancer cells or not.
- Prednisone is not coded as hormone therapy when it is administered for reasons other than with chemotherapeutic treatment.
- Hormone therapy is not coded when used to prolong a patient’s life by controlling symptoms, to alleviate pain, or to make the patient more comfortable.

Hormone 2 NSC Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9862_Hormone2NSCNum	9862	6	CDC/NPCR-CER	2056
N9862_Hormone2NSCNum	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for Hormone 1 NSC Number in this data dictionary.

Codes
See coding information listed for Hormone 1 NSC Number in this data dictionary.

BRM 1 NSC Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9871_BRM1NSC	9871	6	CDC/NPCR-CER	2062
N9871_BRM1NSC	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
Breast, CML, Colon, Rectum

Description
NSC number (*see below for description of NSC numbers) for the first BRM agent administered or planned **as all or part of the first course** of treatment at any facility. Code original agent NSC numbers using the most current SEER*Rx (http://seer.cancer.gov/tools/seerrx/). Include treatment given or planned at all facilities **as all or part of the first course** of therapy. SEER*Rx allows you to look up the treatment category for over 1600 drugs and the individual treatment categories for the drugs in over 700 regimens. The SEER*Rx screen provides information on generic name, brand name, NSC number, drug category and subcategory, cancer sites where the drug is used, and other details, including whether or not the drug should be coded as treatment. Patient's medical records and available pharmacy data sets should be included as potential sources for obtaining this data.

*Please note that the term "NSC" [number] refers to (part of) the acronym of the Cancer Chemotherapy National Service Center (CCNSC). The NSC number is a National Service Center assigned number from the National Cancer Institute (NCI). This number is assigned to a drug during its investigational phase, prior to the adoption of a United States Adopted Name (USAN). A full list of NSC codes is maintained in SEER*Rx.

**During the creation of the analytic data set, whenever possible, project staff converted NSC numbers to agent names using information provided by NCI's SEER*Rx program and SAS programs designed specifically for this purpose. For this reason, we recommend that an analyst including specific agent information in their analysis use the name variables (N9871_BRM1NSC and N9872_BRM2NSC), which have already been converted in a consistent and appropriate manner across the full data set for all agent NSC numbers that had a match in SEER*Rx or in the list that collaborators were provided during the course of data collection. However, agent name should not be used by itself to determine if a specific *treatment* was given. There may be some agents in which an NSC number appears, but there is no matching agent name. For instance, some coded NSC numbers were entered incorrectly and no corresponding agent name exists for the number, and some patients may have been part of a clinical trail in which complete identifying agent information was unknown.

Codes
The NSC codes are entered as 6 digit numbers, as found in the SEER*Rx database, with a leading 0 where necessary.

######	NSC Number (enter the actual number)
000000	BRM therapy was not planned to be administered OR no additional BRM therapy agents were planned
777777	Bone marrow transplant, stem cell harvests, or surgical and/or radiation endocrine therapy
999998	BRM therapy was planned, but the agent NSC code was unknown or was not assigned in SEER*Rx. In these cases, the code "999998" was a temporary code while a permanent code was obtained. If the record stated that the agent was recommended and the patient refused without specifying which agent was recommended, the code "999998" is a permanent code.
999999	Unknown if BRM therapy was planned or not required for this primary site/histology

Example
If the chart states that patient's first course of treatment included diftitox, SEER*Rx returned a screen that displays information on diftitox. The corresponding NSC number was obtained and entered in the data fields using the following pattern:

BRM Agent #1 NSC Number would correspond to diftitox (entry = 714744)

BRM Agent #2 NSC Number would be no additional BRM administered (entry = Blank)

If patient received bone marrow transplant, stem cell harvests, or surgical and/or radiation endocrine therapy that do not fit in these parameters, code 777777 was recorded.

777777 Bone marrow transplant, stem cell harvests, or surgical and/or radiation endocrine therapy

BRM 2 NSC Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9872_BRM2NSC	9872	6	SEER-Rx	2068
N9872_BRM2NSC	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
Breast, CML, Colon, Rectum

Description
See description information listed for BRM 1 NSC Number in this data dictionary.

Codes
See coding information listed for BRM 1 NSC Number in this data dictionary.

Granulocyte CSF Status

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9880_GranulocyteCSFStat	9880	1	CDC/NPCR-CER	2074

Cancer Site
Breast, CML, Colon, Rectum

Description
This data item is used to code if the patient was given Granulocyte-Growth Factors/Cytokines (G-CSF) agents during the twelve months after diagnosis. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data. SEER*Rx allows you to look up the treatment category for over 1600 drugs and the individual treatment categories for the drugs in over 700 regimens, including G-CSF agents. The SEER*Rx screen provides information on generic name, brand name, drug category and subcategory. Three forms of G-CSF are commercially available: filgrastim (Neupogen®), pegfilgrastim (Neulasta®), and lenograstim (Granocyte®). For additional information and descriptions on growth factors/cytokines for cancer, please use the following website as a reference http://www.cancer.gov/cancertopics/factsheet/Therapy/biological .

Examples of agents that fall into this category are the following:

- Filgrastim (Neupogen®) (brand)
- Pegfilgrastim (Neulasta®) (brand)
- Lenograstim (Granocyte®) (brand)

Codes
Code indicating whether or not the patient received G-CSF agents during the first twelve months of treatment after date of diagnosis.

0 No G-CSF treatment given
1 G-CSF treatment was given
7 G-CSF treatment prescribed – patient, patient's family member, or patient's guardian refused
8 G-CSF treatment prescribed, unknown if administered
9 Unknown if G-CSF therapy given or not required for this primary site/histology

Erythro Growth Factor Sta

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9881_ErythroGroFactStat	9881	1	CDC/NPCR-CER	2075

Cancer Site
Breast, CML, Colon, Rectum

Description
This data item is used to code if the patient was given Erythrocyte-Growth Factors/Cytokines agents during the twelve months after diagnosis. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data. For additional information and descriptions on growth factors/cytokines for cancer, please use the following website as a reference http://www.cancer.gov/cancertopics/factsheet/Therapy/biological .

Examples of agents that fall into this category are the following:

- Epoetin alfa - Procrit® (brand)
- Darbepoietin alfa - Aranesp® (brand)

Codes
Code indicating whether or not the patient received Erythrocyte-Growth Factors/Cytokines agents during the first twelve months of treatment after date of diagnosis.

0 No Erythrocyte-Growth Factors/Cytokines treatment given
1 Erythrocyte-Growth Factors/Cytokines therapy was given
7 Erythrocyte-Growth Factors/Cytokines treatment prescribed – patient, patient's family member, or patient's guardian refused
8 Erythrocyte-Growth Factors/Cytokines treatment prescribed, unknown if administered
9 Unknown if Erythrocyte-Growth Factors/Cytokines therapy given or not required for this primary site/histology

Thrombocyte Growth Factor Sta

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9882_ThrombocyteGroFactStat	9882	1	CDC/NPCR-CER	2076

Cancer Site
Breast, CML, Colon, Rectum

Description
This data item is used to code if the patient was given Thrombocyte-Growth Factors/Cytokines agents during the twelve months after diagnosis. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data. For additional information and descriptions on growth factors/cytokines for cancer, please use the following website as a reference http://www.cancer.gov/cancertopics/factsheet/Therapy/biological .

An example of an agent that falls into this category is the following:

- Oprelvekin - Neumega® (brand)

Codes
Code indicating whether or not the patient received Thrombocyte-Growth Factors/Cytokines agents during the first twelve months of treatment after date of diagnosis.

0 No Thrombocyte-Growth Factors/Cytokines treatment given
1 Thrombocyte-Growth Factors/Cytokines treatment was given
7 Thrombocyte-Growth Factors/Cytokines treatment prescribed – patient, patient's family member, or patient's guardian refused
8 Thrombocyte-Growth Factors/Cytokines treatment prescribed, unknown if administered
9 Unknown if Thrombocyte-Growth Factors/Cytokines therapy given or not required for this primary site/histology

Section IV: Stage/Prognostic Factors

Collaborative Stage

For the records in this dataset, the Collaborative Stage Data Collection System (CS) algorithm was used to derive AJCC 7th Edition TNM variables, stage group, and SEER Summary Stage 2000. The CS was designed by a joint task force including representatives from SEER, ACoS, CDC, NAACCR, NCRA, CCCR, CPAC, and AJCC, to provide a single uniform set of codes and rules for coding extent of disease (EOD) and stage information to meet the needs of all of the participating standard setters. When CS data items are coded, a computer algorithm provides the derivation of T, N, M, and stage-based on AJCC Cancer Staging Manual 6th & 7th Editions, SEER Summary Stage 1977, and SEER Summary Stage 2000.

Regional Nodes Positive

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I820_ReglNodesPositive	820	2	SEER/CoC	914-915

Description
Records the exact number of regional nodes examined by the pathologist and found to contain metastases.

Rationale
This data item is necessary for pathologic staging, and it serves as a quality measure for pathology reports and the extent of the surgical evaluation and treatment of the patient.

Codes

00	All nodes examined are negative
01-89	1-89 nodes are positive (code exact number of nodes positive)
90	90 or more nodes are positive
95	Positive aspiration of lymph node(s) was performed
97	Positive nodes are documented, but the number is unspecified
98	No nodes were examined
99	It is unknown whether nodes are positive; not applicable; not stated in patient record

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Regional Nodes Examined

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I830_ReglNodesExam	830	2	SEER/CoC	916-917

Description
Records the total number of regional lymph nodes that were removed and examined by the pathologist.

Rationale
This data item serves as a quality measure of the pathologic and surgical evaluation and treatment of the patient.

Codes

00	No nodes were examined
01-89	1-89 nodes were examined (code for the exact number of regional lymph nodes examined)
90	90 or more nodes were examined
95	No regional nodes were removed, but aspiration of regional nodes was performed
96	Regional lymph node removal was documented as a sampling, and the number of nodes is unknown/not stated
97	Regional lymph node removal was documented as a dissection, and the number of nodes is unknown/not stated
98	Regional lymph nodes were surgically removed, but the number of lymph nodes is unknown/not stated and not documented as a sampling or dissection; nodes were examined, but the number is unknown
99	It is unknown whether nodes were examined; not applicable or negative; not stated in patient record

CS Tumor Size

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2800_CSTumorSize	2800	3	AJCC	985-987

Description
Records the largest dimension or diameter of the **primary tumor** in millimeters.

Rationale
Tumor size at diagnosis is an independent prognostic indicator for many tumors and it is used by Collaborative Staging to derive some TNM-T codes.

Codes

Code	Description
000	No mass/tumor found
001-988	Exact size in millimeters
989	989 millimeters or larger
990	Microscopic focus or foci only and no size of focus is given
991	Described as "less than 1 cm"
992	Described as "less than 2 cm," or "greater than 1 cm," or "between 1 cm and 2 cm"
993	Described as "less than 3 cm," or "greater than 2 cm," or "between 2 cm and 3 cm"
994	Described as "less than 4 cm," or "greater than 3 cm," or "between 3 cm and 4 cm"
995	Described as "less than 5 cm," or "greater than 4 cm," or "between 4 cm and 5 cm"
996-998	**SITE-SPECIFIC CODES WHERE NEEDED*** **Breast:** http://web2.facs.org/cstage/breast/Breast_aab.html **Colon:** http://web2.facs.org/cstage/colon/Colon_aad.html **CML:** http://web2.facs.org/cstage/hemeretic/HemeRetic_ana.html **Rectal:** http://web2.facs.org/cstage/rectum/Rectum_aae.html
999	Unknown; size not stated Not documented in patient record
988	Not applicable

Reference
Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Extension

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2810_CSExt	2810	3	AJCC	988-990

Description
Identifies contiguous growth (extension) of the primary tumor within the organ of origin or its direct extension into neighboring organs. For certain sites such as ovary, discontinuous metastasis is coded in *CS Extension*.

Rationale
Tumor extension at diagnosis is a prognostic indicator used by Collaborative Staging to derive some TNM-T codes and some SEER Summary Stage codes.

Codes

Code	Description	TNM7 Map	TNM6 Map	SS77 Map	SS2000 Map
000	In situ; non-invasive	Tis	Tis	IS	IS
	SITE/HISTOLOGY-SPECIFIC CODES* **Breast:** http://web2.facs.org/cstage/breast/Breast_bak.html **Colon:** http://web2.facs.org/cstage/colon/Colon_bao.html **CML:** http://web2.facs.org/cstage/hemeretic/HemeRetic_bci.html **Rectal:** http://web2.facs.org/cstage/rectum/Rectum_bbf.html				
800	Further contiguous extension				
950	No evidence of primary tumor	T0	T0	U	U
999	Unknown; extension not stated Primary tumor cannot be assessed Not documented in patient record	TX	TX	U	U

Considerations for Use
This variable provides detailed information and allows stratification that may not be available when using the stage grouping. Caution should be used to avoid stratification that may introduce biases due to small case counts.

Reference
Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Tumor Size/Ext Eval

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2820_CSSizeExtEval	2820	1	AJCC	991-991

Description
Records how the codes for the two items *CS Tumor Size* [2800] and *CS Extension* [2810] were determined, based on the diagnostic methods employed.

Rationale
This item is used by Collaborative Staging to describe whether the staging basis for the TNM-T code is clinical or pathological and to record applicable prefix and suffix descriptors used with TNM staging.

Codes*

Code	Description	Staging Basis
0	**Does not meet criteria for AJCC pathologic staging:** No surgical resection done. Evaluation based on physical examination, imaging examination, or other non-invasive clinical evidence. No autopsy evidence used.	c
1	**Does not meet criteria for AJCC pathologic staging:** No surgical resection done. Evaluation based on endoscopic examination, diagnostic biopsy, including fine needle aspiration biopsy, or other invasive techniques, including surgical observation without biopsy. No autopsy evidence used. *See Notes 1 and 2 below.*	c
2	**Meets criteria for AJCC pathologic staging:** No surgical resection done, but evidence derived from autopsy (tumor was suspected or diagnosed prior to autopsy). *See Note 3 below.*	p
3	**Either meets criteria for AJCC pathologic staging:** Surgical resection performed WITHOUT pre-surgical systemic treatment or radiation **OR** surgical resection performed, unknown if pre-surgical systemic treatment or radiation performed **AND** Evaluation based on evidence acquired before treatment, supplemented or modified by the additional evidence acquired during and from surgery, particularly from pathologic examination of the resected specimen. No surgical resection done. Evaluation based on positive biopsy of highest T classification. *See Note 3 below.*	p
5	**Does not meet criteria for AJCC y-pathologic (yp) staging:** Surgical resection performed AFTER neoadjuvant therapy and tumor size/extension based on clinical evidence, unless the pathologic evidence at surgery (AFTER neoadjuvant) is more extensive (see code 6).	c
6	**Meets criteria for AJCC y-pathologic (yp) staging:** Surgical resection performed AFTER neoadjuvant therapy AND tumor size/extension based on pathologic evidence, because pathologic evidence at surgery is more extensive than clinical evidence before treatment. *See Note 4 below.*	yp
8	**Meets criteria for autopsy (a) staging:** Evidence from autopsy only (tumor was unsuspected or undiagnosed prior to autopsy)	a

9	Unknown if surgical resection done Not assessed; cannot be assessed Unknown if assessed Not documented in patient record ***For sites with no TNM schema:*** Not applicable. *See Note 5 below*.	c

Reference

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Lymph Nodes

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2830_CSLymphNodes	2830	3	AJCC	992-994

Description
Identifies the regional lymph nodes, clinically and/or pathologically, involved with cancer at the time of diagnosis.

Rationale
The involvement of specific regional lymph nodes is a prognostic indicator used by Collaborative Staging to derive some TNM-N codes and SEER Summary Stage codes.

Codes

Code	Description	TNM7 Map	TNM6 Map	SS77 Map	SS2000 Map
000	No regional lymph node involvement	N0	N0	None	None
	SITE/HISTOLOGY-SPECIFIC CODES* **Breast:** http://web2.facs.org/cstage/breast/Breast_daj.html **Colon:** http://web2.facs.org/cstage/colon/Colon_dan.html **CML:** http://web2.facs.org/cstage/hemeretic/HemeRetic_dna.html **Rectal:** http://web2.facs.org/cstage/rectum/Rectum_dax.html				
999	Unknown; regional lymph nodes not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	NX	U	U

For schemas that do not use the CS Lymph Nodes field:

Code	Description
988	Not applicable; Information not collected for this schema

Considerations for Use
This variable provides detailed information and allows stratification that may not be available when using the stage grouping. Caution should be used to avoid stratification that may introduce biases due to small case counts.

Reference
Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Lymph Nodes Eval

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2840_CSLymphNodesEval	2840	1	AJCC	995-995

Description
Records how the code for CS Lymph Nodes [2830] was determined, based on the diagnostic methods employed.

Rationale
This data item is used by Collaborative Staging to describe whether the staging basis for the TNM-N code is clinical or pathological and to record applicable prefix and suffix descriptors used with TNM staging.

Codes*

Code	Description	Staging Basis
0	**Does not meet criteria for AJCC pathologic staging:** No regional lymph nodes removed for examination. Evaluation based on physical examination, imaging examination, or other non-invasive clinical evidence. No autopsy evidence used.	c
1	**Does not meet criteria for AJCC pathologic staging based on at least one of the following criteria:** No regional lymph nodes removed for examination. Evaluation based on endoscopic examination or other invasive techniques, including surgical observation without biopsy. No autopsy evidence used. **OR** Fine needle aspiration, incisional or core needle biopsy, or excisional biopsy of regional lymph nodes or sentinel nodes as part of the diagnostic workup WITHOUT removal of the primary site adequate for pathologic T classification (treatment).	c
2	**Meets criteria for AJCC pathologic staging:** No regional lymph nodes removed for examination, but evidence derived from autopsy (tumor was suspected or diagnosed prior to autopsy).	p
3	**Meets criteria for AJCC pathologic staging based on at least one of the following criteria:** Any microscopic assessment of regional nodes (including FNA, incisional or core needle biopsy, excisional biopsy, sentinel node biopsy or node resection) WITH removal of the primary site adequate for pathologic T classification (treatment) or biopsy assessment of the highest T category. **OR** Any microscopic assessment of a regional node in the highest N category, regardless of the T category information.	p
5	**Does not meet criteria for AJCC y-pathologic (yp) staging:** Regional lymph nodes removed for examination AFTER neoadjuvant therapy and lymph node evaluation based on clinical evidence, unless the pathologic evidence at surgery (AFTER neoadjuvant treatment) is more extensive (see code 6).	c

6	**Meets criteria for AJCC y-pathologic (yp) staging:** Regional lymph nodes removed for examination AFTER neoadjuvant therapy AND lymph node evaluation based on pathologic evidence, because the pathologic evidence at surgery is more extensive than clinical evidence before treatment. *See Note 1.*	yp
8	**Meets criteria for AJCC autopsy (a) staging:** Evidence from autopsy; tumor was unsuspected or undiagnosed prior to autopsy.	a
9	Unknown if lymph nodes removed for examination Not assessed; cannot be assessed Unknown if assessed Not documented in patient record ***For sites that have no TNM staging:*** Not applicable; staging basis is displayed as a blank	c

Reference

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Mets at Dx

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2850_CSMetsDx	2850	2	AJCC	996-997

Description
Identifies the distant site(s) of metastatic involvement at time of diagnosis.

Rationale
The presence of metastatic disease at diagnosis is an independent prognostic indicator, and it is used by Collaborative Staging to derive TNM-M codes and SEER Summary Stage codes.

Codes

Code	Description	TNM7 Map	TNM6 Map	SS77 Map	SS2000 Map
00	No distant metastasis	M0	M0	None	None
10	Distant lymph node(s)	M1	M1	D	D
	SITE/HISTOLOGY-SPECIFIC CODES WHERE NEEEDED* **Breast:** http://web2.facs.org/cstage/breast/Breast_hau.html **Colon:** http://web2.facs.org/cstage/colon/Colon_hae.html **CML:** http://web2.facs.org/cstage/hemeretic/HemeRetic_hna.html **Rectal:** http://web2.facs.org/cstage/rectum/Rectum_hag.html				
40	Distant metastases except code 10 Carcinomatosis	M1	M1	D	D
	SITE/HISTOLOGY-SPECIFIC CODES WHERE NEEDED*				
50	40 + 10	M1	M1	D	D
60	Distant metastasis, NOS Stated as M1 with no other information on distant metastasis	M1	M1	D	D
99	Unknown; distant metastasis not stated Distant metastasis cannot be assessed Not documented in patient record	M0	MX	U	U

For schemas that do not use the CS Mets at Dx field:

Code	Description
98	Not applicable; Information not collected for this schema

Considerations for Use
This variable provides detailed information and allows stratification that may not be available when using the stage grouping. Caution should be used to avoid stratification that may introduce biases due to small case counts.

Reference
Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Mets Eval

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2860_CSMetsEval	2860	1	AJCC	998-998

Description
Records how the code for CS Mets at Dx [2850] was determined based on the diagnostic methods employed.

Rationale
This data item is used by Collaborative Staging to describe whether the staging basis for the TNM-M code is clinical or pathological and to record applicable prefix and suffix descriptors used with TNM staging.

Codes*

Code	Description	Staging Basis
0	**Does not meet criteria for AJCC pathologic staging of distant metastasis:** Evaluation of distant metastasis based on physical examination, imaging examination, and/or other non-invasive clinical evidence. No pathologic examination of metastasis performed or pathologic examination was negative.	c
1	**Does not meet criteria for AJCC pathologic staging of distant metastasis:** Evaluation of distant metastasis based on endoscopic examination or other invasive technique, including surgical observation without biopsy. No pathologic examination of metastasis performed or pathologic examination was negative.	c
2	**Meets criteria for AJCC pathologic staging of distant metastasis:** No pathologic examination of metastatic specimen done prior to death, but positive metastatic evidence derived from autopsy (tumor was suspected or diagnosed prior to autopsy).	p
3	**Meets criteria for AJCC pathologic staging of distant metastasis:** Specimen from metastatic site microscopically positive WITHOUT pre-surgical systemic treatment or radiation **OR** specimen from metastatic site microscopically positive, unknown if pre-surgical systemic treatment or radiation performed **OR** specimen from metastatic site microscopically positive prior to neoadjuvant treatment	p
5	**Does not meet criteria for AJCC y-pathologic (yp) staging of distant metastasis:** Specimen from metastatic site microscopically positive WITH pre-surgical systemic treatment or radiation, BUT metastasis based on clinical evidence.	c
6	**Meets criteria for AJCC y-pathologic (yp) staging of distant metastasis:** Specimen from metastatic site microscopically positive WITH pre-surgical systemic treatment or radiation, BUT metastasis based on pathologic evidence. *See Note 1.*	yp
8	**Meets criteria for AJCC autopsy (a) staging of distant metastasis:** Evidence from autopsy based on examination of positive metastatic tissue AND tumor was unsuspected or undiagnosed prior to autopsy.	a

9	Not assessed; cannot be assessed Unknown if assessed Not documented in patient record ***For sites with no TNM staging***: Not applicable	c

Reference

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

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http://web2.facs.org/cstage/schemalistabc.html

CS Site-Specific Factor 01

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2880_CSSSF1	2880	3	AJCC	1003-1005

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Brain, CNSOther, IntracranialGland]
CS Site-Specific Factor 1: World Health Organization (WHO) Grade Classification

Code	Description
010	Grade I
020	Grade II
030	Grade III
040	Grade IV
988	Not applicable: Information not collected for this case (If this item is required by your standard setter, use of code 988 will result in an edit error.)
998	No histologic examination of primary site
999	Not documented in medical record Unknown; WHO grade not stated

[Breast]
CS Site-Specific Factor 1: Estrogen Receptor (ER) Assay

Code	Description
000	OBSOLETE DATA CONVERTED V0203 See code 998 Test not done (test not ordered and not performed)
010	Positive/elevated
020	Negative/normal; within normal limits
030	Borderline; undetermined whether positive or negative

080	OBSOLETE DATA CONVERTED V0203 See code 997 Ordered, but results not in chart
988	Not applicable: Information not collected for this case (If this item is required by your standard setter, use of code 988 will result in an edit error.)
996	Test ordered, results not interpretable
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information Not documented in patient record

[CML]
(Note that JAK-2 is required to be coded for any hematopoietic, reticuloendothelial, immunoproliferative, myeloproliferative, or myelodysplastic disease for which JAK-2 is tested)

Code	Description
000	JAK-2 result stated as negative
010	JAK2 positive for mutation V617F in exon 14
020	JAK2 positive for mutation of exon 12
800	JAK2 positive for other specified mutation
810	JAK2 positive for more than one mutation
850	JAK2 positive NOS; specific mutation(s) not stated
888	OBSOLETE DATA CONVERTED V0200 See code 988 Not applicable for this site
988	Not applicable: Information not collected for this case (May include cases converted from code 888 used in CSv1 for "Not applicable" or when the item was not collected. If this item is required to derive T, N, M, or any stage, use of code 988 may result in an error.)
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)

999	Unknown or no information Not documented in patient record

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Site-Specific Factor 02

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2890_CSSSF2	2890	3	AJCC	1006-1008

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[**Breast]**
CS Site-Specific Factor 2: Progesterone Receptor (PR) Assay

Code	Description
000	OBSOLETE DATA CONVERTED V0203 See code 998 Test not done (test was not ordered and was not performed)
010	Positive/elevated
020	Negative/normal; within normal limits
030	Borderline; undetermined whether positive or negative
080	OBSOLETE DATA CONVERTED V0203 See code 997 Ordered, but results not in chart
988	Not applicable: Information not collected for this case (If this item is required by your standard setter, use of code 988 will result in an edit error.)
996	Test ordered, results not interpretable
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information Not documented in patient record

[CML]
CS Site-Specific Factor 2

Code	Description
888	OBSOLETE DATA CONVERTED V0200 See code 988 Not applicable for this site
988	Not applicable: Site-specific factor not defined

[Colon, Rectum]
CS Site-Specific Factor 2: Clinical Assessment of Regional Lymph Nodes

Code	Description
000	Nodes not clinically evident; imaging of regional nodes performed and nodes not mentioned
010	Metastasis in 1 regional node, determined clinically Stated as clinical N1a
020	Metastases in 2-3 regional nodes, determined clinically Stated as clinical N1b
030	Tumor deposits without regional nodal metastasis Stated as clinical N1c
100	Metastases in 1-3 regional nodes, determined clinically Stated as clinical N1 [NOS]
110	Metastases in 4-6 regional nodes, determined clinically Stated as clinical N2a
120	Metastases in 7 or more regional nodes, determined clinically Stated as clinical N2b
200	Metastases in 4 or more regional nodes, determined clinically Stated as clinical N2 [NOS]
400	Clinically positive regional node(s), NOS
888	OBSOLETE DATA CONVERTED V0200 See code 988 Not applicable for this site

988	Not applicable: Information not collected for this case (May include cases converted from code 888 used in CSv1 for "Not applicable" or when the item was not collected. If this item is required to derive T, N, M, or any stage, use of code 988 may result in an error.)
999	Regional lymph node(s) involved pathologically, clinical assessment not stated Unknown if regional lymph nodes clinically evident Not documented in patient record

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Site-Specific Factor 03

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2900_CSSSF3	2900	3	AJCC	1009-1011

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Breast]
CS Site-Specific Factor 3: Number of Positive Ipsilateral Level I-II Axillary Lymph Nodes

Code	Description
000	All ipsilateral axillary nodes examined negative
001-089	1 - 89 nodes positive (Exact number of nodes positive)
090	90 or more nodes positive
095	Positive aspiration of lymph node(s)
097	Positive nodes, number unspecified
098	No axillary nodes examined
099	Unknown if axillary nodes are positive Not documented in patient record
988	Not applicable: Information not collected for this case (If this item is required by your standard setter, use of code 988 will result in an edit error.)

[CML]

CS Site-Specific Factor 3

Code	Description
888	OBSOLETE DATA CONVERTED V0200 See code 988 Not applicable for this site
988	Not applicable: Site-specific factor not defined

[Colon, Rectum]
CS Site-Specific Factor 3: Carcinoembryonic Antigen (CEA) Lab Value

Code	Description
000	0.0 nanograms/milliliter (ng/ml) exactly
001	0.1 or less ng/ml Stated as less than 0.1 ng/ml with no exact value
002-979	0.2-97.9 ng/ml (Exact value to nearest tenth in ng/ml)
980	0.2-97.9 ng/ml
988	Not applicable: Information not collected for this case (May include cases converted from code 888 used in CSv1 for "Not applicable" or when the item was not collected. If this item is required to derive T, N, M, or any stage, use of code 988 may result in an error.)
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information Not documented in patient record

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Site-Specific Factor 04

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2910_CSSiteSpecFactr4	2910	3	AJCC	1012-1014

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Breast]
CS Site-Specific Factor 4: Immunohistochemistry (IHC) of Regional Lymph Nodes

Code	Description
000	Regional lymph nodes negative on routine hematoxylin and eosin (H and E), no immunohistochemistry (IHC) OR unknown if tested for isolated tumor cells (ITCs) by IHC studies Nodes clinically negative, not examined pathologically
001	Regional lymph nodes negative on routine H and E, IHC studies done, negative for tumor
002	Regional lymph nodes negative on routine H and E, IHC studies done, positive for ITCs (Tumor cell clusters not greater than 0.2 millimeter (mm))
009	Regional lymph nodes negative on routine H and E, positive for tumor detected by IHC, size of tumor cell clusters or metastases not stated Stated as N0(i+) with no further information on regional lymph nodes
888	OBSOLETE DATA CONVERTED V0200 See code 987 Not applicable: CS Lymph Nodes not coded 000
987	Not applicable: CS Lymph Nodes not coded 000
988	Not applicable: Information not collected for this case (If this item is required by your standard setter, use of code 988 will result in an edit error.)

[CML]
CS Site-Specific Factor 4

Code	Description
888	OBSOLETE DATA CONVERTED V0200 See code 988 Not applicable for this site

988	Not applicable: Site-specific factor not defined

[Colon, Rectum]
CS Site-Specific Factor 4: Tumor Deposits

Code	Description
000	None
001-080	1-80 Tumor deposits (TD) (Exact number of TD)
081	81 or more TD
888	OBSOLETE DATA CONVERTED V0200 See code 988 Not applicable for this site
988	Not applicable: Information not collected for this case (May include cases converted from code 888 used in CSv1 for "Not applicable" or when the item was not collected. If this item is required to derive T, N, M, or any stage, use of code 988 may result in an error.)
990	TD identified, number unknown
998	No surgical resection of primary site
999	Unknown or no information Insufficient information; indeterminiate if TD present Not documented in patient record

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Site-Specific Factor 05

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2920_CSSiteSpecFactr5	2920	3	AJCC	1015-1017

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Breast]
CS Site-Specific Factor 5: Molecular (MOL) Studies of Regional Lymph Nodes

Code	Description
000	Regional lymph nodes negative on routine hematoxylin and eosin (H and E), no RT-PCR molecular (MOL) studies done OR unknown if RT-PCR studies done Nodes clinically negative, not examined pathologically
001	Regional lymph nodes negative on routine H and E, RT-PCR MOL studies done, negative for tumor
002	Regional lymph nodes negative on routine H and E, RT-PCR MOL studies done, positive for tumor
888	OBSOLETE DATA CONVERTED V0200 See code 987 Not applicable CS Lymph Nodes not coded 000
987	Not applicable: CS Lymph Nodes not coded 000
988	Not applicable: Information not collected for this case (If this item is required by your standard setter, use of code 988 will result in an edit error.)

[CML]
CS Site-Specific Factor 5

Code	Description
888	OBSOLETE DATA CONVERTED V0200 See code 988 Not applicable for this site
988	Not applicable: Site-specific factor not defined

[Colon, Rectum]
CS Site-Specific Factor 5: Tumor Regression Grade

Code	Description
000	Tumor Regression Grade 0 Complete response: No viable cancer cells No residual tumor
010	Tumor Regression Grade 1 Moderate response: Single cells or small groups of cancer cells
020	Tumor Regression Grade 2 Minimal response: Residual cancer outgrown by fibrosis
030	Tumor Regression Grade 3 Poor response: Minimal or no tumor kill; extensive residual cancer
888	OBSOLETE DATA CONVERTED V0200 See code 988 Not applicable for this site.
988	Not applicable: Information not collected for this case (May include cases converted from code 888 used in CSv1 for "Not applicable" or when the item was not collected. If this item is required to derive T, N, M, or any stage, use of code 988 may result in an error.)
990	Response present, but degree of response not further described
998	No preoperative treatment or no resection of primary site after preoperative treatment
999	Unknown or no information Not documented in patient record

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Site-Specific Factor 06

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2930_CSSiteSpecFactr6	2930	3	AJCC	1018-1020

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Breast]
CS Site-Specific Factor 6: Size of Tumor-Invasive Component

Code	Description
000	Entire tumor reported as invasive (No in situ component reported)
010	Entire tumor reported as in situ (No invasive component reported)
020	Invasive and in situ components present, size of invasive component stated and coded in CS Tumor Size
030	Invasive and in situ components present, size of entire tumor coded in CS Tumor Size because size of invasive component not stated AND in situ described as minimal (less than 25%)
040	Invasive and in situ components present, size of entire tumor coded in CS Tumor Size because size of invasive component not stated AND in situ described as extensive (25% or more)
050	Invasive and in situ components present, size of entire tumor coded in CS Tumor Size because size of invasive component not stated AND proportions of in situ and invasive not known
060	Invasive and in situ components present, unknown size of tumor (CS Tumor Size coded 999)
888	OBSOLETE DATA CONVERTED V0200 See code 987 Unknown if invasive and in situ components present, unknown if tumor size represents mixed tumor or a "pure" tumor. (See Note 2.) Clinical tumor size coded.
987	Unknown if invasive and in situ components present, unknown if tumor size represents mixed tumor or a "pure" tumor. (See Note 2.) Clinical tumor size coded.
988	Not applicable: Information not collected for this case

	(If this item is required by your standard setter, use of code 988 will result in an edit error.)

[CML]
CS Site-Specific Factor 6

Code	Description
888	OBSOLETE DATA CONVERTED V0200 See code 988 Not applicable for this site
988	Not applicable: Site-specific factor not defined

[Colon, Rectum]
CS Site-Specific Factor 6: Circumferential Resection Margin (CRM)

Code	Description
000	Margin IS involved with tumor Circumferential resection margin (CRM) positive Described as "less than 1 millimeter (mm)"
001-980	0.1- 98.0 millimeter (mm) (Exact size to nearest tenth of millimeter)
981	98.1 mm or greater
988	Not applicable: Information not collected for this case (May include cases converted from code 888 used in CSv1 for "Not applicable" or when the item was not collected. If this item is required to derive T, N, M, or any stage, use of code 988 may result in an error.)
990	No residual tumor identified on specimen
991	Margins clear, distance from tumor not stated CRM negative, NOS
992	Described as "less than 2 mm," or "greater than 1 mm," or "between 1 mm and 2 mm"
993	Described as "less than 3 mm," or "greater than 2 mm," or "between 2 mm and 3 mm"
994	Described as "less than 4 mm," or "greater than 3 mm," or "between 3 mm and 4 mm"
995	Described as "less than 5 mm," or "greater than 4 mm," or "between 4 mm and 5 mm"
996	Described as "greater than 5 mm"

998	No resection of primary site
999	Unknown or no information CRM not mentioned Not documented in patient record

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Site-Specific Factor 07

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2861_CSSSF7	2861	3	AJCC	1021-1023

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Breast]
CS Site-Specific Factor 7: Nottingham or Bloom-Richardson (BR) Score/Grade

Code	Description
030	Score of 3
040	Score of 4
050	Score of 5
060	Score of 6
070	Score of 7
080	Score of 8
090	Score of 9
110	Low Grade, Bloom-Richardson (BR) grade 1, score not given
120	Medium (Intermediate) Grade, BR grade 2, score not given
130	High Grade, BR grade 3, score not given
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
998	No histologic examination of primary site
999	Neither BR grade nor BR score given Unknown or no information Not documented in patient record

[CML]
CS Site-Specific Factor 7

Code	Description
988	Not applicable: Site-specific factor not defined

[Colon, Rectum]
CS Site-Specific Factor 7: Microsatellite Instability (MSI)

Code	Description
020	Microsatellite instability (MSI) stable; no MSI
040	MSI unstable low; positive, low
050	MSI unstable high; positive, high
060	MSI unstable, NOS; positive, NOS
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information Not documented in patient record

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

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http://web2.facs.org/cstage/schemalistabc.html

CS Site-Specific Factor 08

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2862_CSSSF8	2862	3	AJCC	1024-1026

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes

[Breast]
CS Site-Specific Factor 8: HER2 – Immunohistochemistry (IHC) Lab Value

Code	Description
000	Score 0
001	OBSOLETE DATA CONVERTED V0203 See code 010 Score 1+
002	OBSOLETE DATA CONVERTED V0203 See code 020 Score 2+
003	OBSOLETE DATA CONVERTED V0203 See code 030 Score 3+
010	Score of 1+
020	Score of 2+
030	Score of 3+
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information Not documented in patient record

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

CS Site-Specific Factor 09

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2863_CSSSF9	2863	3	AJCC	1027-1029

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes

[Breast]
CS Site-Specific Factor 9: HER2 – Immunohistochemistry (IHC) Test Interpretation

Code	Description
010	Positive/elevated
020	Negative/normal; within normal limits
030	Borderline; equivocal; indeterminate; undetermined whether positive or negative
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information Not documented in patient record

[Colon, Rectum]
CS Site-Specific Factor 9: KRAS

Code	Description
010	Abnormal (mutated) Positive for mutations
020	Normal (wild type) Negative for mutations
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
997	Test ordered, results not in chart

998	Test not done (test was not ordered and was not performed)
999	Unknown Not documented in patient record

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

CS Site-Specific Factor 10

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2864_CSSSF10	2864	3	AJCC	1030-1032

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Appendix, Colon, Rectum]
CS Site-Specific Factor 10: 18q Loss of Heterozygosity (LOH)

Code	Description
010	Test positive for loss of heterozygosity (LOH)
020	Test negative for LOH; normal heterozygous state
030	Undetermined if LOH positive or negative
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information Not documented in patient record

[Breast]
CS Site-Specific Factor 10: HER2 – Fluorescence In Situ Hybridization (FISH) Lab Value

Code	Description
100-979	Ratio of 1.00 - 9.79 (Enter exact ratio to two decimal places) Examples: 100 1.0 120 1.2 564 5.64
980	Ratio of 9.80 or greater
981-986	OBSOLETE DATA CONVERTED V0203

	See code 980 Ratio of 9.81 - 9.86
987	OBSOLETE DATA CONVERTED V0203 See code 980 Ratio of 9.87 or greater
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
991	Ratio of less than 1.00
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information Not documented in patient record

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

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http://web2.facs.org/cstage/schemalistabc.html

CS Site-Specific Factor 11

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2865_CSSSF11	2865	3	AJCC	1033-1035

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Appendix]
CS Site-Specific Factor 11: Histopathologic Grading

Code	Description
010	For NON-MUCINOUS tumors: Well differentiated Grade 1/4
011	For MUCINOUS tumors: Grade 1/2 Grade 1/3 Grade 1/4 Low grade Well differentiated Stated as Grade 1 with no information on the total number of codes in the grading system
020	For NON-MUCINOUS tumors: Moderately differentiated Grade 2/4
021	For MUCINOUS tumors: Grade 2/2 Grade 2/3 Grade 2/4 Grade 3/3 Grade 3/4 High grade Moderately differentiated Poorly differentiated Stated as Grade 2 or Grade 3 with no information on the total number of codes in the grading system
030	For NON-MUCINOUS tumors: Poorly differentiated Grade 3/4
040	For NON-MUCINOUS tumors: Undifferentiated Grade 4/4

988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
998	No pathologic confirmation of primary site tumor
999	Unknown or no information Not documented in patient record

[Breast]
CS Site-Specific Factor 11: HER2 – Fluorescence In Situ Hybridization (FISH) Test Interpretation

Code	Description
010	Positive/elevated; amplified
020	Negative/normal; within normal limits; not amplified
030	Borderline; equivocal; indeterminate; undetermined whether positive or negative
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information Not documented in patient record

[CML]
CS Site-Specific Factor 11

Code	Description
988	Not applicable: Site-specific factor not defined

[Colon, Rectum]
CS Site-Specific Factor 11

Code	Description
988	Not applicable: Site-specific factor not defined

[GIST Apppendix, GIST Colon, GIST Rectum]
CS Site-Specific Factor 11: Mitotic Count

Code	Description
000	0.0 mitoses per 50 HPF (40x fields) 0.0 mitoses per 5 square mm Mitoses absent No mitoses present
001-008	0.1 - 0.8 mitoses per 50 HPF (40x fields) 0.1 - 0.8 mitoses per 5 square mm
009	0.9 mitoses per 50 HPF (40x fields) 0.9 mitoses per 5 square mm Stated as less than 1 mitosis per 50 HPF (40x fields) Stated as less than 1 mitosis per 5 square mm
010-100	1 - 10 mitoses per 50 HPF (40x fields) 1 - 10 mitoses per 5 square mm
110	11 or more mitoses per 50 HPF (40x fields) 11 or more mitoses per 5 square mm
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
990	Specific number not stated, described as less than or equal to 5 mitoses per 50 HPF (40x fields) Specific number not stated, described as less than or equal to 5 mitoses per 5 square mm Stated as low mitotic count or rate with no specific number
991	Specific number not stated, described as more than 5 mitoses per 50 HPF (40x fields) Specific number not stated, described as more than 5 mitoses per 5 square mm Stated as high mitotic count or rate with no specific number
995	OBSOLETE DATA CONVERTED V0203 See code 991 Specific number not stated, described as greater than 5 mitoses per 50 high power fields (40x field) Specific number not stated, described as greater than 5 mitoses per 5 square millimeters
996	Mitotic count described with denominator other than 50 HPF (40x field)/5 square mm
998	No histologic specimen from primary site
999	Unknown or no information Not documented in patient record

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

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CS Site-Specific Factor 12

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2866_CSSSF12	2866	3	AJCC	1036-1038

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*
[Breast]
CS Site-Specific Factor 12: HER2 – Chromogenic In Situ Hybridization (CISH) Lab Value

Code	Description
100-979	Mean of 1.00 - 9.79 (Enter exact mean to two decimal places) Examples: 100 1.0 120 1.2 564 5.64
980	Mean of 9.80 or greater
981-986	OBSOLETE DATA CONVERTED V0203 See code 980 Mean of 9.81 - 9.86
987	OBSOLETE DATA CONVERTED V0203 See code 980 Mean of 9.87 or greater
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
991	Mean of less than 1.00
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information Not documented in patient record

[CML, Colon, Rectum]
CS Site-Specific Factor 12

Code	Description
988	Not applicable: Site-specific factor not defined

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

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CS Site-Specific Factor 13

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2867_CSSSF13	2867	3	AJCC	1039-1041

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Breast]
CS Site-Specific Factor 13: HER2 – Chromogenic In Situ Hybridization (CISH) Test Interpretation

Code	Description
010	Positive/elevated; amplified
020	Negative/normal; within normal limits; not amplified
030	Borderline; equivocal; indeterminate; undetermined whether positive or negative
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information Not documented in patient record

[CML, Colon, Rectum]
CS Site-Specific Factor 13

Code	Description
988	Not applicable: Site-specific factor not defined

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

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CS Site-Specific Factor 14

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2868_CSSSF14	2868	3	AJCC	1042-1044

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes

[Breast]
CS Site-Specific Factor 14: HER2 – Result of Other or Unknown Test

Code	Description
010	Positive/elevated; amplified
020	Negative/normal; within normal limits; not amplified
030	Borderline; equivocal; indeterminate; undetermined whether positive or negative
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
997	Test ordered, results not in chart
998	Test not done (test not ordered and was performed)
999	Unknown or no information Not documented in patient record

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

CS Site-Specific Factor 15

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2869_CSSSF15	2869	3	AJCC	1045-1047

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Breast]
CS Site-Specific Factor 15: HER2 – Summary Result of Testing

Code	Description
010	Positive/elevated; amplified
020	Negative/normal; within normal limits; not amplified
030	Borderline; equivocal; indeterminate; undetermined whether positive or negative
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information Not documented in patient record

[CML, Colon, Rectum]
CS Site-Specific Factor 15

Code	Description
988	Not applicable: Site-specific factor not defined

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Site-Specific Factor 16

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2870_CSSSF16	2870	3	AJCC	1048-1050

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Breast]
CS Site-Specific Factor 16: Combinations of ER, PR, and HER2 Results

Code	Description
000	ER Negative, PR Negative, HER2 Negative (Triple Negative)
001	ER Negative, PR Negative, HER2 Positive
010	ER Negative, PR Positive, HER2 Negative
011	ER Negative, PR Positive, HER2 Positive
100	ER Positive, PR Negative, HER2 Negative
101	ER Positive, PR Negative, HER2 Positive
110	ER Positive, PR Positive, HER2 Negative
111	ER Positive, PR Positive, HER2 Positive
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
999	One or more tests not performed One or more tests unknown if performed One or more tests with unknown or borderline results Unknown or no information Not documented in patient record

[CML, Colon, Rectum]
CS Site-Specific Factor 16

Code	Description
988	Not applicable: Site-specific factor not defined

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Site-Specific Factor 17

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2871_CSSSF17	2871	3	AJCC	1051-1053

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Breast]
CS Site-Specific Factor 17: Circulating Tumor Cells (CTC) and Method of Detection

Code	Description
010	Positive, Reverse Transcription Polymerase Chain Reaction (RT-PCR) test
020	Positive, immunomagnetic separation (IMS) test
030	Positive, other test type
040	Positive, unknown test type
110	Negative/normal, RT-PCR test
120	Negative/normal, IMS test
130	Negative/normal, other test type
140	Negative/normal, unknown test type
210	Borderline; equivocal; indeterminate; undetermined if positive or negative, RT-PCR test
220	Borderline; equivocal; indeterminate; undetermined if positive or negative, IMS test
230	Borderline; equivocal; indeterminate; undetermined if positive or negative, other test type
240	Borderline equivocal; indeterminate; undetermined if positive or negative, unknown test type
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information

	Not documented in patient record

[CML, Colon, Rectum]
CS Site-Specific Factor 17

Code	Description
988	Not applicable: Site-specific factor not defined

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

CS Site-Specific Factor 21

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2875_CSSSF21	2875	3	AJCC	1063-1065

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes

[Breast]
CS Site-Specific Factor 21: Response to Neoadjuvant Therapy

Code	Description
010	Complete response (CR)
020	Partial response (PR)
030	No response (NR)
987	Not applicable: Neoadjuvant therapy not given
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
998	OBSOLETE DATA CONVERTED V0203 See code 987 No neoadjuvant therapy
999	Unknown or no information Not documented in patient record

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

CS Site-Specific Factor 22

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2876_CSSSF22	2876	3	AJCC	1066-1068

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes

[Breast]
CS Site-Specific Factor 22: Multigene Signature Method

Code	Description
010	Oncotype DX
020	MammaPrint (MammoPrint)
030	Other
040	Test performed, type of test unknown
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
997	OBSOLETE DATA CONVERTED V0203 See code 040 Test ordered, results not in chart
998	Test not done (test not ordered and was performed)
999	Unknown or no information Not documented in patient record

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

CS Site-Specific Factor 23

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2877_CSSSF23	2877	3	AJCC	1069-1071

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes

[Breast]
CS Site-Specific Factor 23: Multigene Signature Results

Code	Description
000-100	Score of 000 - 100 (Actual score with leading zeroes to nearest whole percentage)
200	Low risk of recurrence (good prognosis)
205	OBSOLETE DATA CONVERTED V0203 See code 400 High risk of recurrence (poor prognosis)
300	Intermediate risk of recurrence
400	High risk of recurrence (poor prognosis)
988	Not applicable: Information not collected for this case (If this information is required by your standard setter, use of code 988 may result in an edit error.)
997	Test ordered, results not in chart
998	Test not done (test not ordered and not performed)
999	Unknown or no information; Not documented in patient record

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

CS Site-Specific Factor 25

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2879_CSSSF25	2879	3	AJCC	1075-1077

Description
Identifies additional information needed to generate stage, or prognostic factors that have an effect on stage or survival.

Rationale
Site-specific factors are used to record additional staging information needed by Collaborative Staging to derive TNM and/or SEER Summary Stage codes for particular site-histology schema.

Codes*

[Breast, CML, Colon, Rectum]
CS Site-Specific Factor 25

Code	Description
988	Not applicable: Site-specific factor not defined

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

*Please refer to this link to access all Site/Histology-Speficic Codes
http://web2.facs.org/cstage/schemalistabc.html

Lymph-Vascular Invasion

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1182_LymphVascularInv	1182	1	AJCC	984-984

Description
Indicates whether lymphatic duct or blood vessel invasion (LVI) is identified in the pathology report. The presence of lymph-vascular invasion may affect the patient's prognosis. Lymph-vascular invasion is an item of interest to both pathologists and clinicians and is used by the Collaborative Stage algorithm to derive the T category in AJCC TNM for prostate and testis cancers.

Rationale
This data item will record the information as stated in the record. Presence or absence of cancer cells in the lymphatic ducts or blood vessels is useful for prognosis.

Codes
0 Lymph-vascular Invasion stated as Not Present
1 Lymph-vascular Invasion Present/Identified
8 Not Applicable
9 Unknown/Indeterminate/not mentioned in path report

Considerations for Use
Clarification between codes 8 and 9:

Code 8 is only used in the following situations:
1. Standard-setter does not require this item and the central registry did not collect it.
2. LVI is not applicable for Hodgkin and Non-Hodgkin Lymphoma, Leukemias, Hematopoietic and Reticuloendothelial disorders, Myelodysplastic syndromes including Refractory Anemias and Refractory Cytopenias, and Myeloproliferative disorders.

Code 9 is used for those cases where there is no information/documentation from the pathology report or other sources.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

CS Version Input Original

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2935_CSVerInputOrig	2935	6	AJCC	1167-1172

Description
This item indicates the number of the version initially used to code Collaborative Staging (CS) fields. The CS version number is returned as part of the output of the CS algorithm.

Rationale
Over time, the input codes and instructions for CS items may change. This item identifies the correct interpretation of input CS items.

Codes
CS Version Input Original is a 6-digit code (e.g., 010100). The first two digits represent the major version number; the second two digits represent minor version changes; and, the last two digits represent even less significant changes, such as corrections of typographical errors that do not affect coding or derivation of results.

010200 **2005** Cases: Version May 2005
010400 **2008** Cases: Version October 2007
010401 **2008** Cases: Version March 2008 (software only)
020200 **2010** Cases: Version January 2010, updated April 2010
020302 **2011** Cases: Version December 2010
020440 **2012** Cases: Version December 2011
http://cancerstaging.org/cstage/csv2/faqs.html

Considerations for Use
All registries were required to use version 020302 for cases diagnosed in 2011. However, it is possible that a 2011 case was abstracted under version 020200 prior to having converted to version 020302. It is also clear that the later version 020440 was used for some 2011 cases abstracted in 2012. Versions earlier than 020200 were likely entered in error.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL).
http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

CS Version Derived

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2936_CSVerDerived	2936	6	AJCC	1173-1178

Description
This data item is recorded the first time the CS output fields are derived and should be updated each time the CS Derived items are recomputed. The CS version number is returned as part of the output of the CS algorithm.

Rationale
The CS algorithm may be re-applied to compute the CS Derived items; for example, when the data are to be used for a special study, transmitted, or when an updated CS algorithm is produced. This item identifies the specific algorithm used to obtain the CS Derived values in the data record.

Codes
CS Version Derived is a 6-digit code (e.g., 010100). The first two digits represent the major version number; the second two digits represent minor version changes; and, the last two digits represent even less significant changes, such as corrections of typographical errors that do not affect coding or derivation results. This item should not be blank if the CS Derived items contain values. It should be blank if the CS Derived items are empty or the CS algorithm has not been applied.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

CS Version Input Current

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I2937_CSVerInputCur	2937	6	AJCC	1161-1166

Description

This data item belongs to the Collaborative Stage (CS) Data Collection System which is based on the AJCC Cancer Staging Manual, 6th and 7th editions. This item identifies the version after CS input fields have been updated or recoded. This data item is recorded the first time the CS input fields are entered and should be updated each time the CS input fields are modified.

Rationale

Over time, the input codes and instructions for CS items may change. This item identifies the correct interpretation of input CS items.

Codes

CS Version Input Current is a 6-digit code (e.g., 020100). The first two digits represent the major version number; the second two digits represent minor version changes; and, the last two digits represent even less significant changes, such as corrections of typographical errors that do not affect coding or derivation of results. Please refer to Table 1 for more information.

	Table 1. CS Version Input Current							
CS Version Original	Convert to CS 0202 without update	Convert to CS 0202 with update	Convert to CS 0203 without update	Convert to CS 0203 with update	Convert to CS 0204 without update	Convert to CS 0204 with update	Convert to CS 0205 without update	Convert to CS 0205 with update
0009XX 01XXXX	020000		020300		020410		020510	020550
0009XX 01XXXX	020000		020300			020440	020540	020550
0009XX 01XXXX	020000			020302	020413		020530	020550
0009XX 01XXXX	020000			020302		020440	020540	020550
0009XX 01XXXX		020200	020301		020412		020520	020550
0009XX 01XXXX		020200	020301			020440	020540	020550
0009XX 01XXXX		020200		020302	020413		020530	020550
0009XX 01XXXX		020200		020302		020440	020540	020550
020001 020100 020200			020301		020420		020520	020550
020001 020100 020200			020301			020440	020540	020550
020001 020100 020200				020302	020423		020530	020550
020001 020100 020202				020302		020440	020540	020550

020302					020430		020530	020550
020302						020440	020540	020550
020440							020540	020550

References

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

Derived SS2000

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3020_DerivedSS2000	3020	1	AJCC	1156-1156

Description
This item is the derived "SEER Summary Stage 2000" from the CS algorithm (or EOD codes).

Rationale
Stage information is important when evaluating the effects of cancer control programs. It is crucial in understanding whether changes over time in incidence rates or outcomes are due to earlier detection of the cancers. In addition, cancer treatment cannot be studied without knowing the stage at diagnosis.

Codes

0	In situ: noninvasive, intraepithelial
1	Localized only
2	Regional by direct extension only
3	Regional lymph node(s) involved only
4	Regional by BOTH direct extension AND regional lymph node(s) involved
5	Regional, NOS
7	Distant site(s)/lymph node(s) involved
9	Unkown if extension or metastasis

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

Adamo MB, Johnson CH, Ruhl JL, Dickie, LA, (eds.). *2011 SEER Program Coding and Staging Manual*. National Cancer Institute, NIH Publication number 11-5581, Bethesda, MD

Derived SS2000 – Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3050_DerivedSS2000Flag	3050	1	AJCC	1160-1160

Description
Flag to indicate whether the derived SEER Summary Stage 2000 (SS2000) was derived from CS or EOD codes.

Rationale
Prior to the implementation of CS, SEER Summary Stage 2000 could be derived using information from the Extent of Disease (EOD) coding system. For all records in this dataset, CS was used to derive SS2000.

Codes
1 SS2000 derived from Collaborative Stage

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

Derived AJCC-7 T

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3400_DerAJCC7T	3400	3	AJCC	1114-1116

Description
This item is the derived AJCC "T" staging element from coded fields using the CS algorithm.

Rationale
Derived AJCC-7 T can be used to evaluate disease spread at diagnosis, plan and track treatment patterns, and analyze outcomes.

Codes

Display String	AJCC6 Storage Code	AJCC7 Storage Code	Comments and Notes
TX	99	999	TX
T0	00	000	T0
Ta	01	010	Ta
Tis	05	050	Tis
Tispu	06	060	Tispu (Urethra only)
Tispd	07	070	Tispd (Urethra only)
T1	10	100	T1
T1mi	11	110	T1mi
T1NOS	19	199	T1 NOS
T1a	12	120	T1a
T1a1	13	130	T1a1
T1a2	14	140	T1a2
T1b	15	150	T1b
T1b1	16	160	T1b1
T1b2	17	170	T1b2
T1c	18	180	T1c
T1d		181	T1d
T2	20	200	T2
T2NOS	29	299	T2 NOS
T2a	21	210	T2a
T2a1		211	T2a1
T2a2		212	T2a2
T2aNOS		213	T2a NOS
T2b	22	220	T2b
T2c	23	230	T2c
T2d		240	T2d
T3	30	300	T3
T3NOS	39	399	T3 NOS
T3a	31	310	T3a
T3b	32	320	T3b
T3c	33	330	T3c
T3d		340	T3d
T4	40	400	T4
T4NOS	49	499	T4 NOS
T4a	41	410	T4a
T4b	42	420	T4b
T4c	43	430	T4c
T4d	44	440	T4d
T4e		450	T4e
T1aNOS	80	800	T1a NOS
T1bNOS	81	810	T1b NOS
NA	88	888	Not applicable

T_ NOS indicates that there are additional choices for the category but a more specific code cannot be determined.

References

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

Derived AJCC-7 T Descript

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3402_DerAJCC7TDescript	3402	1	AJCC	1117-1117

Description
This item is the derived AJCC "T Descriptor" from coded fields using the CS algorithm.

Rationale
Derived AJCC-7 T Descript can be used in analysis to differentiate the timing of staging with respect to the treatment process.

Codes

Code	Description
c	Clinical stage.
p	Pathologic stage.
a	Autopsy stage.
y	Surgical resection performed **after** pre-surgical systemic treatment or radiation; tumor size/extension based on pathologic evidence.
N	Not applicable.
0	Not derived.

Considerations for Use
These descriptors are considered to be modifiers of the derived T, N, and M codes. If the T, N, or M code is absent, there will be nothing to modify and the descriptor should not be blank.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

Derived AJCC-7 N

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3410_DerAJCC7N	3410	3	AJCC	1118-1120

Description
This item is the derived AJCC "N" staging element from coded fields using the CS algorithm.

Rationale
The CS *Derived AJCC-7 N* can be used to evaluate disease spread at diagnosis, plan and track treatment patterns, and analyze outcomes.

Codes

Display String	AJCC6 Storage Code	AJCC7 Storage Code	Comments
NX	99	999	NX
N0	00	000	N0
N0(i-)	01	010	N0(i-)
N0(i+)	02	020	N0(i+)
N0(mol-)	03	030	N0(mol-)
N0(mol+)	04	040	N0(mol+)
N1	10	100	N1
N1NOS	19	199	N1 NOS
N1a	11	110	N1a
N1b	12	120	N1b
N1c	13	130	N1c
N1mi	18	180	N1mi
N2	20	200	N2
N2NOS	29	299	N2 NOS
N2a	21	210	N2a
N2b	22	220	N2b
N2c	23	230	N2c
N3	30	300	N3
N3NOS	39	399	N3 NOS
N3a	31	310	N3a
N3b	32	320	N3b
N3c	33	330	N3c
N4		400	N4
NA	88	888	Not applicable

N_ NOS indicates that there are additional choices for the category but a more specific code cannot be determined.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

Derived AJCC-7 N Descript

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3412_DerAJCC7NDescript	3412	1	AJCC	1121-1121

Description
This item is the derived AJCC "N Descriptor" from coded fields using the CS algorithm.

Rationale
Derived AJCC-7 N Descript can be used in analysis to differentiate the timing of staging with respect to the treatment process.

Codes

Code	Description
c	Clinical stage.
p	Pathologic stage.
a	Autopsy stage.
y	Lymph nodes removed for examination **after** pre-surgical systemic treatment or radiation and lymph node evaluation based on pathologic evidence.
N	Not applicable.
0	Not derived.

Considerations for Use
These descriptors are considered to be modifiers of the derived T, N, and M codes. If the T, N, or M code is absent, there will be nothing to modify and the descriptor should not be blank.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

Derived AJCC-7 M

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3420_DerAJCC7M	3420	3	AJCC	1122-1124

Description
This item is the derived AJCC "M" staging element from coded fields using the CS algorithm.

Rationale
Derived AJCC-7 M can be used to evaluate disease spread at diagnosis, plan and track treatment patterns, and analyze outcomes.

Codes

Display String	AJCC6 Storage Code	AJCC7 Storage Code	Comments
MX	99	999	MX
M0	00	000	M0
M0(i+)		010	M0(i+)
M1	10	100	M1
M1a	11	110	M1a
M1b	12	120	M1b
M1c	13	130	M1c
M1d		140	M1d
M1e		150	M1e
M1NOS	19	199	M1 NOS
NA	88	888	Not applicable

M_ NOS indicates that there are additional choices for the category but a more specific code cannot be determined.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

Derived AJCC-7 M Descript

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3422_DerAJCC7MDescript	3422	1	AJCC	1125-1125

Description
This item is the derived AJCC "M Descriptor" from coded fields using the CS algorithm.

Rationale
Derived AJCC-7 M Descript can be used in analysis to differentiate the timing of staging with respect to the treatment process.

Codes

Code	Description
c	Clinical stage.
p	Pathologic stage.
a	Autopsy stage.
y	Pathologic examination of metastatic tissue performed **after** pre-surgical systemic treatment or radiation and extension based on pathologic evidence.
N	Not applicable.
0	Not derived.

Considerations for Use
These descriptors are considered to be modifiers of the derived T, N, and M codes. If the T, N, or M code is absent, there will be nothing to modify and the descriptor should not be blank.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

Derived AJCC-7 Stage Grp

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3430_DerAJCC7StageGrp	3430	3	AJCC	1126-1128

Description
This item is the derived AJCC "Stage Group" from coded fields using the CS algorithm.

Rationale
The CS *Derived AJCC-7 Stage Group* can be used to evaluate disease spread at diagnosis, plan and track treatment patterns, and analyze outcomes.

Codes

Display String	AJCC6 Storage Code	AJCC7 Storage Code	Comments
0	00	000	Stage 0
0a	01	010	Stage 0a
0is	02	020	Stage 0is
I	10	100	Stage I
INOS	11	110	Stage I NOS
IA	12	120	Stage IA
IA1	13	130	Stage IA1
IA2	14	140	Stage IA2
IANOS		121	Stage IA NOS
IB	15	150	Stage IB
IB1	16	160	Stage IB1
IB2	17	170	Stage IB2
IBNOS		151	Stage IB NOS
IC	18	180	Stage IC
IS	19	190	Stage IS
ISA	23	230	Stage ISA (lymphoma only)
ISB	24	240	Stage ISB (lymphoma only)
IEA	20	200	Stage IEA (lymphoma only)
IEB	21	210	Stage IEB (lymphoma only)
IE	22	220	Stage IE (lymphoma only)
II	30	300	Stage II
IINO	31	310	Stage II NOS
IIA	32	320	Stage IIA
IIAN		321	Stage IIA NOS
IIA1		322	Stage IIA1
IIA2		323	Stage IIA2
IIB	33	330	Stage IIB
IIC	34	340	Stage IIC
IIEA	35	350	Stage IIEA (lymphoma only)
IIEB	36	360	Stage IIEB (lymphoma only)
IIE	37	370	Stage IIE (lymphoma only)
IISA	38	380	Stage IISA (lymphoma only)
IISB	39	390	Stage IISB (lymphoma only)
IIS	40	400	Stage IIS (lymphoma only)
IIES	41	410	Stage IIESA (lymphoma only)
IIES	42	420	Stage IIESB (lymphoma only)
IIES	43	430	Stage IIES (lymphoma only)
III	50	500	Stage III
IIINO	51	510	Stage III NOS
IIIA	52	520	Stage IIIA
IIIB	53	530	Stage IIIB
IIIC	54	540	Stage IIIC

IIIC1		541	Stage IIIC1
IIIC2		542	Stage IIIC2
IIIEA	55	550	Stage IIIEA (lymphoma only)
IIIEB	56	560	Stage IIIEB (lymphoma only)
IIIE	57	570	Stage IIIE (lymphoma only)
IIISA	58	580	Stage IIISA (lymphoma only)
IIISB	59	590	Stage IIISB (lymphoma only)
IIIS	60	600	Stage IIIS (lymphoma only)
IIIES	61	610	Stage IIIESA (lymphoma only)
IIIES	62	620	Stage IIIESB (lymphoma only)
IIIES	63	630	Stage IIIES (lymphoma only)
IV	70	700	Stage IV
IVN	71	710	Stage IV NOS
IVA	72	720	Stage IVA
IVA1		721	Stage IVA1
IVA2		722	Stage IVA2
IVB	73	730	Stage IVB
IVC	74	740	Stage IVC
NA	88	888	Not applicable
OCC	90	900	Stage Occult
UNK	99	999	Stage Unknown

A stage group NOS indicates that there are additional choices for the category but a more specific code cannot be determined.

Considerations for Use

These descriptors are considered to be modifiers of the derived T, N, and M codes. If the T, N, or M code is absent, there will be nothing to modify and the descriptor should not be blank.

References

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Collaborative Stage Work Group of the American Joint Committee on Cancer. *Collaborative Stage Data Collection System Coding Instructions, version 02.03.02*. Published by American Joint Committee on Cancer (Chicago, IL). http://www.cancerstaging.org/cstage/manuals/csmanual-p1s10203.pdf

TNM Clin T

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I940_TNMClinT	940	4	AJCC	958-961

Description
Detailed site-specific codes for the clinical tumor (T) as defined by AJCC and recorded by the physician. Pathologic and clinical stage data are given three separate areas in the NAACCR Data Exchange Record Layout.

Rationale
CoC requires that AJCC TNM staging be used in its approved cancer programs. AJCC developed its staging system for evaluating trends in the treatment and control of cancer. This staging is used by physicians to estimate prognosis, to plan treatment, to evaluate new types of therapy, to analyze outcome, to design follow-up strategies, and to assess early detection results.

Note
See the *AJCC Cancer Staging Manual*, current edition for site-specific categories for the TNM elements and stage groups. See the most recent *FORDS* manual for specifications for codes and data entry rules.

Codes

Code	Definition	Code	Definition	Code	Definition
(leave blank)	Not recorded.	1B	T1b	3	T3
X	TX	1B1	T1b1	3A	T3a
0	T0	1B2	T1b2	3B	T3b
A	Ta	1C	T1c	3C	T3c
IS	Tis	1D	T1d	3D	T3d
ISPU	Tispu	2	T2	4	T4
ISPD	Tispd	2A	T2a	4A	T4a
1MI	T1mi, T1 mic	2A1	T2a1	4B	T4b
1	T1	2A2	T2a2	4C	T4c
1A	T1a	2B	T2b	4D	T4d
1A1	T1a1	2C	T2c	4E	T4e
1A2	T1a2	2D	T2d	88	Not applicable

Considerations for Use
In this dataset, the TNM Clinical T was required for female breast and rectum cancers only.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

TNM Clin N

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I950_TNMClinN	950	4	AJCC	962-965

Description
Detailed site-specific codes for the clinical nodes (N) as defined by AJCC and recorded by the physician. Pathologic and clinical stage data are given three separate areas in the NAACCR Data Exchange Record Layout.

Rationale
CoC requires that AJCC TNM staging be used in its approved cancer programs. AJCC developed its staging system for evaluating trends in the treatment and control of cancer. This staging is used by physicians to estimate prognosis, to plan treatment, to evaluate new types of therapy, to analyze outcome, to design follow-up strategies, and to assess early detection results.

Codes

Code	Definition	Code	Definition
(leave blank)	Not recorded.	1B	N1b
X	NX	1C	N1c
0	N0	2	N2
0I-	N0i-	2A	N2a
0I+	N0i+	2B	N2b
0M-	N0m-	2C	N2c
0M+	N0m+	3	N3
1MI	N1mi	3A	N3a
0A	N0a	3B	N3b
0B	N0b	3C	N3c
1	N1	4	N4
1A	N1a	88	Not applicable

Considerations for Use
In this dataset, the TNM Clinical N was required for female breast and rectum cancers only.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011,* Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

TNM Clin M

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I960_TNMClinM	960	4	AJCC	966-969

Description
Detailed site-specific codes for the clinical metastases (M) as defined by AJCC and recorded by the physician. Pathologic and clinical stage data are given three separate areas in the NAACCR Data Exchange Record Layout.

Rationale
CoC requires that AJCC TNM staging be used in its approved cancer programs. AJCC developed its staging system for evaluating trends in the treatment and control of cancer. This staging is used by physicians to estimate prognosis, to plan treatment, to evaluate new types of therapy, to analyze outcome, to design follow-up strategies, and to assess early detection results.

Codes

Code	Definition
(leave blank)	Not recorded.
X (AJCC editions 1-6 only_)	MX (AJCC editions 1-6 only_)
0	M0
0I+	M0(i+)
1	M1
1A	M1a
1B	M1b
1C	M1c
1D	M1d
1E	M1e
88	Not applicable

Considerations for Use
In this dataset, the TNM Clinical M was required for female breast and rectum cancers only.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011,* Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

TNM Clin Stage Group

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I970_TNMClinStageGrp	970	4	AJCC	970-973

Description
Detailed site-specific codes for the clinical stage group as defined by AJCC and recorded by the physician. Pathologic and clinical stage data are given three separate areas in the NAACCR Data Exchange Record Layout.

Rationale
CoC requires that AJCC TNM staging be used in its approved cancer programs. AJCC developed its staging system for evaluating trends in the treatment and control of cancer. This staging is used by physicians to estimate prognosis, to plan treatment, to evaluate new types of therapy, to analyze outcome, to design follow-up strategies, and to assess early detection results.

Codes

Code	Definition	Code	Definition	Code	Definition
0	Stage 0	1S	Stage IS	3C1	Stage IIIC1
0A	Stage 0A	2	Stage II	3C2	Stage IIIC2
0IS	Stage 0is	2A	Stage IIA	4	Stage IV
1	Stage I	2A1	Stage IIA1	4A	Stage IVA
1A	Stage IA	2A2	Stage IIA2	4A1	Stage IVA1
1A1	Stage IA1	2B	Stage IIB	4A2	Stage IVA2
1A2	Stage IA2	2C	Stage IIC	4B	Stage IVB
1B	Stage IB	3	Stage III	4C	Stage IVC
1B1	Stage IB1	3A	Stage IIIA	OC	Occult
1B2	Stage IB2	3B	Stage IIIB	88	Not applicable
1C	Stage IC	3C	Stage IIIC	99	Unknown

Considerations for Use
In this dataset, the TNM Clinical Stage Group was required for female breast and rectum cancers only.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011,* Chicago, Ill.: Commission on Cancer, January 2011. http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

TNM Clin Descriptor

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I980_TNMClinDescr	980	1	CoC	974-974

Description
Identifies the AJCC clinical stage (prefix/suffix) descriptor as recorded by the physician. AJCC stage descriptors identify special cases that need separate data analysis. The descriptors are adjuncts to and do not change the stage group. Pathologic and clinical stage data are given three separate areas in the NAACCR Data Exchange Record Layout. CoC defines a descriptor and "Staged By" item for each of these three areas.

Rationale
CoC requires that AJCC TNM staging be used in its approved cancer programs. AJCC developed its staging system for evaluating trends in the treatment and control of cancer. This staging is used by physicians to estimate prognosis, to plan treatment, to evaluate new types of therapy, to analyze outcome, to design follow-up strategies, and to assess early detection results.

Codes
0 None
1 E (Extranodal, lymphomas only)
2 S (Spleen, lymphomas only)
3 M (Multiple primary tumors in a single site)
5 E & S (Extranodal and spleen, lymphomas only)
9 Unknown, not stated in patient record

Considerations for Use
In this dataset, the TNM Clinical Descriptor was required for female breast and rectum cancers only.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

TNM Edition Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1060_TNMEditionNum	1060	2	CoC	938-939

Description
A code that indicates the edition of the AJCC manual used to stage the case. This applies to the manually coded AJCC fields. It does not apply to the Derived AJCC T, N, M and AJCC Stage Group fields [2940, 2960, 2980, and 3000].

Rationale
TNM codes have changed over time and conversion is not always simple. Therefore, a case-specific indicator is needed to allow grouping of cases for comparison.

Codes
00 Not staged (cases that have AJCC staging scheme and staging was not done)
01 First Edition
02 Second Edition (published 1983)
03 Third Edition (published 1988)
04 Fourth Edition (published 1992), recommended for use for cases diagnosed 1993-1997
05 Fifth Edition (published 1997), recommended for use for cases diagnosed 1998-2002
06 Sixth Edition (published 2002), recommended for use for cases diagnosed 2003-2009
07 Seventh Edition (published 2009), recommended for use with cases diagnosed 2010+
88 Not applicable (cases that do not have an AJCC staging scheme)
99 Edition Unknown

Considerations for Use
In this dataset, the TNM Clinical T, N, M, Stage Group, and Descriptor were required for female breast and rectum cancers only.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Comorbid/Complication 01

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3110_ComorbidCompl1	3110	5	CoC	1186-1190

Description
Records the patient's pre-existing medical conditions, factors influencing health status, and/or complications during the patient's hospital stay for the treatment of this cancer using ICD-9-CM codes. All are considered secondary diagnoses.

Rationale
Comorbidities may affect treatment decisions and influence patient outcomes. Information on comorbidities is used to adjust outcome statistics when evaluating patient survival and other outcomes. Complications may be related to the quality of care.

Codes (Refer to the most recent version of *FORDS* for additional instructions.)

ICD-9-CM or ICD-10-CM	Code	Definition, specific instructions
Both	00000	No comorbid conditions or complications documented.
ICD-9-CM	00100–13980, 24000–99990	Comorbid conditions: Omit the decimal point between the third and characters.
ICD-9-CM	E8700–E8799, E9300–E9499	Complications: Omit the decimal point between the fourth and fifth characters
ICD-9-CM	V0720–V0739, V1000–V1590, V2220–V2310, V2540, V4400–V4589, V5041–V5049	Factors affecting health status: Omit the decimal point between the fourth and fifth characters
ICD-10-CM	Codes beginning with the following letters: A, B, E, G, H, I, J, K, L, M, N, O, P, R, and T360x-T50Z9 Y6200-Y8490 Z1401-Z2290 Z3001-Z2349 Z6810-Z6854 Z8000-Z8090 Z8500-Z8603 Z8611-Z9989	For ICD-10-CM codes: Omit the decimal point between the third and fourth characters. Omit additional characters beyond 5, if any. If there are fewer than 5 characters, use zeroes after the code to fill the spaces. Capitalize all letters.

Note
For comorbid conditions (ICD-9-CM codes 00100-13980 and 24000-99990), there is an assumed decimal point between the third and fourth characters. For complications (ICD-9-CM codes E8700-E8799 and E9300- E9499), there is an assumed decimal point between the fourth and fifth characters. For conditions influencing health status and contact with health services (ICD-9-CM codes V0720-V0739, V1000-V1590, V2220- V2310, V2540, V4400-V4589, and V5041-V5049), there is an assumed decimal point between the third and fourth characters.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

ICD Codes/Classification of Disease
http://www.cdc.gov/nchs/icd.htm

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Comorbid/Complication 02

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3120_ComorbidCompl2	3120	5	CoC	1191-1195

Description
Records the patient's pre-existing medical conditions, factors influencing health status, and/or complications during the patient's hospital stay for the treatment of this cancer using ICD-9-CM codes. All are considered secondary diagnoses.

Rationale
Comorbidities may affect treatment decisions and influence patient outcomes. Information on comorbidities is used to adjust outcome statistics when evaluating patient survival and other outcomes. Complications may be related to the quality-of-care.

Codes (Refer to the most recent version of *FORDS* for additional instructions.)

Code	Definition
(fill spaces)	Report the ICD-9-CM codes for up to 10 comorbid conditions or complications. *Note:* For comorbid conditions (ICD-9-CM codes 001–139.8 and 240–999.9) there is an assumed decimal point between the third and fourth characters. *Note:* For complications (ICD-9-CM "E"codes) and factors influencing health status (ICD-9-CM "V" codes) there is an assumed decimal point between the fourth and fifth characters. For ICD-10-CM codes there is an assumed decimal between the third and fourth characters.
(leave blank)	Fewer than two comorbid conditions or complications documented.

Note
For comorbid conditions (ICD-9-CM codes 00100-13980 and 24000-99990), there is an assumed decimal point between the third and fourth characters. For complications (ICD-9-CM codes E8700-E8799 and E9300- E9499), there is an assumed decimal point between the fourth and fifth characters. For conditions influencing health status and contact with health services (ICD-9-CM codes V0720-V0739, V1000-V1590, V2220-V2310, V2540, V4400-V4589, and V5041-V5049), there is an assumed decimal point between the third and fourth characters.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

ICD Codes/Classification of Disease
http://www.cdc.gov/nchs/icd.htm

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011,* Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Comorbid/Complication 03

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3130_ComorbidCompl3	3130	5	CoC	1196-1200

Description
Records the patient's pre-existing medical conditions, factors influencing health status, and/or complications during the patient's hospital stay for the treatment of this cancer using ICD-9-CM codes. All are considered secondary diagnoses.

Rationale
Comorbidities may affect treatment decisions and influence patient outcomes. Information on comorbidities is used to adjust outcome statistics when evaluating patient survival and other outcomes. Complications may be related to the quality-of-care.

Codes (Refer to the most recent version of *FORDS* for additional instructions.)

Code	Definition
(fill spaces)	Report the ICD-9-CM codes for up to 10 comorbid conditions or complications. *Note:* For comorbid conditions (ICD-9-CM codes 001–139.8 and 240–999.9) there is an assumed decimal point between the third and fourth characters. *Note:* For complications (ICD-9-CM "E"codes) and factors influencing health status (ICD-9-CM "V" codes) there is an assumed decimal point between the fourth and fifth characters. For ICD-10-CM codes there is an assumed decimal between the third and fourth characters.
(leave blank)	Fewer than three comorbid conditions or complications documented.

Note
For comorbid conditions (ICD-9-CM codes 00100-13980 and 24000-99990), there is an assumed decimal point between the third and fourth characters. For complications (ICD-9-CM codes E8700-E8799 and E9300- E9499), there is an assumed decimal point between the fourth and fifth characters. For conditions influencing health status and contact with health services (ICD-9-CM codes V0720-V0739, V1000-V1590, V2220-V2310, V2540, V4400-V4589, and V5041-V5049), there is an assumed decimal point between the third and fourth characters.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

ICD Codes/Classification of Disease
http://www.cdc.gov/nchs/icd.htm

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Comorbid/Complication 04

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3140_ComorbidCompl4	3140	5	CoC	1201-1205

Description
Records the patient's pre-existing medical conditions, factors influencing health status, and/or complications during the patient's hospital stay for the treatment of this cancer using ICD-9-CM codes. All are considered secondary diagnoses.

Rationale
Comorbidities may affect treatment decisions and influence patient outcomes. Information on comorbidities is used to adjust outcome statistics when evaluating patient survival and other outcomes. Complications may be related to the quality-of-care.

Codes (Refer to the most recent version of *FORDS* for additional instructions.)

Code	Definition
(fill spaces)	Report the ICD-9-CM codes for up to 10 comorbid conditions or complications. *Note:* For comorbid conditions (ICD-9-CM codes 001–139.8 and 240–999.9) there is an assumed decimal point between the third and fourth characters. *Note:* For complications (ICD-9-CM "E"codes) and factors influencing health status (ICD-9-CM "V" codes) there is an assumed decimal point between the fourth and fifth characters. For ICD-10-CM codes there is an assumed decimal between the third and fourth characters.
(leave blank)	Fewer than four comorbid conditions or complications documented.

Note
For comorbid conditions (ICD-9-CM codes 00100-13980 and 24000-99990), there is an assumed decimal point between the third and fourth characters. For complications (ICD-9-CM codes E8700-E8799 and E9300- E9499), there is an assumed decimal point between the fourth and fifth characters. For conditions influencing health status and contact with health services (ICD-9-CM codes V0720-V0739, V1000-V1590, V2220-V2310, V2540, V4400-V4589, and V5041-V5049), there is an assumed decimal point between the third and fourth characters.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

ICD Codes/Classification of Disease
http://www.cdc.gov/nchs/icd.htm

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Comorbid/Complication 05

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3150_ComorbidCompl5	3150	5	CoC	1206-1210

Description
Records the patient's pre-existing medical conditions, factors influencing health status, and/or complications during the patient's hospital stay for the treatment of this cancer using ICD-9-CM codes. All are considered secondary diagnoses.

Rationale
Comorbidities may affect treatment decisions and influence patient outcomes. Information on comorbidities is used to adjust outcome statistics when evaluating patient survival and other outcomes. Complications may be related to the quality-of-care.

Codes (Refer to the most recent version of *FORDS* for additional instructions.)

Code	Definition
(fill spaces)	Report the ICD-9-CM codes for up to 10 comorbid conditions or complications. *Note:* For comorbid conditions (ICD-9-CM codes 001–139.8 and 240–999.9) there is an assumed decimal point between the third and fourth characters. *Note:* For complications (ICD-9-CM "E"codes) and factors influencing health status (ICD-9-CM "V" codes) there is an assumed decimal point between the fourth and fifth characters. For ICD-10-CM codes there is an assumed decimal between the third and fourth characters.
(leave blank)	Fewer than five comorbid conditions or complications documented.

Note
For comorbid conditions (ICD-9-CM codes 00100-13980 and 24000-99990), there is an assumed decimal point between the third and fourth characters. For complications (ICD-9-CM codes E8700-E8799 and E9300- E9499), there is an assumed decimal point between the fourth and fifth characters. For conditions influencing health status and contact with health services (ICD-9-CM codes V0720-V0739, V1000-V1590, V2220-V2310, V2540, V4400-V4589, and V5041-V5049), there is an assumed decimal point between the third and fourth characters.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

ICD Codes/Classification of Disease
http://www.cdc.gov/nchs/icd.htm

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Comorbid/Complication 06

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3160_ComorbidCompl6	3160	5	CoC	1211-1215

Description
Records the patient's pre-existing medical conditions, factors influencing health status, and/or complications during the patient's hospital stay for the treatment of this cancer using ICD-9-CM codes. All are considered secondary diagnoses.

Rationale
Comorbidities may affect treatment decisions and influence patient outcomes. Information on comorbidities is used to adjust outcome statistics when evaluating patient survival and other outcomes. Complications may be related to the quality-of-care.

Codes (Refer to the most recent version of *FORDS* for additional instructions.)

Code	Definition
(fill spaces)	Report the ICD-9-CM codes for up to 10 comorbid conditions or complications. *Note:* For comorbid conditions (ICD-9-CM codes 001–139.8 and 240–999.9) there is an assumed decimal point between the third and fourth characters. *Note:* For complications (ICD-9-CM "E"codes) and factors influencing health status (ICD-9-CM "V" codes) there is an assumed decimal point between the fourth and fifth characters. For ICD-10-CM codes there is an assumed decimal between the third and fourth characters.
(leave blank)	Fewer than six comorbid conditions and complications documented.

Note
For comorbid conditions (ICD-9-CM codes 00100-13980 and 24000-99990), there is an assumed decimal point between the third and fourth characters. For complications (ICD-9-CM codes E8700-E8799 and E9300- E9499), there is an assumed decimal point between the fourth and fifth characters. For conditions influencing health status and contact with health services (ICD-9-CM codes V0720-V0739, V1000-V1590, V2220-V2310, V2540, V4400-V4589, and V5041-V5049), there is an assumed decimal point between the third and fourth characters.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

ICD Codes/Classification of Disease
http://www.cdc.gov/nchs/icd.htm

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Comorbid/Complication 07

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3161_ComorbidCompl7	3161	5	CoC	1216-1220

Description
Records the patient's pre-existing medical conditions, factors influencing health status, and/or complications during the patient's hospital stay for the treatment of this cancer using ICD-9-CM codes. All are considered secondary diagnoses.

Rationale
Comorbidities may affect treatment decisions and influence patient outcomes. Information on comorbidities is used to adjust outcome statistics when evaluating patient survival and other outcomes. Complications may be related to the quality-of-care.

Codes (Refer to the most recent version of *FORDS* for additional instructions.)

Code	Definition
(fill spaces)	Report the ICD-9-CM codes for up to 10 comorbid conditions or complications. *Note:* For comorbid conditions (ICD-9-CM codes 001–139.8 and 240–999.9) there is an assumed decimal point between the third and fourth characters. *Note:* For complications (ICD-9-CM "E"codes) and factors influencing health status (ICD-9-CM "V" codes) there is an assumed decimal point between the fourth and fifth characters. For ICD-10-CM codes there is an assumed decimal between the third and fourth characters.
(leave blank)	Fewer than seven comorbid conditions and complications documented.

Note
For comorbid conditions (ICD-9-CM codes 00100-13980 and 24000-99990), there is an assumed decimal point between the third and fourth characters. For complications (ICD-9-CM codes E8700-E8799 and E9300- E9499), there is an assumed decimal point between the fourth and fifth characters. For conditions influencing health status and contact with health services (ICD-9-CM codes V0720-V0739, V1000-V1590, V2220-V2310, V2540, V4400-V4589, and V5041-V5049), there is an assumed decimal point between the third and fourth characters.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

ICD Codes/Classification of Disease
http://www.cdc.gov/nchs/icd.htm

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Comorbid/Complication 08

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3162_ComorbidCompl8	3162	5	CoC	1221-1225

Description
Records the patient's pre-existing medical conditions, factors influencing health status, and/or complications during the patient's hospital stay for the treatment of this cancer using ICD-9-CM codes. All are considered secondary diagnoses.

Rationale
Comorbidities may affect treatment decisions and influence patient outcomes. Information on comorbidities is used to adjust outcome statistics when evaluating patient survival and other outcomes. Complications may be related to the quality-of-care.

Codes (Refer to the most recent version of *FORDS* for additional instructions.)

Code	Definition
(fill spaces)	Report the ICD-9-CM codes for up to 10 comorbid conditions or complications. *Note:* For comorbid conditions (ICD-9-CM codes 001–139.8 and 240–999.9) there is an assumed decimal point between the third and fourth characters. *Note:* For complications (ICD-9-CM "E"codes) and factors influencing health status (ICD-9-CM "V" codes) there is an assumed decimal point between the fourth and fifth characters. For ICD-10-CM codes there is an assumed decimal between the third and fourth characters.
(leave blank)	Fewer than eight comorbid conditions and complications documented.

Note
For comorbid conditions (ICD-9-CM codes 00100-13980 and 24000-99990), there is an assumed decimal point between the third and fourth characters. For complications (ICD-9-CM codes E8700-E8799 and E9300- E9499), there is an assumed decimal point between the fourth and fifth characters. For conditions influencing health status and contact with health services (ICD-9-CM codes V0720-V0739, V1000-V1590, V2220-V2310, V2540, V4400-V4589, and V5041-V5049), there is an assumed decimal point between the third and fourth characters.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

ICD Codes/Classification of Disease
http://www.cdc.gov/nchs/icd.htm

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Comorbid/Complication 09

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3163_ComorbidCompl9	3163	5	CoC	1226-1230

Description
Records the patient's pre-existing medical conditions, factors influencing health status, and/or complications during the patient's hospital stay for the treatment of this cancer using ICD-9-CM codes. All are considered secondary diagnoses.

Rationale
Comorbidities may affect treatment decisions and influence patient outcomes. Information on comorbidities is used to adjust outcome statistics when evaluating patient survival and other outcomes. Complications may be related to the quality-of-care.

Codes (Refer to the most recent version of *FORDS* for additional instructions.)

Code	Definition
(fill spaces)	Report the ICD-9-CM codes for up to 10 comorbid conditions or complications. *Note:* For comorbid conditions (ICD-9-CM codes 001–139.8 and 240–999.9) there is an assumed decimal point between the third and fourth characters. *Note:* For complications (ICD-9-CM "E"codes) and factors influencing health status (ICD-9-CM "V" codes) there is an assumed decimal point between the fourth and fifth characters. For ICD-10-CM codes there is an assumed decimal between the third and fourth characters.
(leave blank)	Fewer than nine comorbid conditions and complications documented.

Note
For comorbid conditions (ICD-9-CM codes 00100-13980 and 24000-99990), there is an assumed decimal point between the third and fourth characters. For complications (ICD-9-CM codes E8700-E8799 and E9300- E9499), there is an assumed decimal point between the fourth and fifth characters. For conditions influencing health status and contact with health services (ICD-9-CM codes V0720-V0739, V1000-V1590, V2220-V2310, V2540, V4400-V4589, and V5041-V5049), there is an assumed decimal point between the third and fourth characters.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

ICD Codes/Classification of Disease
http://www.cdc.gov/nchs/icd.htm

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011*, Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Comorbid/Complication 10

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I3164_ComorbidCompl10	3164	5	CoC	1231-1235

Description
Records the patien's pre-existing medical conditions, factors influencing health status, and/or complications during the patien's hospital stay for the treatment of this cancer using ICD-9-CM codes. All are considered secondary diagnoses.

Rationale
Comorbidities may affect treatment decisions and influence patient outcomes. Information on comorbidities is used to adjust outcome statistics when evaluating patient survival and other outcomes. Complications may be related to the quality-of-care.

Codes (Refer to the most recent version of *FORDS* for additional instructions.)

Code	Definition
(fill spaces)	Report the ICD-9-CM codes for up to 10 comorbid conditions or complications. *Note:* For comorbid conditions (ICD-9-CM codes 001–139.8 and 240–999.9) there is an assumed decimal point between the third and fourth characters. *Note:* For complications (ICD-9-CM "E"codes) and factors influencing health status (ICD-9-CM "V" codes) there is an assumed decimal point between the fourth and fifth characters. For ICD-10-CM codes there is an assumed decimal between the third and fourth characters.
(leave blank)	Fewer than 10 comorbid conditions and complications documented.

Note
For comorbid conditions (ICD-9-CM codes 00100-13980 and 24000-99990), there is an assumed decimal point between the third and fourth characters. For complications (ICD-9-CM codes E8700-E8799 and E9300- E9499), there is an assumed decimal point between the fourth and fifth characters. For conditions influencing health status and contact with health services (ICD-9-CM codes V0720-V0739, V1000-V1590, V2220-V2310, V2540, V4400-V4589, and V5041-V5049), there is an assumed decimal point between the third and fourth characters.

References
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

ICD Codes/Classification of Disease
http://www.cdc.gov/nchs/icd.htm

Phillips, J L, Stewart, A K, Delev, A (eds). *Facility Oncology Registry Data Standards (FORDS): Revised for 2011,* Chicago, Ill.: Commission on Cancer, January 2011.
http://www.facs.org/cancer/coc/fords/FORDS_for_2011_01012011.pdf

Source Comorbidity

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9970_SourceComorbid	9970	1	CDC/NPCR-CER	1297

Description

This data item is used to record the data source from which comorbidities/complications were collected. This data item refers back to standard NAACCR data item # 3110, 3120, 3130, 3140, 3150, 3160, 3161, 3162, 3163, and 3164.

Codes

0 No comorbid condition or complication identified/Not Applicable
1 Collected from facility face sheet
2 Linkage to facility/hospital discharge data set
3 Linkage to Medicare/Medicaid data set
4 Linkage with another claims data set
5 Combination of two or more sources above
9 Other source

Height

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9960_Height	9960	2	CDC/NPCR-CER	1236

Cancer Site
Required for breast, CML, colon, and rectum when chemotherapy or other drugs given.
As available for all other sites/histologies.

Description
Height is required for breast, CML, colon, and rectum when chemotherapy and/or other drugs were given, and was reported when available for all other sites/histologies. Different tumors for the same patient may have different values. It was collected from source records once for each cancer and was taken from the Nursing Interview Guide, Flow Chart, or Vital Stats section from the patient's hospital medical record or physician office record. The height entered should be that listed at or around the time of diagnosis. If no height was listed on the date of diagnosis, the abstractor was instructed to use the height recorded on the date closest to the date of diagnosis and before treatment was started.

Codes
Entered as 2 digit numbers and measured in inches (note that 1 foot=12 inches).

98 98 inches or greater
99 Unknown height

Note
All inches values should be rounded to the nearest whole number; values with decimal place x .5 and greater should be rounded up (e.g., 62.5 inches would be 63 inches).

When coding breast, colorectal, and CML cases that include chemotherapy or other drugs, **all** potential sources for height were exhausted before using code "99" ("unknown"). For all sites/histologies, "blanks" were not permitted and code "99" was used to reflect unknown height.

Weight

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9961_Weight	9961	3	CDC/NPCR-CER	1238

Cancer Site
Required for breast, CML, colon, and rectum when chemotherapy or other drugs given.
As available for all other sites/histologies.

Description
Weight is required for breast, CML, colon, and rectum when chemotherapy and/or other drugs were given, and was reported when available for all other sites/histologies. Different tumors for the same patient may have different values. It was collected from source records once for each cancer and was taken from the Nursing Interview Guide, Flow Chart, or Vital Stats section from the patient's hospital medical record or physician office record. The weight entered should be that listed on the date of diagnosis. If no weight was listed on the date of diagnosis, the abstractor was instructed to use the weight recorded on the date closest to the date of diagnosis and before treatment was started.

Codes
Entered as 3 digit numbers and measured in pounds (note that 1 kg = 2.2 pounds).

999 Unknown weight

Note
All pound values should be rounded to the nearest whole number; values with decimal place x.5 and greater should be rounded up (e.g., 155.5 pounds would be 156 pounds). Patients with a weight of less than 100 pounds should be recorded with a leading 0.

When coding breast, colorectal, and CML cases that include chemotherapy or other drugs, **all** potential sources for weight were exhausted before using code "999" ("unknown"). For all sites/histologies, "blanks" were not permitted and code "999" was used to reflect unknown weight.

BCR-ABL: Cytogenetic Analysis

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9900_BCRABLCytogenetic	9900	3	CDC/NPCR-CER	1241

Cancer Site
CML

Description
Records the results of the cytogenetic analysis for BCR-ABL t(9;22) (q34;q11) at the time of initial diagnosis. If multiple test results are recorded in the source records, the results that are closest to the date of diagnosis are reported. This variable refers to all BCR-ABL transcriptions, including BCR-ABL2. Cytogenetic analysis may be used to monitor disease response to therapy and relapse.

Additional information and sample reports can be found at: http://www.healthline.com/sw/cs-cml-how-cytogenetic-testing-is-used-for-diagnosis-and-to-monitor-treatment

Note
Other names for this test include: Karyotyping, conventional cytogenetics, Philadelphia chromosome analysis, chromosomal banding analysis

Codes
000* Negative result OR
Not applicable (e.g., information not collected for this case) OR
Test not done (e.g., test not ordered and was not performed) OR
Unknown information (e.g., not documented in source record) OR
Test ordered (e.g., results not in source records)

010 Positive

*Please note that this variable will be used in combination with the corresponding BCR-ABL related date and date flag variables to further substantiate which reason applies for coding "000" for a given case.

BCR-ABL: Cytogenetic Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9901_BCRABLCytogeneticDate	9901	8	CDC/NPCR-CER	1244

Cancer Site
CML

Description
Records the date of the cytogenetic analysis for BCR-ABL t(9;22) (q34;q11) at the time of initial diagnosis. If multiple test results are recorded in the source records, the date of the test results that are closest to the date of diagnosis are reported. This variable refers to all BCR-ABL transcriptions, including BCR-ABL2. Cytogenetic analysis may be used to monitor disease response to therapy and relapse.

The date that the specimen was obtained and sent for analysis was documented by the abstractor and not the report date.

Additional information and sample reports can be found at: http://www.healthline.com/sw/cs-cml-how-cytogenetic-testing-is-used-for-diagnosis-and-to-monitor-treatment

Note
Other names for this test include: Karyotyping, conventional cytogenetics, Philadelphia chromosome analysis, chromosomal banding analysis

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date should be transmitted. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component should be replaced by spaces. If there are no known date components, the fixed-length variable will be completely blank.

For unknown values and codes that have meanings other than dates the HL7 Flavors of Null Table (Appendix C) has been adopted for flagging each non-system-generated missing date as a way to eliminate the ambiguity of missing values. A date flag field, to serve as a flag or indicator, is used for each date field for which an "unknown" or "not applicable" value is appropriate. This item would be blank if a valid date is transmitted in its associated date item. The only date fields that would not have a flag are system-generated dates (e.g., Date Case Completed [2090]), for which "unknown" would never be a legitimate value.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

BCR-ABL: Cytogen Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9902_BCRABLCytogenDateFlag	9902	2	CDC/NPCR-CER	1252

Cancer Site
CML

Description
This flag explains why no appropriate value is in the field, BCR-ABL: Cytogenetic Date [9901].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions).

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if BCR-ABL: Cytogentetic test done)
11	No proper value is applicable in this context (e.g., no BCR-ABL: Cytogentetic test done or not applicable)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., BCR-ABL: Cytogentetic test done, but date is unknown)
15	Information is not available at this time, but it is expected that it will be available later (e.g., BCR-ABL: Cytogentetic test ordered, but has not been administered at the time of the most recent follow up)
Blank	A valid date value is provided in item BCR-ABL: Cytogenetic Date [9901], or the date was not expected to have been transmitted

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

BCR-ABL: FISH

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9903_BCRABL_FISH	9903	3	CDC/NPCR-CER	1254

Cancer Site
CML

Description
Records the results of only the Fluorescence in Situ Hybridization for BCR-ABL t(9;22) (q34;q11) at the time of initial diagnosis. If multiple test results are recorded in the source records, the abstractor recorded the results that were closest to the date of diagnosis. This variable refers to all BCR-ABL transcriptions, including BCR-ABL2.

BCR-ABL FISH may be used to monitor disease response to therapy and relapse.

Additional information and sample reports can be found at: http://www.healthline.com/sw/cs-cml-how-cytogenetic-testing-is-used-for-diagnosis-and-to-monitor-treatment

Codes

000*	Negative result OR Not applicable (e.g., information not collected for this case) OR Test not done (e.g., test not ordered and was not performed) OR Unknown information (e.g., not documented in source record) OR Test ordered (e.g., results not in source records)
010	Positive

*Please note that this variable will be used in combination with the corresponding BCR-ABL related date and date flag variables to further substantiate which reason applies for coding "000" for a given case.

BCR-ABL: FISH Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9904_BCRABL_FISHDate	9904	8	CDC/NPCR-CER	1257

Cancer Site
CML

Description
Records the date of only the Fluorescence in Situ Hybridization for BCR-ABL t(9;22) (q34;q11) at the time of initial diagnosis. If multiple test results were recorded in the source records, the abstractor recorded the date of the test results that are closest to the date of diagnosis. This variable refers to all BCR-ABL transcriptions, including BCR-ABL2.

BCR-ABL FISH may be used to monitor disease response to therapy and relapse.

The date that the specimen was obtained and sent for analysis was recorded, not the report date.

Additional information and sample reports can be found at: http://www.healthline.com/sw/cs-cml-how-cytogenetic-testing-is-used-for-diagnosis-and-to-monitor-treatment

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date should be transmitted. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component should be replaced by spaces. If there are no known date components, the fixed-length variable will be completely blank.

For unknown values and codes that have meanings other than dates the HL7 Flavors of Null Table (Appendix C) has been adopted for flagging each non-system-generated missing date as a way to eliminate the ambiguity of missing values. A date flag field, to serve as a flag or indicator, is used for each date field for which an "unknown" or "not applicable" value is appropriate. This item would be blank if a valid date is transmitted in its associated date item. The only date fields that would not have a flag are system-generated dates (e.g., Date Case Completed [2090]), for which "unknown" would never be a legitimate value.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

BCR-ABL: FISH Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9905_BCRABLFISHDateFlag	9905	2	CDC/NPCR-CER	1265

Cancer Site
CML

Description
This flag explains why no appropriate value is in the field, BCR-ABL: FISH Date [9904].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions).

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if BCR-ABL: FSH test done)
11	No proper value is applicable in this context (e.g., no BCR-ABL: FISH test done or not applicable)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., BCR-ABL: FISH test done, but date is unknown)
15	Information is not available at this time, but it is expected that it will be available later (e.g., BCR-ABL: FISH test ordered, but has not been administered at the time of the most recent follow up)
Blank	A valid date value is provided in item BCR-ABL: FISH Date [9904], or the date was not expected to have been transmitted

BCR-ABL: RT-PCR Qual

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9906_BCRABL_RTPCRQual	9906	3	CDC/NPCR-CER	1267

Cancer Site
CML

Description
Records the results of the *qualitative* Reverse Transcriptase Polymerase Chain Reaction RT-PCR for BCR-ABL t(9;22)(q34;q11) at the time of initial diagnosis. If multiple test results were recorded in the source records, the abstractor reported the results that were closest to the date of diagnosis. This variable refers to all BCR-ABL transcriptions, including BCR-ABL2.

RT-PCR Qualitative may be used to monitor disease response to therapy and relapse.

Additional information and sample reports can be found at: http://www.healthline.com/sw/cs-cml-how-cytogenetic-testing-is-used-for-diagnosis-and-to-monitor-treatment

Codes
000* Negative result OR
Not applicable (e.g., information not collected for this case) OR
Test not done (e.g., test not ordered and was not performed) OR
Unknown information (e.g., not documented in source record) OR
Test ordered (e.g., results not in source records)

010 Positive

*Please note that this variable will be used in combination with the corresponding BCR-ABL related date and date flag variables to further substantiate which reason applies for coding "000" for a given case.

BCR-ABL: RT-PCR Qual Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9907_BCRABL_RTPCRQualDate	9907	8	CDC/NPCR-CER	1270

Cancer Site
CML

Description
Records the date of the *qualitative* Reverse Transcriptase Polymerase Chain Reaction RT-PCR for BCR-ABL t(9;22)(q34;q11) at the time of initial diagnosis. If multiple test results were recorded in the source records, the abstractor reported the date of the results that were closest to the date of diagnosis. This variable refers to all BCR-ABL transcriptions, including BCR-ABL2. RT-PCR Qualitative may be used to monitor disease response to therapy and relapse.

The date that the specimen was obtained and sent for analysis was recorded, not the report date.

Additional information and sample reports can be found at: http://www.healthline.com/sw/cs-cml-how-cytogenetic-testing-is-used-for-diagnosis-and-to-monitor-treatment

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date should be transmitted. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component should be replaced by spaces. If there are no known date components, the fixed-length variable will be completely blank.

For unknown values and codes that have meanings other than dates the HL7 Flavors of Null Table (Appendix C) has been adopted for flagging each non-system-generated missing date as a way to eliminate the ambiguity of missing values. A date flag field, to serve as a flag or indicator, is used for each date field for which an "unknown" or "not applicable" value is appropriate. This item would be blank if a valid date is transmitted in its associated date item. The only date fields that would not have a flag are system-generated dates (e.g., Date Case Completed [2090]), for which "unknown" would never be a legitimate value.

BCR-ABL: RT-PCR Qual Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9908_BCRABL_RTPCRQualDtFlg	9908	2	CDC/NPCR-CER	1278

Cancer Site
CML

Description
This flag explains why no appropriate value is in the field, BCR-ABL: RT-PCR Qual Date [9907].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project date fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions).

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if BCR-ABL: RT-PCR Qual test done)
11	No proper value is applicable in this context (e.g., no BCR-ABL: RT-PCR Qual test done or not applicable)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., BCR-ABL: RT-PCR Qual test done, but date is unknown)
15	Information is not available at this time, but it is expected that it will be available later (e.g., BCR-ABL: RT-PCR Qual test ordered, but has not been administered at the time of the most recent follow up)
Blank	A valid date value is provided in item BCR-ABL: RT-PCR Qual Date [9907], or the date was not expected to have been transmitted

Comment: This is consistent with part of the initiative of the transformation from the old NAACCR date standards to interoperable dates.

BCR-ABL: RT-PCR Quant

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9909_BCRABL_RTPCRQuant	9909	3	CDC/NPCR-CER	1280

Cancer Site
CML

Description
Record results of the quantitative Reverse Transcriptase Polymerase Chain Reaction RT-PCR for BCR-ABL t(9;22) (q34;q11) at time of initial diagnosis. If multiple test results were recorded in the source records, the abstractor reported results that were closest to the date of diagnosis. This variable refers to all BCR-ABL transcriptions, including BCR-ABL2.

Quantitative RT-PCR may be used to monitor disease response to therapy and relapse.

Quantitative units for BCR-ABL transcript levels are reported as a ratio of fusion gene transcript to β-2-microglobulin reference gene transcript.

Additional information and sample reports can be found at: http://www.healthline.com/sw/cs-cml-how-cytogenetic-testing-is-used-for-diagnosis-and-to-monitor-treatment

Note
Other names for this test include: real time RT-PCR, BCR-ABL Gene Rearrangement Analysis

Codes

000*	Negative result OR Not applicable (e.g., information not collected for this case) OR Test not done (e.g., test not ordered and was not performed) OR Unknown information (e.g., not documented in source record) OR Test ordered (e.g., results not in source records)
001 - 998	Ratio of 0.001 to 0.998 (enter exact ratio)
999	Ratio greater than or equal to 0.999

*Please note that this variable will be used in combination with the corresponding BCR-ABL related date and date flag variables to further substantiate which reason applies for coding “000” for a given case.

BCR-ABL: RT-PCR Quant Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9910_BCRABL_RTPCRQuantDate	9910	8	CDC/NPCR-CER	1283

Cancer Site
CML

Description
Record date of quantitative Reverse Transcriptase Polymerase Chain Reaction RT-PCR for BCR-ABL t(9;22) (q34;q11) at time of initial diagnosis. If multiple test results were recorded in source records, the abstractor reported the date related to results that were closest to date of diagnosis. This variable refers to all BCR-ABL transcriptions, including BCR-ABL2.

Quantitative RT-PCR may be used to monitor disease response to therapy and relapse.

The date that the specimen was obtained and sent for analysis was recorded, not the report date.

Quantitative units for BCR-ABL transcript levels are reported as a ratio of fusion gene transcript to β-2-microgloblin reference gene transcript.

Additional information and sample reports can be found at: http://www.healthline.com/sw/cs-cml-how-cytogenetic-testing-is-used-for-diagnosis-and-to-monitor-treatment

Note
Other names for this test include: real time RT-PCR, BCR-ABL Gene Rearrangement Analysis

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date should be transmitted. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component should be replaced by spaces. If there are no known date components, the fixed-length variable will be completely blank.

For unknown values and codes that have meanings other than dates the HL7 Flavors of Null Table (Appendix C) has been adopted for flagging each non-system-generated missing date as a way to eliminate the ambiguity of missing values. A date flag field, to serve as a flag or indicator, is used for each date field for which an "unknown" or "not applicable" value is appropriate. This item would be blank if a valid date is transmitted in its associated date item. The only date fields that would not have a flag are system-generated dates (e.g., Date Case Completed [2090]), for which "unknown" would never be a legitimate value.

BCR-ABL: RT-PCR Quant Date Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9911_BCRABL_RTPCRQuanDtFlg	9911	2	CDC/NPCR-CER	1291

Cancer Site
CML

Description
This flag explains why no appropriate value is in the field, BCR-ABL: RT-PCR Quan Date [9910].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information. The non-standard data items for the CDC/NPCR-CER project dates fields have been designed to follow the model set by the NAACCR standards.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions).

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if BCR-ABL: RT-PCR Quant test done)
11	No proper value is applicable in this context (e.g., no BCR-ABL: RT-PCR Quant test done or not applicable)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., BCR-ABL: RT-PCR Quant test done, but date is unknown)
15	Information is not available at this time, but it is expected that it will be available later (e.g., BCR-ABL: RT-PCR Quant test ordered, but has not been administered at the time of the most recent follow up)
Blank	A valid date value is provided in item BCR-ABL: RT-PCR Quant Date [9910], or the date was not expected to have been transmitted

Tobacco Use

(Separated into four possible tobacco categories)

SAS Alternate Name	Item #	Length	Source of Standard	Column #
TobaccoUseCigarette I9965_TobaccoUseCigarettes	9965	1	CDC/NPCR-CER	1293
TobaccoUseOtherSmoke I9966_TobaccoUseOtherSmoke	9966	1	CDC/NPCR-CER	1294
TobaccoUseSmokeless I9967_TobaccoUseSmokeless	9967	1	CDC/NPCR-CER	1295
TobaccoUseNOS I9968_TobaccoUseNOS	9968	1	CDC/NPCR-CER	1296

Cancer Site

All sites/histologies, as available in the source records

Description

Records the patient's past or current use of tobacco. Tobacco use was obtained from sections such as the Nursing Interview Guide, Flow Chart, Vital Stats or Nursing Assessment section, or other available source from the patient's hospital medical record or physician office record.

The collection of Tobacco Use is divided into three types of tobacco products and when tobacco use is indicated, but type is not specified:
Cigarette smoking
Smoking tobacco products other than cigarettes (e.g., pipes, cigars, kreteks)
Smokeless tobacco products (e.g, chewing tobacco, snuff, etc.)
Tobacco, NOS

Codes

0 Never used
1 Current user (i.e., "current user" as of date of diagnosis)
2 Former user, quit within one year of the date of diagnosis
3 Former user, quit more than one year prior to the date of diagnosis
4 Former user, unknown when quit
9 Unknown/not stated/no smoking specifics provided

If the medical record only indicates "No," use code 9 (Unknown/not stated/no smoking specifics provided) rather than "Never used." If the medical record indicates "None," use 0 ("Never Used").
For all sites/histologies, "blanks" were not permitted and code "9" was used to reflect unknown tobacco use.

Section V: Subsequent Treatment

Reason Subsequent Rx

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9920_ReasonSubsqRX	9920	1	CDC/NPCR-CER	1788

Cancer Site
Required, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
This data item is used to code the reason that the patient received subsequent treatment. Subsequent treatment begins after first course is completed, stopped or changed. Please use the following link to access the SEER Program Code Manual for the full definition of first course of treatment.
http://seer.cancer.gov/manuals/2007/SPCSM_2007_maindoc.pdf . Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data.

Codes
Code indicating the reason that the patient received subsequent or palliative treatment beyond their first course of therapy.
0 No subsequent or palliative treatment
1 Subsequent or palliative treatment due to disease progression*
2 Subsequent or palliative treatment due to recurrence of disease*
4 Subsequent or palliative treatment due to development of medical condition (e.g., heart failure or liver disease develops in patient)
5 Subsequent or palliative treatment due to other reason
9 Unknown if subsequent or palliative therapy given or not required for this primary site/histology
For breast, colorectal, and CML cases, blank was not allowed for any case ("0" was used if no subsequent or palliative treatment was given or "9" if it was unknown). If codes 1-5 are entered, at least one of the subsequent treatment type fields (i.e., items #9921-9927) must have an entry other than "0" (i.e., no or none) or blank. If item 9920 (above) is coded "0" or "9," items #9921-9927 are permitted to be blank, as appropriate.

Note
Usually, the treating physician will note in the patient's medical record explicitly if subsequent treatment is being given as a result of disease progression or disease recurrence. If it is not noted explicitly, the following guideline was used to determine which code applied: if disease progresses, the interval between initial treatment and treatment change will be zero. If there is a recurrence, there will be a time interval that passes before new therapy shows up in the record.

Subsq Rx 2nd Course Date

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1660_SubsqRX2CrsDate	1660	8	NAACCR	1724

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
Date of initiation of subsequent treatment. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data.

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date should be transmitted. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component should be replaced by spaces. If there are no known date components, the fixed-length variable will be completely blank.

For unknown values and codes that have meanings other than dates the HL7 Flavors of Null Table (Appendix C) has been adopted for flagging each non-system-generated missing date as a way to eliminate the ambiguity of missing values. A date flag field, to serve as a flag or indicator, is used for each date field for which an "unknown" or "not applicable" value is appropriate. This item would be blank if a valid date is transmitted in its associated date item. The only date fields that would not have a flag are system-generated dates (e.g., Date Case Completed [2090]), for which "unknown" would never be a legitimate value.

Subsq RX 2nd DateFlag CER

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9955_SubsqRX2ndDateFlagCER	9955	2	CDC/NPCR-CER	1862

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
This flag explains why no appropriate value is in the field, Subsq RX 2nd Course Date [1660].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information.

Codes (see Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions).

10	No information whatsoever can be inferred from this exceptional value (e.g., unknown if any subsequent therapy)
11	No proper value is applicable in this context (e.g., no subsequent therapy)
12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., subsequent therapy given,, but date is unknown)
15	Information is not available at this time, but it is expected that it will be available later (e.g., subsequent therapy ordered, but has not been administered at the time of the most recent follow up)
Blank	A valid date value is provided in item Subsq RX 2nd Course Date [1660], or the date was not expected to have been transmitted

Subsq RX 2nd Crs Surg

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9921_SubsqRX2ndCrsSurg	9921	2	CDC/NPCR-CER	1789

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
This variable is used to code the type of surgery given as part of the subsequent course of treatment. Subsequent treatment is defined as: all cancer-directed therapies administered after the first course is complete due to lack of response or disease progression. Therapy administered after the first course is completed, stopped or changed is recorded as subsequent therapy. Patient's medical records were included as potential sources for obtaining this data. Subsequent surgery is a treatment consideration for local, regional or distant recurrence or progression of disease. Subsequent surgery is also a treatment consideration when other planned first course of treatment fails.

Codes
The CS staging rules were used to determine if subsequent surgery was local, regional or for distant metastasis. Code "00" indicates no subsequent surgery.

00 None OR
Not applicable (e.g., not required for this primary site/histology) OR
Unknown information
10 Surgery to local site
20 Surgery to regional site/lymph nodes
30 Surgery to distant site/lymph nodes
90 Surgery, NOS; a subsequent surgical procedure was done, but no information on the type of surgical procedure is provided.

Subsq RX 2nd Crs Rad

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9922_SubsqRX2ndCrsRad	9922	2	CDC/NPCR-CER	1791

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
This variable is used to code radiation therapy as subsequent treatment. Subsequent treatment is defined as: all cancer-directed therapies administered after the first course is complete due to lack of response or disease progression. Therapy administered after the first course is completed, stopped or changed is recorded as subsequent therapy. Patient's medical records were included as potential sources for obtaining this data. Subsequent radiation therapy is a treatment consideration for local, regional or distant recurrence or progression of disease. Subsequent radiation therapy is also a treatment consideration when other planned first course of treatment fails. Subsequent radiation may have been administered as part of other subsequent treatments (surgery, chemotherapy, etc).

- Radiation may be localized (at the primary site)
- Radiation may be directed to regional site and/or to regional lymph nodes
- Radiation may be directed to a distant or metastatic site or lymph nodes

Codes
The CS staging rules were used to determine if subsequent radiation is for local, regional or distant progression or metastasis. Code "00" indicates no subsequent radiation.

00 None OR Not applicable (e.g., not required for this primary site/histology) OR Unknown information
10 Local radiation
20 Regional radiation
30 Distant radiation, NOS OR other radiation, NOS
31 Bone
32 Brain
33 Liver
34 Lung
35 Other distant sites/lymph nodes or more than one distant site

Subsq RX 2nd Crs Chemo

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9923_SubsqRX2ndCrsChemo	9923	2	CDC/NPCR-CER	1793

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
This variable is used to code the type of chemotherapy given as part of the subsequent course of treatment. Subsequent treatment is defined as: all cancer-directed therapies administered after the first course is complete due to lack of response or disease progression. Therapy administered after the first course is completed, stopped or changed is recorded as subsequent therapy. When subsequent chemotherapy was coded, if the patient had an adverse reaction, the physician may have changed one of the drugs in a combination regimen. If the replacement drug belonged to the same group as the original drug there was no change in the regimen. If the replacement drug is in a different group than the original drug, the new regimen was coded as subsequent therapy. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data.

Codes
Code 00 if no subsequent chemotherapy.

00 None OR Not applicable (e.g., not required for this primary site/histology) OR Unknown information
01 Chemotherapy administered as subsequent therapy, but the type and number of agents is not documented in patient record.
02 Single-agent chemotherapy administered as subsequent therapy.
03 Multiagent chemotherapy administered as subsequent therapy.

- Refer to the *SEER*Rx Interactive Drug Database* (http://seer.cancer.gov/) for a list of chemotherapeutic agents.
- If the managing physician changed one of the agents in a combination regimen, and the replacement agent belonged to a different group (chemotherapeutic agents are grouped as alkylating agents, antimetabolites, natural products, or other miscellaneous) than the original agent, the new regimen represented the start of subsequent therapy.

Subsq RX 2nd Crs Horm

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9924_SubsqRX2ndCrsHorm	9924	2	CDC/NPCR-CER	1795

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
This variable is used to code the type of hormonal therapy given as part of the subsequent course of treatment. Subsequent treatment is defined as: all cancer-directed therapies administered after the first course is complete due to lack of response or disease progression. Therapy administered after the first course is completed, stopped or changed is recorded as subsequent therapy. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data.

Codes
Code 00 if hormone therapy was not administered as subsequent treatment.

00 None OR
Not applicable (e.g., not required for this primary site/histology) OR
Unknown information
01 Hormone therapy administered as subsequent therapy.

- Prednisone was recorded as hormonal therapy when administered in combination with chemotherapy, such as MOPP (mechlorethamine, vincristine, procarbazine, prednisone) or COPP (cyclophosphamide, vincristine, procarbazine, prednisone).
- Prednisone was not coded as hormone therapy when it was administered for reasons other than chemotherapeutic treatment.
- Tumor involvement or treatment may destroy hormone-producing tissue. Hormone replacement therapy may have been given if the hormone was necessary to maintain normal metabolism and body function. Hormone replacement therapy was not coded as part of first course therapy.
- Refer to the SEER*Rx Interactive Drug Database (http://seer.cancer.gov/) for a list of hormonal agents.

Subsq RX 2nd Crs BRM

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9925_SubsqRX2ndCrsBRM	9925	2	CDC/NPCR-CER	1797

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
This variable is used to code the type of biological response modifier therapy (immunotherapy) given as part of the subsequent course of treatment. Subsequent treatment is defined as: all cancer-directed therapies administered after the first course is complete due to lack of response or disease progression. Therapy administered after the first course is completed, stopped or changed is recorded as subsequent therapy. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data.

Codes
Code 00 if immunotherapy was not administered as subsequent treatment

00 None OR
Not applicable (e.g., not required for this primary site/histology) OR
Unknown information
01 Immunotherapy administered as subsequent therapy.

- Refer to the *SEER*Rx Interactive Drug Database* (http://seer.cancer.gov/) for a list of immunotherapeutic agents.

Subsq RX 2nd Crs Oth

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9926_SubsqRX2ndCrsOth	9926	1	CDC/NPCR-CER	1799

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
This variable is used to code the type of other treatment given as part of the subsequent course of treatment. Subsequent treatment is defined as: all cancer-directed therapies administered after the first course is complete due to lack of response or disease progression. Therapy administered after the first course is completed, stopped or changed is recorded as subsequent therapy. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data.

Codes

0 None – All subsequent cancer treatment was coded in other treatment fields (surgery, radiation, systemic therapy) OR
Not applicable (e.g., not required for this primary site/histology) OR
Unknown information.
1 Other – Subsequent treatment that cannot be appropriately assigned to specified treatment data items (surgery, radiation, systemic therapy, hematopoietic cases, such as phlebotomy, transfusion, or aspirin).
2 Other – Experimental This code is not defined. It may be used to record participation in institution-based clinical trials.
3 Other – Double Blind A patient is involved in a double-blind clinical trial. Code the treatment actually administered when the double-blind trial code is broken.
6 Other – Unproven Cancer treatments administered by nonmedical personnel.

- The principal treatment for certain reportable hematopoietic diseases could be supportive care that does not meet the usual definition of treatment that "modifies, controls, removes, or destroys" proliferating cancer tissue.
- Supportive care may include phlebotomy, transfusion, or aspirin. In order to report the hematopoietic cases in which the patient received supportive care, SEER and the Commission on Cancer have agreed to record treatments such as phlebotomy, transfusion, or aspirin as "Other Treatment" (Code 1) for the hematopoietic diseases ONLY. (See instructions for coding in Section One).

Subsq RX 2nd Crs Trans/End

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9927_SubsqRX2ndCrsTransEn	9927	2	CDC/NPCR-CER	1800

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
This variable is used to code the type of transplant/endocrine therapy given as part of the subsequent course of treatment. Subsequent treatment is defined as: all cancer-directed therapies administered after the first course is complete due to lack of response or disease progression. Therapy administered after the first course is completed, stopped or changed is recorded as subsequent therapy. Patient's medical records and available pharmacy data sets were included as potential sources for obtaining this data.

Codes
Code 00 if a subsequent transplant or endocrine procedure was not administered to the patient.

00 None OR
Not applicable (e.g., not required for this primary site/histology) OR
Unknown information
10 A bone marrow transplant procedure was administered, but the type was not specified.
11 Bone marrow transplant–autologous
12 Bone marrow transplant–allogeneic
20 Stem cell harvest and infusion. Umbilical cord stem cell transplant.
30 Endocrine surgery and/or endocrine radiation therapy.
40 Combination of endocrine surgery and/or radiation with a transplant procedure. (Combination of codes 30 and 10, 11, 12, or 20.)

- Bone marrow transplants were coded as either autologous (bone marrow originally taken from the patient) or allogeneic (bone marrow donated by a person other than the patient). For cases in which the bone marrow transplant was syngeneic (transplanted marrow from an identical twin), the item was coded as allogeneic.
- Stem cell harvests involve the collection of immature blood cells from the patient and the reintroduction by transfusion of the harvested cells following chemotherapy or radiation therapy.
- Endocrine irradiation and/or endocrine surgery are procedures which suppress the naturally occurring hormonal activity of the patient and thus alter or affect the long-term control of the cancer's growth. These procedures must be bilateral to qualify as endocrine surgery or endocrine radiation. If only one gland is intact at the start of treatment, surgery and/or radiation to that remaining gland qualifies as endocrine surgery or endocrine radiation.

Subsq RX 2nd Chemo 1 NSC

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9931_SubsqRX2ndChemo1NSC	9931	6	CDC/NPCR-CER	1802
N9931_SubsqRX2ndChemo1NSC	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
See description information listed for Chemotherapy 1 NSC Number in this data dictionary.

**During the creation of the analytic data set, whenever possible, project staff converted NSC numbers to agent names using information provided by NCI's SEER*Rx program and SAS programs designed specifically for this purpose. For this reason, we recommend that an analyst including specific agent information in their analysis use the name variables (N9931_SubsqRX2ndChemo1NSC through N9936_SubsqRX2ndChemo6NSC), which have already been converted in a consistent and appropriate manner across the full data set for all agent NSC numbers that had a match in SEER*Rx or in the list that collaborators were provided during the course of data collection. However, agent name should not be used by itself to determine if a specific *treatment* was given. There may be some agents in which an NSC number appears, but there is no matching agent name. For instance, some coded NSC numbers were entered incorrectly and no corresponding agent name exists for the number, and some patients may have been part of a clinical trail in which complete identifying agent information was unknown.

Codes
See coding information listed for Chemotherapy 1 NSC Number in this data dictionary.

Subsq RX 2nd Chemo 2 NSC

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9932_SubsqRX2ndChemo2NSC	9932	6	CDC/NPCR-CER	1808
N9932_SubsqRX2ndChemo2NSC	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
See description information listed for Chemotherapy 1 NSC Number in this data dictionary.

Codes
See coding information listed for Chemotherapy 1 NSC Number in this data dictionary.

Subsq RX 2nd Chemo 3 NSC

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9933_SubsqRX2ndChemo3NSC	9933	6	CDC/NPCR-CER	1814
N9933_SubsqRX2ndChemo3NSC	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
See description information listed for Chemotherapy 1 NSC Number in this data dictionary.

Codes
See coding information listed for Chemotherapy 1 NSC Number in this data dictionary.

Subsq RX 2nd Chemo 4 NSC

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9934_SubsqRX2ndChemo4NSC	9934	6	CDC/NPCR-CER	1820
N9934_SubsqRX2ndChemo4NSC	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
See description information listed for Chemotherapy 1 NSC Number in this data dictionary.

Codes
See coding information listed for Chemotherapy 1 NSC Number in this data dictionary.

Subsq RX 2nd Chemo 5 NSC

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9935_SubsqRX2ndChemo5NSC	9935	6	CDC/NPCR-CER	1826
N9935_SubsqRX2ndChemo5NSC	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
See description information listed for Chemotherapy 1 NSC Number in this data dictionary.

Codes
See coding information listed for Chemotherapy 1 NSC Number in this data dictionary.

Subsq RX 2nd Chemo 6 NSC

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9936_SubsqRX2ndChemo6NSC	9936	6	CDC/NPCR-CER	1832
N9936_SubsqRX2ndChemo6NSC	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
See description information listed for Chemotherapy 1 NSC Number in this data dictionary.

Codes
See coding information listed for Chemotherapy 1 NSC Number in this data dictionary.

Subsq RX 2nd Horm 1 NSC

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9941_SubsqRX2ndHorm1NSC	9941	6	CDC/NPCR-CER	1838
N9941_SubsqRX2ndHorm1NSC	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
See description information listed for Hormone 1 NSC Number in this data dictionary.

**During the creation of the analytic data set, whenever possible, project staff converted NSC numbers to agent names using information provided by NCI's SEER*Rx program and SAS programs designed specifically for this purpose. For this reason, we recommend that an analyst including specific agent information in their analysis use the name variables (N9941_SubsqRX2ndHorm1NSC through N9942_SubsqRX2ndHorm2NSC), which have already been converted in a consistent and appropriate manner across the full data set for all agent NSC numbers that had a match in SEER*Rx or in the list that collaborators were provided during the course of data collection. However, agent name should not be used by itself to determine if a specific *treatment* was given. There may be some agents in which an NSC number appears, but there is no matching agent name. For instance, some coded NSC numbers were entered incorrectly and no corresponding agent name exists for the number, and some patients may have been part of a clinical trail in which complete identifying agent information was unknown.

Codes
See coding information listed for Hormone 1 NSC Number in this data dictionary.

Subsq RX 2nd Horm 2 NSC

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9942_SubsqRX2ndHorm2NSC	9942	6	CDC/NPCR-CER	1844
N9942_SubsqRX2ndHorm2NSC	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
See description information listed for Hormone 1 NSC Number in this data dictionary (CDC Comparative Effectiveness Research Project Data Dictionary for Non-NAACCR Standard Data Items).

Codes
See coding information listed for Hormone 1 NSC Number in this data dictionary (CDC Comparative Effectiveness Research Project Data Dictionary for Non-NAACCR Standard Data Items).

Subsq RX 2nd BRM 1 NSC

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9951_SubsqRX2ndBRM1NSC	9951	6	CDC/NPCR-CER	1850
N9951_SubsqRX2ndBRM1NSC	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
See description information listed for BRM 1 NSC Number in this data dictionary.

**During the creation of the analytic data set, whenever possible, project staff converted NSC numbers to agent names using information provided by NCI's SEER*Rx program and SAS programs designed specifically for this purpose. For this reason, we recommend that an analyst including specific agent information in their analysis use the name variables (N9951_SubsqRX2ndBRM1NSC through N9952_SubsqRX2ndBRM2NSC), which have already been converted in a consistent and appropriate manner across the full data set for all agent NSC numbers that had a match in SEER*Rx or in the list that collaborators were provided during the course of data collection. However, agent name should not be used by itself to determine if a specific *treatment* was given. There may be some agents in which an NSC number appears, but there is no matching agent name. For instance, some coded NSC numbers were entered incorrectly and no corresponding agent name exists for the number, and some patients may have been part of a clinical trail in which complete identifying agent information was unknown.

Codes
See coding information listed for BRM 1 NSC Number in this data dictionary.

Subsq RX 2nd BRM 2 NSC

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9952_SubsqRX2ndBRM2NSC	9952	6	CDC/NPCR-CER	1856
N9952_SubsqRX2ndBRM2NSC	Agent name (***recommend using for analysis) Please refer to SEER*Rx for details on use.			

Cancer Site
As available, Breast, CML, Colon, Rectum
NOT collected for all other sites/histologies

Description
See description information listed for BRM 1 NSC Number in this data dictionary.

Codes
See coding information listed for BRM 1 NSC Number in this data dictionary.

Section VI: Follow-up/Recurrence/Death

Date of Last Contact

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1750_DateLastContact	1750	8	SEER/CoC	2116-2123

Description
Date of last contact with the patient or date of death. If the patient has multiple tumors, Date of Last Contact should be the same for all tumors.

Rationale
Used for recording Date of Last Contact from active or passive follow-up. Used to record date of death and to calculate survival.

Format
The date format (YYYYMMDD) specifically addresses the NAACCR standard data transmission format; not how the data should be stored in an individual registry's database or viewed on the screen. Only valid portions of the date should be transmitted. Below are the common formats to handle the situation where only certain components of date are known.

YYYYMMDD	when complete date is known and valid
YYYYMM	when year and month are known and valid, and day is unknown
YYYY	when year is known and valid, and month and day are unknown
Blank	when no known date applies

The field is fixed-length and left-justified. Any missing component should be replaced by spaces. If there are no known date components, the fixed-length variable will be completely blank.

For unknown values and codes that have meanings other than dates the HL7 Flavors of Null Table (Appendix C) has been adopted for flagging each non-system-generated missing date as a way to eliminate the ambiguity of missing values. A date flag field, to serve as a flag or indicator, is used for each date field for which an "unknown" or "not applicable" value is appropriate. This item would be blank if a valid date is transmitted in its associated date item. The only date fields that would not have a flag are system-generated dates (e.g., Date Case Completed [2090]), for which "unknown" would never be a legitimate value.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Date of Last Contact Flag

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1751_DateLastCntctFlag	1751	2	NAACCR	2124-2125

Description
This flag explains why no appropriate value is in the field, Date of Last Contact [1750].

Rationale
As part of an initiative to standardize date fields, this field accommodates non-date information.

Codes (See Appendix C for the complete Flavors of Null table, which includes the NAACCR codes, HL7 codes and definitions.)

12	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., date of last contact is unknown).
Blank	A valid date value is provided in item Date of Last Contact [1750], or the date was not expected to have been transmitted.

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Vital Status

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1760_VitalStatus	1760	1	SEER/CoC	2126-2126

Description
Vital status of the patient as of the date entered in Date of Last Contact [1750]. If the patient has multiple tumors, vital status should be the same for all tumors.

Codes
0 Dead (CoC)
1 Alive

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Follow-up Source Central

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1791_FollowUpSrcCntrl	1791	2	NAACCR	2278-2279

Description
This field is created by the central registry. It records the source from which the consolidated information was obtained on a patient's vital status and date of last contact. Follow-up Source Central would be updated when new or more reliable information becomes available. However, when the existing date of last contact/vital status is deemed to be more reliable than newly obtained information, then neither the date of last contact/vital status nor the follow-up source central would be changed.

Rationale
For central registries performing follow-up, this field could help evaluate the success rates of various methods of follow-up. When new follow-up information conflicts with the existing information, knowing the follow-up source can help resolve any discrepancies.

Codes

00	Follow-up not performed for this patient
(01-29)	File Linkages
01	Medicare/Medicaid File
02	Center for Medicare and Medicaid Services (CMS, formerly HCFA)
03	Department of Motor Vehicle Registration
04	National Death Index (NDI)
05	State Death Tape/Death Certificate File
06	County/Municipality Death Tape/ Death Certificate File
07	Social Security Administration Death Master File
08	Hospital Discharge Data
09	Health Maintenance Organization (HMO) file
10	Social Security Epidemiological Vital Status Data
11	Voter Registration File
12	Research/Study Related Linkage
29	Linkages, NOS
(30-39)	Hospitals and Treatment Facilities
30	Hospital in-patient/outpatient
31	Casefinding
32	Hospital cancer registry
33	Radiation treatment center
34	Oncology clinic
35	Ambulatory surgical center
39	Clinic/facility, NOS
(40-49)	Physicians
40	Attending physician
41	Medical oncologist
42	Radiation oncologist
43	Surgeon
48	Other specialist
49	Physician, NOS
(50-59)	Patient
50	Patient contact
51	Relative contact
59	Patient, NOS
(60-98)	Other
60	Central or Regional cancer registry
61	Internet sources
62	Hospice

63	Nursing homes
64	Obituary
65	Other research/study related sources
98	Other, NOS
99	Unknown source

Reference

Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1*, 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Cause of Death

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1910_COD	1910	4	SEER	2269-2272

Description
Official cause of death as coded from the death certificate in valid ICD-7, ICD-8, ICD-9, and ICD-10 codes.

Rationale
Cause of death is used for calculation of adjusted survival rates by the life table method. The adjustment corrects for deaths other than from the diagnosed cancer.

Special codes in addition to ICD-7, ICD-8, ICD-9, and ICD-10 (refer to *SEER Program Code Manual* for additional instructions)

0000	Patient alive at last contact
7777	State death certificate not available
7797	State death certificate available but underlying cause of death is not coded

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010.
http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

ICD Codes/Classification of Disease
http://www.cdc.gov/nchs/icd.htm

ICD Revision Number

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1920_ICDRevNum	1920	1	SEER	2273-2273

Description
Indicator for the coding scheme used to code the cause of death.

Codes
0 Patient alive at last follow-up
1 ICD-10

Reference
Thornton M, (ed). *Standards for Cancer Registries Volume II: Data Standards and Data Dictionary, Record Layout Version 12.1,* 15th ed. Springfield, Ill.: North American Association of Central Cancer Registries, June 2010. http://www.naaccr.org/LinkClick.aspx?fileticket=LJJNRVo4lT4%3D&tabid=268&mid=746

Place of Death – State

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1942_PlaceDeathState	1942	2	NAACCR	450-451

Description
State or Province where the patient died and where certificate of death is filed. This data item became part of the NAACCR transmission record effective with Volume II, Version 13 in order to include country and state for each geographic item and to use interoperable codes. It supplements the item PLACE OF DEATH--COUNTRY [1944]. It replaces the use of PLACE OF DEATH [1940].

Rationale
This field also helps carry out death clearance. When a hospital reports a place of death, the information can help in death certificate matching. It can also signal an out-of-state death for which the death certificate is to be requested.

Codes
Blank Not applicable, patient alive

See Appendix B for an alphabetic list of codes (also see Appendix B of the SEER Program Code Manual at http://seer.cancer.gov/tools/codingmanuals/index.html.

Reference
http://www.naaccr.org/Applications/ContentReader/Archive/13/Chap10.html

Place of Death – Country

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I1944_PlaceDeathCountry	1944	3	NAACCR	452 - 454

Description
Code for the country in which the patient died and where certificate of death is filed. If the patient has multiple tumors, all records should contain the same code. This data item became part of the NAACCR transmission record effective with Volume II, Version 13 in order to include country and state for each geographic item and to use interoperable codes. It supplements the item Place of Death--State [1942]. It replaces the use of Place of Death [1940].

Rationale
Place of death is helpful for carrying out death clearance. When a hospital reports a place of death that is outside of the registry's country, the information can signal a death for which the death certificate will not be available from another state or through the NDI linkage.

Codes
See Appendix B for an alphabetic list of codes (also see Appendix B of the SEER Program Code Manual at http://seer.cancer.gov/tools/codingmanuals/index.html.

Reference
http://www.naaccr.org/Applications/ContentReader/Archive/13/Chap10.html

Section VII: CER Census Tract Socioeconomic Status (SES) Measures

Census Tract Socioeconomic Status (SES) Measures for Linking to 2011 CER Cancer Case Records

July 25, 2013

All measures were obtained from the U.S. Census Bureau data files, which are available free and online. These census tract measures are generally based on pooled 2006-2010 American Community Survey (ACS) data. The ACS data measures are estimates based on a sample, not calculations from complete census tract data. The percent of the census tract population that is urban is based on the Census complete count for 2010. The health insurance measures are based on 2008-2010 data and are at the county level only, as explained below. The advantage of using the U.S. Census Bureau data is that it is free, easily available online, and can be updated in future years. In an Appendix to this document, detailed steps for downloading the Census data are provided. This will promote the ability of states to use the SES data for linking to cancer case records in future years, thus allowing sustainability of the 2011 CER data linkages.

Census tracts were used as the unit of geography for several reasons. First, states are already collecting census tract number as part of the NAACCR record and so no new geo-coding of addresses would be required to link the geographic area data by census tract. Second, the average number of households in a census tract in the United States is approximately 1,700, which is a reasonable approximation of the "neighborhood" in which the patient lives. Also, census tracts can be aggregated exactly into counties, and counties into states. In addition, there are many examples in the health literature validating the method of linking patient-level data to geographic data describing the patient's census tract as a means of adding contextual measures to the analysis.

Why is it important to have measures of neighborhood characteristics for comparative effectiveness research? The environment in which a person lives can influence his health, beyond the effects of individual characteristics. The census tract level variables calculated for this project are intended to describe the neighborhood in which the person lives. These geographic measures are not just a surrogate for individual characteristics. They may be said to describe the "population structure" of an area or the "socioeconomic environment." It might by hypothesized that an older cancer patient living in a neighborhood with a very young median age would have different outcomes than a patient of the same age living in a neighborhood with a much older median age. Or an African American living in a predominantly African American neighborhood could have different outcomes than an African American living in a predominantly white neighborhood (controlling for other measured factors that might affect the outcomes). Merging the census tract level data with the patient-level cancer case records will allow the exploration of such neighborhood effects. There are appropriate statistical techniques that should be used when combining individual level and area level data in an analysis of health outcomes.

List of ACS Census Tract Measures

Variable numbers (to the left of each variable description) are those in the RDC SAS data set. A cross-reference table, with these variable numbers and the corresponding variable labels in the Census Bureau files, is available upon request. There is a record for each census tract which will have the FIPS state code, the FIPS county code, and the census tract code to allow linking to the cancer case records. Each census tract record also has all of the measures listed below. The percentages are shown to one decimal place, as obtained from the Census Bureau data files.

These measures were chosen from the available ACS data as overall indicators for the census tract of demographic structure, income, education, housing characteristics, marital status, and other SES dimensions. Detailed categories were maintained for most of these measures (e.g., age, education, income); these categories could be combined into larger groupings for purposes of data analysis. For most of the measures, the percentage of census tracts with missing data is around one percent. Missing data is usually due to there being either no sample observations in the census tract or too few sample observations available to compute an estimate.

State code
County code
Census tract code
STATE_NAME State name
COUNTY_NAME County name
V92 Population of the census tract
V51 Number of housing units in the census tract

V64 Percent of population that is male
V65 Percent of population that is female
V91 Percent of population that is Hispanic/Latino
V80 Percent of population that is White alone
V82 Percent of population that is Black/African American alone
V84 Percent of population that is American Indian/Alaskan Native alone
V86 Percent of population that is Asian alone
V88 Percent of population that is Native Hawaiian/Pacific Islander alone
V90 Percent of population that is some other race alone
V79 Percent of population that is two or more races
(**Note:** The above 7 measures should add to 100%, except for rounding. Also, some of the more detailed racial classifications in the 2010 Census data will need to be combined to form the 7 categories shown here.)

V81 Percent of the population that is White, alone or in combination with one or more other races
V83 Percent of the population that is Black/African American, alone or in combination with one or more other races
V85 Percent of the population that is American Indian/Alaskan Native, alone or in combination with one or more other races
V87 Percent of the population that is Asian, alone or in combination with one or more other races
V89 Percent of the population that is Native Hawaiian/Pacific Islander, alone or in combination with one or more other races
V66 Percent of population that is age 0-4
V67 Percent of population that is age 5-9
V68 Percent of population that is age 10-14
V69 Percent of population that is age 15-19
V70 Percent of population that is age 20-24
V71 Percent of population that is age 25-34
V72 Percent of population that is age 35-44
V73 Percent of population that is age 45-54
V74 Percent of population that is age 55-59
V75 Percent of population that is age 60-64
V76 Percent of population that is age 65-74
V77 Percent of population that is age 75-84
V78 Percent of population that is age 85+
(**Note:** The above 13 measures should add to 100%, except for rounding.)

V117 Median age
V24 Percent of households with household income and benefits < $10,000
V25 Percent of households with household income and benefits $10,000 - $14,999
V26 Percent of households with household income and benefits $15,000 - $24,999
V27 Percent of households with household income and benefits $25,000 - $34,999
V28 Percent of households with household income and benefits $35,000 - $49,999
V29 Percent of households with household income and benefits $50,000 - $74,999
V30 Percent of households with household income and benefits $75,000 - $99,999
V31 Percent of households with household income and benefits $100,000-$149,999
V32 Percent of households with household income and benefits $150,000 - $199,999
V33 Percent of households with household income and benefits $200,000+
(**Note:** The above 10 measures should add to 100%, except for rounding.)

V34 Median household income
V35 Percent of all families whose income in the past 12 months was below the poverty level
V36 Percent of all people whose income in the past 12 months was below the poverty level
V42 Percent of population age 25+ with less than 9^{th} grade education
V43 Percent of population age 25+ with 9^{th} to 12^{th} grade education, no diploma
V44 Percent of population age 25+, high school graduate (includes equivalency)
V45 Percent of population age 25+ with some college, no degree
V46 Percent of population age 25+ with an associate's degree

V47 Percent of population age 25+ with a bachelor's degree
V48 Percent of population age 25+ with a graduate or professional degree
(**Note:** The above 7 measures should add to 100%, except for rounding.)

V1 Percent of persons in the civilian labor force age 16+ who were unemployed

Percent of the civilian employed population age 16+ in Census-defined occupational groups (these 5 percents should add up to 100%):
V2 Management, business, science, and arts
V3 Service
V4 Sales and office
V5 Natural resources, construction, and maintenance
V6 Production, transportation, and material moving

Percent of the civilian employed population age 16+ in Census-defined industry categories (these 13 percents should add up to 100%):

V7 Agriculture, forestry, fishing and hunting, and mining
V8 Construction
V9 Manufacturing
V10 Wholesale trade
V11 Retail trade
V12 Transportation and warehousing, and utilities
V13 Information
V14 Finance and insurance, and real estate and rental and leasing
V15 Professional, scientific, and management, and administrative and waste management services
V16 Educational services, and health care and social assistance
V17 Arts, entertainment, and recreation, and accommodation and food services
V18 Other services, except public administration
V19 Public administration

Percent of the civilian employed population age 16+ by class of worker (these 4 percents should add up to 100%):

V20 Private wage and salary
V21 Government
V22 Self-employed in own not incorporated business
V23 Unpaid family

V39 Average family size
V37 Percent of family households with a female householder, no husband present
V50 Percent of the population age 5 years and older where only English is spoken in the home
V38 Percent of households with one or more people age 65 and older
V40 Percent of males age 15+ now married
V41 Percent of females age 15+ now married
V52 Percent of housing units that are vacant
V62 Percent of occupied housing units lacking complete plumbing facilities
V63 Median value of owner-occupied housing units
Percent of total housing units by year structure was built (these 9 percents should add up to 100%):

V53 2005 or later
V54 2000-2004
V55 1990-1999
V56 1980-1989
V57 1970-1979
V58 1960-1969
V59 1950-1959

V60 1940-1949
V61 1939 or earlier

PCT_POP_IN_URBAN Percent of the census tract population that is urban

Note: All of the measures above are at the census tract level, while the following health insurance measures are at the **county level**. The ACS did not start collecting health insurance data until 2008, so only three years of data (2008-2010) were available to produce the estimates. The Census Bureau determined that three years of data was not sufficient to produce estimates for census tracts, so only county-level estimates are available. Estimates were not produced for counties with a population of less than 20,000. **All of the census tracts in a county will have the same health insurance measure values**, i.e., those for the county as a whole. Data analysts should be aware of the different level of geography used for these health insurance measures and adjust their methods accordingly. For the 2011 cancer case records submitted by the 10 CER states, approximately 97 percent could be linked to these county-level health insurance measures.

V94 Percent of the civilian non-institutionalized population with health insurance coverage
V95 Percent of the civilian non-institutionalized population with private health insurance
V96 Percent of the civilian non-institutionalized population with public health insurance
V97 Percent of the civilian non-institutionalized population with no health insurance
V99 Percent of the civilian non-institutionalized population under age 18 with no health insurance
V103 Percent of employed persons age 18-64 with health insurance coverage
V104 Percent of employed persons age 18-64 with private health insurance
V105 Percent of employed persons age 18-64 with public health insurance
V106 Percent of employed persons age 18-64 with no health insurance
V108 Percent of unemployed persons age 18-64 with health insurance coverage
V109 Percent of unemployed persons age 18-64 with private health insurance
V110 Percent of unemployed persons age 18-64 with public health insurance
V111 Percent of unemployed persons age 18-64 with no health insurance
V113 Percent of persons age 18-64 not in the labor force with health insurance coverage
V114 Percent of persons age 18-64 not in the labor force with private health insurance
V115 Percent of persons age 18-64 not in the labor force with public health insurance
V116 Percent of persons age 18-64 not in the labor force with no health insurance

Note: The measures below are **county-level population counts** rather than percents, and include the denominators of the health insurance percents immediately above.

V93 Total civilian, non-institutionalized population
V98 Civilian, non-institutionalized population under age 18
V100 Civilian, non-institutionalized population age 18-64
V101 Civilian, non-institutionalized population age 18-64 in the labor force
V102 Civilian, non-institutionalized population age 18-64 in the labor force, employed
V107 Civilian, non-institutionalized population age 18-64 in the labor force, unemployed
V112 Civilian, non-institutionalized population age 18-64 not in the labor force

Section VIII: Other Variables

CER Override

SAS Alternate Name	Item #	Length	Source of Standard	Column #
I9969_OvrdCER	9969	1	CDC/NPCR-CER	1325-1325

Description
This variable was added to distinguish 2011 CER breast, colon, rectal, or chronic myloid leukemia cancer cases reported to the specialized registries after the CER contract was complete. These cases may represent death certificate only, autopsy only, and cases identified or reported to the registries after September 2013.

Rationale
Since these cases were reported to the CER specialized registries after the CER contract was complete, states were not required to collect CER specific data elements and therefore these cases may have missing CER information.

Codes
1 CER case submitted after CER contract was over

Note
A researcher/analyst may consider inclusion/exclusion of these cases from their analysis depending on the data elements being analyzed.

Section IX: Appendices

Appendix A: FIPS Codes for Counties and Equivalent Entities

[Ed. Note: The information in this table is from FIPS Publication Number 6-4, – Counties and Equivalent Entities of the United States, its Possessions, and Associated Areas, as reissued December 21, 1992, and made available electronically on the National Institute of Standards and Technology Website (http://www.itl.nist.gov). We compared two versions of the file against printed lists to reconcile apparents errors and discrepancies.]

STATE NAME: ALABAMA
ALPHABETIC CODE: AL
NUMERIC CODE: 01

CODE	COUNTY NAME
001	Auatauga
003	Baldwin
005	Barbour
007	Bibb
009	Blount
011	Bullock
013	Butler
015	Calhoun
017	Chambers
019	Cherokee
021	Chilton
023	Choctaw
025	Clarke
027	Clay
029	Cleburne
031	Coffee
033	Colbert
035	Conecuh
037	Coosa
039	Covington
041	Crenshaw
043	Cullman
045	Dale
047	Dallas
049	DeKalb
051	Elmore
053	Escambia
055	Etowah
057	Fayette
059	Franklin
061	Geneva
063	Greene
065	Hale
067	Henry
069	Houston
071	Jackson
073	Jefferson
075	Lamar
077	Lauderdale
079	Lawrence
081	Lee
083	Limestone
085	Lowndes
087	Macon
089	Madison
091	Marengo
093	Marion
095	Marshall
097	Mobile
099	Monroe
101	Montgomery
103	Morgan
105	Perry
107	Pickens
109	Pike
111	Randolph
113	Russell
115	St. Clair
117	Shelby
119	Sumter
121	Talladega
123	Tallapoosa
125	Tuscaloosa
127	Walker
129	Washington
131	Wilcox
133	Winston

STATE NAME: ALASKA
ALPHABETIC CODE: AK
NUMERIC CODE: 02

Note: The following is a complete list of all current Alaska county equivalents where (B) identifies a borough and (C) identifies a census area per FIPS Publication Change Notice (Reissue 12/21/92).

CODE	BOROUGH/ CENSUS AREA
013	Aleutians East (B)
016	Aleutians West I
020	Anchorage (B)
050	Bethel I
060	Bristol Bay (B)
068	Denali (B)
070	Dillingham I
090	Fairbanks North Star (B)
100	Haines (B)
110	Juneau (B)
122	Kenai Peninsula (B)
130	Ketchikan Gateway (B)
150	Kodiak Island (B)
164	Lake and Peninsula (B)
170	Matanuska-Susitna (B)
180	Nome I
185	North Slope (B)
188	Northwest Arctic (B)
201	Prince of Wales-Outer Ketchikan I
220	Sitka (B)
232	Skagway-Hoonah-Angoon I
240	Southeast Fairbanks I
261	Valdez-Cordova I
270	Wade Hampton I
280	Wrangell-Petersburg I
282	Yakutat (B)
290	Yukon-Koyukuk I

STATE NAME: ARIZONA
ALPHABETIC CODE: AZ
NUMERIC CODE: 04

CODE	COUNTY NAME
001	Apache
003	Cochise
005	Coconino
007	Gila
009	Graham
011	Greenlee
012	LaPaz
013	Maricopa
015	Mohave
017	Navajo
019	Pima
021	Pinal
023	Santa Cruz
025	Yavapai
027	Yuma

La Paz was established from part of Yuma (1/1/83).

STATE NAME: ARKANSAS
ALPHABETIC CODE: AR
NUMERIC CODE: 05

CODE	COUNTY NAME
001	Arkansas
003	Ashley
005	Baxter
007	Benton
009	Boone
011	Bradley
013	Calhoun
015	Carroll
017	Chicot
019	Clark
021	Clay
023	Cleburne
025	Cleveland
027	Columbia
029	Conway
031	Craighead
033	Crawford
035	Crittenden
037	Cross
039	Dallas
041	Desha
043	Drew
045	Faulkner
047	Franklin
049	Fulton
051	Garland
053	Grant
055	Greene
057	Hempstead
059	Hot Spring
061	Howard
063	Independence
065	Izard
067	Jackson
069	Jefferson
071	Johnson
073	Lafayette
075	Lawrence
077	Lee
079	Lincoln
081	Little River
083	Logan
085	Lonoke
087	Madison
089	Marion
091	Miller
093	Mississippi
095	Monroe
097	Montgomery
099	Nevada
101	Newton
103	Ouachita
105	Perry
107	Phillips
109	Pike
111	Poinsett
113	Polk
115	Pope
117	Prairie
119	Pulaski
121	Randolph
123	St. Francis
125	Saline
127	Scott
129	Searcy

131	Sebastian
133	Sevier
135	Sharp
137	Stone
139	Union
141	Van Buren
143	Washington
145	White
147	Woodruff
149	Yell

STATE NAME: CALIFORNIA
ALPHABETIC CODE: CA
NUMERIC CODE: 06

CODE	COUNTY NAME
001	Alameda
003	Alpine
005	Amador
007	Butte
009	Calaveras
011	Colusa
013	Contra Costa
015	Del Norte
017	El Dorado
019	Fresno
021	Glenn
023	Humboldt
025	Imperial
027	Inyo
029	Kern
031	Kings
033	Lake
035	Lassen
037	Los Angeles
039	Madera
041	Marin
043	Mariposa
045	Mendocino
047	Merced
049	Modoc
051	Mono
053	Monterey
055	Napa
057	Nevada
059	Orange
061	Placer
063	Plumas
065	Riverside
067	Sacramento
069	San Benito
071	San Bernardino
073	San Diego
075	San Francisco
077	San Joaquin
079	San Luis Obispo
081	San Mateo
083	Santa Barbara
085	Santa Clara
087	Santa Cruz
089	Shasta
091	Sierra
093	Siskiyou
095	Solano
097	Sonoma
099	Stanislaus
101	Sutter
103	Tehama
105	Trinity
107	Tulare
109	Tuolomne
111	Ventura
113	Yolo
115	Yuba

STATE NAME: COLORADO
ALPHABETIC CODE: CO
NUMERIC CODE: 08

CODE	COUNTY NAME
001	Adams
003	Alamosa
005	Arapahoe
007	Archuleta
009	Baca
011	Bent
013	Boulder
014	Broomfield
015	Chaffee
017	Cheyenne
019	Clear Creek
021	Conejos
023	Costilla
025	Crowley
027	Custer
029	Delta
031	Denver
033	Dolores
035	Douglas
037	Eagle
039	Elbert
041	El Paso
043	Fremont
045	Garfield
047	Gilpin
049	Grand
051	Gunnison
053	Hinsdale
055	Huerfano
057	Jackson
059	Jefferson
061	Kiowa
063	Kit Carson
065	Lake
067	La Plata
069	Larimer
071	Las Animas
073	Lincoln
075	Logan
077	Mesa
079	Mineral
081	Moffat
083	Montezuma
085	Montrose
087	Morgan
089	Otero
091	Ouray
093	Park
095	Phillips
097	Pitkin
099	Prowers
101	Pueblo
103	Rio Blanco
105	Rio Grande
107	Routt
109	Saguache
111	San Juan
113	San Miguel
115	Sedgwick
117	Summit
119	Teller
121	Washington
123	Weld
125	Yuma

Broomfield County, Colorado, has been created from parts of Adams (001), Boulder (013), Jefferson (059) and Weld (123) counties effective November 15, 2001. The boundaries of Broomfield County reflect the boundaries of Broomfield city legally in effect on November 15, 2001. To maintain alphanumeric sequences of counties, Broomfield County will have a code of 014 for FIPS 6-4.

STATE NAME: CONNECTICUT
ALPHABETIC CODE: CT
NUMERIC CODE: 09

CODE	COUNTY NAME
001	Fairfield
003	Hartford
005	Litchfield
007	Middlesex
009	New Haven
011	New London
013	Tolland
015	Windham

STATE NAME: DELAWARE
ALPHABETIC CODE: DE
NUMERIC CODE: 10

CODE	COUNTY NAME
001	Kent
003	New Castle
005	Sussex

STATE NAME: DISTRICT OF COLUMBIA
ALPHABETIC CODE: DC
NUMERIC CODE: 11

CODE	SUBDIVISION NAME
4..	District of Columbia

Name was reported incorrectly as “Washington” in FIPS PUB 6-3. The District has no first-order subdivisions, and therefore “District of Columbia” also serves as the county-equivalent entity.

STATE NAME: FLORIDA
ALPHABETIC CODE: FL
NUMERIC CODE: 12

CODE	COUNTY NAME
001	Alachua
003	Baker
005	Bay
007	Bradford
009	Brevard
011	Broward
013	Calhoun
015	Charlotte
017	Citrus
019	Clay
021	Collier
023	Columbia
027	DeSoto
029	Dixie
031	Duval
033	Escambia
035	Flagler
037	Franklin
039	Gadsden
041	Gilchrist
043	Glades
045	Gulf
047	Hamilton
049	Hardee
051	Hendry
053	Hernando
055	Highlands
057	Hillsborough
059	Holmes
061	Indian River
063	Jackson
065	Jefferson
067	Lafayette
069	Lake
071	Lee
073	Leon
075	Levy
077	Liberty
079	Madison
081	Manatee
083	Marion
085	Martin
086	Miami-Dade
087	Monroe
089	Nassau
091	Okaloosa
093	Okeechobee
095	Orange
097	Osceola
099	Palm Beach
101	Pasco
103	Pinellas
105	Polk
107	Putnam
109	St. Johns
111	St. Lucie
113	Santa Rosa
115	Sarasota
117	Seminole
119	Sumter

121	Suwannee
123	Taylor
125	Union
127	Volusia
129	Wakulla
131	Walton
133	Washington

Convert Dade County 025 to Miami-Dade County 086. Edits should only allow for code 086.

STATE NAME: GEORGIA
ALPHABETIC CODE: GA
NUMERIC CODE: 13

CODE	COUNTY NAME
001	Appling
003	Atkinson
005	Bacon
007	Baker
009	Baldwin
011	Banks
013	Barrow
015	Bartow
017	Ben Hill
019	Berrien
021	Bibb
023	Bleckley
025	Brantley
027	Brooks
029	Bryan
031	Bulloch
033	Burke
035	Butts
037	Calhoun
039	Camden
043	Candler
045	Carroll
047	Catoosa
049	Charlton
051	Chatham
053	Chattahoochee
055	Chattooga
057	Cherokee
059	Clarke
061	Clay
063	Clayton
065	Clinch
067	Cobb
069	Coffee
071	Colquitt
073	Columbia
075	Cook
077	Coweta
079	Crawford
081	Crisp
083	Dade
085	Dawson
087	Decatur
089	DeKalb
091	Dodge
093	Dooly
095	Dougherty
097	Douglas
099	Early
101	Echols
103	Effingam
105	Elbert
107	Emanuel
109	Evans
111	Fannin
113	Fayette
115	Floyd
117	Forsyth
119	Franklin
121	Fulton
123	Gilmer
125	Glascock
127	Glynn
129	Gordon
131	Grady
133	Greene
135	Gwinnett
137	Habersham
139	Hall
141	Hancock
143	Haralson
145	Harris
147	Hart
149	Heard
151	Henry
153	Houston
155	Irwin
157	Jackson
159	Jasper
161	Jeff Davis
163	Jefferson
165	Jenkins
167	Johnson
169	Jones
171	Lamar
173	Lanier
175	Laurens
177	Lee
179	Liberty
181	Lincoln
183	Long
185	Lowndes
187	Lumpkin
189	McDuffie
191	McIntosh
193	Macon
195	Madison
197	Marion
199	Meriwether
201	Miller
205	Mitchell
207	Monroe
209	Montgomery
211	Morgan
213	Murray
215	Muscogee
217	Newton
219	Oconee
221	Oglethorpe
223	Paulding
225	Peach
227	Pickens
229	Pierce
231	Pike
233	Polk
235	Pulaski
237	Putnam
239	Quitman
241	Rabun
243	Randolph
245	Richmond
247	Rockdale
249	Schley
251	Screven
253	Seminole
255	Spalding
257	Stephens
259	Stewart
261	Sumter
263	Talbot
265	Taliaferro
267	Tattnall
269	Taylor
271	Telfair
273	Terrell
275	Thomas
277	Tift
279	Toombs
281	Towns
283	Treutlen
285	Troup
287	Turner
289	Twiggs
291	Union
293	Upson
295	Walker
297	Walton
299	Ware
301	Warren
303	Washington
305	Wayne
307	Webster
309	Wheeler
311	White
313	Whitfield
315	Wilcox
317	Wilkes
319	Wilkinson
321	Worth

Muscogee was reported incorrectly as “Columbus (consolidated government)” (510) in FIPS PUB6-3.

STATE NAME: HAWAII
ALPHABETIC CODE: HI
NUMERIC CODE: 15

CODE	COUNTY NAME
001	Hawaii
003	Honolulu
005	Kalawao
007	Kauai
009	Maui

Kalawao does not have its own local government; it is administered by the State of Hawaii. It may be included with Maui for statistical purposes.

STATE NAME: IDAHO
ALPHABETIC CODE: ID
NUMERIC CODE: 16

CODE	COUNTY NAME
001	Ada
003	Adams
005	Bannock
007	Bear Lake
009	Benewah
011	Bingham
013	Blaine
015	Boise
017	Bonner
019	Bonneville
021	Boundary
023	Butte
025	Camas
027	Canyon
029	Caribou
031	Cassia
033	Clark
035	Clearwater
037	Custer
039	Elmore
041	Franklin
043	Fremont
045	Gem
047	Gooding
049	Idaho
051	Jefferson
053	Jerome
055	Kootenai
057	Latah
059	Lemhi
061	Lewis
063	Lincoln
065	Madison
067	Minidoka
069	Nez Perce
071	Oneida
073	Owyhee
075	Payette
077	Power
079	Shoshone
081	Teton
083	Twin Falls
085	Valley
087	Washington

STATE NAME: ILLINOIS
ALPHABETIC CODE: IL
NUMERIC CODE: 17

CODE	COUNTY NAME
001	Adams
003	Alexander
005	Bond
007	Boone
009	Brown
011	Bureau
013	Calhoun
015	Carroll
017	Cass
019	Champaign
021	Christian
023	Clark
025	Clay
027	Clinton
029	Coles
031	Cook
033	Crawford
035	Cumberland
037	DeKalb
039	De Witt
041	Douglas

043	DuPage
045	Edgar
047	Edwards
049	Effingham
051	Fayette
053	Ford
055	Franklin
057	Fulton
059	Gallatin
061	Greene
063	Grundy
065	Hamilton
067	Hancock
069	Hardin
071	Henderson
073	Henry
075	Iroquois
077	Jackson
079	Jasper
081	Jefferson
083	Jersey
085	Jo Daviess
087	Johnson
089	Kane
091	Kankakee
093	Kendall
095	Knox
097	Lake
099	La Salle
101	Lawrence
103	Lee
105	Livingston
107	Logan
109	McDonough
111	McHenry
113	McLean
115	Macon
117	Macoupin
119	Madison
121	Marion
123	Marshall
125	Mason
127	Massac
129	Menard
131	Mercer
133	Monroe
135	Montgomery
137	Morgan
139	Moultrie
141	Ogle
143	Peoria
145	Perry
147	Piatt
149	Pike
151	Pope
153	Pulaski
155	Putnam
157	Randolph
159	Richland
161	Rock Island
163	St. Clair
165	Saline
167	Sangamon
169	Schuyler
171	Scott
173	Shelby
175	Stark
177	Stephenson
179	Tazewell
181	Union
183	Vermilion
185	Wabash
187	Warren
189	Washington
191	Wayne
193	White
195	Whiteside
197	Will
199	Williamson
201	Winnebago
203	Woodford

STATE NAME: INDIANA
ALPHABETIC CODE: IN
NUMERIC CODE: 18

CODE	COUNTY NAME
001	Adams
003	Allen
005	Bartholomew
007	Benton
009	Blackford
011	Boone
013	Brown
015	Carroll
017	Cass
019	Clark
021	Clay
023	Clinton
025	Crawford
027	Daviess
029	Dearborn
031	Decatur
033	DeKalb
035	Delaware
037	Dubois
039	Elkhart
041	Fayette
043	Floyd
045	Fountain
047	Franklin
049	Fulton
051	Gibson
053	Grant
055	Greene
057	Hamilton
059	Hancock
061	Harrison
063	Hendricks
065	Henry
067	Howard
069	Huntington
071	Jackson
073	Jasper
075	Jay
077	Jefferson
079	Jennings
081	Johnson
083	Knox
085	Kosciusko
087	Lagrange
089	Lake
091	LaPorte
093	Lawrence
095	Madison
097	Marion
099	Marshall
101	Martin
103	Miami
105	Monroe
107	Montgomery
109	Morgan
111	Newton
113	Noble
115	Ohio
117	Orange
119	Owen
121	Parke
123	Perry
125	Pike
127	Porter
129	Posey
131	Pulaski
133	Putnam
135	Randolph
137	Ripley
139	Rush
141	St. Joseph
143	Scott
145	Shelby
147	Spencer
149	Starke
151	Steuben
153	Sullivan
155	Switzerland
157	Tippecanoe
159	Tipton
161	Union
163	Vanderburgh
165	Vermillion
167	Vigo
169	Wabash
171	Warren
173	Warrick
175	Washington
177	Wayne
179	Wells
181	White
183	Whitley

STATE NAME: IOWA
ALPHABETIC CODE: IA
NUMERIC CODE: 19

CODE	COUNTY NAME
001	Adair
003	Adams
005	Allamakee
007	Appanoose
009	Audubon
011	Benton
013	Black Hawk
015	Boone
017	Bremer
019	Buchanan
021	Buena Vista
023	Butler
025	Calhoun
027	Carroll
029	Cass
031	Cedar
033	Cerro Gordo
035	Cherokee
037	Chickasaw
039	Clarke
041	Clay
043	Clayton
045	Clinton
047	Crawford
049	Dallas
051	Davis
053	Decatur
055	Delaware
057	Des Moines
059	Dickinson
061	Dubuque
063	Emmet
065	Fayette
067	Floyd
069	Franklin
071	Fremont
073	Greene
075	Grundy
077	Guthrie
079	Hamilton
081	Hancock
083	Hardin
085	Harrison
087	Henry
089	Howard
091	Humboldt
093	Ida
095	Iowa
097	Jackson
099	Jasper
101	Jefferson
103	Johnson
105	Jones
107	Keokuk
109	Kossuth
111	Lee
113	Linn
115	Louisa
117	Lucas
119	Lyon
121	Madison
123	Mahaska
125	Marion
127	Marshall
129	Mills
131	Mitchell
133	Monona
135	Monroe
137	Montgomery
139	Muscatine
141	O″Brien
143	Osceola
145	Page
147	Palo Alto
149	Plymouth
151	Pocahontas
153	Polk
155	Pottawattamie
157	Poweshiek
159	Ringgold
161	Sac
163	Scott
165	Shelby
167	Sioux
169	Story
171	Tama
173	Taylor
175	Union
177	Van Buren
179	Wapello
181	Warren
183	Washington
185	Wayne

187	Webster
189	Winnebago
191	Winneshiek
193	Woodbury
195	Worth
197	Wright

STATE NAME: KANSAS
ALPHABETIC CODE: KS
NUMERIC CODE: 20

CODE	COUNTY NAME
001	Allen
003	Anderson
005	Atchison
007	Barber
009	Barton
011	Bourbon
013	Brown
015	Butler
017	Chase
019	Chautauqua
021	Cherokee
023	Cheyenne
025	Clark
027	Clay
029	Cloud
031	Coffey
033	Comanche
035	Cowley
037	Crawford
039	Decatur
041	Dickinson
043	Doniphan
045	Douglas
047	Edwards
049	Elk
051	Ellis
053	Ellsworth
055	Finney
057	Ford
059	Franklin
061	Geary
063	Gove
065	Graham
067	Grant
069	Gray
071	Greeley
073	Greenwood
075	Hamilton
077	Harper
079	Harvey
081	Haskell
083	Hodgeman
085	Jackson
087	Jefferson
089	Jewell
091	Johnson
093	Kearny
095	Kingman
097	Kiowa
099	Labette
101	Lane
103	Leavenworth
105	Lincoln
107	Linn
109	Logan
111	Lyon
113	McPherson
115	Marion
117	Marshall
119	Meade
121	Miami
123	Mitchell
125	Montgomery
127	Morris
129	Morton
131	Nemaha
133	Neosho
135	Ness
137	Norton
139	Osage
141	Osborne
143	Ottawa
145	Pawnee
147	Phillips
149	Pottawatomie
151	Pratt
153	Rawlins
155	Reno
157	Republic
159	Rice
161	Riley
163	Rooks
165	Rush
167	Russell
169	Saline
171	Scott
173	Sedgwick
175	Seward
177	Shawnee
179	Sheridan
181	Sherman
183	Smith
185	Stafford
187	Stanton
189	Stevens
191	Sumner
193	Thomas
195	Trego
197	Wabaunsee
199	Wallace
201	Washington
203	Wichita
205	Wilson
207	Woodson
209	Wyandotte

STATE NAME:
KENTUCKY
ALPHABETIC CODE: KY
NUMERIC CODE: 21

CODE	COUNTY NAME
001	Adair
003	Allen
005	Anderson
007	Ballard
009	Barren
011	Bath
013	Bell
015	Boone
017	Bourbon
019	Boyd
021	Boyle
023	Bracken
025	Breathitt
027	Breckinridge
029	Bullitt
031	Butler
033	Caldwell
035	Calloway
037	Campbell
039	Carlisle
041	Carroll
043	Carter
045	Casey
047	Christian
049	Clark
051	Clay
053	Clinton
055	Crittenden
057	Cumberland
059	Daviess
061	Edmonson
063	Elliott
065	Estill
067	Fayette
069	Fleming
071	Floyd
073	Franklin
075	Fulton
077	Gallatin
079	Garrard
081	Grant
083	Graves
085	Grayson
087	Green
089	Greenup
091	Hancock
093	Hardin
095	Harlan
097	Harrison
099	Hart
101	Henderson
103	Henry
105	Hickman
107	Hopkins
109	Jackson
111	Jefferson
113	Jessamine
115	Johnson
117	Kenton
119	Knott
121	Knox
123	Larue
125	Laurel
127	Lawrence
129	Lee
131	Leslie
133	Letcher
135	Lewis
137	Lincoln
139	Livingston
141	Logan
143	Lyon
145	McCracken
147	McCreary
149	McLean
151	Madison
153	Magoffin
155	Marion
157	Marshall
159	Martin
161	Mason
163	Meade
165	Menifee
167	Mercer
169	Metcalfe
171	Monroe
173	Montgomery
175	Morgan
177	Muhlenberg
179	Nelson
181	Nicholas
183	Ohio
185	Oldham
187	Owen
189	Owsley
191	Pendleton
193	Perry
195	Pike
197	Powell
199	Pulaski
201	Roberston
203	Rockcastle
205	Rowan
207	Russell
209	Scott
211	Shelby
213	Simpson
215	Spencer
217	Taylor
219	Todd
221	Trigg
223	Trimble
225	Union
227	Warren
229	Washington
231	Wayne
233	Webster
235	Whitley
237	Wolfe
239	Woodford

STATE NAME: LOUISIANA
ALPHABETIC CODE: LA
NUMERIC CODE: 22

CODE	COUNTY NAME
001	Acadia
003	Allen
005	Ascension
007	Assumption
009	Avoylelles
011	Beauregard
013	Bienville
015	Bossier
017	Caddo
019	Calcasieu
021	Caldwell
023	Cameron
025	Catahoula
027	Claiborne
029	Concordia
031	DeSoto
033	East Baton Rouge
035	East Carroll
037	East Feliciana
039	Evangeline
041	Franklin
043	Grant
045	Iberia
047	Iberville
049	Jackson
051	Jefferson

053	Jefferson Davis
055	Lafayette
057	Lafourche
059	La Salle
061	Lincoln
063	Livingston
065	Madison
067	Morehouse
069	Natchitoches
071	Orleans
073	Ouachita
075	Plaquemines
077	Pointe Coupee
079	Rapides
081	Red River
083	Richland
085	Sabine
087	St. Bernard
089	St. Charles
091	St. Helena
093	St. James
095	St. John the Baptist
097	St. Landry
099	St. Martin
101	St. Mary
103	St. Tammany
105	Tangipahoa
107	Tensas
109	Terrebonne
111	Union
113	Vermilion
115	Vernon
117	Washington
119	Webster
121	West Baton Rouge
123	West Carroll
125	West Feliciana
127	Winn

STATE NAME: MAINE
ALPHABETIC CODE: ME
NUMERIC CODE: 23

CODE	COUNTY NAME
001	Androscoggin
003	Aroostook
005	Cumberland
007	Franklin
009	Hancock
011	Kennebec
013	Knox
015	Lincoln
017	Oxford
019	Penobscot
021	Piscataquis
023	Sagadahoc
025	Somerset
027	Waldo
029	Washington
031	York

STATE NAME:
MARYLAND
ALPHABETIC CODE: MD
NUMERIC CODE: 24

CODE	COUNTY NAME
001	Allegany
003	Anne Arundel
005	Baltimore
009	Calvert
011	Caroline
013	Carroll
015	Cecil
017	Charles
019	Dorchester
021	Frederick
023	Garrett
025	Harford
027	Howard
029	Kent
031	Montgomery
033	Prince George"s
035	Queen Anne"s
037	St. Mary"s
039	Somerset
041	Talbot
043	Washington
045	Wicomico
047	Worcester

CODE	INDEPENDENT CITY
510	Baltimore (City)

STATE NAME:
MASSACHUSETTS
ALPHABETIC CODE: MA
NUMERIC CODE: 25

CODE	COUNTY NAME
001	Barnstable
003	Berkshire
005	Bristol
007	Dukes
009	Essex
011	Franklin
013	Hampden
015	Hampshire
017	Middlesex
019	Nantucket
021	Norfolk
023	Plymouth
025	Suffolk
027	Worcester

STATE NAME: MICHIGAN
ALPHABETIC CODE: MI
NUMERIC CODE: 26

CODE	COUNTY NAME
001	Alcona
003	Alger
005	Allegan
007	Alpena
009	Antrim
011	Arenac
013	Baraga
015	Barry
017	Bay
019	Benzie
021	Berrien
023	Branch
025	Calhoun
027	Cass
029	Charlevoix
031	Cheboygan
033	Chippewa
035	Clare
037	Clinton
039	Crawford
041	Delta
043	Dickinson
045	Eaton
047	Emmet
049	Genesee
051	Gladwin
053	Gogebic
055	Grand Traverse
057	Gratiot
059	Hillsdale
061	Houghton
063	Huron
065	Ingham
067	Ionia
069	Iosco
071	Iron
073	Isabella
075	Jackson
077	Kalamazoo
079	Kalkaska
081	Kent
083	Keweenaw
085	Lake
087	Lapeer
089	Leelanau
091	Lenawee
093	Livingston
095	Luce
097	Mackinac
099	Macomb
101	Manistee
103	Marquette
105	Mason
107	Mecosta
109	Menominee
111	Midland
113	Missaukee
115	Monroe
117	Montcalm
119	Montmorency
121	Muskegon
123	Newaygo
125	Oakland
127	Oceana
129	Ogemaw
131	Ontonagon
133	Osceola
135	Oscoda
137	Otsego
139	Ottawa
141	Presque Isle
143	Roscommon
145	Saginaw
147	St. Clair
149	St. Joseph
151	Sanilac
153	Schoolcraft
155	Shiawassee
157	Tuscola
159	Van Buren
161	Washtenaw
163	Wayne
165	Wexford

STATE NAME:
MINNESOTA
ALPHABETIC CODE: MN
NUMERIC CODE: 27

CODE	COUNTY NAME
001	Aitkin
003	Anoka
005	Becker
007	Beltrami
009	Benton
011	Big Stone
013	Blue Earth
015	Brown
017	Carlton
019	Carver
021	Cass
023	Chippewa
025	Chisago
027	Clay
029	Clearwater
031	Cook
033	Cottonwood
035	Crow Wing
037	Dakota
039	Dodge
041	Douglas
043	Faribault
045	Fillmore
047	Freeborn
049	Goodhue
051	Grant
053	Hennepin
055	Houston
057	Hubbard
059	Isanti
061	Itasca
063	Jackson
065	Kanabec
067	Kandiyohi
069	Kittson
071	Koochiching
073	Lac qui Parle
075	Lake
077	Lake of the Woods
079	Le Sueur
081	Lincoln
083	Lyon
085	McLeod
087	Mahnomen
089	Marshall
091	Martin
093	Meeker
095	Mille Lacs
097	Morrison
099	Mower
101	Murray
103	Nicollet
105	Nobles
107	Norman
109	Olmsted
111	Otter Tail
113	Pennington
115	Pine
117	Pipestone
119	Polk
121	Pope
123	Ramsey
125	Red Lake

127	Redwood
129	Renville
131	Rice
133	Rock
135	Roseau
137	St. Louis
139	Scott
141	Sherburne
143	Sibley
145	Stearns
147	Steele
149	Stevens
151	Swift
153	Todd
155	Traverse
157	Wabasha
159	Wadena
161	Waseca
163	Washington
165	Watonwan
167	Wilkin
169	Winona
171	Wright
173	Yellow Medicine

STATE NAME:
MISSISSIPPI
ALPHABETIC CODE: MS
NUMERIC CODE: 28

CODE	COUNTY NAME
001	Adams
003	Alcorn
005	Amite
007	Attala
009	Benton
011	Bolivar
013	Calhoun
015	Carroll
017	Chickasaw
019	Choctaw
021	Claiborne
023	Clarke
025	Clay
027	Coahoma
029	Copiah
031	Covington
033	DeSoto
035	Forrest
037	Franklin
039	George
041	Greene
043	Grenada
045	Hancock
047	Harrison
049	Hinds
051	Holmes
053	Humphreys
055	Issaquena
057	Itawamba
059	Jackson
061	Jasper
063	Jefferson
065	Jefferson Davis
067	Jones
069	Kemper
071	Lafayette
073	Lamar
075	Lauderdale
077	Lawrence
079	Leake
081	Lee
083	Leflore
085	Lincoln
087	Lowndes
089	Madison
091	Marion
093	Marshall
095	Monroe
097	Montgomery
099	Neshoba
101	Newton
103	Noxubee
105	Oktibbeha
107	Panola
109	Pearl River
111	Perry
113	Pike
115	Pontotoc
117	Prentiss
119	Quitman
121	Rankin
123	Scott
125	Sharkey
127	Simpson
129	Smith
131	Stone
133	Sunflower
135	Tallahatchie
137	Tate
139	Tippah
141	Tishomingo
143	Tunica
145	Union
147	Walthall
149	Warren
151	Washington
153	Wayne
155	Webster
157	Wilkinson
159	Winston
161	Yalobusha
163	Yazoo

NAME:
MISSOURI
ALPHABETIC CODE: MO
NUMERIC CODE: 29

CODE	COUNTY NAME
001	Adair
003	Andrew
005	Atchison
007	Audrain
009	Barry
011	Barton
013	Bates
015	Benton
017	Bollinger
019	Boone
021	Buchanan
023	Butler
025	Caldwell
027	Callaway
029	Camden
031	Cape Girardeau
033	Carroll
035	Carter
037	Cass
039	Cedar
041	Chariton
043	Christian
045	Clark
047	Clay
049	Clinton
051	Cole
053	Cooper
055	Crawford
057	Dade
059	Dallas
061	Daviess
063	DeKalb
065	Dent
067	Douglas
069	Dunklin
071	Franklin
073	Gasconade
075	Gentry
077	Greene
079	Grundy
081	Harrison
083	Henry
085	Hickory
087	Holt
089	Howard
091	Howell
093	Iron
095	Jackson
097	Jasper
099	Jefferson
101	Johnson
103	Knox
105	Laclede
107	Lafayette
109	Lawrence
111	Lewis
113	Lincoln
115	Linn
117	Livingston
119	McDonald
121	Macon
123	Madison
125	Maries
127	Marion
129	Mercer
131	Miller
133	Mississippi
135	Moniteau
137	Monroe
139	Montgomery
141	Morgan
143	New Madrid
145	Newton
147	Nodaway
149	Oregon
151	Osage
153	Ozark
155	Pemiscot
157	Perry
159	Pettis
161	Phelps
163	Pike
165	Platte
167	Polk
169	Pulaski
171	Putnam
173	Ralls
175	Randolph
177	Ray
179	Reynolds
181	Ripley
183	St. Charles
185	St. Clair
186	Ste. Genevieve
187	St. Francois
189	St. Louis County
195	Saline
197	Schuyler
199	Scotland
201	Scott
203	Shannon
205	Shelby
207	Stoddard
209	Stone
211	Sullivan
213	Taney
215	Texas
217	Vernon
219	Warren
221	Washington
223	Wayne
225	Webster
227	Worth
229	Wright

CODE INDEPENDENT CITY	
510	St. Louis City

STATE NAME: MONTANA
ALPHABETIC CODE: MT
NUMERIC CODE: 30

CODE	COUNTY NAME
001	Beaverhead
003	Big Horn
005	Blaine
007	Broadwater
009	Carbon
011	Carter
013	Cascade
015	Chouteau
017	Custer
019	Daniels
021	Dawson
023	Deer Lodge
025	Fallon
027	Fergus
029	Flathead
031	Gallatin
033	Garfield
035	Glacier
037	Golden Valley
039	Granite
041	Hill
043	Jefferson
045	Judith Basin
047	Lake
049	Lewis and Clark
051	Liberty
053	Lincoln
055	McCone
057	Madison
059	Meagher
061	Mineral
063	Missoula
065	Musselshell

067	Park
069	Petroleum
071	Phillips
073	Pondera
075	Powder River
077	Powell
079	Prairie
081	Ravalli
083	Richland
085	Roosevelt
087	Rosebud
089	Sanders
091	Sheridan
093	Silver Bow
095	Stillwater
097	Sweet Grass
099	Teton
101	Tooke
103	Treasure
105	Valley
107	Wheatland
109	Wibaux
111	Yellowstone

NIST has been notified by the Bureau of Census that Yellowstone National Park, MT, is legally part of Gallatin County and Park County. This eliminates Yellowstone National Park (FIPS Code 113) as a county equivalent.

STATE NAME: NEBRASKA
ALPHABETIC CODE: NE
NUMERIC CODE: 31

CODE	COUNTY NAME
001	Adams
003	Antelope
005	Arthur
007	Banner
009	Blaine
011	Boone
013	Box Butte
015	Boyd
017	Brown
019	Buffalo
021	Burt
023	Butler
025	Cass
027	Cedar
029	Chase
031	Cherry
033	Cheyenne
035	Clay
037	Colfax
039	Cuming
041	Custer
043	Dakota
045	Dawes
047	Dawson
049	Deuel
051	Dixon
053	Dodge
055	Douglas
057	Dundy
059	Fillmore
061	Franklin
063	Frontier
065	Furnas
067	Gage
069	Garden
071	Garfield
073	Gosper
075	Grant
077	Greeley
079	Hall
081	Hamilton
083	Harlan
085	Hayes
087	Hitchcock
089	Holt
091	Hooker
093	Howard
095	Jefferson
097	Johnson
099	Kearney
101	Keith
103	Keya Paha
105	Kimball
107	Knox
109	Lancaster
111	Lincoln
113	Logan
115	Loup
117	McPherson
119	Madison
121	Merrick
123	Morrill
125	Nance
127	Nemaha
129	Nuckolls
131	Otoe
133	Pawnee
135	Perkins
137	Phelps
139	Pierce
141	Platte
143	Polk
145	Red Willow
147	Richardson
149	Rock
151	Saline
153	Sarpy
155	Saunders
157	Scotts Bluff
159	Seward
161	Sheridan
163	Sherman
165	Sioux
167	Stanton
169	Thayer
171	Thomas
173	Thurston
175	Valley
177	Washington
179	Wayne
181	Webster
183	Wheeler
185	York

STATE NAME: NEVADA
ALPHABETIC CODE: NV
NUMERIC CODE: 32

CODE	COUNTY NAME
001	Churchill
003	Clark
005	Doulgas
007	Elko
009	Esmeralda
011	Eureka
013	Humboldt
015	Lander
017	Lincoln
019	Lyon
021	Mineral
023	Nye
027	Pershing
029	Storey
031	Washoe
033	White Pine

CODE	INDEPENDENT CITY
510	Carson City

Carson City does not include a legal designation (such as "city").

STATE NAME:
NEW HAMPSHIRE
ALPHABETIC CODE: NH
NUMERIC CODE: 33

CODE	COUNTY NAME
001	Belknap
003	Carroll
005	Cheshire
007	Coos
009	Grafton
011	Hillsborough
013	Merrimack
015	Rockingham
017	Strafford
019	Sullivan

STATE NAME:
NEW JERSEY
ALPHABETIC CODE: NJ
NUMERIC CODE: 34

CODE	COUNTY NAME
001	Atlantic
003	Bergen
005	Burlington
007	Camden
009	Cape May
011	Cumberland
013	Essex
015	Gloucester
017	Hudson
019	Hunterdon
021	Mercer
023	Middlesex
025	Monmouth
027	Morris
029	Ocean
031	Passaic
033	Salem
035	Somerset
037	Sussex
039	Union
041	Warren

STATE NAME:
NEW MEXICO
ALPHABETIC CODE: NM
NUMERIC CODE: 35

CODE	COUNTY NAME
001	Bernalillo
003	Catron
005	Chaves
006	Cibola
007	Colfax
009	Curry
011	DeBaca
013	Dona Ana
015	Eddy
017	Grant
019	Guadalupe
021	Harding
023	Hidalgo
025	Lea
027	Lincoln
028	Los Alamos
029	Luna
031	McKinley
033	Mora
035	Otero
037	Quay
039	Rio Arriba
041	Roosevelt
043	Sandoval
045	San Juan
047	San Miguel
049	Santa Fe
051	Sierra
053	Socorro
055	Taos
057	Torrance
059	Union
061	Valencia

Cibola was established from part of Valencia (6/19/81).

STATE NAME:
NEW YORK
ALPHABETIC CODE: NY
NUMERIC CODE: 36

CODE	COUNTY NAME
001	Albany
003	Allegany
005	Bronx
007	Broome
009	Cattaraugus
011	Cayuga
013	Chautauqua
015	Chemung
017	Chenango
019	Clinton
021	Columbia
023	Cortland
025	Delaware
027	Dutchess
029	Erie
031	Essex
033	Franklin
035	Fulton
037	Genesee

039	Greene
041	Hamilton
043	Herkimer
045	Jefferson
047	Kings
049	Lewis
051	Livingston
053	Madison
055	Monroe
057	Montgomery
059	Nassau
061	New York
063	Niagara
065	Oneida
067	Onondaga
069	Ontario
071	Orange
073	Orleans
075	Oswego
077	Otsego
079	Putnam
081	Queens
083	Rensselaer
085	Richmond
087	Rockland
089	St. Lawrence
091	Saratoga
093	Schenectady
095	Schoharie
097	Schuyler
099	Seneca
101	Steuben
103	Suffolk
105	Sullivan
107	Tioga
109	Tompkins
111	Ulster
113	Warren
115	Washington
117	Wayne
119	Westchester
121	Wyoming
123	Yates

STATE NAME: NORTH CAROLINA
ALPHABETIC CODE: NC
NUMERIC CODE: 37

CODE	COUNTY NAME
001	Alamance
003	Alexander
005	Alleghany
007	Anson
009	Ashe
011	Avery
013	Beaufort
015	Bertie
017	Bladen
019	Brunswick
021	Buncombe
023	Burke
025	Cabarrus
027	Caldwell
029	Camden
031	Carteret
033	Caswell
035	Catawba
037	Chatham
039	Cherokee
041	Chowan
043	Clay
045	Cleveland
047	Columbus
049	Craven
051	Cumberland
053	Currituck
055	Dare
057	Davidson
059	Davie
061	Duplin
063	Durham
065	Edgecombe
067	Forsyth
069	Franklin
071	Gaston
073	Gates
075	Graham
077	Granville
079	Greene
081	Guilford
083	Halifax
085	Harnett
087	Haywood
089	Henderson
091	Hertford
093	Hoke
095	Hyde
097	Iredell
099	Jackson
101	Johnston
103	Jones
105	Lee
107	Lenoir
109	Lincoln
111	McDowell
113	Macon
115	Madison
117	Martin
119	Mecklenburg
121	Mitchell
123	Montgomery
125	Moore
127	Nash
129	New Hanover
131	Northampton
133	Onslow
135	Orange
137	Pamlico
139	Pasquotank
141	Pender
143	Perquimans
145	Person
147	Pitt
149	Polk
151	Randolph
153	Richmond
155	Robeson
157	Rockingham
159	Rowan
161	Rutherford
163	Sampson
165	Scotland
167	Stanly
169	Stokes
171	Surry
173	Swain
175	Transylvania
177	Tyrrell
179	Union
181	Vance
183	Wake
185	Warren
187	Washington
189	Watauga
191	Wayne
193	Wilkes
195	Wilson
197	Yadkin
199	Yancey

STATE NAME: NORTH DAKOTA
ALPHABETIC CODE: ND
NUMERIC CODE: 38

CODE	COUNTY NAME
001	Adams
003	Barnes
005	Benson
007	Billings
009	Bottineau
011	Bowman
013	Burke
015	Burleigh
017	Cass
019	Cavalier
021	Dickey
023	Divide
025	Dunn
027	Eddy
029	Emmons
031	Foster
033	Golden Valley
035	Grand Forks
037	Grant
039	Griggs
041	Hettinger
043	Kidder
045	LaMoure
047	Logan
049	McHenry
051	McIntosh
053	McKenzie
055	McLean
057	Mercer
059	Morton
061	Mountrail
063	Nelson
065	Oliver
067	Pembina
069	Pierce
071	Ramsey
073	Ransom
075	Renville
077	Richland
079	Rolette
081	Sargent
083	Sheridan
085	Sioux
087	Slope
089	Stark
091	Steele
093	Stutsman
095	Towner
097	Traill
099	Walsh
101	Ward
103	Wells
105	Williams

STATE NAME: OHIO
ALPHABETIC CODE: OH
NUMERIC CODE: 39

CODE	COUNTY NAME
001	Adams
003	Allen
005	Ashland
007	Ashtabula
009	Athens
011	Auglaize
013	Belmont
015	Brown
017	Butler
019	Carroll
021	Champaign
023	Clark
025	Clermont
027	Clinton
029	Columbiana
031	Coshocton
033	Crawford
035	Cuyahoga
037	Darke
039	Defiance
041	Delaware
043	Erie
045	Fairfield
047	Fayette
049	Franklin
051	Fulton
053	Gallia
055	Geauga
057	Greene
059	Guernsey
061	Hamilton
063	Hancock
065	Hardin
067	Harrison
069	Henry
071	Highland
073	Hocking
075	Holmes
077	Huron
079	Jackson
081	Jefferson
083	Knox
085	Lake
087	Lawrence
089	Licking
091	Logan
093	Lorain
095	Lucas
097	Madison
099	Mahoning
101	Marion
103	Medina
105	Meigs
107	Mercer
109	Miami
111	Monroe
113	Montgomery
115	Morgan
117	Morrow
119	Muskingum
121	Noble

123	Ottawa
125	Paulding
127	Perry
129	Pickaway
131	Pike
133	Portage
135	Preble
137	Putnam
139	Richland
141	Ross
143	Sandusky
145	Scioto
147	Seneca
149	Shelby
151	Stark
153	Summit
155	Trumbull
157	Tuscarawas
159	Union
161	VanWert
163	Vinton
165	Warren
167	Washington
169	Wayne
171	Williams
173	Wood
175	Wyandot

STATE NAME: OKLAHOMA
ALPHABETIC CODE: OK
NUMERIC CODE: 40

CODE	COUNTY NAME
001	Adair
003	Alfalfa
005	Atoka
007	Beaver
009	Beckham
011	Blaine
013	Bryan
015	Caddo
017	Canadian
019	Carter
021	Cherokee
023	Choctaw
025	Cimarron
027	Cleveland
029	Coal
031	Comanche
033	Cotton
035	Craig
037	Creek
039	Custer
041	Delaware
043	Dewey
045	Ellis
047	Garfield
049	Garvin
051	Grady
053	Grant
055	Greer
057	Harmon
059	Harper
061	Haskell
063	Hughes
065	Jackson
067	Jefferson
069	Johnston
071	Kay
073	Kingfisher
075	Kiowa
077	Latimer
079	Le Flore
081	Lincoln
083	Logan
085	Love
087	McClain
089	McCurtain
091	McIntosh
093	Major
095	Marshall
097	Mayes
099	Murray
101	Muskogee
103	Noble
105	Nowata
107	Okfushee
109	Oklahoma
111	Okmulgee
113	Osage
115	Ottawa
117	Pawnee
119	Payne
121	Pittsburg
123	Pontotoc
125	Pottawatomie
127	Pushmataha
129	Roger Mills
131	Rogers
133	Seminole
135	Sequoyah
137	Stephens
139	Texas
141	Tillman
143	Tulsa
145	Wagoneer
147	Washington
149	Washita
151	Woods
153	Woodward

STATE NAME: OREGON
ALPHABETIC CODE: OR
NUMERIC CODE: 41

CODE	COUNTY NAME
001	Baker
003	Benton
005	Clackamas
007	Clatsop
009	Columbia
011	Coos
013	Crook
015	Curry
017	Deschutes
019	Douglas
021	Gilliam
023	Grant
025	Harney
027	Hood River
029	Jackson
031	Jefferson
033	Josephine
035	Klamath
037	Lake
039	Lane
041	Lincoln
043	Linn
045	Malheur
047	Marion
049	Morrow
051	Multnomah
053	Polk
055	Sherman
057	Tillamook
059	Umatilla
061	Union
063	Wallowa
065	Wasco
067	Washington
069	Wheeler
071	Yamhill

STATE NAME: PENNSYLVANIA
ALPHABETIC CODE: PA
NUMERIC CODE: 42

CODE	COUNTY NAME
001	Adams
003	Allegheny
005	Armstrong
007	Beaver
009	Bedford
011	Berks
013	Blair
015	Bradford
017	Bucks
019	Butler
021	Cambria
023	Cameron
025	Carbon
027	Centre
029	Chester
031	Clarion
033	Clearfield
035	Clinton
037	Columbia
039	Crawford
041	Cumberland
043	Dauphin
045	Delaware
047	Elk
049	Erie
051	Fayette
053	Forest
055	Franklin
057	Fulton
059	Greene
061	Huntingdon
063	Indiana
065	Jefferson
067	Juniata
069	Lackawanna
071	Lancaster
073	Lawrence
075	Lebanon
077	Lehigh
079	Luzerne
081	Lycoming
083	McKean
085	Mercer
087	Mifflin
089	Monroe
091	Montgomery
093	Montour
095	Northampton
097	Northumberland
099	Perry
101	Philadelphia
103	Pike
105	Potter
107	Schuylkill
109	Snyder
111	Somerset
113	Sullivan
115	Susquehanna
117	Tioga
119	Union
121	Venango
123	Warren
125	Washington
127	Wayne
129	Westmoreland
131	Wyoming
133	York

STATE NAME: RHODE ISLAND
ALPHABETIC CODE: RI
NUMERIC CODE: 44

CODE	COUNTY NAME
001	Bristol
003	Kent
005	Newport
007	Providence
009	Washington

STATE NAME: SOUTH CAROLINA
ALPHABETIC CODE: SC
NUMERIC CODE: 45

CODE	COUNTY NAME
001	Abbeviille
003	Aiken
005	Allendale
007	Anderson
009	Bamberg
011	Barnwell
013	Beaufort
015	Berkeley
017	Calhoun
019	Charleston
021	Cherokee
023	Chester
025	Chesterfield
027	Clarendon
029	Colleton
031	Darlington
033	Dillon
035	Dorchester
037	Edgefield
039	Fairfield
041	Florence
043	Georgetown
045	Greenville
047	Greenwood
049	Hampton
051	Horry
053	Jasper
055	Kershaw
057	Lancaster

059	Laurens
061	Lee
063	Lexington
065	McCormick
067	Marion
069	Marlboro
071	Newberry
073	Oconee
075	Orangeburg
077	Pickens
079	Richland
081	Saluda
083	Spartanburg
085	Sumter
087	Union
089	Williamsburg
091	York

STATE NAME: SOUTH DAKOTA
ALPHABETIC CODE: SD
NUMERIC CODE: 46

CODE	COUNTY NAME
003	Aurora
005	Beadle
007	Bennett
009	Bon Homme
011	Brookings
013	Brown
015	Brule
017	Buffalo
019	Butte
021	Campbell
023	Charles Mix
025	Clark
027	Clay
029	Codington
031	Corson
033	Custer
035	Davison
037	Day
039	Deuel
041	Dewey
043	Douglas
045	Edmunds
047	Fall River
049	Faulk
051	Grant
053	Gregory
055	Haakon
057	Hamlin
059	Hand
061	Hanson
063	Harding
065	Hughes
067	Hutchinson
069	Hyde
071	Jackson
073	Jerauld
075	Jones
077	Kingsbury
079	Lake
081	Lawrence
083	Lincoln
085	Lyman
087	McCook
089	McPherson
091	Marshall
093	Meade
095	Mellette
097	Miner
099	Minnehaha
101	Moody
103	Pennington
105	Perkins
107	Potter
109	Roberts
111	Sanborn
113	Shannon
115	Spink
117	Stanley
119	Sully
121	Todd
123	Tripp
125	Turner
127	Union
129	Walworth
135	Yankton
137	Ziebach

STATE NAME: TENNESSEE
ALPHABETIC CODE: TN
NUMERIC CODE: 47

CODE	COUNTY NAME
001	Anderson
003	Bedford
005	Benton
007	Bledsoe
009	Blount
011	Bradley
013	Campbell
015	Cannon
017	Carroll
019	Carter
021	Cheatham
023	Chester
025	Claiborne
027	Clay
029	Cocke
031	Coffee
033	Crockett
035	Cumberland
037	Davidson
039	Decatur
041	DeKalb
043	Dickson
045	Dyer
047	Fayette
049	Fentress
051	Franklin
053	Gibson
055	Giles
057	Grainger
059	Greene
061	Grundy
063	Hamblen
065	Hamilton
067	Hancock
069	Hardeman
071	Hardin
073	Hawkins
075	Haywood
077	Henderson
079	Henry
081	Hickman
083	Houston
085	Humphreys
087	Jackson
089	Jefferson
091	Johnson
093	Knox
095	Lake
097	Lauderdale
099	Lawrence
101	Lewis
103	Lincoln
105	Loudon
107	McMinn
109	McNairy
111	Macon
113	Madison
115	Marion
117	Marshall
119	Maury
121	Meigs
123	Monroe
125	Montgomery
127	Moore
129	Morgan
131	Obion
133	Overton
135	Perry
137	Pickett
139	Polk
141	Putnam
143	Rhea
145	Roane
147	Robertson
149	Rutherford
151	Scott
153	Sequatchie
155	Sevier
157	Shelby
159	Smith
161	Stewart
163	Sullivan
165	Sumner
167	Tipton
169	Trousdale
171	Unicoi
173	Union
175	Van Buren
177	Warren
179	Washington
181	Wayne
183	Weakley
185	White
187	Williamson
189	Wilson

STATE NAME: TEXAS
ALPHABETIC CODE: TX
NUMERIC CODE: 48

CODE	COUNTY NAME
001	Anderson
003	Andrews
005	Angelina
007	Aransas
009	Archer
011	Armstrong
013	Atascosa
015	Austin
017	Bailey
019	Bandera
021	Bastrop
023	Baylor
025	Bee
027	Bell
029	Bexar
031	Blanco
033	Borden
035	Bosque
037	Bowie
039	Brazoria
041	Brazos
043	Brewster
045	Briscoe
047	Brooks
049	Brown
051	Burleson
053	Burnet
055	Caldwell
057	Calhoun
059	Callahan
061	Cameron
063	Camp
065	Carson
067	Cass
069	Castro
071	Chambers
073	Cherokee
075	Childress
077	Clay
079	Cochran
081	Coke
083	Coleman
085	Collin
087	Collingsworth
089	Colorado
091	Comal
093	Comanche
095	Concho
097	Cooke
099	Coryell
101	Cottle
103	Crane
105	Crockett
107	Crosby
109	Culberson
111	Dallam
113	Dallas
115	Dawson
117	Deaf Smith
119	Delta
121	Denton
123	DeWitt
125	Dickens
127	Dimmit
129	Donley
131	Duval
133	Eastland
135	Ector
137	Edwards
139	Ellis
141	El Paso
143	Erath
145	Falls
147	Fannin
149	Fayette
151	Fisher
153	Floyd
155	Foard

157	Fort Bend
159	Franklin
161	Freestone
163	Frio
165	Gaines
167	Galveston
169	Garza
171	Gillespie
173	Glasscock
175	Goliad
177	Gonzales
179	Gray
181	Grayson
183	Gregg
185	Grimes
187	Guadalupe
189	Hale
191	Hall
193	Hamilton
195	Hansford
197	Hardeman
199	Hardin
201	Harris
203	Harrison
205	Hartley
207	Haskell
209	Hays
211	Hemphill
213	Henderson
215	Hidalgo
217	Hill
219	Hockley
221	Hood
223	Hopkins
225	Houston
227	Howard
229	Hudspeth
231	Hunt
233	Hutchinson
235	Irion
237	Jack
239	Jackson
241	Jasper
243	Jeff Davis
245	Jefferson
247	Jim Hogg
249	Jim Wells
251	Johnson
253	Jones
255	Karnes
257	Kaufman
259	Kendall
261	Kenedy
263	Kent
265	Kerr
267	Kimble
269	King
271	Kinney
273	Kleberg
275	Knox
277	Lamar
279	Lamb
281	Lampasas
283	La Salle
285	Lavaca
287	Lee
289	Leon
291	Liberty
293	Limestone
295	Lipscomb
297	Live Oak
299	Llano
301	Loving
303	Lubbock
305	Lynn
307	McCulloch
309	McLennan
311	McMullen
313	Madison
315	Marion
317	Martin
319	Mason
321	Matagorda
323	Maverick
325	Medina
327	Menard
329	Midland
331	Milam
333	Mills
335	Mitchell
337	Montague
339	Montgomery
341	Moore
343	Morris
345	Motley
347	Nacogdoches
349	Navarro
351	Newton
353	Nolan
355	Nueces
357	Ochiltree
359	Oldham
361	Orange
363	Palo Pinto
365	Panola
367	Parker
369	Parmer
371	Pecos
373	Polk
375	Potter
377	Presidio
379	Rains
381	Randall
383	Reagan
385	Real
387	Red River
389	Reeves
391	Refugio
393	Roberts
395	Robertson
397	Rockwall
399	Runnels
401	Rusk
403	Sabine
405	San Augustine
407	San Jacinto
409	San Patricio
411	San Saba
413	Schleicher
415	Scurry
417	Shackleford
419	Shelby
421	Sherman
423	Smith
425	Somervell
427	Starr
429	Stephens
431	Sterling
433	Stonewall
435	Sutton
437	Swisher
439	Tarrant
441	Taylor
443	Terrell
445	Terry
447	Throckmorton
449	Titus
451.	Tom Green
453	Travis
455	Trinity
457	Tyler
459	Upshur
461	Upton
463	Uvalde
465	Val Verde
467	Van Zandt
469	Victoria
471	Walker
473	Waller
475	Ward
477	Washington
479	Webb
481	Wharton
483	Wheeler
485	Wichita
487	Wilbarger
489	Willacy
491	Williamson
493	Wilson
495	Winkler
497	Wise
499	Wood
501	Yoakum
503	Young
505	Zapata
507	Zavala

STATE NAME: UTAH
ALPHABETIC CODE: UT
NUMERIC CODE: 49

CODE	COUNTY NAME
001	Beaver
003	Box Elder
005	Cache
007	Carbon
009	Daggett
011	Davis
013	Duchesne
015	Emery
017	Garfield
019	Grand
021	Iron
023	Juab
025	Kane
027	Millard
029	Morgan
031	Piute
033	Rich
035	Salt Lake
037	San Juan
039	Sanpete
041	Sevier
043	Summit
045	Tooele
047	Uintah
049	Utah
051	Wasatch
053	Washington
055	Wayne
057	Weber

STATE NAME: VERMONT
ALPHABETIC CODE: VT
NUMERIC CODE: 50

CODE	COUNTY NAME
001	Addison
003	Bennington
005	Caledonia
007	Chittenden
009	Essex
011	Franklin
013	Grand Isle
015	Lamoille
017	Orange
019	Orleans
021	Rutland
023	Washington
025	Windham
027	Windsor

STATE NAME: VIRGINIA
ALPHABETIC CODE: VA
NUMERIC CODE: 51

CODE	COUNTY NAME
001	Accomack
003	Albermarle
005	Alleghany
007	Amelia
009	Amherst
011	Appomattox
013	Arlington
015	Augusta
017	Bath
019	Bedford
021	Bland
023	Botetourt
025	Brunswick
027	Buchanan
029	Buckingham
031	Campbell
033	Caroline
035	Carroll
036	Charles City
037	Charlotte
041	Chesterfield
043	Clarke
045	Craig
047	Culpeper
049	Cumberland
051	Dickenson
053	Dinwiddie
057	Essex
059	Fairfax
061	Fauquier
063	Floyd
065	Fluvanna
067	Franklin
069	Frederick
071	Giles
073	Gloucester
075	Goochland
077	Grayson
079	Greene

081	Greensville
083	Halifax
085	Hanover
087	Henrico
089	Henry
091	Highland
093	Isle of Wight
095	James City
097	King And Queen
099	King George
101	King William
103	Lancaster
105	Lee
107	Loudoun
109	Louisa
111	Lunenburg
113	Madison
115	Mathews
117	Mecklenburg
119	Middlesex
121	Montgomery
125	Nelson
127	New Kent
131	Northampton
133	Northumberland
135	Nottoway
137	Orange
139	Page
141	Patrick
143	Pittsylvania
145	Powhatan
147	Prince Edward
149	Prince George
153	Prince William
155	Pulaski
157	Rappahannock
159	Richmond
161	Roanoke
163	Rockbridge
165	Rockingham
167	Russell
169	Scott
171	Shenandoah
173	Smyth
175	Southampton
177	Spotsylvania
179	Stafford
181	Surry
183	Sussex
185	Tazewell
187	Warren
191	Washington
193	Westmoreland
195	Wise
197	Wythe
199	York

CODE	INDEPENDENT CITY
510	Alexandria (city)
515	Bedford (city)
520	Bristol (city)
530	Buena Vista (city)
540	Charlottsville (city)
550	Chesapeake (city)
570	Colonial Heights (city)
580	Covington (city)
590	Danville (city)
595	Emporia (city)
600	Fairfax (city)
610	Falls Church (city)
620	Franklin (city)
630	Fredericksburg (city)
640	Galax (city)
650	Hampton (city)
660	Harrisonburg (city)
670	Hopewell (city)
678	Lexington (city)
680	Lynchburg (city)
683	Manassas (city)
685	Manassas Park (city)
690	Martinsville (city)
700	Newport News (city)
710	Norfolk (city)
720	Norton (city)
730	Petersburg (city)
735	Poquoson (city)
740	Portsmouth (city)
750	Radford (city)
760	Richmond (city)
770	Roanoke (city)
775	Salem (city)
790	Staunton (city)
800	Suffolk (city)
810	Virginia Beach (city)
820	Waynesboro (city)
830	Williamsburg (city)
840	Winchester (city)

The codes for Charles City and Charlotte Counties, reported respectively as 037 and 039 in FIPS PUB 6-3, have been corrected. The Bureau of Economic Analysis, U.S. Department of Commerce has defined codes in the 900 series to represent county/independent city combination in Virginia

The FIPS county code of 780 for South Boston. VA, is deleted. South Boston will be incorporated witin Halifax County rather than a separate county-equivalent surrounded by Halifax Country

The independent city (country equivalent) of Clifton Forge has reverted to town status effective July 1, 2001. Clifton Forge is now an incorporated place within Alleghany County, rather than a separate county-equivalent surrounded by Alleghany County. The FIPS county code of 560 for Clifton Forge is deleted.

STATE NAME: WASHINGTON
ALPHABETIC CODE: WA
NUMERIC CODE: 53

CODE	COUNTY NAME
001	Adams
003	Asotin
005	Benton
007	Chelan
009	Clallam
011	Clark
013	Columbia
015	Cowlitz
017	Douglas
019	Ferry
021	Franklin
023	Garfield
025	Grant
027	Grays Harbor
029	Island
031	Jefferson
033	King
035	Kitsap
037	Kittitas
039	Klickitat
041	Lewis
043	Lincoln
045	Mason
047	Okanogan
049	Pacific
051	Pend Oreille
053	Pierce
055	San Juan
057	Skagit
059	Skamania
061	Snohomish
063	Spokane
065	Stevens
067	Thurnston
069	Wahkiakum
071	Walla Walla
073	Whatcom
075	Whitman
077	Yakima

STATE NAME: WEST VIRGINIA
ALPHABETIC CODE: WV
NUMERIC CODE: 54

CODE	COUNTY NAME
001	Barbour
003	Berkeley
005	Boone
007	Braxton
009	Brooke
011	Cabell
013	Calhoun
015	Clay
017	Doddridge
019	Fayette
021	Gilmer
023	Grant
025	Greenbrier
027	Hampshire
029	Hancock
031	Hardy
033	Harrison
035	Jackson
037	Jefferson
039	Kanawha
041	Lewis
043	Lincoln
045	Logan
047	McDowell
049	Marion
051	Marshall
053	Mason
055	Mercer
057	Mineral
059	Mingo
061	Monongalia
063	Monroe
065	Morgan
067	Nicholas
069	Ohio
071	Pendleton
073	Pleasants
075	Pocahontas
077	Preston
079	Putnam
081	Raleigh
083	Randolph
085	Ritchie
087	Roane
089	Summers
091	Taylor
093	Tucker
095	Tyler
097	Upshur
099	Wayne
101	Webster
103	Wetzel
105	Wirt
107	Wood
109	Wyoming

STATE NAME: WISCONSIN
ALPHABETIC CODE: WI
NUMERIC CODE: 55

CODE	COUNTY NAME
001	Adams
003	Ashland
005	Barron
007	Bayfield
009	Brown
011	Buffalo
013	Burnett
015	Calumet
017	Chippewa
019	Clark
021	Columbia
023	Crawford
025	Dane
027	Dodge
029	Door
031	Douglas
033	Dunn
035	Eau Claire
037	Florence
039	Fond du Lac
041	Forest
043	Grant
045	Green
047	Green Lake
049	Iowa
051	Iron
053	Jackson
055	Jefferson
057	Juneau
059	Kenosha
061	Kewaunee
063	La Crosse
065	Lafayette

067	Langlade
069	Lincoln
071	Manitowoc
073	Marathon
075	Marinette
077	Marquette
078	Menominee
079	Milwaukee
081	Monroe
083	Oconto
085	Oneida
087	Outagamie
089	Ozaukee
091	Pepin
093	Pierce
095	Polk
097	Portage
099	Price
101	Racine
103	Richland
105	Rock
107	Rusk
109	St. Croix
111	Sauk
113	Sawyer
115	Shawano
117	Sheboygan
119	Taylor
121	Trempealeau
123	Vernon
125	Vilas
127	Walworth
129	Washburn
131	Washington
133	Waukesha
135	Waupaca
137	Waushara
139	Winnebago
141	Wood

STATE NAME: WYOMING
ALPHABETIC CODE: WY
NUMERIC CODE: 56

CODE	COUNTY NAME
001	Albany
003	Big Horn
005	Campbell
007	Carbon
009	Converse
011	Crook
013	Fremont
015	Goshen
017	Hot Springs
019	Johnson
021	Laramie
023	Lincoln
025	Natrona
027	Niobrara
029	Park
031	Platte
033	Sheridan
035	Sublette
037	Sweetwater
039	Teton
041	Uinta
043	Washakie
045	Weston

AREA NAME: AMERICAN SAMOA
ALPHABETIC CODE: AS
NUMERIC CODE: 60

CODE	DISTRICT/ISLAND NAME
010	Eastern (District)
020	Manu″a (District)
030	Rose Island
040	Swains Island
050	Western (District)

"Island" is part of the name of Rose Island and Swains Island. The entities called "counties" in American Samoa are subdivisions of the districts, and therefore are second-order subdivisions of American Samoa.

AREA NAME: GUAM
ALPHABETIC CODE: GU
NUMERIC CODE: 66

CODE	SUBDIVISION NAME
010	Guam

Guam has no first-order subdivisions, and therefore "Guam" also serves as the county-equivalent entity.

AREA NAME: NORTHERN MARINA ISLANDS
ALPHABETIC CODE: MP
NUMERIC CODE: 69

CODE	MUNICIPALITY NAME
085	Northern Islands
100	Rota
110	Saipan
120	Tinian

AREA NAME: PALAU
ALPHABETIC CODE: PW
NUMERIC CODE: 70

CODE	STATE NAME
002	Aimeliik
004	Airai
010	Angaur
050	Hatoboheit
100	Kayangel
150	Koror
212	Melekeok
214	Ngaraard
218	Ngarchelong
222	Ngardmau
224	Ngatpang
226	Ngchesar
227	Ngernmlengui
228	Ngiwal
350	Peleliu
370	Sonsorol

Palau also is known as Beau, and may be referred to as the Republic of..." Changes since recognition of Palau in Change Notice No. 9 to FIPS PUB 6-3. The first-order subdivisions of Palau have been revised from municipalities to states; the name of Melekeiok has been revised to Melekeok; the name and code for Ngaremlengui (223) have been revised to Ngeremlengui (227); the name and code for Tobi (380) have been revised to Hatobohei (050); the Palau Islands (unorganized territory) (300) is no longer included because that area is part of Koror and Peleliu.

AREA NAME: PUERTO RICO
ALPHABETIC CODE: PR
NUMERIC CODE: 72

CODE	MUNICIPALITY NAME
001	Adjuntas
003	Aguada
005	Aguadilla
007	Aguas Buenas
009	Aibonito
011	Anasco
013	Arecibo
015	Arroyo
017	Barceloneta
019	Barranquitas
021	Bayamo″n
023	Cabo Rojo
025	Caguas
027	Camuy
029	Canovanas
031	Carolina
033	Catano
035	Cayey
037	Ceiba
039	Ciales
041	Cidra
043	Coamo
045	Comerio
047	Corozal
049	Culebra
051	Dorado
053	Fajardo
054	Florida
057	Guayama
059	Guayanilla
061	Guaynabo
063	Gurabo
065	Hatillo
067	Hormigueros
069	Humacao
071	Isabela
073	Jayuya
075	Juana Diaz
077	Juncos
079	Lajas
081	Lares
083	Las Marias
085	Las Piedras
087	Loiza
089	Luquillo
091	Manati
093	Maricao
095	Maunabo
097	Mayaguez
099	Moca
101	Morovis
103	Naguabo
105	Naranjito
107	Orocovis
109	Patillas
111	Penuelas
113	Ponce
115	Quebradillas
117	Rincon
119	Rio Grande
121	Sabana Grande
123	Salinas
125	San German
127	San Juan
129	San Lorenzo
131	San Sebastian
133	Santa Isabel
135	Toa Alta
137	Toa Baja
139	Trujillo Alto
141	Utuado
143	Vega Alta
145	Vega Baja
147	Vieques
149	Villalba
151	Yabucoa
153	Yauco

AREA NAME: U.S. OUTLYING ISLANDS
ALPHABETIC CODE: UM
NUMERIC CODE: 74

CODE	ISLAND NAME
050	Baker Island
100	Howland Island
150	Jarvis Island
200	Johnston Island
250	Kingman Reef
300	Midway Islands
350	Navassa Island
400	Palmyra Atoll
450	Wake Island

An FIPS State numeric code is available for each area; FIPS PUB 5-2 identifies the codes and explains their usage. The State codes can be used in combination with the "county" codes listed here.

AREA NAME: VIRGIN ISLANDS OF THE UNITED STATES
ALPHABETIC CODE: VI
NUMERIC CODE: 78

CODE	ISLAND NAME
010	St. Croix
020	St. John
030	St. Thomas

AREA NAME: FEDREATED STATES OF MICRONESIA
ALPHATETIC CODE: FM
NUMERIC CODE: 64

CODE	STATE NAME
002	Chuuk
005	Kosrae
040	Pohnpeit
060	Yap

The Federated States of Micronesia (FSM) became a freely associated state on 11/3/86. Its first-order subdivisions are called states. Changes since recognition of the FSM in Change Notice No. 9 to FIPS PUB 6-3. Ponape was renamed Pohnpei (11/8/84), and retained code 040; Truk (050) was renamed Chuuk (10/1/89).

AREA NAME: MARSHALL ISLANDS
ALPHABETIC CODE: MH
NUMERIC CODE: 68

CODE	MUNICIPALITY NAME
007	Ailinginaie
010	Ailinglaplap
030	Ailuk
040	Arno
050	Aur
060	Bikar
070	Bikini
073	Bokak
080	Ebon
090	Enewetak
100	Erikub
110	Jabat
120	Jaluit
130	Jemo
140	Kili
150	Kwajalein
160	Lae
170	Lib
180	Likiep
190	Majuro
300	Maloelap
310	Mejit
320	Mili
330	Namorik
340	Namu
350	Rongelap
360	Rongrik
385	Toke
390	Ujae
400	Ujelang
410	Utrik
420	Wotho
430	Wotle

The Marshall Islands became a freely associated state on 11/3/86. Its first-order subdivisions also may be referred to as “islands” and “atolls.” Since the recognition of the Marshall Islands in Change Notice No. 9, Jemo has been revised from Jemo Island to a municipality. Toke also may be spelled “Taka.”

Appendix B: State & Country Codes

Alphabetic List by Code

ISO country code	USPS state code	Name of Country/State
ABW	XX	Aruba
AFG	XX	Afghanistan
AGO	XX	Angola
AIA	XX	Anguilla
ALA	XX	Aland Islands
ALB	XX	Albania
AND	XX	Andorra
ARE	XX	United Arab Emirates
ARG	XX	Argentina
ARM	XX	Armenia
ASM	AS	American Samoa
ATA	XX	Antarctica
ATF	XX	French Southern Territories
ATG	XX	Antigua and Barbuda
AUS	XX	Australia
AUT	XX	Austria
AZE	XX	Azerbaijan
BDI	XX	Burundi
BEL	XX	Belgium
BEN	XX	Benin
BES	XX	Bonaire, Saint Eustatius and Saba
BFA	XX	Burkina Faso
BGD	XX	Bangladesh
BGR	XX	Bulgaria
BHR	XX	Bahrain
BHS	XX	Bahamas
BIH	XX	Bosnia and Herzogovina
BLM	XX	St. Barthelemy
BLR	XX	Belarus
BLZ	XX	Belize
BMU	XX	Bermuda
BOL	XX	Bolivia
BRA	XX	Brazil
BRB	XX	Barbados
BRN	XX	Brunei
BTN	XX	Bhutan
BVT	XX	Bouvet Island
BWA	XX	Botswana
CAF	XX	Central African Republic
CAN	AB	Alberta
CAN	BC	British Columbia
CAN	CD	Canada
CAN	MB	Manitoba
CAN	NB	New Brunswick
CAN	NL	Newfoundland and Labrador

ISO country code	USPS state code	Name of Country/State
CAN	NS	Nova Scotia
CAN	NT	Northwest Territories
CAN	NU	Nunavut
CAN	ON	Ontario
CAN	PE	Prince Edward Island
CAN	QC	Quebec
CAN	SK	Saskatchewan
CAN	YT	Yukon Territory
CCK	XX	Cocos (Keeling) Islands
CHE	XX	Switzerland
CHL	XX	Chile
CHN	XX	China
CIV	XX	Cote d'Ivoire
CMR	XX	Cameroon
COD	XX	Congo, Democratic Republic of
COG	XX	Congo
COK	XX	Cook Islands
COL	XX	Colombia
COM	XX	Comoros
CPV	XX	Cape Verde
CRI	XX	Costa Rica
CUB	XX	Cuba
CUW	XX	Curacao
CXR	XX	Christmas Island
CYM	XX	Cayman Islands
CYP	XX	Cyprus
CZE	XX	Czech Republic
DEU	XX	Germany
DJI	XX	Djibouti
DMA	XX	Dominica
DNK	XX	Denmark
DOM	XX	Dominican Republic
DZA	XX	Algeria
ECU	XX	Ecuador
EGY	XX	Egypt
ENG	XX	England
ERI	XX	Eritrea
ESH	XX	Western Sahara
ESP	XX	Spain
EST	XX	Estonia
ETH	XX	Ethiopia
FIN	XX	Finland
FJI	XX	Fiji
FLK	XX	Falkland Islands
FRA	XX	France
FRO	XX	Faroe Islands
FSM	FM	Micronesia
GAB	XX	Gabon

ISO country code	USPS state code	Name of Country/State
GBR	XX	United Kingdom
GEO	XX	Georgia
GGY	XX	Guernsey
GHA	XX	Ghana
GIB	XX	Gibraltar
GIN	XX	Guinea
GLP	XX	Guadeloupe
GMB	XX	Gambia
GNB	XX	Guinea Bissau
GNQ	XX	Equatorial Guinea
GRC	XX	Greece
GRD	XX	Grenada
GRL	XX	Greenland
GTM	XX	Guatemala
GUF	XX	French Guiana
GUM	GU	Guam
GUY	XX	Guyana
HKG	XX	Hong Kong
HMD	XX	Heard Island and McDonald Islands
HND	XX	Honduras
HRV	XX	Croatia
HTI	XX	Haiti
HUN	XX	Hungary
IDN	XX	Indonesia (Dutch East Indies)
IMN	XX	Isle of Man
IND	XX	India
IOT	XX	British Indian Ocean Territory
IRL	XX	Ireland
IRN	XX	Iran
IRQ	XX	Iraq
ISL	XX	Iceland
ISR	XX	Israel
ITA	XX	Italy
JAM	XX	Jamaica
JEY	XX	Jersey
JOR	XX	Jordan
JPN	XX	Japan
KAZ	XX	Kazakhstan
KEN	XX	Kenya
KGZ	XX	Kyrgyzstan
KHM	XX	Cambodia
KIR	XX	Kiribati
KNA	XX	St. Kitts and Nevis
KOR	XX	South Korea
KWT	XX	Kuwait
LAO	XX	Laos
LBN	XX	Lebanon
LBR	XX	Liberia

ISO country code	USPS state code	Name of Country/State
LBY	XX	Libya
LCA	XX	St. Lucia
LIE	XX	Liechtenstein
LKA	XX	Sri Lanka
LSO	XX	Lesotho
LTU	XX	Lithuania
LUX	XX	Luxembourg
LVA	XX	Latvia
MAC	XX	Macao
MAF	XX	Saint Martin (French part)
MAR	XX	Morocco
MCO	XX	Monaco
MDA	XX	Moldova
MDG	XX	Madagascar
MDV	XX	Maldives
MEX	XX	Mexico
MHL	MH	Marshall Islands
MKD	XX	Macedonia
MLI	XX	Mali
MLT	XX	Malta
MMR	XX	Myanmar
MNE	XX	Montenegro
MNG	XX	Mongolia
MNP	MP	Northern Mariana Islands
MOZ	XX	Mozambique
MRT	XX	Mauritania
MSR	XX	Montserrat
MTQ	XX	Martinique
MUS	XX	Mauritius
MWI	XX	Malawi
MYS	XX	Malaysia
MYT	XX	Mayotte
NAM	XX	Namibia
NCL	XX	New Caledonia
NER	XX	Niger
NFK	XX	Norfolk Island
NGA	XX	Nigeria
NIC	XX	Nicaragua
NIR	XX	Northern Ireland (Ulster)
NIU	XX	Niue
NLD	XX	Netherlands
NOR	XX	Norway
NPL	XX	Nepal
NRU	XX	Nauru
NZL	XX	New Zealand
OMN	XX	Oman
PAK	XX	Pakistan
PAN	XX	Panama

ISO country code	USPS state code	Name of Country/State
PCN	XX	Pitcairn Islands
PER	XX	Peru
PHL	XX	Philippines
PLW	PW	Palau (Trust Territory of Pacific Islands)
PNG	XX	Papua New Guinea
POL	XX	Poland
PRI	PR	Puerto Rico
PRK	XX	North Korea
PRT	XX	Portugal
PRY	XX	Paraguay
PSE	XX	Palestine Territory, Occupied
PYF	XX	French Polynesia
QAT	XX	Qatar
REU	XX	Réunion
ROU	XX	Romania
RUS	XX	Russia
RWA	XX	Rwanda
SAU	XX	Saudi Arabia
SCT	XX	Scotland
SDN	XX	Sudan
SEN	XX	Senegal
SGP	XX	Singapore
SGS	XX	South Georgia and the South Sandwich Islands
SHN	XX	St. Helena
SJM	XX	Svalbard and Jan Mayen
SLB	XX	Solomon Islands
SLE	XX	Sierra Leone
SLV	XX	El Salvador
SMR	XX	San Marino
SOM	XX	Somalia
SPM	XX	St Pierre and Miquelon
SRB	XX	Serbia
SSD	XX	South Sudan
STP	XX	Sao Tome & Principe
SUR	XX	Suriname
SVK	XX	Slovakia
SVN	XX	Slovenia
SWE	XX	Sweden
SWZ	XX	Swaziland
SXM	XX	Sint-Maarten
SYC	XX	Seychelles
SYR	XX	Syria
TCA	XX	Turks and Caicos
TCD	XX	Chad
TGO	XX	Togo
THA	XX	Thailand
TJK	XX	Tajikistan
TKL	XX	Tokelau Islands (New Zealand)

ISO country code	USPS state code	Name of Country/State
TKM	XX	Turkmenistan
TLS	XX	Timor-Leste
TON	XX	Tonga
TTO	XX	Trinidad and Tobago
TUN	XX	Tunisia
TUR	XX	Turkey
TUV	XX	Tuvalu
TWN	XX	Taiwan
TZA	XX	Tanzania
UGA	XX	Uganda
UKR	XX	Ukraine
UMI	UM	U.S. Minor Outlying Islands
URY	XX	Uruguay
USA	AA	Armed Forces Americas
USA	AE	Armed Forces Canada, Europe, Middle East, Africa
USA	AK	Alaska
USA	AL	Alabama
USA	AP	Armed Forces Pacific
USA	AR	Arkansas
USA	AZ	Arizona
USA	CA	California
USA	CO	Colorado
USA	CT	Connecticut
USA	DC	District of Columbia
USA	DE	Delaware
USA	FL	Florida
USA	GA	Georgia
USA	HI	Hawaii
USA	IA	Iowa
USA	ID	Idaho
USA	IL	Illinois
USA	IN	Indiana
USA	KS	Kansas
USA	KY	Kentucky
USA	LA	Louisiana
USA	MA	Massachusetts
USA	MD	Maryland
USA	ME	Maine
USA	MI	Michigan
USA	MN	Minnesota
USA	MO	Missouri
USA	MS	Mississippi
USA	MT	Montana
USA	NC	North Carolina
USA	ND	North Dakota
USA	NE	Nebraska
USA	NH	New Hampshire
USA	NJ	New Jersey

ISO country code	USPS state code	Name of Country/State
USA	NM	New Mexico
USA	NV	Nevada
USA	NY	New York
USA	OH	Ohio
USA	OK	Oklahoma
USA	OR	Oregon
USA	PA	Pennsylvania
USA	RI	Rhode Island
USA	SC	South Carolina
USA	SD	South Dakota
USA	TN	Tennessee
USA	TX	Texas
USA	US	United States
USA	UT	Utah
USA	VA	Virginia
USA	VT	Vermont
USA	WA	Washington
USA	WI	Wisconsin
USA	WV	West Virginia
USA	WY	Wyoming
UZB	XX	Uzbekistan
VAT	XX	Vatican City
VCT	XX	St. Vincent and the Grenadines
VEN	XX	Venezuela
VGB	XX	British Virgin Islands
VIR	VI	U.S. Virgin Islands
VNM	XX	Vietnam
VUT	XX	Vanuatu
WLF	XX	Wallis and Fotuna
WLS	XX	Wales
WSM	XX	Samoa
YEM	XX	Yemen
ZAF	XX	Republic of South Africa
ZMB	XX	Zambia
ZWE	XX	Zimbabwe
ZZA[1]	YY	Asia, NOS
ZZC[1]	YY	Central America, NOS
ZZE[1]	YY	Europe, NOS
ZZF[1]	YY	Africa, NOS
ZZN[1]	YY	North America, NOS
ZZP[1]	YY	Pacific, NOS
ZZS[1]	YY	South America, NOS
ZZU[1]	ZZ	Unknown
ZZX[1]	YY	Non-US/Canada NOS

Custom Codes for Historic Use Only

Name of State/Province	ISO country code	USPS state code
Maritime Provinces (New Brunsw, Newfound, Nova Scotia, PE)	CAN	MM
Prairie Provinces (Alberta, Manitoba, Saskatchewan)	CAN	PP
Northwest Territories, Yukon Territory	CAN	YN
New England and New Jersey	USA	NN

Name of Country	ISO country code	USPS state code
Arabian Peninsula	XAP	YY
Other Caribbean Islands	XCB	YY
China, NOS	XCH	YY
Caucasian Republics of the USSR	XCR	YY
Czechoslovakia (former)	XCZ	YY
East Africa	XEF	YY
England, Channel Islands, Isle of Man	XEN	XX
Ethiopia (Abyssinia), Eritrea	XET	YY
Germanic Countries	XGR	YY
African Coastal Islands (previously in South Africa, NOS)	XIF	YY
Israel and former Jewish Palestine	XIS	YY
Micronesian Islands	XMC	YY
Melanesian Islands, Solomon Islands	XML	YY
Malaysia, Singapore, Brunei	XMS	YY
North Africa	XNF	YY
North American Islands	XNI	YY
Other Asian Republics of the USSR	XOR	YY
Polynesian Islands	XPL	YY
Scandinavia	XSC	YY
Sudanese Countries	XSD	YY
Southeast Asia	XSE	YY
South Africa, NOS	XSF	YY
Slavic Countries	XSL	YY
Ukraine and Moldavia	XUM	YY
West Africa, NOS (French Africa, NOS)	XWF	YY
Yugoslavia (former)	XYG	YY

Appendix C: HL7 Flavors of Null Table

Definition: If a value is an exceptional value (NULL-value), this specifies in what way and why proper information is missing.

NAACCR Code	HL7 Code	Name	Definition
10	NI	no information	No information whatsoever can be inferred from this exceptional value. This is the most general exceptional value. It is also the default exceptional value. It is unknown whether this event occurred (e.g., radiation treatment).
11	NA	not applicable	No proper value is applicable in this context (e.g., last menstrual period for a male).
12	UNK	unknown	A proper value is applicable but not known. This event occurred, but the date is unknown (e.g., birth date).
13	NASK	not asked	This information has not been sought (i.e., patient was not asked).
14	ASKU	asked but unknown	Information was sought but not found (i.e., patient was asked but did not know).
15	NAV	temporarily unavailable	Information is not available at this time, but it is expected that it will be available later.
16	OTH*	other*	The actual value is not an element in the value domain of a variable (e.g., concept not provided by required code system).
17	PINF	positive infinity	Positive infinity of numbers.
18	NINF	negative infinity	Negative infinity of numbers.
19	MSK	masked	Information on this item is available, but it has not been provided by the sender due to security, privacy, or other reasons. An alternate mechanism for gaining access to this information may be available. Note: Using this null flavor does provide information that may be a breach of confidentiality. Its primary purpose is for those circumstances where it is necessary to inform the receiver that the information does exist.
20	NP	not present	Value is not present in a message. This is only defined in messages, never in application data! All values not present in the message must be replaced by the applicable default or No-Information (NI) as the default of all defaults.

The null flavors are a general domain extension of all normal data types. Note the distinction between value domain of any data type and the vocabulary domain of coded data types. A vocabulary domain is a value domain for coded values, but not all value domains are vocabulary domains.

* The null flavor Other is used whenever the actual value is not in the required value domain. This may be, for example, when the value exceeds some constraints that are defined too restrictively (e.g., age < 100 years).

Note
Null flavors are applicable to any property of a data value or a higher-level object attribute. Where the difference of null flavors is not significant, ITs are not required to represent them. If nothing else is noted in this specification, ITs need not represent general NULL flavors for data-value property.

Appendix D: Histology Codes

8000	0	Neoplasm, benign
8000	0	Tumor, benign
8000	0	Tumor, benign, unclassified
8000	0	Tumor, unclassified, benign
8000	0	Unclassified tumor, benign
8000	1	Neoplasm, uncertain whether benign or malignant
8000	1	Tumor, NOS
8000	1	Tumor, unclassified, uncertain whether benign or malignant
8000	1	Unclassified tumor, uncertain whether benign or malignant
8000	1	Neoplasm, NOS
8000	1	Unclassified tumor, borderline malignancy
8000	1	Tumor, unclassified, borderline malignancy
8000	3	Neoplasm, malignant
8000	3	Blastoma, NOS
8000	3	Cancer (see coding guidelines, page 27)
8000	3	Tumor, malignant, NOS
8000	3	Tumor, malignant, unclassified
8000	3	Tumor, unclassified, malignant
8000	3	Unclassified tumor, malignant
8000	3	Malignancy
8000	6	Neoplasm, metastatic
8000	6	Tumor embolus
8000	6	Tumor, metastatic
8000	6	Tumor, secondary

8000	6	Neoplasm, secondary
8000	6	secondary neoplasm
8000	6	secondary tumor
8000	6	Embolus, tumor
8000	6	Metastatic neoplasm
8000	6	Metastatic tumor
8000	9	Neoplasm, malignant, uncertain whether primary or metastatic
8000	9	Tumor, unclassified, malignant, uncertain whether primary or metastatic
8000	9	Unclassified tumor, malignant, uncertain whether primary or metastatic
8000	9	Tumor, malignant, unclassified, uncertain whether primary or metastatic
8001	0	Tumor cells, benign
8001	1	Tumor cells, uncertain whether benign or malignant
8001	1	Tumor cells, NOS
8001	3	Tumor cells, malignant
8002	3	Malignant tumor, small cell type
8002	3	Tumor, malignant, small cell type
8002	3	Tumor, small cell type, malignant
8002	3	Small cell type, malignant tumor
8003	3	Malignant tumor, giant cell type
8003	3	Tumor, giant cell type, malignant
8003	3	Tumor, malignant, giant cell type
8003	3	Giant cell type, malignant tumor
8004	3	Malignant tumor, spindle cell type
8004	3	Malignant tumor, fusiform cell type
8004	3	Tumor, fusiform cell type, malignant

8004	3	Tumor, malignant, fusiform cell type
8004	3	Tumor, malignant, spindle cell type
8004	3	Tumor, spindle cell type, malignant
8004	3	Fusiform cell type, malignant tumor
8004	3	Spindle cell type, malignant tumor
8005	0	Clear cell tumor, NOS
8005	0	Tumor, clear cell, NOS
8005	3	Malignant tumor, clear cell type
8005	3	Tumor, malignant, clear cell type
8005	3	Clear cell type malignant tumor
8005	3	Tumor, clear cell type, malignant
8010	0	Epithelial tumor, benign
8010	0	Tumor, epithelial, benign
8010	2	Carcinoma in situ, NOS
8010	2	Carcinoma, intraepithelial, NOS
8010	2	In situ carcinoma, NOS
8010	2	Intraepithelial carcinoma, NOS
8010	3	Carcinoma, NOS
8010	3	Tumor, epithelial, malignant
8010	3	Epithelial tumor, malignant
8010	6	Carcinoma, metastatic, NOS
8010	6	Carcinoma, NOS, metastatic
8010	6	Carcinoma, secondary
8010	6	secondary carcinoma
8010	6	Metastatic carcinoma, NOS

8010	9	Carcinomatosis
8011	0	Epithelioma, benign
8011	3	Epithelioma, malignant
8011	3	Epithelioma, NOS
8012	3	Large cell carcinoma, NOS
8012	3	Carcinoma, large cell, NOS
8013	3	Large cell neuroendocrine carcinoma
8013	3	Carcinoma, large cell, neuroendocrine
8013	3	Carcinoma, neuroendocrine, large cell
8013	3	Large cell carcinoma, neuroendocrine
8013	3	Neuroendocrine carcinoma, large cell
8014	3	Large cell carcinoma with rhabdoid phenotype
8014	3	Carcinoma, large cell, with rhabdoid phenotype
8014	3	Rhabdoid phenotype, large cell carcinoma with
8014	3	Phenotype, large cell carcinoma with rhabdoid
8015	3	Glassy cell carcinoma
8015	3	Carcinoma, glassy cell
8020	3	Carcinoma, undifferentiated, NOS
8020	3	Undifferentiated carcinoma, NOS
8021	3	Carcinoma, anaplastic, NOS
8021	3	Anaplastic carcinoma, NOS
8022	3	Pleomorphic carcinoma
8022	3	Carcinoma, pleomorphic
8030	3	Giant cell and spindle cell carcinoma
8030	3	Carcinoma, giant cell and spindle cell

8030	3	Carcinoma, spindle cell and giant cell
8030	3	Spindle cell carcinoma and giant cell carcinoma
8031	3	Giant cell carcinoma
8031	3	Carcinoma, giant cell
8032	3	Spindle cell carcinoma, NOS
8032	3	Carcinoma, spindle cell, NOS
8033	3	Pseudosarcomatous carcinoma
8033	3	Carcinoma, pseudosarcomatous
8033	3	Sarcomatoid carcinoma
8033	3	Carcinoma, sarcomatoid
8034	3	Polygonal cell carcinoma
8034	3	Carcinoma, polygonal cell
8035	3	Carcinoma with osteoclast-like giant cells
8035	3	Giant cells, carcinoma with osteoclast-like
8035	3	Osteoclast-like giant cells, carcinoma with
8040	0	Tumorlet, benign
8040	1	Tumorlet, NOS
8041	3	Small cell carcinoma, NOS
8041	3	Carcinoma, reserve cell
8041	3	Carcinoma, round cell
8041	3	Carcinoma, small cell, NOS
8041	3	Reserve cell carcinoma
8041	3	Round cell carcinoma
8041	3	Small cell neuroendocrine carcinoma
8041	3	Carcinoma, small cell, neuroendocrine

8041	3	Small cell carcinoma, neuroendocrine
8041	3	Neuroendocrine carcinoma, small cell
8042	3	Oat cell carcinoma (C34._)
8042	3	Carcinoma, oat cell (C34._)
8043	3	Small cell carcinoma, fusiform cell
8043	3	Carcinoma, small cell, fusiform cell
8043	3	Fusiform cell, small cell carcinoma
8044	3	Small cell carcinoma, intermediate cell
8044	3	Carcinoma, small cell, intermediate cell
8044	3	Intermediate cell, small cell carcinoma
8045	3	Combined small cell carcinoma
8045	3	Small cell-large cell carcinoma, combined
8045	3	Carcinoma, large cell-small cell, combined
8045	3	Carcinoma, small cell-large cell, combined
8045	3	Large cell-small cell carcinoma, combined
8045	3	Mixed small cell carcinoma
8045	3	Combined small cell-adenocarcinoma
8045	3	Combined small cell-squamous cell carcinoma
8045	3	Adenocarcinoma, combined small cell-adenocarcinoma
8045	3	Carcinoma, combined small cell
8045	3	Carcinoma, combined small cell-large cell
8045	3	Carcinoma, combined small cell-squamous cell
8045	3	Carcinoma, mixed small cell
8045	3	Combined small cell-large cell carcinoma
8045	3	Small cell carcinoma, combined

8045	3	Small cell carcinoma, mixed
8045	3	Small cell-adenocarcinoma, combined
8045	3	Small cell-squamous cell carcinoma, combined
8045	3	Squamous cell-small cell carcinoma, combined
8046	3	Non-small cell carcinoma (C34._)
8046	3	Carcinoma, non-small cell (C34._)
8050	0	Papilloma, NOS (except papilloma of bladder M-8120/1)
8050	2	Papillary carcinoma in situ
8050	2	Carcinoma in situ, papillary
8050	2	In situ carcinoma, papillary
8050	2	Carcinoma, papillary, in situ
8050	2	In situ papillary carcinoma
8050	3	Papillary carcinoma, NOS
8050	3	Carcinoma, papillary, NOS
8051	0	Verrucous papilloma
8051	0	Papilloma, verrucous
8051	3	Verrucous carcinoma, NOS
8051	3	Carcinoma, epidermoid, verrucous
8051	3	Carcinoma, squamous cell, verrucous
8051	3	Verrucous carcinoma, epidermoid
8051	3	Verrucous carcinoma, squamous cell
8051	3	Carcinoma, verrucous, NOS
8051	3	Carcinoma, verrucous, epidermoid
8051	3	Carcinoma, verrucous, squamous cell
8051	3	Epidermoid carcinoma, verrucous

8051	3	Verrucous squamous cell carcinoma
8051	3	Squamous cell carcinoma, verrucous
8051	3	Verrucous epidermoid carcinoma
8051	3	Condylomatous carcinoma
8051	3	Warty carcinoma
8051	3	Carcinoma, condylomatous
8051	3	Carcinoma, warty
8052	0	Squamous cell papilloma, NOS
8052	0	Keratotic papilloma
8052	0	Papilloma, keratotic
8052	0	Papilloma, squamous
8052	0	Papilloma, squamous cell, NOS
8052	0	Squamous papilloma
8052	2	Papillary squamous cell carcinoma, non-invasive
8052	2	Papillary squamous cell carcinoma in situ
8052	2	Carcinoma, papillary squamous cell, in situ
8052	2	Carcinoma, papillary squamous cell, non-invasive
8052	2	Carcinoma, squamous cell papillary, non-invasive
8052	2	In situ papillary squamous cell carcinoma
8052	2	In situ squamous cell carcinoma, papillary
8052	2	Squamous cell carcinoma, papillary, in situ
8052	2	Squamous cell carcinoma, papillary, non-invasive
8052	2	Non-invasive carcinoma, papillary squamous cell
8052	2	Papillary carcinoma in situ, squamous cell
8052	2	Papillary carcinoma, squamous cell, non-invasive

8052	3	Papillary squamous cell carcinoma
8052	3	Carcinoma, epidermoid, papillary
8052	3	Carcinoma, papillary, epidermoid
8052	3	Carcinoma, papillary squamous cell
8052	3	Carcinoma, squamous cell, papillary
8052	3	Epidermoid carcinoma, papillary
8052	3	Papillary epidermoid carcinoma
8052	3	Papillary carcinoma, epidermoid
8052	3	Papillary carcinoma, squamous cell
8052	3	Squamous cell carcinoma, papillary
8052	3	Carcinoma, papillary epidermoid
8053	0	Squamous cell papilloma, inverted
8053	0	Inverted papilloma, squamous cell
8053	0	Papilloma, inverted squamous cell
8053	0	Papilloma, squamous cell, inverted
8060	0	Squamous papillomatosis
8060	0	Papillomatosis, NOS
8060	0	Papillomatosis, squamous
8070	2	Squamous cell carcinoma in situ, NOS
8070	2	Carcinoma, epidermoid, in situ, NOS
8070	2	Carcinoma in situ, epidermoid, NOS
8070	2	Carcinoma in situ, squamous cell, NOS
8070	2	Carcinoma, intraepidermal, NOS
8070	2	Carcinoma, intraepithelial, squamous cell
8070	2	Carcinoma, squamous cell, in situ, NOS

8070	2	Carcinoma, squamous cell, intraepithelial
8070	2	Epidermoid carcinoma in situ, NOS
8070	2	In situ carcinoma, epidermoid, NOS
8070	2	In situ carcinoma, squamous cell, NOS
8070	2	Intraepidermal carcinoma, NOS
8070	2	Intraepithelial squamous cell carcinoma
8070	2	Squamous cell carcinoma, intraepithelial
8070	2	In situ epidermoid carcinoma, NOS
8070	2	In situ squamous cell carcinoma, NOS
8070	3	Squamous cell carcinoma, NOS
8070	3	Carcinoma, epidermoid, NOS
8070	3	Carcinoma, squamous
8070	3	Carcinoma, squamous cell, NOS
8070	3	Epidermoid carcinoma, NOS
8070	3	Epithelioma, squamous cell
8070	3	Squamous carcinoma
8070	3	Squamous cell epithelioma
8070	6	Squamous cell carcinoma, metastatic, NOS
8070	6	Carcinoma, squamous cell, NOS, metastatic
8070	6	Carcinoma, squamous cell, metastatic, NOS
8070	6	Metastatic squamous cell carcinoma, NOS
8071	3	Squamous cell carcinoma, keratinizing, NOS
8071	3	Carcinoma, epidermoid, keratinizing
8071	3	Carcinoma, large cell, squamous cell, keratinizing
8071	3	Carcinoma, squamous cell, keratinizing, NOS

8071	3	Carcinoma, squamous cell, large cell, keratinizing
8071	3	Epidermoid carcinoma, keratinizing
8071	3	Keratinizing epidermoid carcinoma
8071	3	Keratinizing squamous cell carcinoma, NOS
8071	3	Keratinizing squamous cell carcinoma, large cell
8071	3	Large cell carcinoma, squamous cell, keratinizing
8071	3	Squamous cell carcinoma, large cell, keratinizing
8072	3	Squamous cell carcinoma, large cell, nonkeratinizing, NOS
8072	3	Carcinoma, epidermoid, large cell, nonkeratinizing
8072	3	Carcinoma, large cell, squamous cell, nonkeratinizing, NOS
8072	3	Carcinoma, squamous cell, large cell, nonkeratinizing, NOS
8072	3	Carcinoma, squamous cell, nonkeratinizing, NOS
8072	3	Epidermoid carcinoma, large cell, nonkeratinizing
8072	3	Large cell carcinoma, epidermoid, nonkeratinizing
8072	3	Large cell carcinoma, squamous cell, nonkeratinizing, NOS
8072	3	Nonkeratinizing epidermoid carcinoma, large cell
8072	3	Nonkeratinizing squamous cell carcinoma, NOS
8072	3	Nonkeratinizing squamous cell carcinoma, large cell,NOS
8072	3	Squamous cell carcinoma, nonkeratinizing, NOS
8072	3	Carcinoma, large cell epidermoid, nonkeratinizing
8073	3	Squamous cell carcinoma, small cell, nonkeratinizing
8073	3	Carcinoma, epidermoid, small cell, nonkeratinizing
8073	3	Carcinoma, small cell, squamous cell, nonkeratinizing
8073	3	Carcinoma, squamous cell, small cell, nonkeratinizing
8073	3	Epidermoid carcinoma, small cell, nonkeratinizing

8073	3	Nonkeratinizing epidermoid carcinoma, small cell
8073	3	Nonkeratinizing squamous cell carcinoma, small cell
8073	3	Small cell carcinoma, epidermoid, nonkeratinizing
8073	3	Small cell carcinoma, squamous cell, nonkeratinizing
8074	3	Squamous cell carcinoma, spindle cell
8074	3	Carcinoma, epidermoid, spindle cell
8074	3	Carcinoma, squamous cell, spindle cell
8074	3	Epidermoid carcinoma, spindle cell
8074	3	Spindle cell squamous cell carcinoma
8074	3	Squamous cell carcinoma, sarcomatoid
8074	3	Carcinoma, squamous cell, sarcomatoid
8074	3	Sarcomatoid carcinoma, squamous cell
8074	3	Sarcomatoid squamous cell carcinoma
8074	3	Spindle cell epidermoid carcinoma
8075	3	Squamous cell carcinoma, adenoid
8075	3	Adenoid squamous cell carcinoma
8075	3	Carcinoma, adenoid squamous cell
8075	3	Carcinoma, pseudoglandular, squamous cell
8075	3	Carcinoma, squamous cell, adenoid
8075	3	Carcinoma, squamous cell, pseudoglandular
8075	3	Pseudoglandular squamous cell carcinoma
8075	3	Squamous cell carcinoma, pseudoglandular
8075	3	Squamous cell carcinoma, acantholytic
8075	3	Acantholytic squamous cell carcinoma
8075	3	Carcinoma, acantholytic squamous cell

8075	3	Carcinoma, squamous cell, acantholytic
8076	2	Squamous cell carcinoma in situ with questionable stromal invasion
8076	2	Carcinoma in situ, epidermoid with questionable stromal invasion
8076	2	Carcinoma in situ, squamous cell with questionable stromal invasion
8076	2	Carcinoma, squamous cell, in situ, with questionable stromal invasion
8076	2	Epidermoid carcinoma in situ with questionable stromal invasion
8076	2	In situ carcinoma, epidermoid with questionable stromal invasion
8076	2	In situ carcinoma, squamous cell with questionable stromal invasion
8076	2	Carcinoma, epidermoid in situ with questionable stromal invasion
8076	2	In situ epidermoid carcinoma with questionable stromal invasion
8076	2	In situ squamous cell carcinoma with questionable stromal invasion
8076	2	Questionable stromal invasion, epidermoid carcinoma insitu with
8076	2	Questionable stromal invasion, squamous cell carcinoma in situ with
8076	3	Squamous cell carcinoma, microinvasive
8076	3	Carcinoma, microinvasive squamous cell
8076	3	Carcinoma, squamous cell, microinvasive
8076	3	Microinvasive squamous cell carcinoma
8077	2	Squamous intraepithelial neoplasia, grade III (see Coding Guidelines, page 28)
8077	2	VAIN III (C52._)
8077	2	VIN III (C51._)
8077	2	Cervical intraepithelial neoplasia, grade III (C53._)
8077	2	CIN III, NOS (C53._) (see Coding Guidelines, page 28)
8077	2	CIN III with severe dysplasia (C53._) (see Coding Guidelines, page 28)
8077	2	Neoplasia, cervical intraepithelial, grade III (C53._)
8077	2	Vaginal intraepithelial neoplasia, grade III (C52._)

8077	2	Vulvar intraepithelial neoplasia, grade III (C51._)
8077	2	Anal intraepithelial neoplasia, grade III (C21.1)
8077	2	AIN III (C21.1)
8077	2	Dysplasia, CIN III with severe (C53._)
8077	2	Grade III anal intraepithelial neoplasia (C21.1)
8077	2	Grade III cervical intraepithelial neoplasia (C53._)
8077	2	Grade III squamous intraepithelial neoplasia
8077	2	Grade III vaginal intraepithelial neoplasia (C52._)
8077	2	Grade III vulvar intraepithelial neoplasia (C51._)
8077	2	Intraepithelial neoplasia, grade III, anal (C21.1)
8077	2	Intraepithelial neoplasia, grade III, cervical (C53._)
8077	2	Intraepithelial neoplasia, grade III, squamous
8077	2	Intraepithelial neoplasia, grade III, vaginal (C52._)
8077	2	Intraepithelial neoplasia, grade III, vulvar (C51._)
8077	2	Neoplasia, anal intraepithelial, grade III (C21.1)
8077	2	Neoplasia, squamous intraepithelial, grade III
8077	2	Neoplasia, vaginal intraepithelial, grade III (C52._)
8077	2	Neoplasia, vulvar intraepithelial, grade III (C51._)
8077	2	Severe dysplasia, CIN III with (C53._)
8078	3	Squamous cell carcinoma with horn formation
8078	3	Carcinoma, squamous cell, with horn formation
8078	3	Horn formation, squamous cell carcinoma with
8078	3	Squamous cell carcinoma, with horn formation
8080	2	Queyrat erythroplasia (C60._)
8080	2	Erythroplasia, Queyrat (C60._)

8081	2	Bowen disease (C44._)
8081	2	Bowen type intraepidermal squamous cell carcinoma (C44._)
8081	2	Carcinoma, Bowen type, intraepidermal squamous cell (C44._)
8081	2	Carcinoma, intraepidermal, squamous cell, Bowen type (C44._)
8081	2	Intraepidermal squamous cell carcinoma, Bowen type (C44._)
8081	2	Squamous cell carcinoma, Bowen type, intraepidermal (C44._)
8081	2	Squamous cell carcinoma, intraepidermal, Bowen type (C44._)
8081	2	Carcinoma, squamous cell, intradermal, Bowen type (C44._)
8081	2	Disease, Bowen (C44._)
8082	3	Lymphoepithelial carcinoma
8082	3	Carcinoma, lymphoepithelial
8082	3	Tumor, Schmincke (C11._)
8082	3	Lymphoepithelioma
8082	3	Schmincke tumor (C11._)
8082	3	Lymphoepithelioma-like carcinoma
8082	3	Carcinoma, lymphoepithelioma-like
8083	3	Basaloid squamous cell carcinoma
8083	3	Carcinoma, basaloid squamous cell
8083	3	Carcinoma, squamous cell, basaloid
8083	3	Squamous cell carcinoma, basaloid
8084	3	Squamous cell carcinoma, clear cell type
8084	3	Carcinoma, squamous cell, clear cell type
8084	3	Clear cell type squamous cell carcinoma
8090	1	Basal cell tumor (C44._)
8090	1	Tumor, basal cell (C44._)

8090	3	Basal cell carcinoma, NOS (C44._)
8090	3	Basal cell carcinoma, pigmented (C44._)
8090	3	Basal cell epithelioma (C44._)
8090	3	Carcinoma, basal cell, NOS (C44._)
8090	3	Carcinoma, basal cell, pigmented (C44._)
8090	3	Ulcer, rodent (C44._)
8090	3	Epithelioma, basal cell (C44._)
8090	3	Pigmented basal cell carcinoma (C44._)
8090	3	Rodent ulcer (C44._)
8090	3	Carcinoma, pigmented basal cell (C44._)
8091	3	Multifocal superficial basal cell carcinoma (C44._)
8091	3	Multicentric basal cell carcinoma (C44._)
8091	3	Basal cell carcinoma, multicentric (C44._)
8091	3	Carcinoma, basal cell, multicentric (C44._)
8091	3	Carcinoma, multicentric basal cell (C44._)
8091	3	Basal cell carcinoma, multifocal superficial (C44._)
8091	3	Carcinoma, basal cell, multifocal superficial (C44._)
8091	3	Carcinoma, basal cell, superficial, multifocal (C44._)
8091	3	Carcinoma, multifocal superficial basal cell (C44._)
8091	3	Superficial basal cell carcinoma, multifocal (C44._)
8092	3	Infiltrating basal cell carcinoma, NOS (C44._)
8092	3	Infiltrating basal cell carcinoma, non-sclerosing (C44._)
8092	3	Infiltrating basal cell carcinoma, sclerosing (C44._)
8092	3	Basal cell carcinoma, morpheic (C44._)
8092	3	Basal cell carcinoma, desmoplastic type (C44._)

8092	3	Basal cell carcinoma, infiltrating, NOS (C44._)
8092	3	Basal cell carcinoma, infiltrating, non-sclerosing (C44._)
8092	3	Basal cell carcinoma, infiltrating, sclerosing (C44._)
8092	3	Carcinoma, basal cell, desmoplastic type (C44._)
8092	3	Carcinoma, basal cell, morpheic (C44._)
8092	3	Carcinoma, basal cell, non-sclerosing, infiltrating (C44._)
8092	3	Carcinoma, basal cell, sclerosing, infiltrating (C44._)
8092	3	Desmoplastic type, basal cell carcinoma (C44._)
8092	3	Morpheic basal cell carcinoma (C44._)
8092	3	Sclerosing basal cell carcinoma, infiltrating (C44._)
8092	3	Non-sclerosing infiltrating basal cell carcinoma (C44._)
8093	3	Basal cell carcinoma, fibroepithelial (C44._)
8093	3	Carcinoma, basal cell, fibroepithelial (C44._)
8093	3	Fibroepithelial basal cell carcinoma (C44._)
8093	3	Fibroepithelioma of Pinkus type
8093	3	Fibroepithelial basal cell carcinoma, Pinkus type
8093	3	Pinkus tumor
8093	3	Fibroepithelioma, NOS
8093	3	Basal cell carcinoma, fibroepithelial, Pinkus type
8093	3	Carcinoma, basal cell, fibroepithelial, Pinkus type
8093	3	Tumor, Pinkus
8093	3	Pinkus type, fibroepithelial basal cell carcinoma
8093	3	Pinkus type, fibroepithelioma
8094	3	Basosquamous carcinoma (C44._)
8094	3	Basal-squamous cell carcinoma, mixed (C44._)

8094	3	Carcinoma, basosquamous (C44._)
8094	3	Carcinoma, basal-squamous cell, mixed (C44._)
8094	3	Mixed basal-squamous cell carcinoma (C44._)
8094	3	Mixed squamous-basal cell carcinoma (C44._)
8094	3	Squamous-basal cell carcinoma, mixed (C44._)
8094	3	Carcinoma, mixed basal-squamous cell (C44._)
8095	3	Metatypical carcinoma (C44._)
8095	3	Carcinoma, metatypical (C44._)
8096	0	Intraepidermal epithelioma of Jadassohn (C44._)
8096	0	Epithelioma, intraepidermal, Jadassohn (C44._)
8096	0	Intraepidermal epithelioma, Jadassohn (C44._)
8096	0	Jadassohn intraepidermal epithelioma (C44._)
8097	3	Basal cell carcinoma, nodular (C44._)
8097	3	Basal cell carcinoma, micronodular (C44._)
8097	3	Carcinoma, basal cell, micronodular (C44._)
8097	3	Carcinoma, basal cell, nodular (C44._)
8097	3	Micronodular basal cell carcinoma (C44._)
8097	3	Nodular basal cell carcinoma (C44._)
8098	3	Adenoid basal carcinoma (C53._)
8098	3	Basal carcinoma, adenoid (C53._)
8098	3	Carcinoma, adenoid basal (C53._)
8098	3	Carcinoma, basal, adenoid (C53._)
8100	0	Trichoepithelioma (C44._)
8100	0	Brooke tumor (C44._)
8100	0	Tumor, Brooke (C44._)

8100	0	Epithelioma adenoideos cysticum (C44._)
8100	0	Adenoideos cysticum, epithelioma (C44._)
8100	0	Cysticum, epithelioma adenoideos (C44._)
8101	0	Trichofolliculoma (C44._)
8102	0	Trichilemmoma (C44._)
8102	3	Trichilemmocarcinoma (C44._)
8102	3	Trichilemmal carcinoma (C44._)
8102	3	Carcinoma, trichilemmal (C44._)
8103	0	Pilar tumor (C44._)
8103	0	Proliferating trichilemmal cyst
8103	0	Proliferating trichilemmal tumor
8103	0	Cyst, proliferating trichilemmal
8103	0	Cyst, trichilemmal, proliferating
8103	0	Trichilemmal cyst, proliferating
8103	0	Trichilemmal tumor, proliferating
8103	0	Tumor, pilar (C44._)
8103	0	Tumor, proliferating trichilemmal
8103	0	Tumor, trichilemmal, proliferating
8110	0	Pilomatrixoma, NOS (C44._)
8110	0	Calcifying epithelioma of Malherbe (C44._)
8110	0	Epithelioma, calcifying, Malherbe (C44._)
8110	0	Malherbe calcifying epithelioma (C44._)
8110	0	Pilomatricoma, NOS
8110	3	Pilomatrix carcinoma (C44._)
8110	3	Pilomatrixoma, malignant (C44._)

8110	3	Carcinoma, pilomatrix (C44._)
8110	3	Pilomatricoma, malignant (C44._)
8110	3	Matrical carcinoma (C44._)
8110	3	Carcinoma, matrical (C44._)
8120	0	Transitional cell papilloma, benign
8120	0	Transitional papilloma
8120	0	Papilloma, transitional, NOS
8120	0	Papilloma, transitional cell, benign
8120	0	Papilloma, transitional
8120	1	Urothelial papilloma, NOS
8120	1	Transitional cell papilloma, NOS
8120	1	Papilloma of bladder (C67._)
8120	1	Papilloma, NOS of bladder (C67._)
8120	1	Papilloma, bladder (C67._)
8120	1	Papilloma, transitional cell, NOS
8120	1	Papilloma, urothelial, NOS
8120	1	Bladder, papilloma of (C67._)
8120	2	Transitional cell carcinoma in situ
8120	2	Carcinoma in situ, transitional cell
8120	2	In situ carcinoma, transitional cell
8120	2	Urothelial carcinoma in situ
8120	2	Carcinoma in situ, urothelial
8120	2	Carcinoma, transitional cell in situ
8120	2	Carcinoma, urothelial, in situ
8120	2	In situ transitional cell carcinoma

8120	3	Transitional cell carcinoma, NOS
8120	3	Carcinoma, transitional
8120	3	Carcinoma, transitional cell, NOS
8120	3	Transitional carcinoma
8120	3	Urothelial carcinoma, NOS
8120	3	Carcinoma, urothelial, NOS
8121	0	Schneiderian papilloma, NOS (C30.0, C31._)
8121	0	Papilloma, Schneiderian, NOS (C30.0, C31._)
8121	0	Sinonasal papilloma, NOS (C30.0, C31._)
8121	0	Sinonasal papilloma, exophytic (C30.0, C31._)
8121	0	Sinonasal papilloma, fungiform (C30.0, C31._)
8121	0	Transitional cell papilloma, inverted, benign
8121	0	Transitional papilloma, inverted, benign
8121	0	Exophytic sinonasal papilloma (C30.0, C31._)
8121	0	Fungiform sinonasal papilloma (C30.0, C31._)
8121	0	Papilloma, sinonasal, NOS (C30.0, C31._)
8121	0	Papilloma, sinonasal, exophytic (C30.0, C31._)
8121	0	Papilloma, sinonasal, fungiform (C30.0, C31._)
8121	0	Papilloma, transitional cell, inverted, benign
8121	0	Papilloma, transitional, inverted, benign
8121	1	Transitional cell papilloma, inverted, NOS
8121	1	Inverted transitional cell papilloma, NOS
8121	1	Papilloma, transitional cell, inverted, NOS
8121	1	Transitional papilloma, inverted, NOS
8121	1	Schneiderian papilloma, inverted (C30.0, C31._)

8121	1	Columnar cell papilloma
8121	1	Cylindrical cell papilloma (C30.0, C31._)
8121	1	Oncocytic Schneiderian papilloma (C30.0, C31._)
8121	1	Inverted Schneiderian papilloma (C30.0, C31._)
8121	1	Schneiderian papilloma, oncocytic (C30.0, C31._)
8121	1	Papilloma, columnar cell
8121	1	Papilloma, cylindrical cell (C30.0, C31._)
8121	1	Papilloma, Schneiderian, inverted (C30.0, C31._)
8121	1	Papilloma, Schneiderian, oncocytic (C30.0, C31._)
8121	1	Papilloma, transitional, inverted, NOS
8121	3	Schneiderian carcinoma (C30.0, C31._)
8121	3	Carcinoma, Schneiderian (C30.0, C31._)
8121	3	Cylindrical cell carcinoma (C30.0, C31._)
8121	3	Carcinoma, cylindrical cell (C30.0, C31._)
8122	3	Transitional cell carcinoma, spindle cell
8122	3	Carcinoma, transitional cell, spindle cell
8122	3	Spindle cell transitional cell carcinoma
8122	3	Transitional cell carcinoma, sarcomatoid
8122	3	Carcinoma, transitional cell, sarcomatoid
8122	3	Sarcomatoid transitional cell carcinoma
8123	3	Basaloid carcinoma
8123	3	Carcinoma, basaloid
8124	3	Cloacogenic carcinoma (C21.2)
8124	3	Carcinoma, cloacogenic (C21.2)
8130	1	Papillary transitional cell neoplasm of lowmalignant potential (C67._)

8130	1	Papillary urothelial neoplasm of low malignantpotential (C67._)
8130	1	Low malignant potential, papillary transitional cellneoplasm (C67._)
8130	1	Low malignant potential, papillary urothelialneoplasm (C67._)
8130	1	Neoplasm, papillary transitional cell, low malignantpotential (C67._)
8130	1	Neoplasm, papillary urothelial, low malignantpotential (C67._)
8130	1	Transitional cell neoplasm, papillary, low malignantpotential (C67._)
8130	1	Urothelial neoplasm, papillary, of low malignantpotential (C67._)
8130	2	Papillary transitional cell carcinoma, non-invasive (C67._)
8130	2	Papillary urothelial carcinoma, non-invasive (C67._)
8130	2	Carcinoma, non-invasive, papillary transitional cell (C67._)
8130	2	Carcinoma, non-invasive, papillary urothelial (C67._)
8130	2	Carcinoma, papillary transitional cell, non-invasive (C67._)
8130	2	Carcinoma, papillary urothelial, non-invasive (C67._)
8130	2	Carcinoma, transitional cell, papillary, non-invasive (C67._)
8130	2	Carcinoma, urothelial, non-invasive, papillary (C67._)
8130	2	Carcinoma, urothelial, papillary, non-invasive (C67._)
8130	2	Transitional cell carcinoma, papillary, non-invasive (C67._)
8130	2	Urothelial carcinoma, papillary, non-invasive (C67._)
8130	2	Non-invasive carcinoma, papillary transitional cell (C67._)
8130	2	Non-invasive carcinoma, papillary urothelial (C67._)
8130	2	Papillary carcinoma, urothelial, non-invasive (C67._)
8130	3	Papillary transitional cell carcinoma (C67._)
8130	3	Carcinoma, papillary transitional cell (C67._)
8130	3	Transitional cell carcinoma, papillary (C67._)
8130	3	Carcinoma, transitional cell, papillary (C67._)

8130	3	Papillary carcinoma, transitional cell (C67._)
8130	3	Papillary urothelial carcinoma (C67._)
8130	3	Carcinoma, papillary urothelial (C67._)
8130	3	Urothelial carcinoma, papillary (C67._)
8130	3	Papillary carcinoma, urothelial (C67._)
8131	3	Transitional cell carcinoma, micropapillary (C67._)
8131	3	Carcinoma, micropapillary transitional cell (C67._)
8131	3	Carcinoma, transitional cell, micropapillary (C67._)
8131	3	Micropapillary transitional cell carcinoma (C67._)
8140	0	Adenoma, NOS
8140	1	Atypical adenoma
8140	1	Bronchial adenoma, NOS (C34._)
8140	1	Adenoma, bronchial, NOS (C34._)
8140	1	Adenoma, atypical
8140	2	Adenocarcinoma in situ, NOS
8140	2	In situ adenocarcinoma, NOS
8140	3	Adenocarcinoma, NOS
8140	6	Adenocarcinoma, metastatic, NOS
8140	6	Adenocarcinoma, NOS, metastatic
8140	6	Metastatic adenocarcinoma, NOS
8141	3	Scirrhous adenocarcinoma
8141	3	Carcinoma, scirrhous
8141	3	Carcinoma with productive fibrosis
8141	3	Adenocarcinoma, scirrhous
8141	3	Scirrhous carcinoma

8141	3	Fibrosis, carcinoma with productive
8141	3	Productive fibrosis, carcinoma with
8142	3	Linitis plastica (C16._)
8142	3	Plastica, linitis (C16._)
8143	3	Superficial spreading adenocarcinoma
8143	3	Adenocarcinoma, superficial spreading
8144	3	Adenocarcinoma, intestinal type (C16._)
8144	3	Carcinoma, intestinal type (C16._)
8144	3	Intestinal type adenocarcinoma (C16._)
8144	3	Intestinal type carcinoma (C16._)
8145	3	Carcinoma, diffuse type (C16._)
8145	3	Diffuse type, adenocarcinoma (C16._)
8145	3	Diffuse type, carcinoma (C16._)
8145	3	Adenocarcinoma, diffuse type (C16._)
8146	0	Monomorphic adenoma
8146	0	Adenoma, monomorphic
8147	0	Basal cell adenoma
8147	0	Adenoma, basal cell
8147	3	Basal cell adenocarcinoma
8147	3	Adenocarcinoma, basal cell
8148	2	Glandular intraepithelial neoplasia, grade III
8148	2	Prostatic intraepithelial neoplasia, grade III (C61.9)
8148	2	PIN III (C61.9)
8148	2	Grade III glandular intraepithelial neoplasia
8148	2	Intraepithelial neoplasia, grade III, glandular

8148	2	Intraepithelial neoplasia, grade III, prostatic (C61.9)
8149	0	Canalicular adenoma
8149	0	Adenoma, canalicular
8150	0	Islet cell adenoma (C25._)
8150	0	Tumor, islet cell, benign (C25._)
8150	0	Adenoma, islet cell (C25._)
8150	0	Islet cell tumor, benign (C25._)
8150	0	Nesidioblastoma (C25._)
8150	0	Islet cell adenomatosis (C25._)
8150	0	Adenomatosis, islet cell (C25._)
8150	1	Islet cell tumor, NOS (C25._)
8150	1	Tumor, islet cell, NOS (C25._)
8150	3	Islet cell carcinoma (C25._)
8150	3	Carcinoma, islet cell (C25._)
8150	3	Adenocarcinoma, islet cell (C25._)
8150	3	Islet cell adenocarcinoma (C25._)
8151	0	Insulinoma, NOS (C25._)
8151	0	Beta cell adenoma (C25._)
8151	0	Adenoma, beta cell (C25._)
8151	3	Insulinoma, malignant (C25._)
8151	3	Beta cell tumor, malignant (C25._)
8151	3	Tumor, beta cell, malignant (C25._)
8152	1	Glucagonoma, NOS (C25._)
8152	1	Alpha cell tumor, NOS (C25._)
8152	1	Tumor, alpha cell, NOS (C25._)

8152	3	Glucagonoma, malignant (C25._)
8152	3	Tumor, alpha cell, malignant (C25._)
8152	3	Alpha cell tumor, malignant (C25._)
8153	1	Gastrinoma, NOS
8153	1	Tumor, G cell, NOS
8153	1	G cell tumor, NOS
8153	1	Gastrin cell tumor
8153	1	Tumor, gastrin cell
8153	3	Gastrinoma, malignant
8153	3	Tumor, G cell, malignant
8153	3	G cell tumor, malignant
8153	3	Gastrin cell tumor, malignant
8153	3	Tumor, gastrin cell, malignant
8154	3	Mixed islet cell and exocrine adenocarcinoma (C25._)
8154	3	Exocrine and islet cell adenocarcinoma, mixed (C25._)
8154	3	Adenocarcinoma, exocrine and islet cell, mixed (C25._)
8154	3	Adenocarcinoma, islet cell and exocrine, mixed (C25._)
8154	3	Islet cell and exocrine adenocarcinoma, mixed (C25._)
8154	3	Mixed exocrine and islet cell adenocarcinoma (C25._)
8154	3	Mixed acinar-endocrine carcinoma (C25._)
8154	3	Mixed ductal-endocrine carcinoma (C25._)
8154	3	Acinar-endocrine carcinoma, mixed (C25._)
8154	3	Adenocarcinoma, mixed islet cell and exocrine (C25._)
8154	3	Carcinoma, mixed acinar-endocrine (C25._)
8154	3	Carcinoma, mixed ductal-endocrine (C25._)

8154	3	Ductal, mixed ductal-endocrine carcinoma (C25._)
8154	3	Endocrine-acinar carcinoma, mixed (C25._)
8154	3	Endocrine-ductal carcinoma, mixed (C25._)
8154	3	Mixed endocrine-acinar carcinoma (C25._)
8154	3	Mixed endocrine-ductal carcinoma (C25._)
8155	1	Vipoma, NOS
8155	3	Vipoma, malignant
8156	1	Somatostatinoma, NOS
8156	1	Somatostatin cell tumor, NOS
8156	1	Tumor, somatostatin cell, NOS
8156	3	Somatostatinoma, malignant
8156	3	Somatostatin cell tumor, malignant
8156	3	Tumor, somatostatin cell, malignant
8157	1	Enteroglucagonoma, NOS
8157	3	Enteroglucagonoma, malignant
8160	0	Bile duct adenoma (C22.1, C24.0)
8160	0	Cholangioma (C22.1, C24.0)
8160	0	Adenoma, bile duct (C22.1, C24.0)
8160	3	Cholangiocarcinoma (C22.1, C24.0)
8160	3	Bile duct adenocarcinoma (C22.1, C24.0)
8160	3	Bile duct carcinoma (C22.1, C24.0)
8160	3	Carcinoma, bile duct (C22.1, C24.0)
8160	3	Adenocarcinoma, bile duct (C22.1, C24.0)
8161	0	Bile duct cystadenoma (C22.1, C24.0)
8161	0	Cystadenoma, bile duct (C22.1, C24.0)

8161	3	Bile duct cystadenocarcinoma (C22.1, C24.0)
8161	3	Cystadenocarcinoma, bile duct (C22.1, C24.0)
8162	3	Klatskin tumor (C22.1, C24.0)
8162	3	Tumor, Klatskin (C22.1, C24.0)
8170	0	Liver cell adenoma (C22.0)
8170	0	Adenoma, hepatocellular (C22.0)
8170	0	Adenoma, liver cell (C22.0)
8170	0	Hepatocellular adenoma (C22.0)
8170	0	Hepatoma, benign (C22.0)
8170	3	Hepatocellular carcinoma, NOS (C22.0)
8170	3	Carcinoma, hepatocellular, NOS (C22.0)
8170	3	Carcinoma, liver cell (C22.0)
8170	3	Hepatocarcinoma (C22.0)
8170	3	Hepatoma, NOS (C22.0)
8170	3	Hepatoma, malignant (C22.0)
8170	3	Liver cell carcinoma (C22.0)
8171	3	Hepatocellular carcinoma, fibrolamellar (C22.0)
8171	3	Carcinoma, fibrolamellar, hepatocellular (C22.0)
8171	3	Carcinoma, hepatocellular, fibrolamellar (C22.0)
8171	3	Fibrolamellar, hepatocellular carcinoma (C22.0)
8172	3	Hepatocellular carcinoma, scirrhous (C22.0)
8172	3	Sclerosing hepatic carcinoma (C22.0)
8172	3	Carcinoma, hepatic, sclerosing (C22.0)
8172	3	Carcinoma, hepatocellular, scirrhous (C22.0)
8172	3	Hepatic carcinoma, sclerosing (C22.0)

8172 3 Scirrhous carcinoma, hepatocellular (C22.0)

8173 3 Hepatocellular carcinoma, spindle cell variant (C22.0)

8173 3 Hepatocellular carcinoma, sarcomatoid (C22.0)

8173 3 Carcinoma, hepatocellular, sarcomatoid (C22.0)

8173 3 Carcinoma, hepatocellular, spindle cell variant (C22.0)

8173 3 Sarcomatoid carcinoma, hepatocellular (C22.0)

8173 3 Spindle cell variant, hepatocellular carcinoma(C22.0)

8174 3 Hepatocellular carcinoma, clear cell type (C22.0)

8174 3 Carcinoma, hepatocellular, clear cell type (C22.0)

8174 3 Clear cell type hepatocellular carcinoma (C22._)

8175 3 Hepatocellular carcinoma, pleomorphic type (C22.0)

8175 3 Carcinoma, hepatocellular, pleomorphic type (C22.0)

8175 3 Pleomorphic type, hepatocellular carcinoma (C22.0)

8180 3 Combined hepatocellular carcinoma andcholangiocarcinoma (C22.0)

8180 3 Bile duct carcinoma and hepatocellular carcinoma, mixed (C22.0)

8180 3 Carcinoma, bile duct and hepatocellular, mixed (C22.0)

8180 3 Carcinoma, hepatocellular and bile duct, mixed (C22.0)

8180 3 Carcinoma, hepatocellular and cholangiocarcinoma,combined (C22.0)

8180 3 Cholangiocarcinoma and hepatocellular carcinoma,combined (C22.0)

8180 3 Hepatocellular carcinoma and bile duct carcinoma, mixed (C22.0)

8180 3 Hepatocellular carcinoma and cholangiocarcinoma,combined (C22.0)

8180 3 Hepatocholangiocarcinoma (C22.0)

8180 3 Mixed bile duct and hepatocellular carcinoma (C22.0)

8180 3 Mixed hepatocellular and bile duct carcinoma (C22.0)

8180 3 Carcinoma, combined hepatocellular andcholangiocarcinoma (C22.0)

8180	3	Carcinoma, mixed hepatocellular and bile duct (C22.0)
8180	3	Hepatocellular and bile duct carcinoma, mixed (C22.0)
8190	0	Trabecular adenoma
8190	0	Adenoma, trabecular
8190	3	Trabecular adenocarcinoma
8190	3	Carcinoma, trabecular
8190	3	Trabecular carcinoma
8190	3	Adenocarcinoma, trabecular
8191	0	Embryonal adenoma
8191	0	Adenoma, embryonal
8200	0	Eccrine dermal cylindroma (C44._)
8200	0	Tumor, turban (C44.4)
8200	0	Turban tumor (C44.4)
8200	0	Cylindroma, eccrine dermal (C44._)
8200	0	Cylindroma, skin (C44._)
8200	0	Dermal eccrine cylindroma (C44._)
8200	0	Cylindroma of skin (C44._)
8200	0	Dermal cylindroma, eccrine (C44._)
8200	3	Adenoid cystic carcinoma
8200	3	Carcinoma, adenocystic
8200	3	Carcinoma, adenoid cystic
8200	3	Cylindroid adenocarcinoma
8200	3	Cylindroid bronchial adenoma (C34._) [obs]
8200	3	Cylindroma, NOS (except cylindroma of skin M-8200/0)
8200	3	Bronchial adenoma, cylindroid (C34._) [obs]

8200	3	Adenocarcinoma, cylindroid
8200	3	Adenocystic carcinoma
8200	3	Adenoma, bronchial, cylindroid (C34._) [obs]
8200	3	Cystic carcinoma, adenoid
8201	2	Cribriform carcinoma in situ (C50._)
8201	2	Ductal carcinoma in situ, cribriform type (C50._)
8201	2	Carcinoma, cribriform in situ (C50._)
8201	2	Carcinoma, ductal in situ, cribriform type (C50._)
8201	2	Cribriform ductal carcinoma in situ (C50._)
8201	2	Ductal carcinoma, cribriform type, in situ (C50._)
8201	2	In situ cribriform carcinoma (C50._)
8201	2	In situ ductal carcinoma, cribriform type (C50._)
8201	3	Cribriform carcinoma, NOS
8201	3	Carcinoma, cribriform, NOS
8201	3	Ductal carcinoma, cribriform type (C50._)
8201	3	Carcinoma, ductal, cribriform type (C50._)
8201	3	Cribriform ductal carcinoma (C50._)
8202	0	Microcystic adenoma (C25._)
8202	0	Adenoma, microcystic, NOS (C25._)
8204	0	Lactating adenoma (C50._)
8204	0	Adenoma. lactating (C50._)
8210	0	Adenomatous polyp, NOS
8210	0	Adenoma, polypoid, NOS
8210	0	Polyp, adenomatous, NOS
8210	0	Polypoid adenoma

8210	2	Adenocarcinoma in situ in adenomatous polyp
8210	2	Carcinoma in situ in a polyp, NOS
8210	2	Carcinoma in situ in adenomatous polyp
8210	2	Tubular adenoma, adenocarcinoma in situ in
8210	2	Adenocarcinoma in situ in a polyp, NOS
8210	2	Adenocarcinoma in situ in polypoid adenoma
8210	2	Adenocarcinoma in situ in tubular adenoma
8210	2	Adenoma, polypoid, adenocarcinoma in situ in
8210	2	Adenoma, tubular, adenocarcinoma in situ in
8210	2	Adenomatous polyp, adenocarcinoma in situ in
8210	2	In situ adenocarcinoma, in a polyp, NOS
8210	2	In situ adenocarcinoma, in adenomatous polyp
8210	2	In situ adenocarcinoma, in polypoid adenoma
8210	2	In situ adenocarcinoma, in tubular adenoma
8210	2	In situ carcinoma, in a polyp, NOS
8210	2	In situ carcinoma, in adenomatous polyp
8210	2	Polyp, NOS, adenocarcinoma in situ in
8210	2	Polyp, NOS, carcinoma in situ in
8210	2	Polyp, adenomatous, adenocarcinoma in situ in
8210	2	Polyp, adenomatous, carcinoma in situ in
8210	2	Polypoid adenoma, adenocarcinoma in situ in
8210	2	Adenomatous polyp, carcinoma in situ in
8210	3	Adenocarcinoma in adenomatous polyp
8210	3	Carcinoma in a polyp, NOS
8210	3	Carcinoma in adenomatous polyp

8210	3	Tubular adenoma, adenocarcinoma in
8210	3	Adenocarcinoma in a polyp, NOS
8210	3	Adenocarcinoma in polypoid adenoma
8210	3	Adenocarcinoma in tubular adenoma
8210	3	Adenoma, polypoid, adenocarcinoma in
8210	3	Adenoma, tubular, adenocarcinoma in
8210	3	Adenomatous polyp, adenocarcinoma in
8210	3	Adenomatous polyp, carcinoma in
8210	3	Polyp, NOS, adenocarcinoma in
8210	3	Polyp, NOS, carcinoma in
8210	3	Polyp, adenomatous, adenocarcinoma in
8210	3	Polyp, adenomatous, carcinoma in
8210	3	Polypoid adenoma, adenocarcinoma in
8210	3	Adenoma, adenocarcinoma in polypoid
8211	0	Tubular adenoma, NOS
8211	0	Adenoma, tubular, NOS
8211	3	Tubular adenocarcinoma
8211	3	Tubular carcinoma
8211	3	Carcinoma, tubular
8211	3	Adenocarcinoma, tubular
8212	0	Flat adenoma
8212	0	Adenoma, flat
8213	0	Serrated adenoma (C18._)
8213	0	Mixed adenomatous and hyperplastic polyp (C18._)
8213	0	Adenoma, serrated (C18._)

8213	0	Adenomatous and hyperplastic polyp, mixed (C18._)
8213	0	Adenomatous polyp, mixed, and hyperplastic (C18._)
8213	0	Hyperplastic and adenomatous polyp, mixed (C18._)
8213	0	Mixed hyperplastic and adenomatous polyp (C18._)
8214	3	Parietal cell carcinoma (C16._)
8214	3	Parietal cell adenocarcinoma (C16._)
8214	3	Adenocarcinoma, parietal cell (C16._)
8214	3	Carcinoma, parietal cell (C16._)
8215	3	Adenocarcinoma of anal glands (C21.1)
8215	3	Adenocarcinoma of anal ducts (C21.1)
8215	3	Adenocarcinoma, anal ducts (C21.1)
8215	3	Adenocarcinoma, anal glands (C21.1)
8215	3	Anal ducts adenocarcinoma (C21.1)
8215	3	Anal glands adenocarcinoma (C21.1)
8220	0	Adenomatous polyposis coli (C18._)
8220	0	Familial polyposis coli (C18._)
8220	0	Adenomatosis, NOS
8220	0	Polyposis, adenomatous, coli (C18._)
8220	0	Polyposis coli, familial (C18._)
8220	3	Adenocarcinoma in adenomatous polyposis coli (C18._)
8220	3	Adenomatous polyposis coli, adenocarcinoma in (C18._)
8220	3	Polyposis, adenomatous, coli, adenocarcinoma in (C18._)
8221	0	Multiple adenomatous polyps
8221	0	Adenomatous polyps, multiple
8221	0	Multiple polyps, adenomatous

8221	0	Polyposis, multiple
8221	0	Polyps, adenomatous, multiple
8221	3	Adenocarcinoma in multiple adenomatous polyps
8221	3	Adenomatous polyps, multiple, adenocarcinoma in
8221	3	Multiple adenomatous polyps, adenocarcinoma in
8221	3	Multiple polyps, adenomatous, adenocarcinoma in
8221	3	Polyps, adenomatous, multiple, adenocarcinoma in
8230	2	Ductal carcinoma in situ, solid type (C50._)
8230	2	Intraductal carcinoma, solid type
8230	2	Carcinoma, ductal in situ, solid type (C50._)
8230	2	Carcinoma, intraductal, solid type
8230	2	In situ ductal carcinoma, solid type (C50._)
8230	2	Solid type, ductal carcinoma in situ (C50._)
8230	2	Solid type, intraductal carcinoma
8230	3	Solid carcinoma, NOS
8230	3	Carcinoma, solid, NOS
8230	3	Solid carcinoma with mucin formation
8230	3	Solid adenocarcinoma with mucin formation
8230	3	Adenocarcinoma, solid, with mucin formation
8230	3	Carcinoma, solid, with mucin formation
8230	3	Mucin formation, solid adenocarcinoma with
8230	3	Mucin formation, solid carcinoma with
8231	3	Carcinoma simplex
8231	3	Simplex, carcinoma
8240	1	Carcinoid tumor of uncertain malignant potential

8240	1	Argentaffin carcinoid tumor, NOS
8240	1	Argentaffinoma, NOS [obs]
8240	1	Carcinoid, NOS, of appendix (C18.1)
8240	1	Carcinoid tumor, NOS, of appendix (C18.1)
8240	1	Carcinoid tumor, argentaffin, NOS
8240	1	Tumor, carcinoid, NOS, of appendix (C18.1)
8240	1	Tumor, carcinoid, argentaffin, NOS
8240	1	Uncertain malignant potential, tumor, carcinoid
8240	3	Carcinoid tumor, NOS (except of appendix M-8240/1)
8240	3	Bronchial adenoma, carcinoid (C34._)
8240	3	Carcinoid, NOS (except of appendix M-8240/1)
8240	3	Carcinoid, bronchial adenoma (C34._)
8240	3	Tumor, carcinoid, NOS (except of appendix M-8240/1)
8240	3	Adenoma, bronchial, carcinoid (C34._)
8240	3	Typical carcinoid
8240	3	Carcinoid tumor, typical
8241	3	Enterochromaffin cell carcinoid
8241	3	Carcinoid tumor, argentaffin, malignant (except of appendix M-8240/1)
8241	3	Argentaffin carcinoid tumor, malignant (except of appendix M-8240/1)
8241	3	Argentaffinoma, malignant [obs]
8241	3	Tumor, carcinoid, argentaffin, malignant
8241	3	EC cell carcinoid
8241	3	Serotonin producing carcinoid
8241	3	Carcinoid, EC cell
8241	3	Carcinoid, enterochromaffin cell

8241	3	Carcinoid, serotonin producing
8242	1	Enterochromaffin-like cell carcinoid, NOS
8242	1	ECL cell carcinoid, NOS
8242	1	Carcinoid, ECL cell, NOS
8242	1	Carcinoid, enterochromaffin-like cell, NOS
8242	3	Enterochromaffin-like cell tumor, malignant
8242	3	ECL cell carcinoid, malignant
8242	3	Carcinoid, ECL cell, malignant
8242	3	Tumor, enterochromaffin-like cell, malignant
8243	3	Goblet cell carcinoid
8243	3	Carcinoid, goblet cell
8243	3	Carcinoid, mucinous
8243	3	Tumor, mucocarcinoid
8243	3	Mucinous carcinoid
8243	3	Mucocarcinoid tumor
8244	3	Composite carcinoid
8244	3	Carcinoid, composite
8244	3	Carcinoid and adenocarcinoma, combined
8244	3	Combined carcinoid and adenocarcinoma
8244	3	Adenocarcinoma and carcinoid, combined
8244	3	Mixed carcinoid-adenocarcinoma
8244	3	Adenocarcinoma, combined carcinoid and adenocarcinoma
8244	3	Adenocarcinoma, mixed carcinoid-adenocarcinoma
8244	3	Carcinoid, adenocarcinoma and, combined
8244	3	Carcinoid, adenocarcinoma and, mixed

8244	3	Carcinoid, combined carcinoid and adenocarcinoma
8244	3	Carcinoid, mixed carcinoid-adenocarcinoma
8244	3	Mixed adenocarcinoma-carcinoid
8244	3	Combined adenocarcinoma and carcinoid
8245	1	Tubular carcinoid
8245	1	Carcinoid, tubular
8245	3	Adenocarcinoid tumor
8245	3	Tumor, adenocarcinoid
8246	3	Neuroendocrine carcinoma, NOS
8246	3	Carcinoma, neuroendocrine, NOS
8247	3	Merkel cell carcinoma (C44._)
8247	3	Carcinoma, Merkel cell (C44._)
8247	3	Tumor, Merkel cell (C44._)
8247	3	Merkel cell tumor (C44._)
8247	3	Primary cutaneous neuroendocrine carcinoma (C44._)
8247	3	Carcinoma, neuroendocrine, primary cutaneous (C44._)
8247	3	Cutaneous neuroendocrine carcinoma, primary (C44._)
8247	3	Neuroendocrine carcinoma, primary cutaneous (C44._)
8248	1	Apudoma
8249	3	Atypical carcinoid tumor
8249	3	Carcinoid tumor, atypical
8249	3	Tumor, atypical carcinoid
8250	1	Pulmonary adenomatosis (C34._)
8250	1	Adenomatosis, pulmonary (C34._)
8250	3	Bronchiolo-alveolar adenocarcinoma, NOS (C34._)

8250	3	Bronchiolar adenocarcinoma (C34._)
8250	3	Bronchiolar carcinoma (C34._)
8250	3	Bronchiolo-alveolar carcinoma, NOS (C34._)
8250	3	Carcinoma, alveolar cell (C34._)
8250	3	Carcinoma, bronchiolar (C34._)
8250	3	Carcinoma, bronchiolo-alveolar, NOS (C34._)
8250	3	Adenocarcinoma, bronchiolar (C34._)
8250	3	Adenocarcinoma, bronchiolo-alveolar, NOS (C34._)
8250	3	Alveolar cell carcinoma (C34._)
8251	0	Alveolar adenoma (C34._)
8251	0	Adenoma, alveolar (C34._)
8251	3	Alveolar adenocarcinoma (C34._)
8251	3	Carcinoma, alveolar (C34._)
8251	3	Adenocarcinoma, alveolar (C34._)
8251	3	Alveolar carcinoma (C34._)
8252	3	Bronchiolo-alveolar carcinoma, non-mucinous (C34._)
8252	3	Bronchiolo-alveolar carcinoma, Clara cell (C34._)
8252	3	Bronchiolo-alveolar carcinoma, type II pneumocyte (C34._)
8252	3	Carcinoma, bronchiolo-alveolar, Clara cell (C34._)
8252	3	Carcinoma, bronchiolo-alveolar, non-mucinous (C34._)
8252	3	Carcinoma, bronchiolo-alveolar, type II pneumocyte (C34._)
8252	3	Clara cell bronchiolo-alveolar carcinoma (C34._)
8252	3	Non-mucinous bronchiolo-alveolar carcinoma (C34._)
8252	3	Pneumocyte, type II, bronchiolo-alveolar carcinoma (C34._)
8253	3	Bronchiolo-alveolar carcinoma, mucinous (C34._)

8253	3	Bronchiolo-alveolar carcinoma, goblet cell type (C34._)
8253	3	Carcinoma, bronchiolo-alveolar, goblet cell type (C34._)
8253	3	Carcinoma, bronchiolo-alveolar, mucinous (C34._)
8253	3	Goblet cell type, bronchiolo-alveolar carcinoma (C34._)
8253	3	Mucinous bronchiolo-alveolar carcinoma (C34._)
8254	3	Bronchiolo-alveolar carcinoma, mixed mucinous and non-mucinous (C34._)
8254	3	Bronchiolo-alveolar carcinoma, Clara cell and goblet cell type (C34._)
8254	3	Bronchiolo-alveolar carcinoma, type II pneumocyte and goblet cell type (C34._)
8254	3	Bronchiolo-alveolar carcinoma, indeterminate type (C34._)
8254	3	Carcinoma, bronchiolo-alveolar, Clara cell and goblet cell type (C34._)
8254	3	Carcinoma, bronchiolo-alveolar, indeterminate type (C34._)
8254	3	Carcinoma, bronchiolo-alveolar, mixed mucinous and non-mucinous (C34._)
8254	3	Carcinoma, bronchiolo-alveolar, type II pneumocyte and goblet cell (C34._)
8254	3	Clara cell and goblet cell type bronchiolo-alveolar carcinoma (C34._)
8254	3	Goblet cell type, bronchiolo-alveolar carcinoma, Clara cell and (C34._)
8254	3	Goblet cell type, bronchiolo-alveolar carcinoma, type II pneumocyte and (C34._)
8254	3	Indeterminate type bronchiolo-alveolar carcinoma (C34._)
8254	3	Mixed mucinous and non-mucinous bronchiolo-alveolar carcinoma (C34._)
8254	3	Mixed non-mucinous and mucinous bronchiolo-alveolar carcinoma (C34._)
8254	3	Mucinous bronchiolo-alveolar carcinoma, non-mucinous and, mixed (C34._)
8254	3	Pneumocyte, type II and goblet cell type bronchiolo-alveolar carcinoma (C34._)
8254	3	Non-mucinous and mucinous bronchiolo-alveolar carcinoma, mixed (C34._)
8255	3	Adenocarcinoma with mixed subtypes
8255	3	Adenocarcinoma combined with other types of carcinoma
8255	3	Adenocarcinoma with other types of carcinoma, combined

8255	3	Carcinoma, combined adenocarcinoma with other types of carcinoma
8260	0	Papillary adenoma, NOS
8260	0	Adenoma, papillary, NOS
8260	0	Glandular papilloma
8260	0	Papilloma, glandular
8260	3	Papillary adenocarcinoma, NOS
8260	3	Adenocarcinoma, papillary, NOS
8260	3	Papillary carcinoma of thyroid (C73.9)
8260	3	Papillary renal cell carcinoma (C64.9)
8260	3	Carcinoma, papillary renal cell (C64.9)
8260	3	Carcinoma, papillary, thyroid (C73.9)
8260	3	Carcinoma, renal cell, papillary (C64.9)
8260	3	Papillary carcinoma, thyroid (C73.9)
8261	0	Villous adenoma, NOS
8261	0	Villous papilloma
8261	0	Adenoma, villous, NOS
8261	0	Papilloma, villous
8261	2	Adenocarcinoma in situ in villous adenoma
8261	2	Villous adenoma, adenocarcinoma in situ in
8261	2	Adenoma, villous, adenocarcinoma in situ in
8261	2	In situ adenocarcinoma, in villous adenoma
8261	3	Adenocarcinoma in villous adenoma
8261	3	Villous adenoma, adenocarcinoma in
8261	3	Adenoma, villous, adenocarcinoma in
8262	3	Villous adenocarcinoma

8262	3	Adenocarcinoma, villous
8263	0	Tubulovillous adenoma, NOS
8263	0	Villoglandular adenoma
8263	0	Adenoma, papillotubular
8263	0	Adenoma, tubulovillous, NOS
8263	0	Adenoma, villoglandular
8263	0	Papillotubular adenoma
8263	2	Adenocarcinoma in situ in tubulovillous adenoma
8263	2	Tubulovillous adenoma, adenocarcinoma in situ in
8263	2	Adenoma, tubulovillous, adenocarcinoma in situ in
8263	2	In situ adenocarcinoma, in tubulovillous adenoma
8263	3	Adenocarcinoma in tubulovillous adenoma
8263	3	Tubulovillous adenoma, adenocarcinoma in
8263	3	Adenoma, tubulovillous, adenocarcinoma in
8263	3	Papillotubular adenocarcinoma
8263	3	Tubulopapillary adenocarcinoma
8263	3	Adenocarcinoma, papillotubular
8263	3	Adenocarcinoma, tubulopapillary
8264	0	Papillomatosis, glandular
8264	0	Biliary papillomatosis (C22.1, C24.0)
8264	0	Glandular papillomatosis
8264	0	Papillomatosis, biliary (C22.1, C24.0)
8270	0	Chromophobe adenoma (C75.1)
8270	0	Adenoma, chromophobe (C75.1)
8270	3	Chromophobe carcinoma (C75.1)

8270	3	Carcinoma, chromophobe (C75.1)
8270	3	Chromophobe adenocarcinoma (C75.1)
8270	3	Adenocarcinoma, chromophobe (C75.1)
8271	0	Prolactinoma (C75.1)
8272	0	Pituitary adenoma, NOS (C75.1)
8272	0	Adenoma, pituitary, NOS (C75.1)
8272	3	Pituitary carcinoma, NOS (C75.1)
8272	3	Carcinoma, pituitary, NOS (C75.1)
8280	0	Acidophil adenoma (C75.1)
8280	0	Eosinophil adenoma (C75.1)
8280	0	Adenoma, acidophil (C75.1)
8280	0	Adenoma, eosinophil (C75.1)
8280	3	Acidophil carcinoma (C75.1)
8280	3	Carcinoma, acidophil (C75.1)
8280	3	Carcinoma, eosinophil (C75.1)
8280	3	Eosinophil adenocarcinoma (C75.1)
8280	3	Eosinophil carcinoma (C75.1)
8280	3	Adenocarcinoma, acidophil (C75.1)
8280	3	Acidophil adenocarcinoma (C75.1)
8280	3	Adenocarcinoma, eosinophil (C75.1)
8281	0	Mixed acidophil-basophil adenoma (C75.1)
8281	0	Basophil-acidophil adenoma, mixed (C75.1)
8281	0	Acidophil-basophil adenoma, mixed (C75.1)
8281	0	Adenoma, acidophil-basophil, mixed (C75.1)
8281	0	Adenoma, basophil-acidophil, mixed (C75.1)

8281	0	Adenoma, mixed acidophil-basophil (C75.1)
8281	0	Mixed basophil-acidophil adenoma (C75.1)
8281	0	Basophil acidophil adenoma, mixed (C75.1)
8281	3	Mixed acidophil-basophil carcinoma (C75.1)
8281	3	Basophil-acidophil carcinoma, mixed (C75.1)
8281	3	Carcinoma, acidophil-basophil, mixed (C75.1)
8281	3	Carcinoma, basophil-acidophil, mixed (C75.1)
8281	3	Acidophil-basophil carcinoma, mixed (C75.1)
8281	3	Mixed basophil-acidophil carcinoma (C75.1)
8281	3	Basophil acidophil carcinoma, mixed (C75.1)
8290	0	Oxyphilic adenoma
8290	0	Tumor, Hurthle cell (C73.9)
8290	0	Adenoma, Hurthle cell (C73.9)
8290	0	Adenoma, oncocytic
8290	0	Adenoma, oxyphilic
8290	0	Hurthle cell adenoma (C73.9)
8290	0	Hurthle cell tumor (C73.9)
8290	0	Oncocytic adenoma
8290	0	Oncocytoma
8290	0	Follicular adenoma, oxyphilic cell (C73.9)
8290	0	Adenoma, follicular, oxyphilic cell (C73.9)
8290	0	Adenoma, oxyphilic cell follicular (C73.9)
8290	0	Oxyphilic cell follicular adenoma (C73.9)
8290	3	Oxyphilic adenocarcinoma
8290	3	Carcinoma, Hurthle cell (C73.9)

8290	3	Carcinoma, oncocytic
8290	3	Adenocarcinoma, Hurthle cell (C73.9)
8290	3	Adenocarcinoma, oncocytic
8290	3	Adenocarcinoma, oxyphilic
8290	3	Hurthle cell adenocarcinoma (C73.9)
8290	3	Hurthle cell carcinoma (C73.9)
8290	3	Oncocytic adenocarcinoma
8290	3	Oncocytic carcinoma
8290	3	Follicular carcinoma, oxyphilic cell (C73.9)
8290	3	Carcinoma, follicular, oxyphilic cell (C73.9)
8290	3	Oxyphilic cell follicular carcinoma (C73.9)
8300	0	Basophil adenoma (C75.1)
8300	0	Adenoma, basophil (C75.1)
8300	0	Adenoma, mucoid cell (C75.1)
8300	0	Mucoid cell adenoma (C75.1)
8300	3	Basophil carcinoma (C75.1)
8300	3	Basophil adenocarcinoma (C75.1)
8300	3	Adenocarcinoma, basophil (C75.1)
8300	3	Carcinoma, basophil (C75.1)
8300	3	Adenocarcinoma, mucoid cell (C75.1)
8300	3	Mucoid cell adenocarcinoma (C75.1)
8310	0	Clear cell adenoma
8310	0	Adenoma, clear cell
8310	3	Clear cell adenocarcinoma, NOS
8310	3	Carcinoma, clear cell

8310	3	Clear cell adenocarcinoma, mesonephroid
8310	3	Clear cell carcinoma
8310	3	Adenocarcinoma, clear cell, NOS
8310	3	Adenocarcinoma, clear cell, mesonephroid
8310	3	Adenocarcinoma, mesonephroid, clear cell
8310	3	Mesonephroid clear cell adenocarcinoma
8311	1	Hypernephroid tumor [obs]
8311	1	Tumor, hypernephroid [obs]
8312	3	Renal cell carcinoma, NOS (C64.9)
8312	3	Carcinoma, renal cell, NOS (C64.9)
8312	3	Tumor, Grawitz (C64.9) [obs]
8312	3	Grawitz tumor (C64.9) [obs]
8312	3	Adenocarcinoma, renal cell (C64.9)
8312	3	Hypernephroma (C64.9) [obs]
8312	3	Renal cell adenocarcinoma (C64.9)
8313	0	Clear cell adenofibroma (C56.9)
8313	0	Clear cell cystadenofibroma (C56.9)
8313	0	Cystadenofibroma, clear cell (C56.9)
8313	0	Adenofibroma, clear cell (C56.9)
8313	1	Clear cell adenofibroma of borderline malignancy (C56.9)
8313	1	Clear cell cystadenofibroma of borderline malignancy (C56.9)
8313	1	Adenofibroma, clear cell, of borderline malignancy (C56.9)
8313	1	Cystadenofibroma, clear cell, of borderlinemalignancy (C56.9)
8313	3	Clear cell adenocarcinofibroma (C56.9)
8313	3	Clear cell cystadenocarcinofibroma (C56.9)

8313	3	Adenocarcinofibroma, clear cell (C56.9)
8313	3	Cystadenocarcinofibroma, clear cell (C56.9)
8314	3	Lipid-rich carcinoma (C50._)
8314	3	Carcinoma, lipid-rich (C50._)
8315	3	Glycogen-rich carcinoma (C50._)
8315	3	Carcinoma, glycogen-rich (C50._)
8316	3	Cyst-associated renal cell carcinoma (C64.9)
8316	3	Carcinoma, renal cell, cyst-associated (C64.9)
8316	3	Renal cell carcinoma, cyst-associated (C64.9)
8317	3	Renal cell carcinoma, chromophobe type (C64.9)
8317	3	Chromophobe cell renal carcinoma (C64.9)
8317	3	Carcinoma, chromophobe cell renal (C64.9)
8317	3	Carcinoma, renal cell, chromophobe type (C64.9)
8317	3	Carcinoma, renal, chromophobe cell (C64.9)
8317	3	Renal carcinoma, chromophobe cell (C64.9)
8318	3	Renal cell carcinoma, sarcomatoid (C64.9)
8318	3	Renal cell carcinoma, spindle cell (C64.9)
8318	3	Carcinoma, renal cell, spindle cell (C64.9)
8318	3	Carcinoma, renal cell, sarcomatoid (C64.9)
8318	3	Carcinoma, sarcomatoid renal cell (C64.9)
8318	3	Carcinoma, spindle cell, renal cell (C64.9)
8318	3	Sarcomatoid carcinoma, renal cell (C64.9)
8318	3	Sarcomatoid renal cell carcinoma (C64.9)
8318	3	Spindle cell carcinoma, renal cell (C64.9)
8318	3	Spindle cell renal cell carcinoma (C64.9)

8319	3	Collecting duct carcinoma (C64.9)
8319	3	Bellini duct carcinoma (C64.9)
8319	3	Renal carcinoma, collecting duct type (C64.9)
8319	3	Carcinoma, Bellini duct (C64.9)
8319	3	Carcinoma, collecting duct (C64.9)
8319	3	Carcinoma, duct, collecting (C64.9)
8319	3	Carcinoma, renal, collecting duct type (C64.9)
8319	3	Collecting duct type renal carcinoma (C64.9)
8319	3	Duct, Bellini, carcinoma (C64.9)
8319	3	Duct carcinoma, Bellini (C64.9)
8319	3	Duct carcinoma, collecting (C64.9)
8319	3	Duct, renal carcinoma, collecting duct type (C64.9)
8320	3	Granular cell carcinoma
8320	3	Carcinoma, granular cell
8320	3	Granular cell adenocarcinoma
8320	3	Adenocarcinoma, granular cell
8321	0	Chief cell adenoma (C75.0)
8321	0	Adenoma, chief cell (C75.0)
8322	0	Water-clear cell adenoma (C75.0)
8322	0	Adenoma, water-clear cell (C75.0)
8322	3	Water-clear cell adenocarcinoma (C75.0)
8322	3	Water-clear cell carcinoma (C75.0)
8322	3	Carcinoma, water-clear cell (C75.0)
8322	3	Adenocarcinoma, water-clear cell (C75.0)
8323	0	Mixed cell adenoma

8323	0	Adenoma, mixed cell
8323	3	Mixed cell adenocarcinoma
8323	3	Adenocarcinoma, mixed cell
8324	0	Lipoadenoma
8324	0	Adenolipoma
8325	0	Metanephric adenoma (C64.9)
8325	0	Adenoma, metanephric (C64.9)
8330	0	Follicular adenoma, NOS (C73.9)
8330	0	Adenoma, follicular, NOS (C73.9)
8330	1	Atypical follicular adenoma (C73.9)
8330	1	Adenoma, follicular, atypical (C73.9)
8330	1	Follicular adenoma, atypical (C73.9)
8330	3	Follicular adenocarcinoma, NOS (C73.9)
8330	3	Carcinoma, follicular, NOS (C73.9)
8330	3	Adenocarcinoma, follicular, NOS (C73.9)
8330	3	Follicular carcinoma, NOS (C73.9)
8331	3	Follicular adenocarcinoma, well differentiated (C73.9)
8331	3	Carcinoma, follicular, well differentiated (C73.9)
8331	3	Well differentiated follicular adenocarcinoma (C73.9)
8331	3	Well differentiated follicular carcinoma (C73.9)
8331	3	Adenocarcinoma, follicular, well differentiated (C73.9)
8331	3	Follicular carcinoma, well differentiated (C73.9)
8332	3	Follicular adenocarcinoma, trabecular (C73.9)
8332	3	Carcinoma, follicular, moderately differentiated (C73.9)
8332	3	Carcinoma, follicular, trabecular (C73.9)

8332	3	Trabecular follicular adenocarcinoma (C73.9)
8332	3	Trabecular follicular carcinoma (C73.9)
8332	3	Adenocarcinoma, follicular, moderatelydifferentiated (C73.9)
8332	3	Adenocarcinoma, follicular, trabecular (C73.9)
8332	3	Follicular adenocarcinoma, moderately differentiated (C73.9)
8332	3	Follicular carcinoma, moderately differentiated (C73.9)
8332	3	Follicular carcinoma, trabecular (C73.9)
8332	3	Moderately differentiated, follicular adenocarcinoma (C73.9)
8332	3	Moderately differentiated, follicular carcinoma(C73.9)
8333	0	Microfollicular adenoma, NOS (C73.9)
8333	0	Fetal adenoma (C73.9)
8333	0	Adenoma, fetal (C73.9)
8333	0	Adenoma, microfollicular, NOS (C73.9)
8333	3	Fetal adenocarcinoma (C73.9)
8333	3	Adenocarcinoma, fetal (C73.9)
8334	0	Macrofollicular adenoma (C73.9)
8334	0	Colloid adenoma (C73.9)
8334	0	Adenoma, colloid (C73.9)
8334	0	Adenoma, macrofollicular (C73.9)
8335	3	Follicular carcinoma, minimally invasive (C73.9)
8335	3	Follicular carcinoma, encapsulated (C73.9)
8335	3	Carcinoma, follicular, encapsulated (C73.9)
8335	3	Carcinoma, follicular, minimally invasive (C73.9)
8335	3	Encapsulated follicular carcinoma (C73.9)
8335	3	Minimally invasive follicular carcinoma (C73.9)

8336	0	Hyalinizing trabecular adenoma (C73.9)
8336	0	Adenoma, trabecular, hyalinizing (C73.9)
8336	0	Trabecular adenoma, hyalinizing (C73.9)
8337	3	Insular carcinoma (C73.9)
8337	3	Carcinoma, insular (C73.9)
8340	3	Papillary carcinoma, follicular variant (C73.9)
8340	3	Carcinoma, follicular and papillary (C73.9)
8340	3	Carcinoma, papillary and follicular (C73.9)
8340	3	Carcinoma, papillary, follicular variant (C73.9)
8340	3	Adenocarcinoma, follicular and papillary (C73.9)
8340	3	Adenocarcinoma, papillary and follicular (C73.9)
8340	3	Adenocarcinoma, papillary, follicular variant (C73.9)
8340	3	Follicular and papillary adenocarcinoma (C73.9)
8340	3	Follicular and papillary carcinoma (C73.9)
8340	3	Papillary adenocarcinoma, follicular variant (C73.9)
8340	3	Papillary and follicular adenocarcinoma (C73.9)
8340	3	Papillary and follicular carcinoma (C73.9)
8340	3	Follicular variant, papillary adenocarcinoma (C73.9)
8340	3	Follicular variant, papillary carcinoma (C73.9)
8340	3	Papillary, follicular variant, adenocarcinoma (C73.9)
8341	3	Papillary microcarcinoma (C73.9)
8341	3	Microcarcinoma, papillary (C73.9)
8342	3	Papillary carcinoma, oxyphilic cell (C73.9)
8342	3	Carcinoma, papillary, oxyphilic cell (C73.9)
8342	3	Oxyphilic cell papillary carcinoma (C73.9)

8343	3	Papillary carcinoma, encapsulated (C73.9)
8343	3	Carcinoma, papillary, encapsulated (C73.9)
8343	3	Encapsulated papillary carcinoma (C73.9)
8344	3	Papillary carcinoma, columnar cell (C73.9)
8344	3	Papillary carcinoma, tall cell (C73.9)
8344	3	Carcinoma, papillary, columnar cell (C73.9)
8344	3	Carcinoma, papillary, tall cell (C73.9)
8344	3	Columnar cell papillary carcinoma (C73.9)
8344	3	Tall cell papillary carcinoma (C73.9)
8345	3	Medullary carcinoma with amyloid stroma (C73.9)
8345	3	C cell carcinoma (C73.9)
8345	3	Carcinoma, C cell (C73.9)
8345	3	Carcinoma, medullary with amyloid stroma (C73.9)
8345	3	Carcinoma, parafollicular cell (C73.9)
8345	3	Parafollicular cell carcinoma (C73.9)
8345	3	Amyloid stroma, medullary carcinoma with (C73.9)
8345	3	Stroma, medullary caracinoma with amyloid (C73.9)
8346	3	Mixed medullary-follicular carcinoma (C73.9)
8346	3	Carcinoma, follicular-medullary, mixed (C73.9)
8346	3	Carcinoma, mixed follicular-medullary (C73.9)
8346	3	Carcinoma, mixed medullary-follicular (C73.9)
8346	3	Follicular-medullary carcinoma, mixed (C73.9)
8346	3	Medullary-follicular carcinoma, mixed (C73.9)
8346	3	Mixed follicular-medullary carcinoma (C73.9)
8347	3	Mixed medullary-papillary carcinoma (C73.9)

8347	3	Carcinoma, mixed medullary-papillary (C73.9)
8347	3	Carcinoma, mixed papillary-medullary (C73.9)
8347	3	Carcinoma, papillary-medullary, mixed (C73.9)
8347	3	Medullary-papillary carcinoma, mixed (C73.9)
8347	3	Mixed papillary-medullary carcinoma (C73.9)
8347	3	Papillary-medullary carcinoma, mixed (C73.9)
8350	3	Nonencapsulated sclerosing carcinoma (C73.9)
8350	3	Carcinoma, nonencapsulated sclerosing (C73.9)
8350	3	Tumor, nonencapsulated sclerosing (C73.9)
8350	3	Adenocarcinoma, nonencapsulated sclerosing (C73.9)
8350	3	Nonencapsulated sclerosing adenocarcinoma (C73.9)
8350	3	Nonencapsulated sclerosing tumor (C73.9)
8350	3	Sclerosing adenocarcinoma, nonencapsulated (C73.9)
8350	3	Sclerosing carcinoma, nonencapsulated (C73.9)
8350	3	Sclerosing tumor, nonencapsulated (C73.9)
8350	3	Papillary carcinoma, diffuse sclerosing (C73.9)
8350	3	Adenocarcinoma, sclerosing, nonencapsulated (C73.9)
8350	3	Carcinoma, papillary, diffuse sclerosing (C73.9)
8350	3	Carcinoma, sclerosing, nonencapsulated (C73.9)
8350	3	Diffuse papillary carcinoma, sclerosing (C73.9)
8350	3	Sclerosing carcinoma, papillary, diffuse (C73.9)
8350	3	Sclerosing papillary carcinoma, diffuse (C73.9)
8350	3	Tumor, sclerosing, nonencapsulated (C73.9)
8360	1	Multiple endocrine adenomas
8360	1	Adenomas, multiple, endocrine

8360	1	Adenomatosis, endocrine
8360	1	Endocrine adenomas, multiple
8360	1	Endocrine adenomatosis
8360	1	Multiple adenomas, endocrine
8361	0	Juxtaglomerular tumor (C64.9)
8361	0	Tumor, juxtaglomerular (C64.9)
8361	0	Reninoma (C64.9)
8370	0	Adrenal cortical adenoma, NOS (C74.0)
8370	0	Tumor, adrenal cortical, NOS (C74.0)
8370	0	Tumor, adrenal cortical, benign (C74.0)
8370	0	Adenoma, adrenal cortical, NOS (C74.0)
8370	0	Adrenal cortical tumor, NOS (C74.0)
8370	0	Adrenal cortical tumor, benign (C74.0)
8370	3	Adrenal cortical carcinoma (C74.0)
8370	3	Carcinoma, adrenal cortical (C74.0)
8370	3	Tumor, adrenal cortical, malignant (C74.0)
8370	3	Adenocarcinoma, adrenal cortical (C74.0)
8370	3	Adrenal cortical adenocarcinoma (C74.0)
8370	3	Adrenal cortical tumor, malignant (C74.0)
8371	0	Adrenal cortical adenoma, compact cell (C74.0)
8371	0	Compact cell adrenal cortical adenoma (C74.0)
8371	0	Adenoma, adrenal cortical, compact cell (C74.0)
8372	0	Adrenal cortical adenoma, pigmented (C74.0)
8372	0	Black adenoma (C74.0)
8372	0	Adenoma, black (C74.0)

8372	0	Pigmented adenoma (C74.0)
8372	0	Adenoma, adrenal cortical, pigmented (C74.0)
8372	0	Adenoma, pigmented (C74.0)
8372	0	Pigmented adrenal cortical adenoma (C74.0)
8373	0	Adrenal cortical adenoma, clear cell (C74.0)
8373	0	Clear cell adrenal cortical adenoma (C74.0)
8373	0	Adenoma, adrenal cortical, clear cell (C74.0)
8374	0	Adrenal cortical adenoma, glomerulosa cell (C74.0)
8374	0	Glomerulosa cell, adrenal cortical adenoma (C74.0)
8374	0	Adenoma, adrenal cortical, glomerulosa cell (C74.0)
8375	0	Adrenal cortical adenoma, mixed cell (C74.0)
8375	0	Adenoma, adrenal cortical, mixed cell (C74.0)
8375	0	Mixed cell, adrenal cortical adenoma (C74.0)
8380	0	Endometrioid adenoma, NOS
8380	0	Cystadenoma, endometrioid, NOS
8380	0	Endometrioid cystadenoma, NOS
8380	0	Adenoma, endometrioid, NOS
8380	1	Endometrioid adenoma, borderline malignancy
8380	1	Tumor, endometrioid of low malignant potential (C56.9)
8380	1	Cystadenoma, endometrioid, borderline malignancy
8380	1	Endometrioid cystadenoma, borderline malignancy
8380	1	Endometrioid tumor of low malignant potential
8380	1	Adenoma, endometrioid, borderline malignancy
8380	1	Atypical proliferative endometrioid tumor
8380	1	Endometrioid tumor, atypical proliferative

8380	1	Low malignant potential, endometrioid tumor
8380	1	Proliferative endometrioid tumor, atypical
8380	1	Tumor, endometrioid, atypical proliferative
8380	3	Endometrioid adenocarcinoma, NOS
8380	3	Endometrioid carcinoma, NOS
8380	3	Carcinoma, endometrioid, NOS
8380	3	Cystadenocarcinoma, endometrioid
8380	3	Endometrioid cystadenocarcinoma
8380	3	Adenocarcinoma, endometrioid, NOS
8381	0	Endometrioid adenofibroma, NOS
8381	0	Cystadenofibroma, endometrioid, NOS
8381	0	Endometrioid cystadenofibroma, NOS
8381	0	Adenofibroma, endometrioid, NOS
8381	1	Endometrioid adenofibroma, borderline malignancy
8381	1	Cystadenofibroma, endometrioid, borderline malignancy
8381	1	Endometrioid cystadenofibroma, borderline malignancy
8381	1	Adenofibroma, endometrioid, borderline malignancy
8381	3	Endometrioid adenofibroma, malignant
8381	3	Cystadenofibroma, endometrioid, malignant
8381	3	Endometrioid cystadenofibroma, malignant
8381	3	Adenofibroma, endometrioid, malignant
8382	3	Endometrioid adenocarcinoma, secretory variant
8382	3	Adenocarcinoma, endometrioid, secretory variant
8382	3	secretory variant, endometrioid adenocarcinoma
8383	3	Endometrioid adenocarcinoma, ciliated cell variant

8383	3	Adenocarcinoma, endometrioid, ciliated cell variant
8383	3	Ciliated cell variant, endometrioid adenocarcinoma
8384	3	Adenocarcinoma, endocervical type
8384	3	Endocervical type adenocarcinoma
8390	0	Skin appendage adenoma (C44._)
8390	0	Tumor, skin appendage, benign (C44._)
8390	0	Adenoma, skin appendage (C44._)
8390	0	Adnexal tumor, benign (C44._)
8390	0	Skin appendage tumor, benign (C44._)
8390	0	Tumor, adnexal, benign (C44._)
8390	3	Skin appendage carcinoma (C44._)
8390	3	Carcinoma, adnexal (C44._)
8390	3	Carcinoma, skin appendage (C44._)
8390	3	Adnexal carcinoma (C44._)
8391	0	Follicular fibroma (C44._)
8391	0	Trichodiscoma (C44._)
8391	0	Fibrofolliculoma (C44._)
8391	0	Perifollicular fibroma (C44._)
8391	0	Fibroma, follicular (C44._)
8391	0	Fibroma, perifollicular (C44._)
8392	0	Syringofibroadenoma (C44._)
8400	0	Sweat gland adenoma (C44._)
8400	0	Tumor, sweat gland, benign (C44._)
8400	0	Adenoma, sweat gland (C44._)
8400	0	Hidradenoma, NOS (C44._)

8400	0	Sweat gland tumor, benign (C44._)
8400	0	Syringadenoma, NOS (C44._)
8400	1	Sweat gland tumor, NOS (C44._)
8400	1	Tumor, sweat gland, NOS (C44._)
8400	3	Sweat gland adenocarcinoma (C44._)
8400	3	Carcinoma, sweat gland (C44._)
8400	3	Tumor, sweat gland, malignant (C44._)
8400	3	Adenocarcinoma, sweat gland (C44._)
8400	3	Sweat gland carcinoma (C44._)
8400	3	Sweat gland tumor, malignant (C44._)
8401	0	Apocrine adenoma
8401	0	Adenoma, apocrine
8401	0	Apocrine cystadenoma
8401	0	Cystadenoma, apocrine
8401	3	Apocrine adenocarcinoma
8401	3	Adenocarcinoma, apocrine
8402	0	Nodular hidradenoma (C44._)
8402	0	Clear cell hidradenoma (C44._)
8402	0	Eccrine acrospiroma (C44._)
8402	0	Acrospiroma, eccrine (C44._)
8402	0	Hidradenoma, clear cell (C44._)
8402	0	Hidradenoma, nodular (C44._)
8402	3	Nodular hidradenoma, malignant (C44._)
8402	3	Hidradenocarcinoma (C44._)
8402	3	Hidradenoma, nodular, malignant (C44._)

8403	0	Eccrine spiradenoma (C44._)
8403	0	Spiradenoma, NOS (C44._)
8403	0	Spiradenoma, eccrine (C44._)
8403	3	Malignant eccrine spiradenoma (C44._)
8403	3	Eccrine spiradenoma, malignant (C44._)
8403	3	Spiradenoma, eccrine, malignant (C44._)
8404	0	Hidrocystoma (C44._)
8404	0	Eccrine cystadenoma (C44._)
8404	0	Cystadenoma, eccrine (C44._)
8405	0	Papillary hidradenoma
8405	0	Hidradenoma, papillary
8405	0	Hidradenoma papilliferum
8405	0	Papilliferum, hidradenoma
8406	0	Papillary syringadenoma (C44._)
8406	0	Papillary syringocystadenoma (C44._)
8406	0	Syringadenoma, papillary (C44._)
8406	0	Syringocystadenoma, papillary (C44._)
8406	0	Syringocystadenoma papilliferum
8406	0	Papilliferum, syringocystadenoma
8407	0	Syringoma, NOS (C44._)
8407	3	Sclerosing sweat duct carcinoma (C44._)
8407	3	Syringomatous carcinoma (C44._)
8407	3	Microcystic adnexal carcinoma (C44._)
8407	3	Adnexal microcystic, carcinoma (C44._)
8407	3	Adnexal carcinoma, microcystic (C44._)

8407	3	Carcinoma, adnexal, microcystic (C44._)
8407	3	Carcinoma, microcystic adnexal (C44._)
8407	3	Carcinoma, sclerosing sweat duct (C44._)
8407	3	Carcinoma, sweat duct, sclerosing (C44._)
8407	3	Carcinoma, syringomatous (C44._)
8407	3	Duct carcinoma, sclerosing sweat (C44._)
8407	3	Duct, sweat, carcinoma, sclerosing (C44._)
8407	3	Sweat duct carcinoma, sclerosing (C44._)
8408	0	Eccrine papillary adenoma (C44._)
8408	0	Adenoma, eccrine papillary (C44._)
8408	0	Adenoma, papillary, eccrine (C44._)
8408	0	Papillary adenoma, eccrine (C44._)
8408	0	Eccrine adenoma, papillary (C44._)
8408	1	Aggressive digital papillary adenoma (C44._)
8408	1	Adenoma, aggressive digital papillary (C44._)
8408	1	Adenoma, digital papillary, aggressive (C44._)
8408	1	Adenoma, papillary, aggressive digital (C44._)
8408	1	Aggressive papillary adenoma, digital (C44._)
8408	1	Digital papillary adenoma, aggressive (C44._)
8408	1	Papillary adenoma, aggressive digital (C44._)
8408	3	Eccrine papillary adenocarcinoma (C44._)
8408	3	Digital papillary adenocarcinoma (C44._)
8408	3	Adenocarcinoma, digital papillary (C44._)
8408	3	Adenocarcinoma, eccrine papillary (C44._)
8408	3	Adenocarcinoma, papillary digital (C44._)

8408	3	Adenocarcinoma, papillary eccrine (C44._)
8408	3	Eccrine adenocarcinoma, papillary (C44._)
8408	3	Papillary adenocarcinoma, digital (C44._)
8408	3	Papillary adenocarcinoma, eccrine (C44._)
8409	0	Eccrine poroma (C44._)
8409	0	Poroma, eccrine (C44._)
8409	3	Eccrine poroma, malignant (C44._)
8409	3	Porocarcinoma (C44._)
8409	3	Poroma, eccrine, malignant (C44._)
8410	0	Sebaceous adenoma (C44._)
8410	0	Adenoma, sebaceous (C44._)
8410	0	Sebaceous epithelioma (C44._)
8410	0	Epithelioma, sebaceous (C44._)
8410	3	Sebaceous adenocarcinoma (C44._)
8410	3	Carcinoma, sebaceous (C44._)
8410	3	Adenocarcinoma, sebaceous (C44._)
8410	3	Sebaceous carcinoma (C44._)
8413	3	Eccrine adenocarcinoma (C44._)
8413	3	Adenocarcinoma, eccrine, NOS (C44._)
8420	0	Ceruminous adenoma (C44.2)
8420	0	Adenoma, ceruminous (C44.2)
8420	3	Ceruminous adenocarcinoma (C44.2)
8420	3	Carcinoma, ceruminous (C44.2)
8420	3	Ceruminous carcinoma (C44.2)
8420	3	Adenocarcinoma, ceruminous (C44.2)

8430	1	Mucoepidermoid tumor [obs]
8430	1	Tumor, mucoepidermoid [obs]
8430	3	Mucoepidermoid carcinoma
8430	3	Carcinoma, mucoepidermoid
8440	0	Cystadenoma, NOS
8440	0	Cystoma, NOS
8440	3	Cystadenocarcinoma, NOS
8441	0	Serous cystadenoma, NOS
8441	0	Cystadenoma, serous, NOS
8441	0	Cystoma, serous
8441	0	Serous cystoma
8441	0	Serous microcystic adenoma
8441	0	Adenoma, microcystic, serous
8441	0	Adenoma, serous microcystic
8441	0	Microcystic adenoma, serous
8441	0	Serous adenoma, microcystic
8441	3	Serous cystadenocarcinoma, NOS (C56.9)
8441	3	Cystadenocarcinoma, serous, NOS (C56.9)
8441	3	Adenocarcinoma, serous, NOS
8441	3	Serous adenocarcinoma, NOS
8441	3	Serous carcinoma, NOS
8441	3	Carcinoma, serous, NOS
8442	1	Serous cystadenoma, borderline malignancy (C56.9)
8442	1	Tumor, serous, NOS, of low malignant potential (C56.9)
8442	1	Cystadenoma, serous, borderline malignancy (C56.9)

8442	1	Serous tumor, NOS, of low malignant potential (C56.9)
8442	1	Atypical proliferating serous tumor (C56.9)
8442	1	Low malignant potential, serous tumor, NOS (C56.9)
8442	1	Proliferating serous tumor, atypical (C56.9)
8442	1	Serous tumor, atypical proliferating (C56.9)
8442	1	Tumor, serous, atypical proliferating (C56.9)
8443	0	Clear cell cystadenoma (C56.9)
8443	0	Cystadenoma, clear cell (C56.9)
8444	1	Clear cell cystic tumor of borderline malignancy (C56.9)
8444	1	Atypical proliferating clear cell tumor (C56.9)
8444	1	Clear cell tumor, atypical proliferating (C56.9)
8444	1	Cystic clear cell, tumor of borderline malignancy (C56.9)
8444	1	Cystic tumor, clear cell, borderline malignancy (C56.9)
8444	1	Proliferating clear cell tumor, atypical (C56.9)
8444	1	Tumor, clear cell, atypical proliferating (C56.9)
8444	1	Tumor, clear cell, cystic, borderline malignancy (C56.9)
8444	1	Tumor, cystic, clear cell, borderline malignancy (C56.9)
8450	0	Papillary cystadenoma, NOS (C56.9)
8450	0	Cystadenoma, papillary, NOS (C56.9)
8450	3	Papillary cystadenocarcinoma, NOS (C56.9)
8450	3	Cystadenocarcinoma, papillary, NOS (C56.9)
8450	3	Adenocarcinoma, papillocystic
8450	3	Papillocystic adenocarcinoma
8451	1	Papillary cystadenoma, borderline malignancy (C56.9)
8451	1	Cystadenoma, papillary, borderline malignancy (C56.9)

8452	1	Solid pseudopapillary tumor (C25._)
8452	1	Papillary cystic tumor (C25._)
8452	1	Tumor, papillary cystic (C25._)
8452	1	Cystic tumor, papillary (C25._)
8452	1	Solid and papillary epithelial neoplasm (C25._)
8452	1	Solid and cystic tumor (C25._)
8452	1	Cystic and solid tumor (C25._)
8452	1	Cystic papillary, tumor (C25._)
8452	1	Epithelial neoplasm, solid and papillary (C25._)
8452	1	Neoplasm, papillary and solid epithelial (C25._)
8452	1	Neoplasm, solid and papillary epithelial (C25._)
8452	1	Tumor, cystic and solid (C25._)
8452	1	Tumor, cystic, papillary (C25._)
8452	1	Tumor, pseudopapillary, solid (C25._)
8452	1	Tumor, solid and cystic (C25._)
8452	1	Papillary epithelial neoplasm, solid and (C25._)
8452	3	Solid pseudopapillary carcinoma (C25._)
8452	3	Carcinoma, solid, pseudopapillary (C25._)
8453	0	Intraductal papillary-mucinous adenoma (C25._)
8453	0	Adenoma, intraductal papillary-mucinous (C25._)
8453	0	Adenoma, mucinous-papillary, intraductal (C25._)
8453	0	Adenoma, papillary-mucinous, intraductal (C25._)
8453	0	Mucinous-papillary adenoma, intraductal (C25._)
8453	1	Intraductal papillary-mucinous tumor with moderate dysplasia (C25._)
8453	1	Dysplasia, intraductal papillary-mucinous tumor with moderate (C25._)

8453	1	Moderate dysplasia, intraductal papillary-mucinous tumor with (C25._)
8453	1	Mucinous-papillary tumor, intraductal, with moderate dysplasia (C25._)
8453	1	Tumor, intraductal papillary-mucinous, with moderate dysplasia (C25._)
8453	1	Tumor, mucinous-papillary, intraductal, withmoderate dysplasia (C25._)
8453	1	Tumor, papillary-mucinous, intraductal, with moderate dysplasia (C25._)
8453	1	Papillary-mucinous tumor, intraductal, with moderate dysplasia (C25._)
8453	2	Intraductal papillary-mucinous carcinoma, non-invasive (C25._)
8453	2	Carcinoma, papillary-mucinous, intraductal, non-invasive (C25._)
8453	2	Mucinous-papillary carcinoma, intraductal, non-invasive (C25._)
8453	2	Non-invasive carcinoma, intraductal papillary-mucinous (C25._)
8453	2	Papillary-mucinous carcinoma, intraductal, non-invasive (C25._)
8453	3	Intraductal papillary-mucinous carcinoma, invasive (C25._)
8453	3	Invasive intraductal papillary-mucinous carcinoma (C25._)
8453	3	Mucinous-papillary carcinoma, intraductal, invasive (C25._)
8453	3	Papillary-mucinous carcinoma, intraductal, invasive (C25._)
8454	0	Cystic tumor of atrio-ventricular node (C38.0)
8454	0	Tumor, cystic, atrio-ventricular node (C38.0)
8460	0	Papillary serous cystadenoma, NOS (C56.9)
8460	0	Cystadenoma, papillary serous, NOS (C56.9)
8460	0	Papillary cystadenoma, serous, NOS (C56.9)
8460	0	Serous cystadenoma, papillary, NOS (C56.9)
8460	3	Papillary serous cystadenocarcinoma (C56.9)
8460	3	Cystadenocarcinoma, papillary serous (C56.9)
8460	3	Papillary serous adenocarcinoma (C56.9)
8460	3	Adenocarcinoma, papillary, serous (C56.9)

8460	3	Adenocarcinoma, serous, papillary (C56.9)
8460	3	Papillary adenocarcinoma, serous (C56.9)
8460	3	Papillary cystadenocarcinoma, serous (C56.9)
8460	3	Serous adenocarcinoma, papillary (C56.9)
8460	3	Serous cystadenocarcinoma, papillary (C56.9)
8460	3	Micropapillary serous carcinoma (C56.9)
8460	3	Carcinoma, micropapillary serous (C56.9)
8460	3	Serous carcinoma, micropapillary (C56.9)
8461	0	Serous surface papilloma (C56.9)
8461	0	Papilloma, serous surface (C56.9)
8461	0	Surface papilloma, serous (C56.9)
8461	3	Serous surface papillary carcinoma (C56.9)
8461	3	Carcinoma, papillary, serous surface (C56.9)
8461	3	Carcinoma, serous surface papillary (C56.9)
8461	3	Papillary carcinoma, serous surface (C56.9)
8461	3	Serous surface carcinoma, papillary (C56.9)
8461	3	Primary serous papillary carcinoma of peritoneum (C48.1)
8461	3	Carcinoma, papillary serous, primary, peritoneum (C48.1)
8461	3	Carcinoma, primary serous papillary, peritoneum (C48.1)
8461	3	Carcinoma, serous papillary, primary, peritoneum (C48.1)
8461	3	Serous papillary carcinoma, primary, peritoneum (C48.1)
8461	3	Surface papillary carcinoma, serous (C56.9)
8461	3	Papillary carcinoma, primary serous, peritoneum (C48.1)
8461	3	Papillary primary serous carcinoma, peritoneum (C48.1)
8462	1	Serous papillary cystic tumor of borderline malignancy (C56.9)

8462	1	Papillary serous cystadenoma, borderline malignancy (C56.9)
8462	1	Tumor, papillary serous, of low malignant potential (C56.9)
8462	1	Tumor, serous, papillary, of low malignant potential (C56.9)
8462	1	Cystadenoma, papillary serous, borderline malignancy (C56.9)
8462	1	Papillary serous tumor of low malignant potential (C56.9)
8462	1	Papillary cystadenoma, serous, borderline malignancy (C56.9)
8462	1	Serous tumor, papillary, of low malignant potential (C56.9)
8462	1	Serous cystadenoma, papillary, borderline malignancy (C56.9)
8462	1	Atypical proliferative papillary serous tumor (C56.9)
8462	1	Cystic serous papillary, tumor, borderline malignancy (C56.9)
8462	1	Cystic tumor, serous papillary, borderline malignancy (C56.9)
8462	1	Low malignant potential, papillary serous tumor (C56.9)
8462	1	Proliferative papillary serous tumor, atypical (C56.9)
8462	1	Serous tumor, papillary, atypical proliferating (C56.9)
8462	1	Tumor, papillary, serous, atypical proliferative (C56.9)
8462	1	Tumor, serous, papillary cystic, of borderline malignancy (C56.9)
8462	1	Papillary cystic tumor, serous, borderline malignancy (C56.9)
8462	1	Papillary serous tumor, atypical proliferative (C56.9)
8463	1	Serous surface papillary tumor of borderline malignancy (C56.9)
8463	1	Surface papillary tumor, serous surface, borderline malignancy (C56.9)
8463	1	Tumor, serous surface papillary, of borderline malignancy (C56.9)
8470	0	Mucinous cystadenoma, NOS (C56.9)
8470	0	Cystadenoma, mucinous, NOS (C56.9)
8470	0	Cystadenoma, pseudomucinous, NOS (C56.9)
8470	0	Cystoma, mucinous (C56.9)

8470	0	Mucinous cystoma (C56.9)
8470	0	Pseudomucinous cystadenoma, NOS (C56.9)
8470	1	Mucinous cystic tumor with moderate dysplasia (C25._)
8470	1	Cystic mucinous, tumor with moderate dysplasia (C25._)
8470	1	Dysplasia, mucinous cystic tumor with moderate (C25._)
8470	1	Cystic tumor, mucinous, with moderate dyplasia (C25._)
8470	1	Moderate dysplasia, mucinous cystic tumor with (C25._)
8470	1	Mucinous tumor, cystic, with moderate dysplasia (C25._)
8470	1	Tumor, cystic, mucinous, with moderate dysplasia (C25._)
8470	1	Tumor, mucinous, cystic, with moderate dysplasia (C25._)
8470	2	Mucinous cystadenocarcinoma, non-invasive (C25._)
8470	2	Cystadenocarcinoma, mucinous, non-invasive (C25._)
8470	2	Non-invasive cystadenocarcinoma, mucinous (C25._)
8470	3	Mucinous cystadenocarcinoma, NOS (C56.9)
8470	3	Cystadenocarcinoma, mucinous, NOS (C56.9)
8470	3	Cystadenocarcinoma, pseudomucinous, NOS (C56.9)
8470	3	Adenocarcinoma, pseudomucinous (C56.9)
8470	3	Pseudomucinous adenocarcinoma (C56.9)
8470	3	Pseudomucinous cystadenocarcinoma, NOS (C56.9)
8471	0	Papillary mucinous cystadenoma, NOS (C56.9)
8471	0	Cystadenoma, papillary mucinous, NOS (C56.9)
8471	0	Cystadenoma, papillary pseudomucinous, NOS (C56.9)
8471	0	Papillary pseudomucinous cystadenoma, NOS (C56.9)
8471	0	Mucinous cystadenoma, papillary, NOS (C56.9)
8471	0	Papillary cystadenoma, mucinous, NOS (C56.9)

8471	0	Papillary cystadenoma, pseudomucinous, NOS (C56.9)
8471	0	Pseudomucinous cystadenoma, papillary, NOS (C56.9)
8471	3	Papillary mucinous cystadenocarcinoma (C56.9)
8471	3	Cystadenocarcinoma, papillary mucinous (C56.9)
8471	3	Cystadenocarcinoma, papillary pseudomucinous (C56.9)
8471	3	Papillary pseudomucinous cystadenocarcinoma (C56.9)
8471	3	Mucinous cystadenocarcinoma, papillary (C56.9)
8471	3	Papillary cystadenocarcinoma, mucinous (C56.9)
8471	3	Papillary cystadenocarcinoma, pseudomucinous (C56.9)
8471	3	Pseudomucinous cystadenocarcinoma, papillary (C56.9)
8472	1	Mucinous cystic tumor of borderline malignancy(C56.9)
8472	1	Mucinous cystadenoma, borderline malignancy (C56.9)
8472	1	Tumor, mucinous, NOS, of low malignant potential (C56.9)
8472	1	Cystadenoma, mucinous, borderline malignancy (C56.9)
8472	1	Cystadenoma, pseudomucinous, borderline malignancy(C56.9)
8472	1	Mucinous tumor, NOS, of low malignant potential(C56.9)
8472	1	Pseudomucinous cystadenoma, borderline malignancy (C56.9)
8472	1	Atypical proliferative mucinous tumor (C56.9)
8472	1	Cystic mucinous, tumor of borderline malignancy(C56.9)
8472	1	Cystic tumor, mucinous, borderline malignancy(C56.9)
8472	1	Low malignant potential, mucinous tumor, NOS (C56.9)
8472	1	Mucinous tumor, atypical proliferative (C56.9)
8472	1	Mucinous tumor, cystic, of borderline malignancy(C56.9)
8472	1	Proliferative mucinous tumor, atypical (C56.9)
8472	1	Tumor, mucinous, atypical proliferative (C56.9)

8472	1	Tumor, mucinous, cystic, of borderline malignancy (C56.9)
8473	1	Papillary mucinous cystadenoma, borderline malignancy (C56.9)
8473	1	Tumor, mucinous, papillary, of low malignantpotential (C56.9)
8473	1	Tumor, papillary mucinous, of low malignantpotential (C56.9)
8473	1	Cystadenoma, papillary mucinous, borderlinemalignancy (C56.9)
8473	1	Cystadenoma, papillary pseudomucinous, borderlinemalignancy (C56.9)
8473	1	Papillary pseudomucinous cystadenoma, borderlinemalignancy (C56.9)
8473	1	Mucinous tumor, papillary, of low malignantpotential (C56.9)
8473	1	Mucinous cystadenoma, papillary, borderlinemalignancy (C56.9)
8473	1	Papillary mucinous tumor of low malignant potential (C56.9)
8473	1	Papillary cystadenoma, mucinous, borderlinemalignancy (C56.9)
8473	1	Papillary cystadenoma, pseudomucinous, borderlinemalignancy (C56.9)
8473	1	Pseudomucinous cystadenoma, papillary, borderlinemalignancy (C56.9)
8473	1	Low malignant potential, papillary mucinous tumor (C56.9)
8480	0	Mucinous adenoma
8480	0	Adenoma, mucinous
8480	3	Mucinous adenocarcinoma
8480	3	Carcinoma, colloid
8480	3	Carcinoma, gelatinous [obs]
8480	3	Carcinoma, mucinous
8480	3	Carcinoma, mucoid
8480	3	Carcinoma, mucous
8480	3	Colloid adenocarcinoma
8480	3	Colloid carcinoma
8480	3	Adenocarcinoma, colloid

8480	3	Adenocarcinoma, gelatinous [obs]
8480	3	Adenocarcinoma, mucinous, NOS
8480	3	Adenocarcinoma, mucoid
8480	3	Adenocarcinoma, mucous
8480	3	Gelatinous adenocarcinoma [obs]
8480	3	Gelatinous carcinoma [obs]
8480	3	Mucinous carcinoma
8480	3	Mucoid adenocarcinoma
8480	3	Mucoid carcinoma
8480	3	Mucous adenocarcinoma
8480	3	Mucous carcinoma
8480	3	Pseudomyxoma peritonei with unknown primary site (C80.9)
8480	3	Unknown primary site, pseudomyxoma peritonei with (C80.9)
8480	3	Peritonei, pseudomyxoma, with unknown primary site (C80.9)
8480	6	Pseudomyxoma peritonei
8480	6	Peritonei, pseudomyxoma
8481	3	Mucin-producing adenocarcinoma
8481	3	Carcinoma, mucin-producing
8481	3	Carcinoma, mucin-secreting
8481	3	Adenocarcinoma, mucin-producing
8481	3	Adenocarcinoma, mucin-secreting
8481	3	Mucin-producing carcinoma
8481	3	Mucin-secreting adenocarcinoma
8481	3	Mucin-secreting carcinoma
8482	3	Mucinous adenocarcinoma, endocervical type

8482	3	Adenocarcinoma, mucinous, endocervical type
8482	3	Endocervical type mucinous adenocarcinoma
8490	3	Signet ring cell carcinoma
8490	3	Carcinoma, signet ring cell
8490	3	Adenocarcinoma, signet ring cell
8490	3	Signet ring cell adenocarcinoma
8490	6	Metastatic signet ring cell carcinoma
8490	6	Carcinoma, metastatic, signet ring cell
8490	6	Carcinoma, signet ring cell, metastatic
8490	6	Tumor, Krukenberg
8490	6	Krukenberg tumor
8490	6	Signet ring cell carcinoma, metastatic
8500	2	Intraductal carcinoma, noninfiltrating, NOS
8500	2	Carcinoma, intraductal, NOS
8500	2	Carcinoma, intraductal, noninfiltrating, NOS
8500	2	Carcinoma, noninfiltrating, intraductal, NOS
8500	2	Intraductal adenocarcinoma, noninfiltrating, NOS
8500	2	Intraductal carcinoma, NOS (C50._)
8500	2	Adenocarcinoma, intraductal, noninfiltrating, NOS
8500	2	Adenocarcinoma, noninfiltrating, intraductal, NOS
8500	2	Noninfiltrating adenocarcinoma, intraductal, NOS
8500	2	Noninfiltrating carcinoma, intraductal, NOS
8500	2	Ductal carcinoma in situ, NOS (C50._)
8500	2	DCIS, NOS (C50._)
8500	2	Ductal intraepithelial neoplasia 3 (C50._)

8500	2	DIN 3 (C50._)
8500	2	Carcinoma, ductal in situ, NOS (C50._)
8500	2	In situ ductal carcinoma, NOS (C50._)
8500	2	Intraepithelial neoplasia 3, ductal (C50._)
8500	2	Neoplasia, ductal intraepithelial 3 (C50._)
8500	3	Infiltrating duct carcinoma, NOS (C50._)
8500	3	Carcinoma, duct, NOS
8500	3	Carcinoma, duct, infiltrating, NOS (C50._)
8500	3	Carcinoma, duct cell
8500	3	Carcinoma, ductal, NOS
8500	3	Carcinoma, infiltrating duct, NOS (C50._)
8500	3	Adenocarcinoma, duct, NOS
8500	3	Adenocarcinoma, duct, infiltrating (C50._)
8500	3	Adenocarcinoma, infiltrating duct (C50._)
8500	3	Duct adenocarcinoma, NOS
8500	3	Duct adenocarcinoma, infiltrating (C50._)
8500	3	Duct carcinoma, NOS
8500	3	Duct carcinoma, infiltrating, NOS (C50._)
8500	3	Duct cell carcinoma
8500	3	Ductal carcinoma, NOS
8500	3	Infiltrating duct adenocarcinoma (C50._)
8500	3	Duct, infiltrating, adenocarcinoma (C50._)
8500	3	Duct, infiltrating, carcinoma, NOS (C50._)
8501	2	Comedocarcinoma, noninfiltrating (C50._)
8501	2	Noninfiltrating comedocarcinoma (C50,_)

8501	2	Ductal carcinoma in situ, comedo type (C50._)
8501	2	DCIS, comedo type (C50._)
8501	2	Carcinoma, ductal in situ, comedo type (C50._)
8501	2	Comedo type DCIS (C50._)
8501	2	Comedo type ductal carcinoma in situ (C50._)
8501	2	In situ ductal carcinoma, comedo type (C50._)
8501	3	Comedocarcinoma, NOS (C50._)
8502	3	Secretory carcinoma of breast (C50._)
8502	3	Juvenile carcinoma of breast (C50._)
8502	3	Carcinoma, juvenile, breast (C50._)
8502	3	Carcinoma, secretory, breast (C50._)
8502	3	Juvenile carcinoma, breast (C50._)
8503	0	Intraductal papilloma
8503	0	Adenoma, duct, NOS
8503	0	Duct adenoma, NOS
8503	0	Ductal papilloma
8503	0	Papilloma, ductal
8503	0	Papilloma, intraductal
8503	2	Noninfiltrating intraductal papillary adenocarcinoma (C50._)
8503	2	Carcinoma, intraductal, noninfiltrating, papillary (C50._)
8503	2	Carcinoma, intraductal, papillary, NOS (C50._)
8503	2	Carcinoma, noninfiltrating, intraductal papillary (C50._)
8503	2	Carcinoma, papillary, intraductal, noninfiltrating (C50._)
8503	2	Intraductal adenocarcinoma, noninfiltrating papillary (C50._)
8503	2	Intraductal adenocarcinoma, papillary, NOS (C50._)

8503	2	Intraductal adenocarcinoma, papillary, noninfiltrating (C50._)
8503	2	Intraductal carcinoma, noninfiltrating, papillary (C50._)
8503	2	Intraductal carcinoma, papillary, NOS (C50._)
8503	2	Intraductal carcinoma, papillary, noninfiltrating (C50._)
8503	2	Intraductal papillary adenocarcinoma, NOS (C50._)
8503	2	Intraductal papillary adenocarcinoma, noninfiltrating (C50._)
8503	2	Intraductal papillary carcinoma, NOS (C50._)
8503	2	Adenocarcinoma, intraductal, noninfiltrating, papillary (C50._)
8503	2	Adenocarcinoma, intraductal papillary, NOS (C50._)
8503	2	Adenocarcinoma, noninfiltrating, intraductal, papillary (C50._)
8503	2	Adenocarcinoma, papillary, intraductal, NOS (C50._)
8503	2	Adenocarcinoma, papillary, intraductal, noninfiltrating (C50._)
8503	2	Intraductal papillary carcinoma, noninfiltrating (C50._)
8503	2	Noninfiltrating adenocarcinoma, intraductal, papillary (C50._)
8503	2	Noninfiltrating carcinoma, intraductal, papillary (C50._)
8503	2	Papillary adenocarcinoma, intraductal, NOS (C50._)
8503	2	Papillary adenocarcinoma, noninfiltrating, intraductal (C50._)
8503	2	Papillary carcinoma, intraductal, NOS (C50._)
8503	2	Papillary carcinoma, noninfiltrating, intraductal (C50._)
8503	2	Noninfiltrating intraductal papillary carcinoma (C50._)
8503	2	Ductal carcinoma in situ, papillary (C50._)
8503	2	DCIS, papillary (C50._)
8503	2	Carcinoma, ductal in situ, papillary (C50._)
8503	2	Carcinoma, intraductal, papillary, noninfiltrating (C50._)
8503	2	Carcinoma, papillary intraductal, NOS (C50._)

8503	2	In situ ductal carcinoma, papillary (C50._)
8503	2	Papillary carcinoma in situ, ductal (C50._)
8503	2	Papillary DCIS (C50._)
8503	2	Papillary ductal carcinoma in situ (C50._)
8503	3	Intraductal papillary adenocarcinoma with invasion (C50._)
8503	3	Intraductal adenocarcinoma, papillary, with invasion (C50._)
8503	3	Adenocarcinoma, infiltrating and papillary
8503	3	Adenocarcinoma, intraductal papillary, with invasion (C50._)
8503	3	Adenocarcinoma, papillary and infiltrating
8503	3	Adenocarcinoma, papillary, intraductal, with invasion (C50._)
8503	3	Papillary adenocarcinoma, infiltrating and (C50._)
8503	3	Papillary adenocarcinoma, intraductal with invasion (C50._)
8503	3	Infiltrating and papillary adenocarcinoma
8503	3	Infiltrating papillary adenocarcinoma
8503	3	Adenocarcinoma, papillary, infiltrating
8503	3	Invasion, intraductal papillary adenocarcinoma with (C50._)
8504	0	Intracystic papillary adenoma
8504	0	Intracystic adenoma, papillary
8504	0	Intracystic papilloma
8504	0	Adenoma, intracystic, papillary
8504	0	Adenoma, papillary, intracystic
8504	0	Papillary adenoma, intracystic
8504	0	Papilloma, intracystic
8504	2	Noninfiltrating intracystic carcinoma
8504	2	Carcinoma, intracystic, noninfiltrating

8504	2	Carcinoma, noninfiltrating, intracystic
8504	2	Intracystic carcinoma, noninfiltrating
8504	2	Noninfiltrating carcinoma, intracystic
8504	2	Intracystic noninfiltrating carcinoma
8504	3	Intracystic carcinoma, NOS
8504	3	Carcinoma, intracystic, NOS
8504	3	Intracystic adenocarcinoma, papillary
8504	3	Adenocarcinoma, intracystic papillary
8504	3	Adenocarcinoma, papillary, intracystic
8504	3	Papillary adenocarcinoma, intracystic
8504	3	Intracystic papillary adenocarcinoma
8504	3	Carcinoma, intracystic, papillary
8504	3	Intracystic papillary carcinoma
8504	3	Intracystic carcinoma, papillary
8504	3	Papillary carcinoma, intracystic
8504	3	Carcinoma, papillary, intracystic
8504	3	Papillary intracystic adenocarcinoma
8504	3	Papillary intracystic carcinoma
8505	0	Intraductal papillomatosis, NOS
8505	0	Diffuse intraductal papillomatosis
8505	0	Intraductal papillomatosis, diffuse
8505	0	Papillomatosis, intraductal, NOS
8505	0	Papillomatosis, intraductal, diffuse
8505	0	Diffuse papillomatosis, intraductal
8505	0	Papillomatosis, diffuse intraductal

8506	0	Adenoma of nipple (C50.0)
8506	0	Adenoma, nipple (C50.0)
8506	0	Papillomatosis, subareolar duct (C50.0)
8506	0	Subareolar duct papillomatosis (C50.0)
8506	0	Duct papillomatosis, subareolar (C50.0)
8507	2	Intraductal micropapillary carcinoma (C50._)
8507	2	Ductal carcinoma in situ, micropapillary (C50._)
8507	2	Intraductal carcinoma, clinging (C50._)
8507	2	Carcinoma, clinging, intraductal (C50._)
8507	2	Carcinoma, ductal in situ, micropapillary (C50._)
8507	2	Carcinoma, intraductal, clinging (C50._)
8507	2	Carcinoma, intraductal, micropapillary (C50._)
8507	2	Carcinoma, micropapillary intraductal (C50._)
8507	2	Clinging intraductal carcinoma (C50._)
8507	2	In situ ductal carcinoma, micropapillary (C50._)
8507	2	Intraductal carcinoma, micropapillary (C50._)
8507	2	Micropapillary carcinoma, intraductal (C50._)
8507	2	Micropapillary ductal carcinoma in situ (C50._)
8508	3	Cystic hypersecretory carcinoma (C50._)
8508	3	Carcinoma, cystic hypersecretory (C50._)
8508	3	Hypersecretory carcinoma, cystic (C50._)
8510	3	Medullary carcinoma, NOS
8510	3	Carcinoma, medullary, NOS
8510	3	Adenocarcinoma, medullary
8510	3	Medullary adenocarcinoma

8512	3	Medullary carcinoma with lymphoid stroma
8512	3	Carcinoma, medullary with lymphoid stroma
8512	3	Lymphoid stroma, medullary carcinoma with
8512	3	Stroma, medullary carcinoma with lymphoid
8513	3	Atypical medullary carcinoma (C50._)
8513	3	Carcinoma, medullary, atypical (C50._)
8513	3	Medullary carcinoma, atypical (C50._)
8514	3	Duct carcinoma, desmoplastic type
8514	3	Carcinoma, duct, desmoplastic type
8514	3	Desmoplastic type, duct carcinoma
8520	2	Lobular carcinoma in situ, NOS (C50._)
8520	2	Carcinoma in situ, lobular, NOS (C50._)
8520	2	Carcinoma, lobular, noninfiltating (C50._)
8520	2	Carcinoma, noninfiltrating, lobular (C50._)
8520	2	In situ carcinoma, lobular, NOS (C50._)
8520	2	Lobular carcinoma, noninfiltrating (C50._)
8520	2	Noninfiltrating carcinoma, lobular (C50,_)
8520	2	LCIS, NOS (C50._)
8520	2	Carcinoma, lobular in situ, NOS (C50._)
8520	2	In situ lobular carcinoma, NOS (C50._)
8520	3	Lobular carcinoma, NOS (C50._)
8520	3	Carcinoma, lobular, NOS (C50._)
8520	3	Carcinoma, lobular, infiltrating (C50._)
8520	3	Infiltrating lobular carcinoma, NOS (C50._)
8520	3	Adenocarcinoma, lobular (C50._)

8520	3	Lobular adenocarcinoma (C50._)
8520	3	Lobular carcinoma, infiltrating, NOS (C50._)
8520	3	Carcinoma, infiltrating lobular, NOS (C50._)
8521	3	Infiltrating ductular carcinoma (C50._)
8521	3	Carcinoma, ductular, infiltrating (C50._)
8521	3	Carcinoma, infiltrating ductular (C50._)
8521	3	Ductular carcinoma, infiltrating (C50._)
8522	2	Intraductal carcinoma and lobular carcinoma in situ (C50._)
8522	2	Carcinoma in situ, lobular and intraductal (C50._)
8522	2	Carcinoma, intraductal and lobular in situ (C50._)
8522	2	Carcinoma, lobular, in situ, and intraductal (C50._)
8522	2	In situ carcinoma, lobular, and iintraductal carcinoma (C50._)
8522	2	Lobular carcinoma in situ and intraductal carcinoma (C50._)
8522	3	Infiltrating duct and lobular carcinoma (C50._)
8522	3	Carcinoma, duct, infiltrating and lobular carcinoma (C50._)
8522	3	Carcinoma, duct, infiltrating and lobular carcinoma insitu (C50._)
8522	3	Carcinoma, ductal and lobular (C50._)
8522	3	Carcinoma in situ, lobular and infiltrating duct (C50._)
8522	3	Carcinoma, infiltrating duct and lobular (C50._)
8522	3	Carcinoma, infiltrating duct and lobular in situ (C50._)
8522	3	Carcinoma, lobular and ductal (C50._)
8522	3	Carcinoma, lobular and infiltrating duct (C50._)
8522	3	Carcinoma, lobular and intraductal (C50._)
8522	3	Carcinoma, lobular, in situ, and infiltrating duct (C50._)
8522	3	Infiltrating duct and lobular carcinoma in situ(C50._)

8522	3	Intraductal carcinoma and lobular carcinoma (C50._)
8522	3	Duct carcinoma, infiltrating and lobular carcinoma (C50._)
8522	3	Duct carcinoma, infiltrating and lobular carcinoma insitu (C50._)
8522	3	Ductal carcinoma and lobular carcinoma (C50._)
8522	3	In situ carcinoma, lobular, and infiltrating duct carcinoma (C50._)
8522	3	Lobular carcinoma and infiltrating duct carcinoma (C50._)
8522	3	Lobular carcinoma and ductal carcinoma (C50._)
8522	3	Lobular carcinoma and intraductal carcinoma (C50._)
8522	3	Lobular carcinoma in situ and infiltrating duct carcinoma (C50._)
8522	3	Lobular and ductal carcinoma (C50._)
8522	3	Intraductal and lobular carcinoma (C50._)
8522	3	Infiltrating lobular carcinoma and ductal carcinoma insitu (C50._)
8522	3	Carcinoma, ductal in situ and infiltrating lobular (C50._)
8522	3	Carcinoma in situ, ductal and infiltrating lobular (C50._)
8522	3	Carcinoma, infiltrating lobular and ductal carcinoma insitu (C50._)
8522	3	Carcinoma, intraductal and lobular (C50._)
8522	3	Duct, infiltrating, and lobular carcinoma (C50._)
8522	3	Duct, infiltrating, and lobular carcinoma in situ(C50._)
8522	3	Ductal carcinoma in situ and infiltrating lobular carcinoma (C50._)
8522	3	Ductal, lobular and ductal carcinoma (C50._)
8522	3	In situ ductal carcinoma and infiltrating lobular carcinoma (C50._)
8522	3	In situ lobular carcinoma and intraductal carcinoma (C50._)
8522	3	Lobular and infiltrating duct carcinoma (C50._)
8522	3	Lobular and intraductal carcinoma (C50._)
8522	3	Lobular carcinoma, infiltrating, and ductal carcinomain situ (C50._)

8523	3	Infiltrating duct mixed with other types of carcinoma (C50._)
8523	3	Infiltrating duct and cribriform carcinoma (C50._)
8523	3	Infiltrating duct and mucinous carcinoma (C50._)
8523	3	Infiltrating duct and tubular carcinoma (C50._)
8523	3	Infiltrating duct and colloid carcinoma (C50._)
8523	3	Carcinoma, colloid and infiltrating duct (C50._)
8523	3	Carcinoma, cribriform and infiltrating duct (C50._)
8523	3	Carcinoma, duct, infiltrating and colloid (C50._)
8523	3	Carcinoma, duct, infiltrating and cribriform (C50._)
8523	3	Carcinoma, duct, infiltrating and mucinous (C50._)
8523	3	Carcinoma, duct, infiltrating and tubular (C50._)
8523	3	Carcinoma, infiltrating duct and colloid (C50._)
8523	3	Carcinoma, infiltrating duct and cribriform (C50._)
8523	3	Carcinoma, infiltrating duct and mucinous (C50._)
8523	3	Carcinoma, infiltrating duct and tubular (C50._)
8523	3	Carcinoma, infiltrating duct mixed with other types (C50._)
8523	3	Carcinoma, mixed with other types, infiltrating duct (C50._)
8523	3	Carcinoma, mucinous and infiltrating duct (C50._)
8523	3	Carcinoma, other types, infiltrating duct mixed with (C50._)
8523	3	Carcinoma, tubular and infiltrating duct (C50._)
8523	3	Colloid carcinoma and infiltrating duct (C50._)
8523	3	Cribriform (type), carcinoma, infiltrating duct and (C50._)
8523	3	Duct, infiltrating, and colloid carcinoma (C50._)
8523	3	Duct, infiltrating, and cribriform carcinoma (C50._)
8523	3	Duct, infiltrating, and mucinous carcinoma (C50._)

8523	3	Duct, infiltrating, and tubular carcinoma (C50._)
8523	3	Duct, infiltrating, mixed with other types of carcinoma (C50._)
8523	3	Mixed duct, infiltrating, with other types of carcinoma (C50._)
8523	3	Mixed infiltrating duct with other types of carcinoma (C50._)
8523	3	Mixed duct, infiltrating, with other types of carcinoma (C50._)
8523	3	Mucinous and infiltrating duct carcinoma (C50._)
8523	3	Tubular and infiltrating duct carcinoma (C50._)
8523	3	Other types of carcinoma, infiltrating duct mixed with (C50._)
8524	3	Infiltrating lobular mixed with other types of carcinoma (C50._)
8524	3	Carcinoma, infiltrating lobular mixed with other types (C50._)
8524	3	Carcinoma, mixed with other types, infiltrating lobular (C50._)
8524	3	Carcinoma, other types, infiltrating lobular mixed with (C50._)
8524	3	Lobular infiltrating, mixed with other types of carcinoma (C50._)
8524	3	Mixed infiltrating lobular with other types of carcinoma (C50._)
8524	3	Mixed lobular, infiltrating, with other types of carcinoma (C50._)
8524	3	Other types of carcinoma, infiltrating lobular mixed with (C50._)
8525	3	Polymorphous low grade adenocarcinoma
8525	3	Terminal duct adenocarcinoma
8525	3	Adenocarcinoma, low grade, polymorphous
8525	3	Adenocarcinoma, polymorphous low grade
8525	3	Adenocarcinoma, terminal duct
8525	3	Duct, terminal, adenocarcinoma
8525	3	Low grade adenocarcinoma, polymorphous
8530	3	Inflammatory carcinoma (C50._)
8530	3	Carcinoma, inflammatory (C50._)

8530	3	Inflammatory adenocarcinoma (C50._)
8530	3	Adenocarcinoma, inflammatory (C50._)
8540	3	Paget disease, mammary (C50._)
8540	3	Paget disease, breast (C50._)
8540	3	Paget disease of breast (C50._)
8540	3	Mammary Paget disease (C50._)
8541	3	Paget disease and infiltrating duct carcinoma of breast (C50._)
8541	3	Carcinoma, duct, infiltrating and Paget disease, breast (C50._)
8541	3	Carcinoma, infiltrating duct and Paget disease, breast (C50._)
8541	3	Infiltrating duct carcinoma and Paget disease, breast (C50._)
8541	3	Duct carcinoma, infiltrating and Paget disease, breast (C50._)
8541	3	Duct, infiltrating carcinoma, and Paget disease, breast (C50._)
8542	3	Paget disease, extramammary (except Paget disease of bone)
8542	3	Extramammary Paget disease (except Paget disease of bone)
8543	3	Paget disease and intraductal carcinoma of breast (C50._)
8543	3	Carcinoma, intraductal and Paget disease, breast (C50._)
8543	3	Intraductal carcinoma and Paget disease, breast (C50._)
8550	0	Acinar cell adenoma
8550	0	Acinar adenoma
8550	0	Acinic cell adenoma
8550	0	Adenoma, acinar
8550	0	Adenoma, acinar cell
8550	0	Adenoma, acinic cell
8550	1	Acinar cell tumor [obs]
8550	1	Tumor, acinar cell [obs]

8550	1	Tumor, acinic cell [obs]
8550	1	Acinic cell tumor [obs]
8550	3	Acinar cell carcinoma
8550	3	Carcinoma, acinar
8550	3	Carcinoma, acinar cell
8550	3	Adenocarcinoma, acinar
8550	3	Adenocarcinoma, acinic cell
8550	3	Acinar adenocarcinoma
8550	3	Acinar carcinoma
8550	3	Acinic cell adenocarcinoma
8551	3	Acinar cell cystadenocarcinoma
8551	3	Cystadenocarcinoma, acinar cell
8560	0	Mixed squamous cell and glandular papilloma
8560	0	Glandular papilloma, squamous cell and, mixed
8560	0	Mixed glandular and squamous cell papilloma
8560	0	Squamous cell papilloma and glandular papilloma, mixed
8560	0	Papilloma, squamous cell and glandular, mixed
8560	0	Papilloma, mixed squamous cell and glandular
8560	3	Adenosquamous carcinoma
8560	3	Carcinoma, adenosquamous
8560	3	Carcinoma, epidermoid and adenocarcinoma, mixed
8560	3	Carcinoma, squamous cell and adenocarcinoma, mixed
8560	3	Epidermoid carcinoma and adenocarcinoma, mixed
8560	3	Adenocarcinoma and epidermoid carcinoma, mixed
8560	3	Adenocarcinoma and squamous cell carcinoma, mixed

8560	3	Mixed adenocarcinoma and epidermoid carcinoma
8560	3	Mixed adenocarcinoma and squamous cell carcinoma
8560	3	Mixed epidermoid carcinoma and adenocarcinoma
8560	3	Mixed squamous cell carcinoma and adenocarcinoma
8560	3	Squamous cell carcinoma and adenocarcinoma, mixed
8560	3	Adenocarcinoma, mixed adenocarcinoma and epidermoid carcinoma
8560	3	Adenocarcinoma, mixed adenocarcinoma and squamous cell carcinoma
8560	3	Carcinoma, mixed adenocarcinoma and epidermoid
8560	3	Carcinoma, mixed adenocarcinoma and squamous cell
8560	3	Carcinoma, mixed squamous cell and adenocarcinoma
8561	0	Adenolymphoma (C07._, C08._)
8561	0	Tumor, Warthin (C07._, C08._)
8561	0	Warthin tumor (C07._, C08._)
8561	0	Cystadenoma lymphomatosum, papillary (C07._, C08._)
8561	0	Papillary cystadenoma lymphomatosum (C07._, C08._)
8561	0	Cystadenoma, papillary, lymphomatosum (C07._, C08._)
8561	0	Lymphomatosum, papillary cystadenoma (C07._, C08._)
8562	3	Epithelial-myoepithelial carcinoma
8562	3	Carcinoma, epithelial-myoepithelial
8562	3	Carcinoma, myoepithelial-epithelial
8562	3	Myoepithelial-epithelial carcinoma
8570	3	Adenocarcinoma with squamous metaplasia
8570	3	Adenoacanthoma
8570	3	Metaplasia, squamous, adenocarcinoma with
8570	3	Squamous cell metaplasia, adenocarcinoma with

8571	3	Adenocarcinoma with cartilaginous and osseous metaplasia
8571	3	Adenocarcinoma with cartilaginous metaplasia
8571	3	Adenocarcinoma with osseous metaplasia
8571	3	Cartilaginous and osseous metaplasia, adenocarcinoma with
8571	3	Cartilaginous metaplasia, adenocarcinoma with
8571	3	Metaplasia, cartilaginous, adenocarcinoma with
8571	3	Metaplasia, cartilaginous and osseous, adenocarcinoma with
8571	3	Metaplasia, osseous, adenocarcinoma with
8571	3	Osseous metaplasia, adenocarcinoma with
8571	3	Osseous metaplasia, adenocarcinoma with cartilaginous and
8572	3	Adenocarcinoma with spindle cell metaplasia
8572	3	Metaplasia, spindle cell, adenocarcinoma with
8572	3	Spindle cell metaplasia, adenocarcinoma with
8573	3	Adenocarcinoma with apocrine metaplasia
8573	3	Carcinoma with apocrine metaplasia
8573	3	Apocrine metaplasia, adenocarcinoma with
8573	3	Apocrine metaplasia, carcinoma with
8573	3	Metaplasia, apocrine, adenocarcinoma with
8573	3	Metaplasia, apocrine, carcinoma with
8574	3	Adenocarcinoma with neuroendocrine differentiation
8574	3	Carcinoma with neuroendocrine differentiation
8574	3	Differentiation, adenocarcinoma with neuroendocrine
8574	3	Differentiation, carcinoma with neuroendocrine
8574	3	Neuroendocrine differentiation, adenocarcinoma with
8574	3	Neuroendocrine differentiation, carcinoma with

8575	3	Metaplastic carcinoma, NOS
8575	3	Carcinoma, metaplastic, NOS
8576	3	Hepatoid adenocarcinoma
8576	3	Hepatoid carcinoma
8576	3	Adenocarcinoma, hepatoid
8576	3	Carcinoma, hepatoid
8580	0	Thymoma, benign (C37.9)
8580	1	Thymoma, NOS (C37.9)
8580	3	Thymoma, malignant, NOS (C37.9)
8580	3	Thymoma, NOS, malignant (C37.9)
8581	1	Thymoma, type A, NOS (C37.9)
8581	1	Thymoma, spindle cell, NOS (C37.9)
8581	1	Thymoma, medullary, NOS (C37.9)
8581	1	Medullary thymoma, NOS (C37.9)
8581	1	Spindle cell thymoma, NOS (C37.9)
8581	3	Thymoma, type A, malignant (C37.9)
8581	3	Thymoma, spindle cell, malignant (C37.9)
8581	3	Thymoma, medullary, malignant (C37.9)
8581	3	Medullary thymoma, malignant (C37.9)
8581	3	Spindle cell thymoma, malignant (C37.9)
8582	1	Thymoma, type AB, NOS (C37.9)
8582	1	Thymoma, mixed type, NOS (C37.9)
8582	1	Mixed type, thymoma, NOS (C37.9)
8582	3	Thymoma, type AB, malignant (C37.9)
8582	3	Thymoma, mixed type, malignant (C37.9)

8582	3	Mixed type thymoma, malignant (C37.9)
8583	1	Thymoma, type B1, NOS (C37.9)
8583	1	Thymoma, lymphocyte-rich, NOS (C37.9)
8583	1	Thymoma, lymphocytic, NOS (C37.9)
8583	1	Thymoma, predominantly cortical, NOS (C37.9)
8583	1	Thymoma, organoid, NOS (C37.9)
8583	1	Cortical thymoma, predominantly cortical, NOS (see also adrenal cortical) (C37.9)
8583	1	Lymphocyte-rich thymoma, NOS (C37.9)
8583	1	Lymphocytic thymoma, NOS (C37.9)
8583	1	Predominantly cortical, thymoma, NOS (C37.9)
8583	1	Organoid thymoma, NOS (C37.9)
8583	3	Thymoma, type B1, malignant (C37.9)
8583	3	Thymoma, lymphocyte-rich, malignant (C37.9)
8583	3	Thymoma, lymphocytic, malignant (C37.9)
8583	3	Thymoma, predominantly cortical, malignant (C37.9)
8583	3	Thymoma, organoid, malignant (C37.9)
8583	3	Cortical thymoma, predominantly cortical, malignant (C37.9)
8583	3	Lymphocytic thymoma, malignant (C37.9)
8583	3	Predominantly cortical, thymoma, malignant (C37.9)
8583	3	Organoid thymoma, malignant (C37.9)
8583	3	Lymphocyte-rich thymoma, malignant (C37.9)
8584	1	Thymoma, type B2, NOS (C37.9)
8584	1	Thymoma, cortical, NOS (C37.9)
8584	1	Cortical thymoma, NOS (C37.9)
8584	3	Thymoma, type B2, malignant (C37.9)

8584	3	Thymoma, cortical, malignant (C37.9)
8584	3	Cortical thymoma, malignant (C37.9)
8585	1	Thymoma, type B3, NOS (C37.9)
8585	1	Thymoma, epithelial, NOS (C37.9)
8585	1	Thymoma, atypical, NOS (C37.9)
8585	1	Atypical thymoma, NOS (C37.9)
8585	1	Epithelial thymoma, NOS (C37.9)
8585	3	Thymoma, type B3, malignant (C37.9)
8585	3	Thymoma, epithelial, malignant (C37.9)
8585	3	Thymoma, atypical, malignant (C37.9)
8585	3	Well differentiated thymic carcinoma (C37.9)
8585	3	Atypical thymoma, malignant (C37.9)
8585	3	Carcinoma, thymic, well differentiated (C37.9)
8585	3	Thymic carcinoma, well differentiated (C37.9)
8586	3	Thymic carcinoma, NOS (C37.9)
8586	3	Thymoma, type C (C37.9)
8586	3	Carcinoma, thymic, NOS (C37.9)
8587	0	Ectopic hamartomatous thymoma
8587	0	Hamartomatous thymoma, ectopic
8587	0	Thymoma, extopic hamartomatous
8587	0	Thymoma, hamartomatous, ectopic
8588	3	Spindle epithelial tumor with thymus-like element
8588	3	Spindle epithelial tumor with thymus-like differentiation
8588	3	SETTLE
8588	3	Element, spindle epithelial tumor with thymus-like

8588	3	Epithelial tumor, spindle, with thymus-like differentiation
8588	3	Epithelial tumor, spindle, with thymus-like element
8588	3	Differentiation, spindle epithelial tumor withthymus-like
8588	3	Thymus-like differentiation, spindle epithelial tumor with thymus-like
8588	3	Thymus-like element, spindle epithelial tumor with
8588	3	Tumor, spindle, epithelial, with thymus-like differentiation
8588	3	Tumor, spindle, epithelial, with thymus-like element
8589	3	Carcinoma showing thymus-like element
8589	3	Carcinoma showing thymus-like differentiation
8589	3	CASTLE
8589	3	Carcinoma, showing thymus-like differentiation
8589	3	Differentiation, carcinoma showing thymus-like
8589	3	Thymus-like differentiation, carcinoma showing
8589	3	Thymus-like element, carcinoma showing
8590	1	Sex cord-gonadal stromal tumor, NOS
8590	1	Testicular stromal tumor (C62._)
8590	1	Tumor, gonadal stromal
8590	1	Tumor, ovarian stromal (C56.9)
8590	1	Tumor, sex cord, NOS
8590	1	Tumor, testicular stromal (C62._)
8590	1	Gonadal stromal tumor, NOS
8590	1	Ovarian stromal tumor (C56.9)
8590	1	Sex cord tumor, NOS
8590	1	Stromal tumor, gonadal, NOS
8590	1	Stromal tumor, ovarian (C56.9)

8590	1	Stromal tumor, testicular (C62._)
8590	1	Gonadal stromal tumor and sex cord tumor
8590	1	Sex cord-gonadal stromal tumor, NOS
8590	1	Stromal tumor, sex cord-gonadal
8590	1	Tumor, gonadal stromal-sex cord, NOS
8590	1	Tumor, sex cord-gonadal stromal, NOS
8590	1	Tumor, testicular stromal (C62._)
8591	1	Sex cord-gonadal stromal tumor, incompletely differentiated
8591	1	Gonadal stromal tumor, sex cord, incompletely differentiated
8591	1	Incompletely differentiated sex cord-gonadal stromal tumor
8591	1	Stromal tumor, sex cord-gonadal, incompletely differentiated
8591	1	Tumor, gonadal stromal-sex cord, incompletely differentiated
8591	1	Tumor, sex cord-gonadal stromal, incompletely differentiated
8592	1	Sex cord-gonadal stromal tumor, mixed forms
8592	1	Gonadal stromal tumor, sex cord, mixed forms
8592	1	Mixed sex cord-gonadal stromal tumor, mixed forms
8592	1	Stromal tumor, sex cord-gonadal, mixed forms
8592	1	Tumor, gonadal stromal-sex cord, mixed forms
8592	1	Tumor, sex cord-gonadal stromal, mixed forms
8593	1	Stromal tumor with minor sex cord elements (C56.9)
8593	1	Elements, stromal tumor with minor sex cord (C56.9)
8593	1	Minor sex cord elements, stromal tumor with (C56.9)
8593	1	Sex cord elements, stromal tumor with minor (C56.9)
8593	1	Tumor, stromal, with minor sex cord elements (C56.9)
8600	0	Thecoma, NOS (C56.9)

8600	0	Theca cell tumor (C56.9)
8600	0	Tumor, theca cell (C56.9)
8600	3	Thecoma, malignant (C56.9)
8601	0	Thecoma, luteinized (C56.9)
8601	0	Luteinized thecoma (C56.9)
8602	0	Sclerosing stromal tumor (C56.9)
8602	0	Tumor, sclerosing stromal (C56.9)
8602	0	Tumor, stromal, sclerosing (C56.9)
8602	0	Stromal tumor, sclerosing (C56.9)
8602	0	Sclerosing tumor, stroma. (C56.9)
8610	0	Luteoma, NOS (C56.9)
8610	0	Luteinoma (C56.9)
8620	1	Granulosa cell tumor, adult type (C56.9)
8620	1	Tumor, granulosa cell, NOS (C56.9)
8620	1	Granulosa cell tumor, NOS (C56.9)
8620	1	Adult type, granulosa cell tumor (C56.9)
8620	1	Tumor, granulosa cell, adult type (C56.9)
8620	3	Granulosa cell tumor, malignant (C56.9)
8620	3	Carcinoma, granulosa cell (C56.9)
8620	3	Tumor, granulosa cell, malignant (C56.9)
8620	3	Granulosa cell carcinoma (C56.9)
8620	3	Granulosa cell tumor, sarcomatoid (C56.9)
8620	3	Sarcomatoid granulosa cell tumor (C56.9)
8620	3	Tumor, granulosa cell, sarcomatoid (C56.9)
8621	1	Granulosa cell-theca cell tumor (C56.9)

8621	1	Theca cell-granulosa cell tumor (C56.9)
8621	1	Tumor, granulosa cell-theca cell (C56.9)
8621	1	Tumor, theca cell-granulosa cell (C56.9)
8622	1	Granulosa cell tumor, juvenile (C56.9)
8622	1	Tumor, granulosa cell, juvenile (C56.9)
8622	1	Tumor, juvenile granulosa cell (C56.9)
8622	1	Juvenile granulosa cell tumor (C56.9)
8623	1	Sex cord tumor with annular tubules (C56.9)
8623	1	Tumor, sex cord, with annular tubules (C56.9)
8623	1	Annular tubules, sex cord tumor with (C56.9)
8623	1	Tubules, annular, sex cord tumor with (C56.9)
8630	0	Androblastoma, benign
8630	0	Arrhenoblastoma, benign
8630	1	Androblastoma, NOS
8630	1	Arrhenoblastoma, NOS
8630	3	Androblastoma, malignant
8630	3	Arrhenoblastoma, malignant
8631	0	Sertoli-Leydig cell tumor, well differentiated
8631	0	Leydig-Sertoli cell tumor, well differentiated
8631	0	Tumor, Leydig-Sertoli cell, well differentiated
8631	0	Well differentiated Sertoli-Leydig cell tumor
8631	1	Sertoli-Leydig cell tumor of intermediate differentiation
8631	1	Sertoli-Leydig cell tumor, NOS
8631	1	Differentiation, Sertoli-Leydig cell tumor, intermediate
8631	1	Intermediate differentiation, Sertoli-Leydig cell tumor

8631	1	Leydig-Sertoli cell tumor, NOS
8631	1	Leydig-Sertoli cell tumor, intermediate differentiation
8631	3	Sertoli-Leydig cell tumor, poorly differentiated
8631	3	Sertoli-Leydig cell tumor, sarcomatoid
8631	3	Leydig-Sertoli cell tumor, poorly differentiated
8631	3	Leydig-Sertoli cell tumor, sarcomatoid
8631	3	Poorly differentiated Sertoli-Leydig cell tumor
8631	3	Sarcomatoid Sertoli-Leydig cell tumor
8632	1	Gynandroblastoma (C56.9)
8633	1	Sertoli-Leydig cell tumor, retiform
8633	1	Leydig-Sertoli cell tumor, retiform
8633	1	Retiform Sertoli-Leydig cell tumor
8634	1	Sertoli-Leydig cell tumor, intermediate differentiation, with heterologous elements
8634	1	Sertoli-Leydig cell tumor, retiform, with heterologous elements
8634	1	Element, Sertoli-Leydig cell tumor, intermediate differentiation, with heterologous
8634	1	Element, Sertoli-Leydig cell tumor, retiform, with heterologous
8634	1	Differentiation, Sertoli-Leydig cell tumor, intermediate, with heterologous elements
8634	1	Heterlogous elements, Sertoli-Leydig cell tumor, intermediate differentiation, with
8634	1	Heterlogous elements, Sertoli-Leydig cell tumor, retiform, with
8634	1	Intermediate differentiation, Sertoli-Leydig cell tumor, with heterologous elements
8634	1	Leydig-Sertoli cell tumor, intermediate differentiation, with heterologous elements
8634	1	Leydig-Sertoli cell tumor, retiform, with heterologous elements
8634	1	Retiform Sertoli-Leydig cell tumor, with heterologous elements
8634	3	Sertoli-Leydig cell tumor, poorly differentiated,with heterologous elements
8634	3	Element, Sertoli-Leydig cell tumor, poorly differentiated, with heterologous

8634	3	Heterlogous elements, Sertoli-Leydig cell tumor,poorly differentiated, with
8634	3	Leydig-Sertoli cell tumor, poorly differentiated,with heterologous elements
8634	3	Poorly differentiated Sertoli-Leydig cell tumor, with heterologous elements
8640	1	Sertoli cell tumor, NOS
8640	1	Androblastoma, tubular, NOS
8640	1	Testicular adenoma
8640	1	Tubular adenoma, Pick
8640	1	Tubular androblastoma, NOS
8640	1	Tumor, Sertoli cell, NOS
8640	1	Adenoma, Pick tubular
8640	1	Adenoma, Sertoli cell
8640	1	Adenoma, testicular
8640	1	Adenoma, tubular, Pick
8640	1	Pick tubular adenoma
8640	1	Sertoli cell adenoma
8640	3	Sertoli cell carcinoma (C62._)
8640	3	Carcinoma, Sertoli cell (C62._)
8641	0	Sertoli cell tumor with lipid storage
8641	0	Androblastoma, tubular, with lipid storage (C56.9)
8641	0	Tubular androblastoma with lipid storage (C56.9)
8641	0	Tumor, Sertoli cell with lipid storage
8641	0	Folliculome lipidique (C56.9)
8641	0	Lipid-rich Sertoli cell tumor (C56.9)
8641	0	Lipid storage, Sertoli cell tumor with
8641	0	Lipid storage, tubular androblastoma with (C56.9)

8641	0	Lipidique, folliculome (C56.9)
8641	0	Sertoli cell tumor, lipid-rich (C56.9)
8641	0	Storage, lipid, Sertoli cell tumor with
8641	0	Storage, lipid, tubular androblastoma with (C56.9)
8641	0	Tumor, Sertoli cell, lipid-rich (C56.9)
8642	1	Large cell calcifying Sertoli cell tumor
8642	1	Calcifying Sertoli cell tumor, large cell
8642	1	Sertoli cell tumor, large cell calcifying
8642	1	Tumor, Sertoli cell, large cell calcifying
8650	0	Leydig cell tumor, benign (C62._)
8650	0	Tumor, interstitial cell, benign
8650	0	Tumor, Leydig cell, benign (C62._)
8650	0	Interstitial cell tumor, benign
8650	1	Leydig cell tumor, NOS (C62._)
8650	1	Tumor, interstitial cell, NOS
8650	1	Tumor, Leydig cell, NOS (C62._)
8650	1	Interstitial cell tumor, NOS
8650	3	Leydig cell tumor, malignant (C62._)
8650	3	Tumor, interstitial cell, malignant
8650	3	Tumor, Leydig cell, malignant (C62._)
8650	3	Interstitial cell tumor, malignant
8660	0	Hilus cell tumor (C56.9)
8660	0	Tumor, hilar cell (C56.9)
8660	0	Tumor, hilus cell (C56.9)
8660	0	Hilar cell tumor (C56.9)

8670	0	Lipid cell tumor of ovary (C56.9)
8670	0	Tumor, lipid cell, ovary (C56.9)
8670	0	Tumor, lipoid cell, ovary (C56.9)
8670	0	Lipoid cell tumor of ovary (C56.9)
8670	0	Lipid cell tumor, ovary (C56.9)
8670	0	Lipoid cell tumor, ovary (C56.9)
8670	0	Masculinovoblastoma (C56.9)
8670	0	Steroid cell tumor, NOS
8670	0	Tumor, steroid cell, NOS
8670	3	Steroid cell tumor, malignant
8670	3	Tumor, steroid cell, malignant
8671	0	Adrenal rest tumor
8671	0	Tumor, adrenal rest
8671	0	Rest, tumor, adrenal
8680	0	Paraganglioma, benign
8680	1	Paraganglioma, NOS
8680	3	Paraganglioma, malignant
8681	1	Sympathetic paraganglioma
8681	1	Paraganglioma, sympathetic
8682	1	Parasympathetic paraganglioma
8682	1	Paraganglioma, parasympathetic
8683	0	Gangliocytic paraganglioma (C17.0)
8683	0	Paraganglioma, gangliocytic (C17.0)
8690	1	Glomus jugulare tumor, NOS (C75.5)
8690	1	Tumor, glomus jugulare, NOS (C75.5)

8690	1	Jugular paraganglioma (C75.5)
8690	1	Paraganglioma, jugular (C75.5)
8690	1	Jugulotympanic paraganglioma (C75.5)
8690	1	Jugulare tumor, glomus, NOS (C75.5)
8690	1	Paraganglioma, jugulotympanic (C75.5)
8691	1	Aortic body tumor (C75.5)
8691	1	Aortic body paraganglioma (C75.5)
8691	1	Tumor, aortic body (C75.5)
8691	1	Paraganglioma, aortic body (C75.5)
8691	1	Aorticopulmonary paraganglioma (C75.5)
8691	1	Paraganglioma, aorticopulmonary (C75.5)
8692	1	Carotid body tumor (C75.4)
8692	1	Tumor, carotid body (C75.4)
8692	1	Carotid body paraganglioma (C75.4)
8692	1	Paraganglioma, carotid body (C75.4)
8693	1	Extra-adrenal paraganglioma, NOS
8693	1	Chemodectoma
8693	1	Nonchromaffin paraganglioma, NOS
8693	1	Paraganglioma, extrasuprarrenal, NOS
8693	1	Paraganglioma, nonchromaffin, NOS
8693	3	Extra-adrenal paraganglioma, malignant
8693	3	Nonchromaffin paraganglioma, malignant
8693	3	Paraganglioma, extrasuprarrenal, malignant
8693	3	Paraganglioma, nonchromaffin, malignant
8700	0	Pheochromocytoma, NOS (C74.1)

8700	0	Tumor, chromaffin
8700	0	Chromaffin paraganglioma
8700	0	Chromaffin tumor
8700	0	Chromaffinoma
8700	0	Paraganglioma, chromaffin
8700	0	Adrenal medullary paraganglioma (C74.1)
8700	0	Medullary, adrenal, paraganglioma, (C74.1)
8700	0	Medullary paraganglioma, adrenal (C74.1)
8700	0	Paraganglioma, adrenal medullary (C74.1)
8700	3	Pheochromocytoma, malignant (C74.1)
8700	3	Pheochromoblastoma (C74.1)
8700	3	Adrenal medullary paraganglioma, malignant (C74.1)
8700	3	Medullary, adrenal, paraganglioma, malignant (C74.1)
8700	3	Medullary paraganglioma, adrenal, malignant (C74.1)
8700	3	Paraganglioma, adrenal medullary, malignant (C74.1)
8710	3	Glomangiosarcoma
8710	3	Glomoid sarcoma
8710	3	Sarcoma, glomoid
8711	0	Glomus tumor, NOS
8711	0	Tumor, glomus, NOS
8711	3	Glomus tumor, malignant
8711	3	Tumor, glomus, malignant
8712	0	Glomangioma
8713	0	Glomangiomyoma
8720	0	Pigmented nevus, NOS (C44._)

8720	0	Hairy nevus (C44._)
8720	0	Melanocytic nevus (C44._)
8720	0	Nevus, NOS (C44._)
8720	0	Nevus, hairy (C44._)
8720	0	Nevus, melanocytic (C44._)
8720	0	Nevus, pigmented, NOS (C44._)
8720	2	Melanoma in situ
8720	2	In situ melanoma
8720	3	Malignant melanoma, NOS (except juvenile melanoma M-8770/0)
8720	3	Melanoma, NOS
8720	3	Melanoma, malignant, NOS (except juvenile melanoma M-8770/0)
8721	3	Nodular melanoma (C44._)
8721	3	Melanoma, nodular (C44._)
8722	0	Balloon cell nevus (C44._)
8722	0	Nevus, balloon cell (C44._)
8722	3	Balloon cell melanoma (C44._)
8722	3	Melanoma, balloon cell (C44._)
8723	0	Halo nevus (C44._)
8723	0	Nevus, halo (C44._)
8723	0	Nevus, regressing (C44._)
8723	0	Regressing nevus (C44._)
8723	3	Malignant melanoma, regressing (C44._)
8723	3	Melanoma, regressing, malignant (C44._)
8723	3	Regressing melanoma, malignant (C44._)
8723	3	Melanoma, malignant, regressing (C44._)

8723	3	Regressing malignant melanoma (C44._)
8725	0	Neuronevus (C44._)
8726	0	Magnocellular nevus (C69.4)
8726	0	Melanocytoma, eyeball (C69.4)
8726	0	Nevus, magnocellular (C69.4)
8726	0	Melanocytoma, NOS
8727	0	Dysplastic nevus (C44._)
8727	0	Nevus, dysplastic (C44._)
8728	0	Diffuse melanocytosis (C70.9)
8728	0	Melanocytosis, diffuse (C70.9)
8728	1	Meningeal melanocytoma (C70.9)
8728	1	Melanocytoma, meningeal (C70.9)
8728	3	Meningeal melanomatosis (C70.9)
8728	3	Melanomatosis, meningeal (C70.9)
8730	0	Nonpigmented nevus (C44._)
8730	0	Achromic nevus (C44._)
8730	0	Nevus, achromic (C44._)
8730	0	Nevus, nonpigmented (C44._)
8730	3	Amelanotic melanoma (C44._)
8730	3	Melanoma, amelanotic (C44._)
8740	0	Junctional nevus, NOS (C44._)
8740	0	Intraepidermal nevus (C44._)
8740	0	Junction nevus (C44._)
8740	0	Nevus, intraepidermal (C44._)
8740	0	Nevus, junction (C44._)

8740	0	Nevus, junctional, NOS (C44._)
8740	3	Malignant melanoma in junctional nevus (C44._)
8740	3	Junctional nevus, malignant melanoma in (C44._)
8740	3	Melanoma, malignant, in junctional nevus (C44._)
8740	3	Nevus, junctional, malignant melanoma in (C44._)
8741	2	Precancerous melanosis, NOS (C44._)
8741	2	Melanosis, precancerous, NOS (C44._)
8741	3	Malignant melanoma in precancerous melanosis (C44._)
8741	3	Melanoma, malignant, in precancerous melanosis (C44._)
8741	3	Melanosis, precancerous, malignant melanoma in (C44._)
8741	3	Precancerous melanosis, malignant melanoma in (C44._)
8742	2	Lentigo maligna (C44._)
8742	2	Hutchinson melanotic freckle, NOS (C44._)
8742	2	Melanotic freckle, Hutchinson, NOS (C44._)
8742	2	Freckle, Hutchinson melanotic, NOS (C44._)
8742	2	Maligna, lentigo (C44._)
8742	3	Lentigo maligna melanoma (C44._)
8742	3	Malignant melanoma in Hutchinson melanotic freckle (C44._)
8742	3	Hutchinson melanotic freckle, malignant melanoma in (C44._)
8742	3	Melanoma, lentigo maligna (C44._)
8742	3	Melanoma, malignant, in Hutchinson melanotic freckle (C44._)
8742	3	Melanotic freckle, Hutchinson, malignant melanoma in (C44._)
8742	3	Freckle, malignant melanoma in Hutchinson
8742	3	Maligna melanoma, lentigo (C44._)
8743	3	Superficial spreading melanoma (C44._)

8743	3	Melanoma, superficial spreading (C44._)
8744	3	Acral lentiginous melanoma, malignant (C44._)
8744	3	Lentiginous melanoma, acral, malignant (C44._)
8744	3	Melanoma, acral lentiginous, malignant (C44._)
8744	3	Melanoma, lentiginous, acral, malignant (C44._)
8744	3	Melanoma, malignant, acral lentiginous (C44._)
8745	3	Desmoplastic melanoma, malignant (C44._)
8745	3	Melanoma, desmoplastic, malignant (C44._)
8745	3	Melanoma, malignant, desmoplastic (C44._)
8745	3	Melanoma, malignant, neurotropic (C44._)
8745	3	Melanoma, neurotropic, malignant (C44._)
8745	3	Neurotropic melanoma, malignant (C44._)
8745	3	Desmoplastic melanoma, amelanotic (C44._)
8745	3	Amelanotic desmoplastic melanoma (C44._)
8745	3	Melanoma, amelanotic, desmoplastic (C44._)
8745	3	Melanoma, desmoplastic, amelanotic (C44._)
8746	3	Mucosal lentiginous melanoma
8746	3	Lentiginous melanoma, mucosal
8750	0	Intradermal nevus (C44._)
8750	0	Dermal nevus (C44._)
8750	0	Nevus, dermal (C44._)
8750	0	Nevus, intradermal (C44._)
8760	0	Compound nevus (C44._)
8760	0	Dermal and epidermal nevus (C44._)
8760	0	Epidermal and dermal nevus (C44._)

8760	0	Nevus, compound (C44._)
8760	0	Nevus, dermal and epidermal (C44._)
8761	0	Small congenital nevus (C44._)
8761	0	Congenital nevus, small (C44._)
8761	0	Nevus, congenital, small (C44._)
8761	0	Nevus, small congenital (C44._)
8761	1	Giant pigmented nevus, NOS (C44._)
8761	1	Nevus, giant pigmented, NOS (C44._)
8761	1	Pigmented nevus, giant, NOS (C44._)
8761	1	Intermediate and giant congenital nevus (C44._)
8761	1	Congenital nevus, intermediate and giant (C44._)
8761	1	Giant congenital nevus, intermediate and (C44._)
8761	1	Nevus, congenital, intermediate and giant (C44._)
8761	1	Nevus, giant and intermediate, congenital (C44._)
8761	1	Nevus, intermediate and giant congenital (C44._)
8761	1	Nevus, pigmented giant, NOS (C44._)
8761	3	Malignant melanoma in giant pigmented nevus (C44._)
8761	3	Giant pigmented nevus, malignant melanoma in (C44._)
8761	3	Melanoma, malignant, in giant pigmented nevus (C44._)
8761	3	Nevus, giant pigmented, malignant melanoma in (C44._)
8761	3	Pigmented nevus, giant, malignant melanoma in (C44._)
8761	3	Malignant melanoma in congenital melanocytic nevus (C44._)
8761	3	Congenital melanocytic nevus, malignant melanoma in (C44._)
8761	3	Melanocytic nevus, congenital, malignant melanoma in (C44._)
8761	3	Melanoma, malignant, in congenital malenocytic nevus (C44._)

8761	3	Nevus, congenital melanocytic, malignant melanoma in (C44._)
8761	3	Nevus, melanocytic, congenital, malignant melanoma (C44._)
8762	1	Proliferative dermal lesion in congenital nevus (C44._)
8762	1	Congenital nevus, proliferative dermal lesion in (C44._)
8762	1	Dermal lesion, proliferative in congenital nevus (C44._)
8762	1	Dermal proliferative, lesion in congenital nevus (C44._)
8762	1	Lesion, proliferative dermal, in congenital nevus (C44._)
8762	1	Nevus, congenital, proliferative dermal lesion in (C44._)
8770	0	Epithelioid and spindle cell nevus (C44._)
8770	0	Juvenile melanoma (C44._)
8770	0	Juvenile nevus (C44._)
8770	0	Melanoma, juvenile (C44._)
8770	0	Nevus, epithelioid and spindle cell (C44._)
8770	0	Nevus, juvenile (C44._)
8770	0	Nevus, spindle cell and epithelioid cell (C44._)
8770	0	Nevus, Spitz (C44._)
8770	0	Spindle cell and epithelioid nevus (C44._)
8770	0	Spitz nevus (C44._)
8770	0	Pigmented spindle cell nevus of Reed (C44._)
8770	0	Reed pigmented spindle cell nevus (C44._)
8770	0	Spindle cell nevus of Reed, pigmented (C44._)
8770	0	Nevus, pigmented, spindle cell, Reed
8770	0	Nevus, Reed pigmented spindle cell
8770	0	Nevus, spindle cell, pigmented, Reed
8770	3	Mixed epithelioid and spindle cell melanoma

8770	3	Epithelioid and spindle cell melanoma, mixed
8770	3	Melanoma, epithelioid and spindle cell, mixed
8770	3	Melanoma, spindle cell and epithelioid cell, mixed
8770	3	Mixed spindle cell and epithelioid cell melanoma
8770	3	Spindle cell melanoma and epithelioid melanoma, mixed
8770	3	Spindle cell and epithelioid melanoma, mixed
8771	0	Epithelioid cell nevus (C44._)
8771	0	Nevus, epithelioid cell (C44._)
8771	3	Epithelioid cell melanoma
8771	3	Melanoma, epithelioid cell
8772	0	Spindle cell nevus, NOS (C44._)
8772	0	Nevus, spindle cell, NOS (C44._)
8772	3	Spindle cell melanoma, NOS
8772	3	Melanoma, spindle cell, NOS
8773	3	Spindle cell melanoma, type A (C69._)
8773	3	Melanoma, spindle cell, type A (C69._)
8774	3	Spindle cell melanoma, type B (C69._)
8774	3	Melanoma, spindle cell, type B (C69._)
8780	0	Blue nevus, NOS (C44._)
8780	0	Blue nevus, Jadassohn (C44._)
8780	0	Jadassohn blue nevus (C44._)
8780	0	Nevus, blue, NOS (C44._)
8780	0	Nevus, blue, Jadassohn (C44._)
8780	0	Nevus, Jadassohn blue (C44._)
8780	3	Blue nevus, malignant (C44._)

8780	3	Nevus, blue, malignant (C44._)
8790	0	Cellular blue nevus (C44._)
8790	0	Blue nevus, cellular (C44._)
8790	0	Nevus, blue, cellular (C44._)
8800	0	Soft tissue tumor, benign
8800	0	Tumor, soft tissue, benign
8800	3	Sarcoma, NOS
8800	3	Tumor, mesenchymal, malignant
8800	3	Tumor, soft tissue, malignant
8800	3	Mesenchymal tumor, malignant
8800	3	Sarcoma, soft tissue
8800	3	Soft tissue sarcoma
8800	3	Soft tissue tumor, malignant
8800	3	Tumor, malignant, mesenchymal
8800	9	Sarcomatosis, NOS
8801	3	Spindle cell sarcoma
8801	3	Sarcoma, spindle cell
8802	3	Giant cell sarcoma (except of bone M-9250/3)
8802	3	Pleomorphic cell sarcoma
8802	3	Sarcoma, giant cell (except of bone M-9250/3)
8802	3	Sarcoma, pleomorphic cell
8803	3	Small cell sarcoma
8803	3	Round cell sarcoma
8803	3	Sarcoma, round cell
8803	3	Sarcoma, small cell

8804	3	Epithelioid sarcoma
8804	3	Epithelioid cell sarcoma
8804	3	Sarcoma, epithelioid
8804	3	Sarcoma, epithelioid cell
8805	3	Undifferentiated sarcoma
8805	3	Sarcoma, undifferentiated
8806	3	Desmoplastic small round cell tumor
8806	3	Round cell tumor, desmoplastic small
8806	3	Tumor, desmoplastic small round cell
8806	3	Tumor, round cell, desmoplastic small
8806	3	Tumor, small round cell, desmoplastic
8810	0	Fibroma, NOS
8810	1	Cellular fibroma (C56.9)
8810	1	Fibroma, cellular (C56.9)
8810	3	Fibrosarcoma, NOS
8811	0	Fibromyxoma
8811	0	Fibroma, myxoid
8811	0	Myxofibroma, NOS
8811	0	Myxoid fibroma
8811	3	Fibromyxosarcoma
8812	0	Periosteal fibroma (C40._, C41._)
8812	0	Fibroma, periosteal (C40._, C41._)
8812	3	Periosteal fibrosarcoma (C40._, C41._)
8812	3	Fibrosarcoma, periosteal (C40._, C41._)
8812	3	Periosteal sarcoma, NOS (C40._, C41._)

8812	3	Sarcoma, periosteal, NOS (C40._, C41._)
8813	0	Fascial fibroma
8813	0	Fibroma, fascial
8813	3	Fascial fibrosarcoma
8813	3	Fibrosarcoma, fascial
8814	3	Infantile fibrosarcoma
8814	3	Congenital fibrosarcoma
8814	3	Fibrosarcoma, congenital
8814	3	Fibrosarcoma, infantile
8815	0	Solitary fibrous tumor
8815	0	Localized fibrous tumor
8815	0	Fibrous tumor, localized
8815	0	Fibrous tumor, solitary
8815	0	Tumor, fibrous, localized
8815	0	Tumor, fibrous, solitary
8815	3	Solitary fibrous tumor, malignant
8815	3	Fibrous tumor, solitary, malignant
8815	3	Tumor, fibrous, solitary, malignant
8820	0	Elastofibroma
8821	1	Aggressive fibromatosis
8821	1	Desmoid, NOS
8821	1	Desmoid, extra-abdominal
8821	1	Extra-abdominal desmoid
8821	1	Fibroma, invasive
8821	1	Fibromatosis, aggressive

8821	1	Invasive fibroma
8822	1	Abdominal fibromatosis
8822	1	Desmoid, abdominal
8822	1	Abdominal desmoid
8822	1	Fibromatosis, abdominal
8822	1	Fibromatosis, mesenteric (C48.1)
8822	1	Fibromatosis, retroperitoneal (C48.0)
8822	1	Mesenteric fibromatosis (C48.1)
8822	1	Retroperitoneal fibromatosis (C48.0)
8823	0	Desmoplastic fibroma
8823	0	Fibroma, desmoplastic
8824	0	Myofibroma
8824	1	Myofibromatosis
8824	1	Congenital generalized fibromatosis
8824	1	Fibromatosis, congenital generalized
8824	1	Infantile myofibromatosis
8824	1	Congenital fibromatosis, generalized
8824	1	Generalized fibromatosis, congenital
8824	1	Myofibromatosis, infantile
8825	0	Myofibroblastoma
8825	1	Myofibroblastic tumor, NOS
8825	1	Inflammatory myofibroblastic tumor
8825	1	Myofibroblastic tumor, inflammatory
8825	1	Tumor, myofibroblastic, NOS
8825	1	Tumor, myofibroblastic, inflammatory

8826	0	Angiomyofibroblastoma
8827	1	Myofibroblastic tumor, peribronchial (C34._)
8827	1	Congenital peribronchial myofibroblastic tumor (C34._)
8827	1	Congenital myofibroblastic tumor, peribronchial (C34._)
8827	1	Myofibroblastic tumor, peribronchial, congenital (C34._)
8827	1	Tumor, myofibroblastic, congenital peribronchial (C34._)
8827	1	Tumor, myofibroblastic, peribronchial (C34._)
8827	1	Peribronchial myofibroblastic tumor (C34._)
8827	1	Peribronchial myofibroblastic tumor, congenital (C34._)
8830	0	Benign fibrous histiocytoma
8830	0	Xanthofibroma
8830	0	Fibrous histiocytoma, NOS
8830	0	Fibroxanthoma, NOS
8830	0	Histiocytoma, fibrous, NOS
8830	0	Fibrous histiocytoma, benign
8830	0	Histiocytoma, fibrous, benign
8830	1	Atypical fibrous histiocytoma
8830	1	Atypical fibroxanthoma
8830	1	Fibrous histiocytoma, atypical
8830	1	Fibroxanthoma, atypical
8830	1	Histiocytoma, fibrous, atypical
8830	3	Malignant fibrous histiocytoma
8830	3	Fibrous histiocytoma, malignant
8830	3	Fibroxanthoma, malignant
8830	3	Histiocytoma, fibrous, malignant

8831	0	Histiocytoma, NOS
8831	0	Deep histiocytoma
8831	0	Juvenile histiocytoma
8831	0	Reticulohistiocytoma
8831	0	Histiocytoma, deep
8831	0	Histiocytoma, juvenile
8832	0	Dermatofibroma, NOS (C44._)
8832	0	Dermatofibroma lenticulare (C44._)
8832	0	Hemangioma, sclerosing (C44._)
8832	0	Fibrosis, subepidermal nodular (C44._)
8832	0	Nodular subepidermal fibrosis (C44.)
8832	0	Sclerosing hemangioma (C44._)
8832	0	Subepidermal nodular fibrosis (C44._)
8832	0	Cutaneous histiocytoma, NOS (C44._)
8832	0	Histiocytoma, cutaneous, NOS (C44._)
8832	0	Lenticulare, dermatofibroma (C44._)
8832	3	Dermatofibrosarcoma, NOS (C44._)
8832	3	Dermatofibrosarcoma protuberans, NOS (C44._)
8832	3	Protuberans, dermatofibrosarcoma, NOS (C44._)
8833	3	Pigmented dermatofibrosarcoma protuberans (C44._)
8833	3	Bednar tumor (C44._)
8833	3	Tumor, Bednar (C44._)
8833	3	Dermatofibrosarcoma protuberans, pigmented (C44._)
8833	3	Protuberans, dermatofibrosarcoma, pigmented (C44._)
8834	1	Giant cell fibroblastoma

8834	1	Fibroblastoma, giant cell
8835	1	Plexiform fibrohistiocytic tumor
8835	1	Fibrohistiocytic tumor, plexiform
8835	1	Tumor, fibrohistiocytic, plexiform
8835	1	Tumor, plexiform fibrohistiocytic
8836	1	Angiomatoid fibrous histiocytoma
8836	1	Fibrosis histiocytoma, angiomatoid
8836	1	Histocytoma, fibrous, angiomatoid
8840	0	Myxoma, NOS
8840	3	Myxosarcoma
8841	1	Angiomyxoma
8841	1	Aggressive angiomyxoma
8841	1	Angiomyxoma, aggressive
8842	0	Ossifying fibromyxoid tumor
8842	0	Fibromyxoid tumor, ossifying
8842	0	Tumor, fibromyxoid, ossifying
8842	0	Tumor, ossifying fibromyxoid
8850	0	Lipoma, NOS
8850	1	Atypical lipoma
8850	1	Superficial well differentated liposarcoma
8850	1	Well differentiated liposarcoma of superficial soft tissue
8850	1	Liposarcoma, superficial well differentiated
8850	1	Liposarcoma, well differentiated, superficial soft tissue
8850	1	Soft tissue, superficial, well differentiated liposarcoma
8850	1	Superficial soft tissue, well differentiated liposarcoma

8850	1	Well differentiated liposarcoma, superficial
8850	1	Lipoma, atypical
8850	3	Liposarcoma, NOS
8850	3	Fibroliposarcoma
8851	0	Fibrolipoma
8851	3	Liposarcoma, well differentiated
8851	3	Well differentiated liposarcoma, NOS
8851	3	Differentiated liposarcoma
8851	3	Liposarcoma, differentiated
8851	3	Lipoma-like liposarcoma
8851	3	Sclerosing liposarcoma
8851	3	Inflammatory liposarcoma
8851	3	Liposarcoma, inflammatory
8851	3	Liposarcoma, lipoma-like
8851	3	Liposarcoma, sclerosing
8852	0	Fibromyxolipoma
8852	0	Myxolipoma
8852	3	Myxoid liposarcoma
8852	3	Liposarcoma, myxoid
8852	3	Myxoliposarcoma
8853	3	Round cell liposarcoma
8853	3	Liposarcoma, round cell
8854	0	Pleomorphic lipoma
8854	0	Lipoma, pleomorphic
8854	3	Pleomorphic liposarcoma

8854	3	Liposarcoma, pleomorphic
8855	3	Mixed liposarcoma
8855	3	Liposarcoma, mixed
8856	0	Intramuscular lipoma
8856	0	Infiltrating lipoma
8856	0	Infiltrating angiolipoma
8856	0	Lipoma, infiltrating
8856	0	Lipoma, intramuscular
8856	0	Angiolipoma, infiltrating
8857	0	Spindle cell lipoma
8857	0	Lipoma, spindle cell
8857	3	Fibroblastic liposarcoma
8857	3	Liposarcoma, fibroblastic
8858	3	Dedifferentiated liposarcoma
8858	3	Liposarcoma, dedifferentiated
8860	0	Angiomyolipoma
8861	0	Angiolipoma, NOS
8862	0	Chondroid lipoma
8862	0	Lipoma, chondroid
8870	0	Myelolipoma
8880	0	Hibernoma
8880	0	Brown fat tumor
8880	0	Tumor, brown fat
8880	0	Fetal fat cell lipoma
8880	0	Lipoma, fetal fat cell

8880	0	Fat cell lipoma, fetal
8880	0	Fat tumor, brown
8881	0	Lipoblastomatosis
8881	0	Fetal lipoma, NOS
8881	0	Fetal lipomatosis
8881	0	Lipoblastoma
8881	0	Lipoma, fetal, NOS
8881	0	Lipomatosis, fetal
8890	0	Leiomyoma, NOS
8890	0	Fibroid uterus (C55.9)
8890	0	Fibromyoma
8890	0	Leiomyofibroma
8890	0	Plexiform leiomyoma
8890	0	Lipoleiomyoma
8890	0	Leiomyoma, plexiform
8890	0	Uterus, fibroid (C55.9)
8890	1	Leiomyomatosis, NOS
8890	1	Intravascular leiomyomatosis
8890	1	Leiomyomatosis, intravascular
8890	3	Leiomyosarcoma, NOS
8891	0	Epithelioid leiomyoma
8891	0	Leiomyoblastoma
8891	0	Leiomyoma, epithelioid
8891	3	Epithelioid leiomyosarcoma
8891	3	Leiomyosarcoma, epithelioid

8892	0	Cellular leiomyoma
8892	0	Leiomyoma, cellular
8893	0	Bizarre leiomyoma
8893	0	Leiomyoma, bizarre
8893	0	Symplastic leiomyoma
8893	0	Atypical leiomyoma
8893	0	Pleomorphic leiomyoma
8893	0	Leiomyoma, atypical
8893	0	Leiomyoma, pleomorphic
8893	0	Leiomyoma, symplastic
8894	0	Angiomyoma
8894	0	Vascular leiomyoma
8894	0	Leiomyoma, vascular
8894	0	Angioleiomyoma
8894	3	Angiomyosarcoma
8895	0	Myoma
8895	3	Myosarcoma
8896	3	Myxoid leiomyosarcoma
8896	3	Leiomyosarcoma, myxoid
8897	1	Smooth muscle tumor of uncertain malignant potential
8897	1	Tumor, smooth muscle, NOS
8897	1	Smooth muscle tumor, NOS
8897	1	Muscle tumor, smooth, NOS
8897	1	Muscle tumor, smooth, uncertain malignant potential
8897	1	Potential, uncertain malignant, smooth muscle tumor

8897	1	Tumor, smooth muscle, uncertain malignant potential
8897	1	Uncertain malignant potential, tumor, smooth muscle
8898	1	Metastasizing leiomyoma
8898	1	Leiomyoma, metastasizing
8900	0	Rhabdomyoma, NOS
8900	3	Rhabdomyosarcoma, NOS
8900	3	Rhabdosarcoma
8901	3	Pleomorphic rhabdomyosarcoma, adult type
8901	3	Pleomorphic rhabdomyosarcoma, NOS
8901	3	Rhabdomyosarcoma, pleomorphic, NOS
8901	3	Adult type, pleomorphic rhabdomyosarcoma
8901	3	Rhabdomyosarcoma, pleomorphic, adult type
8901	3	Rhabdomyosarcoma, adult type
8902	3	Mixed type rhabdomyosarcoma
8902	3	Rhabdomyosarcoma, mixed type
8902	3	Mixed embryonal rhabdomyosarcoma and alveolar rhabdomyosarcoma
8902	3	Alveolar and embryonal rhabdomyosarcoma, mixed
8902	3	Alveolar rhabdomyosarcoma and embryonal rhabdomyosarcoma, mixed
8902	3	Embryonal and alveolar rhabdomyosarcoma, mixed
8902	3	Embryonal rhabdomyosarcoma and alveolar, mixed
8902	3	Mixed alveolar rhabdomyosarcoma and embryonal rhabdomyosarcoma
8902	3	Mixed rhabdomyosarcoma, alveolar and embryonal
8902	3	Rhabdomyosarcoma, alveolar and embryonal, mixed
8902	3	Rhabdomyosarcoma, mixed embryonal and alveolar
8903	0	Fetal rhabdomyoma

8903	0	Rhabdomyoma, fetal
8904	0	Adult rhabdomyoma
8904	0	Glycogenic rhabdomyoma
8904	0	Rhabdomyoma, adult
8904	0	Rhabdomyoma, glycogenic
8905	0	Genital rhabdomyoma (C51._, C52.9)
8905	0	Rhabdomyoma, genital (C51._, C52.9)
8910	3	Embryonal rhabdomyosarcoma, NOS
8910	3	Botryoid sarcoma
8910	3	Rhabdomyosarcoma, embryonal, NOS
8910	3	Sarcoma, botryoid
8910	3	Sarcoma botryoides
8910	3	Embryonal rhabdomyosarcoma, pleomorphic
8910	3	Botryoides, sarcoma
8910	3	Rhabdomyosarcoma, embryonal, pleomorphic
8910	3	Pleomorphic rhabdomyosarcoma, embryonal
8912	3	Spindle cell rhabdomyosarcoma
8912	3	Rhabdomyosarcoma, spindle cell
8920	3	Alveolar rhabdomyosarcoma
8920	3	Rhabdomyosarcoma, alveolar
8921	3	Rhabdomyosarcoma with ganglionic differentiation
8921	3	Ectomesenchymoma
8921	3	Differentiation, rhabdomyosarcoma with ganglionic
8921	3	Ganglionic differentiation, rhabdomyosarcoma with
8930	0	Endometrial stromal nodule (C54.1)

8930	0	Nodule, endometrial stromal (C54.1)
8930	0	Stromal nodule, endometrial (C54.1)
8930	3	Endometrial stromal sarcoma, NOS (C54.1)
8930	3	Endometrial stromal sarcoma, high grade (C54.1)
8930	3	Endometrial sarcoma, NOS (C54.1)
8930	3	Sarcoma, endometrial, NOS (C54.1)
8930	3	Sarcoma, endometrial stromal, NOS (C54.1)
8930	3	Sarcoma, stromal, endometrial, NOS (C54.1)
8930	3	Stromal sarcoma, endometrial, NOS (C54.1)
8930	3	Sarcoma, endometrial stromal, high grade (C54.1)
8930	3	Sarcoma, stromal, endometrial, high grade (C54.1)
8930	3	Stromal sarcoma, endometrial, high grade (C54.1)
8931	3	Endometrial stromal sarcoma, low grade (C54.1)
8931	3	Endometriosis, stromal (C54.1)
8931	3	Endolymphatic stromal myosis (C54.1)
8931	3	Endometrial stromatosis (C54.1)
8931	3	Myosis, stromal, NOS (C54.1)
8931	3	Myosis, stromal, endolymphatic (C54.1)
8931	3	Stromal endometriosis (C54.1)
8931	3	Stromal myosis, NOS (C54.1)
8931	3	Stromal myosis, endolymphatic (C54.1)
8931	3	Stromatosis, endometrial (C54.1)
8931	3	Low grade endometrial stromal sarcoma (C54.1)
8931	3	Sarcoma, endometrial stromal, low grade (C54.1)
8931	3	Sarcoma, stromal, endometrial, low grade (C54.1)

8931	3	Stromal sarcoma, endometrial, low grade (C54.1)
8932	0	Adenomyoma
8932	0	Atypical polypoid adenomyoma
8932	0	Adenomyoma, atypical polypoid
8932	0	Polypoid atypical adenomyoma
8933	3	Adenosarcoma
8934	3	Carcinofibroma
8935	0	Stromal tumor, benign
8935	0	Tumor, stromal, benign
8935	1	Stromal tumor, NOS
8935	1	Tumor, stromal, NOS
8935	3	Stromal sarcoma, NOS
8935	3	Sarcoma, stromal, NOS
8936	0	Gastrointestinal stromal tumor, benign
8936	0	GIST, benign
8936	0	Stromal tumor, gastarointestinal, benign
8936	0	Tumor, gastrointestinal stromal, benign
8936	0	Tumor, stromal, gastrointestinal, benign
8936	1	Gastrointestinal stromal tumor, NOS
8936	1	GIST, NOS
8936	1	Gastrointestinal stromal tumor, uncertain malignant potential
8936	1	Gastrointestinal autonomic nerve tumor
8936	1	GANT
8936	1	Gastrointestinal pacemaker cell tumor
8936	1	Autonomic nerve tumor, gastrointestinal

8936	1	Potential, uncertain malignant, gastrointestinal stromal tumor
8936	1	Stromal tumor, gastrointestinal, NOS
8936	1	Stromal tumor, gastrointestinal, uncertain malignant potential
8936	1	Tumor, autonomic nerve, gastrointestinal
8936	1	Tumor, gastrointestinal, autonomic nerve
8936	1	Tumor, gastrointestinal, pacemaker cell
8936	1	Tumor, gastrointestinal stromal, NOS
8936	1	Tumor, gastrointestinal stromal, uncertain malignant potential
8936	1	Tumor, pacemaker cell, gastrointestinal
8936	1	Tumor, stromal, gastrointestinal, uncertain malignant potential
8936	1	Uncertain malignant potential, tumor, gastrointestinal stromal
8936	1	Pacemaker cell tumor, gastrointestinal
8936	3	Gastrointestinal stromal sarcoma
8936	3	Gastrointestinal stromal tumor, malignant
8936	3	GIST, malignant
8936	3	Sarcoma, gastrointestinal stromal
8936	3	Stromal sarcoma, gastrointestinal
8936	3	Stromal tumor, gastrointestinal, malignant
8936	3	Tumor, gastrointestinal stromal, malignant
8936	3	Tumor, stromal, gastrointestinal, malignant
8939	3	Sarcoma, stromal, gastrointestinal
8940	0	Pleomorphic adenoma
8940	0	Tumor, mixed, NOS
8940	0	Tumor, mixed, salivary gland type, NOS (C07._,C08._)
8940	0	Chondroid syringoma (C44._)

8940	0	Salivary gland type mixed tumor, NOS (C07._, C08._)
8940	0	Adenoma, pleomorphic
8940	0	Mixed tumor, NOS
8940	0	Mixed tumor, salivary gland type, NOS (C07._, C08._)
8940	0	Syringoma, chondroid (C44._)
8940	3	Mixed tumor, malignant, NOS
8940	3	Tumor, malignant, mixed, NOS
8940	3	Tumor, malignant, mixed, salivary gland type (C07._,C08._)
8940	3	Tumor, mixed, malignant, NOS
8940	3	Tumor, mixed, salivary gland type, malignant (C07._,C08._)
8940	3	Mixed tumor, salivary gland type, malignant (C07._,C08._)
8940	3	Salivary gland type mixed tumor, malignant (C07._,C08._)
8940	3	Malignant chondroid syringoma (C44._)
8940	3	Chondroid syringoma, malignant (C44._)
8940	3	Syringoma, chondroid, malignant (C44._)
8941	3	Carcinoma in pleomorphic adenoma (C07._, C08._)
8941	3	Adenoma, pleomorphic, carcinoma in (C07._, C08._)
8941	3	Pleomorphic adenoma, carcinoma in (C07._, C08._)
8950	3	Mullerian mixed tumor (C54._)
8950	3	Tumor, Mullerian mixed (C54._)
8950	3	Mixed Mullerian tumor (C54._)
8950	3	Mixed tumor, Mullerian (C54._)
8951	3	Mesodermal mixed tumor
8951	3	Tumor, mesodermal, mixed
8951	3	Tumor, mixed mesodermal

8951	3	Mixed mesodermal tumor
8951	3	Mixed tumor, mesodermal
8959	0	Benign cystic nephroma (C64.9)
8959	0	Cystic nephroma, benign (C64.9)
8959	0	Nephroma, cystic, benign (C64.9)
8959	1	Cystic partially differentiated nephroblastoma (C64.9)
8959	1	Cystic nephroblastoma, partially differentiated (C64.9)
8959	1	Nephroblastoma, cystic partially differentiated (C64.9)
8959	1	Partially differentiated nephroblastoma, cystic (C64.9)
8959	3	Malignant cystic nephroma (C64.9)
8959	3	Malignant multilocular cystic nephroma (C64.9)
8959	3	Cystic nephroma, malignant (C64.9)
8959	3	Cystic nephroma, multilocular, malignant (C64.9)
8959	3	Multilocular cystic nephroma, malignant (C64.9)
8959	3	Nephroma, cystic, malignant (C64.9)
8959	3	Nephroma, cystic, multilocular, malignant (C64.9)
8960	1	Mesoblastic nephroma
8960	1	Nephroma, mesoblastic
8960	3	Nephroblastoma, NOS (C64.9)
8960	3	Tumor, Wilms (C64.9)
8960	3	Wilms tumor (C64.9)
8960	3	Nephroma, NOS (C64.9)
8963	3	Malignant rhabdoid tumor
8963	3	Rhabdoid sarcoma
8963	3	Sarcoma, rhabdoid

8963	3	Rhabdoid tumor, NOS
8963	3	Rhabdoid tumor, malignant
8963	3	Tumor, rhabdoid, NOS
8963	3	Tumor, rhabdoid, malignant
8964	3	Clear cell sarcoma of kidney (C64.9)
8964	3	Sarcoma, clear cell of kidney (C64.9)
8965	0	Nephrogenic adenofibroma (C64.9)
8965	0	Adenofibroma, nephrogenic (C64.9)
8966	0	Renomedullary interstitial cell tumor (C64.9)
8966	0	Renomedullary fibroma (C64.9)
8966	0	Fibroma, renomedullary (C64.9)
8966	0	Interstitial cell tumor, renomedullary (C64.9)
8966	0	Tumor, renomedullary interstitial cell (C64.9)
8967	0	Ossifying renal tumor (C64.9)
8967	0	Renal tumor, ossifying (C64.9)
8967	0	Tumor, ossifying renal (C64.9)
8967	0	Tumor, renal, ossifying (C64.9)
8970	3	Hepatoblastoma (C22.0)
8970	3	Embryonal hepatoma (C22.0)
8970	3	Hepatoma, embryonal (C22.0)
8971	3	Pancreatoblastoma (C25._)
8972	3	Pulmonary blastoma (C34._)
8972	3	Blastoma, pulmonary (C34._)
8972	3	Pneumoblastoma (C34._)
8973	3	Pleuropulmonary blastoma

8973	3	Blastoma, pleuropulmonary
8974	1	Sialoblastoma
8980	3	Carcinosarcoma, NOS
8981	3	Carcinosarcoma, embryonal
8981	3	Embryonal carcinosarcoma
8982	0	Myoepithelioma
8982	0	Tumor, myoepithelial
8982	0	Myoepithelial tumor
8982	0	Myoepithelial adenoma
8982	0	Adenoma, myoepithelial
8982	3	Malignant myoepithelioma
8982	3	Myoepithelial carcinoma
8982	3	Carcinoma, myoepithelial
8982	3	Myoepithelioma, malignant
8983	0	Adenomyoepithelioma (C50._)
8990	0	Mesenchymoma, benign
8990	1	Mesenchymoma, NOS
8990	1	Tumor, mesenchymal, mixed
8990	1	Tumor, mixed mesenchymal
8990	1	Mesenchymal tumor, mixed
8990	1	Mixed mesenchymal tumor
8990	3	Mesenchymoma, malignant
8990	3	Mesenchymal sarcoma, mixed
8990	3	Mixed mesenchymal sarcoma
8990	3	Sarcoma, mesenchymal, mixed

8991	3	Embryonal sarcoma
8991	3	Sarcoma, embryonal
9000	0	Brenner tumor, NOS (C56.9)
9000	0	Tumor, Brenner, NOS (C56.9)
9000	1	Brenner tumor, borderline malignancy (C56.9)
9000	1	Brenner tumor, proliferating (C56.9)
9000	1	Tumor, Brenner, borderline malignancy (C56.9)
9000	1	Tumor, Brenner, proliferating (C56.9)
9000	1	Proliferating Brenner tumor (C56.9)
9000	3	Brenner tumor, malignant (C56.9)
9000	3	Tumor, Brenner, malignant (C56.9)
9010	0	Fibroadenoma, NOS (C50._)
9011	0	Intracanalicular fibroadenoma (C50._)
9011	0	Fibroadenoma, intracanalicular (C50._)
9012	0	Pericanalicular fibroadenoma (C50._)
9012	0	Fibroadenoma, pericanalicular (C50._)
9013	0	Adenofibroma, NOS
9013	0	Cystadenofibroma, NOS
9013	0	Adenofibroma, papillary
9013	0	Papillary adenofibroma
9014	0	Serous adenofibroma, NOS
9014	0	Cystadenofibroma, serous, NOS
9014	0	Adenofibroma, serous, NOS
9014	0	Serous cystadenofibroma, NOS
9014	1	Serous adenofibroma of borderline malignancy

9014	1	Serous cystadenofibroma of borderline malignancy
9014	1	Adenofibroma, serous, borderline malignancy
9014	1	Cystadenofibroma, serous, borderline malignancy
9014	3	Serous adenocarcinofibroma
9014	3	Malignant serous adenofibroma
9014	3	Serous cystadenocarcinofibroma
9014	3	Malignant serous cystadenofibroma
9014	3	Adenocarcinofibroma, serous
9014	3	Adenofibroma, serous, malignant
9014	3	Cystadenocarcinofibroma, serous
9014	3	Cystadenofibroma, serous, malignant
9014	3	Serous adenofibroma, malignant
9015	0	Mucinous adenofibroma, NOS
9015	0	Cystadenofibroma, mucinous, NOS
9015	0	Adenofibroma, mucinous
9015	0	Mucinous cystadenofibroma, NOS
9015	1	Mucinous adenofibroma of borderline malignancy
9015	1	Mucinous cystadenofibroma of borderline malignancy
9015	1	Adenofibroma, mucinous, of borderline malignancy
9015	1	Cystadenofibroma, mucinous, borderline malignancy
9015	3	Mucinous adenocarcinofibroma
9015	3	Malignant mucinous adenofibroma
9015	3	Mucinous cystadenocarcinofibroma
9015	3	Malignant mucinous cystadenofibroma
9015	3	Adenocarcinofibroma, mucinous

9015	3	Cystadenocarcinofibroma, mucinous
9015	3	Cystadenofibroma, mucinous, malignant
9015	3	Mucinous, adenofibroma, malignant
9015	3	Mucinous cystadenofibroma, malignant
9016	0	Giant fibroadenoma (C50._)
9016	0	Fibroadenoma, giant (C50._)
9020	0	Phyllodes tumor, benign (C50._)
9020	0	Tumor, phyllodes, benign (C50._)
9020	0	Cystosarcoma phyllodes, benign (C50._) [obs]
9020	0	Phyllodes, cystosarcoma, benign (C50._) [obs]
9020	1	Phyllodes tumor, borderline (C50._)
9020	1	Tumor, phyllodes, NOS (C50._)
9020	1	Cystosarcoma phyllodes, NOS (C50._)
9020	1	Phyllodes tumor, NOS (C50._)
9020	1	Tumor, phyllodes, borderline (C50._)
9020	1	Phyllodes, cystosarcoma, NOS (C50._)
9020	3	Phyllodes tumor, malignant (C50._)
9020	3	Tumor, phyllodes, malignant (C50._)
9020	3	Cystosarcoma phyllodes, malignant (C50._)
9020	3	Phyllodes, cystosarcoma, malignant (C50._)
9030	0	Juvenile fibroadenoma (C50._)
9030	0	Fibroadenoma, juvenile (C50._)
9040	0	Synovioma, benign
9040	3	Synovial sarcoma, NOS
9040	3	Sarcoma, synovial, NOS

9040	3	Synovioma, NOS
9040	3	Synovioma, malignant
9041	3	Synovial sarcoma, spindle cell
9041	3	Sarcoma, synovial, spindle cell
9041	3	Spindle cell synovial sarcoma
9041	3	Synovial sarcoma, monophasic fibrous
9041	3	Fibrous synovial sarcoma, monophasic
9041	3	Monophasic fibrous synovial sarcoma
9041	3	Sarcoma, synovial, monophasic fibrous
9042	3	Synovial sarcoma, epithelioid cell
9042	3	Epithelioid cell synovial sarcoma
9042	3	Sarcoma, synovial, epithelioid cell
9043	3	Synovial sarcoma, biphasic
9043	3	Sarcoma, synovial, biphasic
9043	3	Biphasic synovial sarcoma
9044	3	Clear cell sarcoma (except of kidney M-8964/3)
9044	3	Clear cell sarcoma of tendons and aponeuroses (C49._)
9044	3	Melanoma, malignant, of soft parts (C49._)
9044	3	Sarcoma, clear cell, NOS (except of kidney M-8964/3)
9044	3	Sarcoma, clear cell of tendons and aponeuroses (C49._)
9044	3	Aponeuroses and tendons, clear cell sarcoma (C49._)
9044	3	Soft parts, melanoma, malignant (C49._)
9060	3	Dysgerminoma
9061	3	Seminoma, NOS (C62._)
9062	3	Seminoma, anaplastic (C62._)

9062	3	Anaplastic seminoma (C62._)
9062	3	Seminoma with high mitotic index (C62._)
9063	3	Spermatocytic seminoma (C62._)
9063	3	Seminoma, spermatocytic (C62._)
9063	3	Spermatocytoma (C62._)
9064	2	Intratubular malignant germ cells (C62._)
9064	2	Intratubular germ cell neoplasia (C62._)
9064	2	Germ cells, intratubular malignant (C62._)
9064	2	Germ cell neoplasia, intratubular (C62._)
9064	2	Neoplasia, intratubular germ cell (C62._)
9064	3	Germinoma
9064	3	Tumor, germ cell, NOS
9064	3	Germ cell tumor, NOS
9065	3	Germ cell tumor, nonseminomatous (C62._)
9065	3	Tumor, germ cell, nonseminomatous (C62._)
9065	3	Tumor, nonseminomatous germ cell (C62._)
9070	3	Embryonal carcinoma, NOS
9070	3	Carcinoma, embryonal, NOS
9070	3	Adenocarcinoma, embryonal
9070	3	Embryonal adenocarcinoma
9071	3	Yolk sac tumor
9071	3	Carcinoma, embryonal, infantile
9071	3	Carcinoma, infantile, embryonal
9071	3	Tumor, endodermal sinus
9071	3	Tumor, polyvesicular vitelline

9071	3	Tumor, sinus, endodermal
9071	3	Tumor, vitelline, polyvesicular
9071	3	Tumor, yolk sac
9071	3	Vitelline tumor, polyvesicular
9071	3	Endodermal sinus tumor
9071	3	Embryonal carcinoma, infantile
9071	3	Infantile embryonal carcinoma
9071	3	Orchioblastoma (C62._)
9071	3	Polyvesicular vitelline tumor
9071	3	Sinus tumor, endodermal
9071	3	Hepatoid yolk sac tumor
9071	3	Tumor, yolk sac, hepatoid
9071	3	Yolk sac tumor, hepatoid
9072	3	Polyembryoma
9072	3	Carcinoma, embryonal, polyembryonal type
9072	3	Embryonal carcinoma, polyembryonal type
9072	3	Polyembryonal type embryonal carcinoma
9073	1	Gonadoblastoma
9073	1	Gonocytoma
9080	0	Teratoma, benign
9080	0	Cystic teratoma, NOS
9080	0	Cystic teratoma, adult
9080	0	Differentiated teratoma
9080	0	Adult teratoma, NOS
9080	0	Adult teratoma, cystic

9080	0	Mature teratoma
9080	0	Teratoma, adult, NOS
9080	0	Teratoma, adult, cystic
9080	0	Teratoma, cystic, NOS
9080	0	Teratoma, cystic, adult
9080	0	Teratoma, differentiated
9080	0	Teratoma, mature
9080	0	Adult cystic teratoma
9080	1	Teratoma, NOS
9080	1	Solid teratoma
9080	1	Teratoma, solid
9080	3	Teratoma, malignant, NOS
9080	3	Embryonal teratoma
9080	3	Immature teratoma, NOS
9080	3	Teratoblastoma, malignant
9080	3	Teratoma, embryonal
9080	3	Teratoma, immature, NOS
9080	3	Immature teratoma, malignant
9080	3	Teratoma, immature, malignant
9081	3	Teratocarcinoma
9081	3	Carcinoma, embryonal and teratoma, mixed
9081	3	Embryonal carcinoma and teratoma, mixed
9081	3	Mixed embryonal carcinoma and teratoma
9081	3	Mixed teratoma and embryonal carcinoma
9081	3	Teratoma and embryonal carcinoma, mixed

9082	3	Malignant teratoma, undifferentiated
9082	3	Anaplastic malignant teratoma
9082	3	Undifferentiated teratoma, malignant
9082	3	Teratoma, malignant, anaplastic
9082	3	Teratoma, malignant, undifferentiated
9082	3	Malignant teratoma, anaplastic
9082	3	Anaplastic teratoma, malignant
9082	3	Teratoma, anaplastic, malignant
9082	3	Teratoma, undifferentiated, malignant
9083	3	Malignant teratoma, intermediate
9083	3	Teratoma, malignant, intermediate
9083	3	Intermediate malignant teratoma
9083	3	Teratoma, intermediate, malignant
9084	0	Dermoid cyst, NOS
9084	0	Cyst, dermoid, NOS
9084	0	Dermoid, NOS
9084	3	Teratoma with malignant transformation
9084	3	Cyst, dermoid, with malignant transformation (C56.9)
9084	3	Dermoid cyst with malignant transformation (C56.9)
9084	3	Dermoid cyst with secondary tumor
9084	3	Cyst, dermoid, with secondary tumor
9084	3	Secondary tumor, dermoid cyst with
9084	3	Transformation, malignant, dermoid cyst with (C56.9)
9084	3	Transformation, malignant, teratoma with
9084	3	Tumor, secondary, dermoid cyst with

9085	3	Mixed germ cell tumor
9085	3	Tumor, germ cell, mixed
9085	3	Tumor, mixed germ cell
9085	3	Germ cell tumor, mixed
9085	3	Mixed teratoma and seminoma
9085	3	Mixed seminoma and teratoma
9085	3	Seminoma and teratoma, mixed
9085	3	Teratoma and seminoma, mixed
9090	0	Struma ovarii, NOS (C56.9)
9090	0	Ovarii, struma (C56.9)
9090	3	Struma ovarii, malignant (C56.9)
9090	3	Ovarii, struma, malignant (C56.9)
9091	1	Strumal carcinoid (C56.9)
9091	1	Carcinoid, strumal (C56.9)
9091	1	Carcinoid and struma ovarii (C56.9)
9091	1	Struma ovarii and carcinoid (C56.9)
9091	1	Carcinoid, struma ovarii and (C56.9)
9100	0	Hydatidiform mole, NOS (C58.9)
9100	0	Complete hydatidiform mole (C58.9)
9100	0	Hydatid mole (C58.9)
9100	0	Hydatidiform mole, complete (C58.9)
9100	0	Mole, hydatid (C58.9)
9100	0	Mole, hydatidiform, NOS (C58.9)
9100	0	Mole, hydatidiform, complete (C58.9)
9100	1	Invasive hydatidiform mole (C58.9)

9100	1	Chorioadenoma (C58.9)
9100	1	Chorioadenoma destruens (C58.9)
9100	1	Hydatidiform mole, invasive (C58.9)
9100	1	Hydatidiform mole, malignant (C58.9)
9100	1	Invasive mole, NOS (C58.9)
9100	1	Mole, hydatidiform, invasive (C58.9)
9100	1	Mole, hydatidiform, malignant (C58.9)
9100	1	Mole, invasive, NOS (C58.9)
9100	1	Malignant hydatidiform mole (C58.9)
9100	1	Destruens, chorioadenoma (C58.9)
9100	3	Choriocarcinoma, NOS
9100	3	Chorioepithelioma
9100	3	Chorionepithelioma
9101	3	Choriocarcinoma combined with other germ cell elements
9101	3	Carcinoma, embryonal, combined with choriocarcinoma
9101	3	Choriocarcinoma combined with embryonal carcinoma
9101	3	Choriocarcinoma combined with teratoma
9101	3	Embryonal carcinoma, combined with choriocarcinoma
9101	3	Teratoma combined with choriocarcinoma
9101	3	Combined choriocarcinoma with embryonal carcinoma
9101	3	Combined choriocarcinoma with other germ cell elements
9101	3	Combined choriocarcinoma with teratoma
9101	3	Elements, choriocarcinoma combined with other germ cell
9101	3	Germ cell elements, choriocarcinoma combined with other
9101	3	Other germ cell elements, choriocarcinoma combined with

9102	3	Malignant teratoma, trophoblastic
9102	3	Trophoblastic malignant teratoma
9102	3	Teratoma, malignant, trophoblastic
9102	3	Teratoma, trophoblastic, malignant
9103	0	Partial hydatidiform mole (C58.9)
9103	0	Hydatidiform mole, partial (C58.9)
9103	0	Mole, hydatidiform, partial (C58.9)
9104	1	Placental site trophoblastic tumor (C58.9)
9104	1	Trophoblastic tumor, placental site (C58.9)
9104	1	Tumor, placental site trophoblastic (C58.9)
9104	1	Tumor, trophoblastic, placental site (C58.9)
9105	3	Trophoblastic tumor, epithelioid
9105	3	Epithelioid trophoblastic tumor
9105	3	Tumor, trophoblastic, epithelioid
9110	0	Mesonephroma, benign
9110	0	Wolffian duct adenoma
9110	0	Adenoma, mesonephric
9110	0	Adenoma, Wolffian duct
9110	0	Duct, Wolffian, adenoma
9110	0	Mesonephric adenoma
9110	1	Mesonephric tumor, NOS
9110	1	Tumor, mesonephric, NOS
9110	1	Wolffian duct tumor
9110	1	Duct, Wolffian, tumor
9110	1	Tumor, Wolffian duct

9110	3	Mesonephroma, malignant
9110	3	Wolffian duct carcinoma
9110	3	Carcinoma, Wolffian duct
9110	3	Adenocarcinoma, mesonephric
9110	3	Duct, Wolffian, carcinoma
9110	3	Mesonephric adenocarcinoma
9110	3	Mesonephroma, NOS
9120	0	Hemangioma, NOS
9120	0	Chorioangioma (C58.9)
9120	0	Angioma, NOS
9120	3	Hemangiosarcoma
9120	3	Angiosarcoma
9121	0	Cavernous hemangioma
9121	0	Hemangioma, cavernous
9122	0	Venous hemangioma
9122	0	Hemangioma, venous
9123	0	Racemose hemangioma
9123	0	Arteriovenous hemangioma
9123	0	Hemangioma, arteriovenous
9123	0	Hemangioma, racemose
9124	3	Kupffer cell sarcoma (C22.0)
9124	3	Sarcoma, Kupffer cell (C22.0)
9125	0	Epithelioid hemangioma
9125	0	Hemangioma, epithelioid
9125	0	Hemangioma, histiocytoid

9125	0	Histiocytoid hemangioma
9130	0	Hemangioendothelioma, benign
9130	1	Hemangioendothelioma, NOS
9130	1	Angioendothelioma, NOS
9130	1	Kaposiform hemangioendothelioma
9130	1	Hemangioendothelioma, Kaposi form
9130	3	Hemangioendothelioma, malignant
9130	3	Hemangioendothelial sarcoma
9130	3	Sarcoma, hemangioendothelial
9131	0	Capillary hemangioma
9131	0	Hemangioma, capillary
9131	0	Hemangioma, infantile
9131	0	Hemangioma, juvenile
9131	0	Hemangioma, plexiform
9131	0	Hemangioma simplex
9131	0	Infantile hemangioma
9131	0	Juvenile hemangioma
9131	0	Plexiform hemangioma
9131	0	Simplex, hemangioma
9132	0	Intramuscular hemangioma
9132	0	Hemangioma, intramuscular
9133	1	Epithelioid hemangioendothelioma, NOS
9133	1	Hemangioendothelioma, epithelioid, NOS
9133	3	Epithelioid hemangioendothelioma, malignant
9133	3	Bronchial alveolar tumor, intravascular (C34._) [obs]

9133	3	Tumor, alveolar, intravascular bronchial (C34._) [obs]
9133	3	Tumor, bronchial alveolar, intravascular (C34._) [obs]
9133	3	Tumor, intravascular bronchial alveolar (C34._) [obs]
9133	3	Hemangioendothelioma, epithelioid, malignant
9133	3	Intravascular bronchial alveolar tumor (C34._) [obs]
9133	3	Alveolar tumor, intravascular bronchial (C34._) [obs]
9135	1	Endovascular papillary angioendothelioma
9135	1	Dabska tumor
9135	1	Angioendothelioma, endovascular papillary
9135	1	Tumor, Dabska
9135	1	Papillary endovascular, angioendothelioma
9136	1	Spindle cell hemangioendothelioma
9136	1	Spindle cell angioendothelioma
9136	1	Angioendothelioma, spindle cell
9136	1	Hemangioendothelioma, spindle cell
9141	0	Angiokeratoma
9142	0	Verrucous keratotic hemangioma
9142	0	Hemangioma, verrucous keratotic
9142	0	Keratotic verrucous hemangioma
9142	0	Keratotic hemangioma, verrucous
9150	0	Hemangiopericytoma, benign
9150	1	Hemangiopericytoma, NOS
9150	1	Hemangiopericytic meningioma (C70._) [obs]
9150	1	Meningioma, hemangiopericytic (C70._) [obs]
9150	3	Hemangiopericytoma, malignant

9160	0	Angiofibroma, NOS
9160	0	Angiofibroma, juvenile
9160	0	Fibrous papule of nose (C44.3) [obs]
9160	0	Fibrous papule, nose (C44.3) [obs]
9160	0	Involuting nevus (C44._) [obs]
9160	0	Juvenile angiofibroma
9160	0	Nevus, involuting (C44._) [obs]
9160	0	Giant cell angiofibroma
9160	0	Cellular angiofibroma
9160	0	Angiofibroma, cellular
9160	0	Angiofibroma, giant cell
9160	0	Papule, fibrous, of nose (C44.3) [obs]
9161	0	Acquired tufted hemangioma
9161	0	Hemangioma, acquired tufted
9161	0	Tufted hemangioma, acquired
9161	1	Hemangioblastoma
9161	1	Angioblastoma
9170	0	Lymphangioma, NOS
9170	0	Lymphangioendothelioma, NOS
9170	3	Lymphangiosarcoma
9170	3	Lymphangioendothelial sarcoma
9170	3	Lymphangioendothelioma, malignant
9170	3	Sarcoma, lymphangioendothelial
9171	0	Capillary lymphangioma
9171	0	Lymphangioma, capillary

9172	0	Cavernous lymphangioma
9172	0	Lymphangioma, cavernous
9173	0	Cystic lymphangioma
9173	0	Cystic hygroma
9173	0	Hygroma, NOS
9173	0	Hygroma, cystic
9173	0	Lymphangioma, cystic
9174	0	Lymphangiomyoma
9174	1	Lymphangiomyomatosis
9174	1	Lymphangioleiomyomatosis
9175	0	Hemolymphangioma
9180	0	Osteoma, NOS (C40._, C41._)
9180	3	Osteosarcoma, NOS (C40._, C41._)
9180	3	Osteoblastic sarcoma (C40._, C41._)
9180	3	Osteochondrosarcoma (C40._, C41._)
9180	3	Osteogenic sarcoma, NOS (C40._, C41._)
9180	3	Sarcoma, osteoblastic (C40._, C41._)
9180	3	Sarcoma, osteogenic, NOS (C40._, C41._)
9181	3	Chondroblastic osteosarcoma (C40._, C41._)
9181	3	Osteosarcoma, chondroblastic (C40._, C41._)
9182	3	Fibroblastic osteosarcoma (C40._, C41._)
9182	3	Osteofibrosarcoma (C40._, C41._)
9182	3	Osteosarcoma, fibroblastic (C40._, C41._)
9183	3	Telangiectatic osteosarcoma (C40._, C41._)
9183	3	Osteosarcoma, telangiectatic (C40._, C41._)

9184	3	Osteosarcoma in Paget disease of bone (C40._, C41._)
9184	3	Paget disease, bone, osteosarcoma in (C40._, C41._)
9185	3	Small cell osteosarcoma (C40._, C41._)
9185	3	Osteosarcoma, small cell (C40._, C41._)
9185	3	Round cell osteosarcoma (C40._, C41._)
9185	3	Osteosarcoma, round cell (C40._, C41._)
9186	3	Central osteosarcoma (C40._, C41._)
9186	3	Conventional central osteosarcoma (C40._, C41._)
9186	3	Medullary osteosarcoma (C40._, C41._)
9186	3	Central osteosarcoma, conventional (C40._, C41._)
9186	3	Osteosarcoma, central (C40._, C41._)
9186	3	Osteosarcoma, central, conventional (C40._, C41._)
9186	3	Osteosarcoma, medullary (C40._, C41._)
9187	3	Intraosseous well differentiated osteosarcoma (C40._, C41._)
9187	3	Intraosseous low grade osteosarcoma (C40._, C41._)
9187	3	Intraosseous osteosarcoma, low grade (C40._, C41._)
9187	3	Intraosseous osteosarcoma, well differentiated (C40._, C41._)
9187	3	Low grade osteosarcoma, intraosseous (C40._, C41._)
9187	3	Well differentiated osteosarcoma, intraosseous (C40._, C41._)
9187	3	Osteosarcoma, intraosseous low grade (C40._, C41._)
9187	3	Osteosarcoma, intraosseous well differentiated (C40._, C41._)
9191	0	Osteoid osteoma, NOS (C40._, C41._)
9191	0	Osteoma, osteoid, NOS (C40._, C41._)
9192	3	Parosteal osteosarcoma (C40._, C41._)
9192	3	Juxtacortical osteosarcoma (C40._, C41._)

9192	3	Osteosarcoma, juxtacortical (C40._, C41._)
9192	3	Osteosarcoma, parosteal (C40., C41._)
9193	3	Periosteal osteosarcoma (C40._, C41._)
9193	3	Osteosarcoma, periosteal (C40._, C41._)
9194	3	High grade surface osteosarcoma (C40._, C41._)
9194	3	Surface osteosarcoma, high grade (C40._, C41._)
9194	3	Osteosarcoma, surface, high grade (C40._, C41._)
9195	3	Intracortical osteosarcoma (C40._, C41._)
9195	3	Osteosarcoma, intracortical (C40._, C41._)
9200	0	Osteoblastoma, NOS (C40._, C41._)
9200	0	Giant osteoid osteoma(C40._, C41._)
9200	0	Osteoid osteoma, giant (C40._, C41._)
9200	0	Osteoma, osteoid, giant (C40._, C41._)
9200	1	Aggressive osteoblastoma (C40._, C41._)
9200	1	Osteoblastoma, aggressive (C40._, C41._)
9210	0	Osteochondroma (C40._, C41._)
9210	0	Cartilaginous exostosis (C40._, C41._)
9210	0	Exostosis, cartilaginous (C40._, C41._)
9210	0	Exostosis, osteocartilaginous (C40._, C41._)
9210	0	Ecchondroma (C40._, C41._)
9210	0	Osteocartilaginous exostosis (C40._, C41._)
9210	1	Osteochondromatosis, NOS (C40._, C41._)
9210	1	Ecchondrosis (C40._, C41._)
9220	0	Chondroma, NOS (C40._, C41._)
9220	0	Enchondroma (C40._, C41._)

9220	1	Chondromatosis, NOS
9220	3	Chondrosarcoma, NOS (C40._, C41._)
9220	3	Fibrochondrosarcoma (C40._, C41._)
9221	0	Juxtacortical chondroma (C40._, C41._)
9221	0	Chondroma, juxtacortical (C40._, C41._)
9221	0	Chondroma, periosteal (C40._, C41._)
9221	0	Periosteal chondroma (C40._, C41._)
9221	3	Juxtacortical chondrosarcoma (C40._, C41._)
9221	3	Chondrosarcoma, juxtacortical (C40._, C41._)
9221	3	Periosteal chondrosarcoma (C40._, C41._)
9221	3	Chondrosarcoma, periosteal (C40._, C41._)
9230	0	Chondroblastoma, NOS (C40._, C41._)
9230	0	Tumor, chondromatous giant cell (C40._, C41._)
9230	0	Tumor, Codman (C40._, C41._)
9230	0	Tumor, giant cell, chondromatous (C40._, C41._)
9230	0	Chondromatous giant cell tumor (C40._, C41._)
9230	0	Codman tumor (C40._, C41._)
9230	0	Giant cell tumor, chondromatous (C40.-, C41._)
9230	3	Chondroblastoma, malignant (C40._, C41._)
9231	3	Myxoid chondrosarcoma
9231	3	Chondrosarcoma, myxoid
9240	3	Mesenchymal chondrosarcoma
9240	3	Chondrosarcoma, mesenchymal
9241	0	Chondromyxoid fibroma (C40._, C41._)
9241	0	Fibroma, chondromyxoid (C40._, C41._)

9242	3	Clear cell chondrosarcoma (C40._, C41._)
9242	3	Chondrosarcoma, clear cell (C40._, C41._)
9243	3	Dedifferentiated chondrosarcoma (C40._, C41._)
9243	3	Chondrosarcoma, dedifferentiated (C40._, C41._)
9250	1	Giant cell tumor of bone, NOS (C40._, C41._)
9250	1	Tumor, giant cell, bone, NOS (C40._, C41._)
9250	1	Giant cell tumor, bone, NOS (C40._, C41._)
9250	1	Osteoclastoma, NOS (C40._, C41._)
9250	3	Giant cell tumor of bone, malignant (C40._, C41._)
9250	3	Tumor, giant cell, bone, malignant (C40._, C41._)
9250	3	Giant cell sarcoma, bone (C40._, C41._)
9250	3	Giant cell tumor, bone, malignant (C40._, C41._)
9250	3	Osteoclastoma, malignant (C40._, C41._)
9250	3	Sarcoma, giant cell, bone (C40._, C41._)
9250	3	Giant cell sarcoma of bone (C40._, C41._)
9251	1	Giant cell tumor of soft parts, NOS
9251	1	Tumor, giant cell, soft parts, NOS
9251	1	Giant cell tumor, soft parts, NOS
9251	1	Soft parts, giant cell tumor, NOS
9251	3	Malignant giant cell tumor of soft parts
9251	3	Tumor, giant cell, soft parts, malignant
9251	3	Giant cell tumor, soft parts, malignant
9251	3	Soft parts, giant cell tumor, malignant
9252	0	Tenosynovial giant cell tumor (C49._)
9252	0	Fibrous histiocytoma of tendon sheath (C49._)

9252	0	Giant cell tumor of tendon sheath (C49._)
9252	0	Giant cell tumor, tendon sheath (C49._)
9252	0	Giant cell tumor, tenosynovial (C49._)
9252	0	Histiocytoma, fibrous, tendon sheath (C49._)
9252	0	Tumor, giant cell, tendon sheath (C49._)
9252	0	Tumor, giant cell, tenosynovial (C49._)
9252	0	Tumor, tenosynovial giant cell (C49._)
9252	3	Malignant tenosynovial giant cell tumor (C49._)
9252	3	Giant cell tumor of tendon sheath, malignant (C49._)
9252	3	Giant cell tumor, tendon sheath, malignant (C49._)
9252	3	Giant cell tumor, tenosynovial, malignant (C49._)
9252	3	Tenosynovial giant cell tumor, malignant (C49._)
9252	3	Tumor, giant cell, tendon sheath, malignant (C49._)
9252	3	Tumor, giant cell, tenosynovial, malignant (C49._)
9252	3	Tumor, tenosynovial giant cell, malignant (C49._)
9260	3	Ewing sarcoma (C40._, C41._)
9260	3	Tumor, Ewing (C40._, C41._)
9260	3	Ewing tumor (C40._, C41._)
9260	3	Sarcoma, Ewing (C40._, C41._)
9261	3	Adamantinoma of long bones (C40._)
9261	3	Tibial adamantinoma (C40.2)
9261	3	Adamantinoma, tibial (C40.2)
9262	0	Ossifying fibroma (C40._, C41._)
9262	0	Fibroma, ossifying (C40._, C41._)
9262	0	Fibro-osteoma (C40._, C41._)

9262	0	Osteofibroma (C40._, C41._)
9270	0	Odontogenic tumor, benign (C41._)
9270	0	Tumor, odontogenic, benign (C41._)
9270	1	Odontogenic tumor, NOS (C41._)
9270	1	Tumor, odontogenic, NOS (C41._)
9270	3	Odontogenic tumor, malignant (C41._)
9270	3	Ameloblastic carcinoma (C41._)
9270	3	Carcinoma, ameloblastic (C41._)
9270	3	Carcinoma, intraosseous, primary (C41.1)
9270	3	Carcinoma, odontogenic (C41._)
9270	3	Tumor, odontogenic, malignant (C41._)
9270	3	Intraosseous carcinoma, primary (C41.1)
9270	3	Odontogenic carcinoma (C41._)
9270	3	Odontogenic sarcoma (C41._)
9270	3	Sarcoma, odontogenic (C41._)
9270	3	Primary intraosseous carcinoma (C41._)
9270	3	Carcinoma, primary intraosseous (C41.1)
9271	0	Ameloblastic fibrodentinoma (C41._)
9271	0	Dentinoma (C41._)
9271	0	Fibrodentinoma, ameloblastic (C41._)
9272	0	Cementoma, NOS (C41._)
9272	0	Cemental dysplasia, periapical (C41._)
9272	0	Cemento-osseous dysplasia, periapical (C41._)
9272	0	Dysplasia, periapical cemental (C41._)
9272	0	Dysplasia, periapical cemento-osseous (C41._)

9272	0	Periapical cemental dysplasia (C41._)
9272	0	Periapical cemento-osseous dysplasia (C41._)
9273	0	Cementoblastoma, benign (C41._)
9274	0	Cementifying fibroma (C41._)
9274	0	Fibroma, cementifying (C41._)
9274	0	Cemento-ossifying fibroma (C41._)
9274	0	Fibroma, cemento-ossifying (C41._)
9275	0	Gigantiform cementoma (C41._)
9275	0	Cementoma, gigantiform (C41._)
9275	0	Dysplasia, florid osseous (C41._)
9275	0	Florid osseous dysplasia (C41._)
9275	0	Osseous dysplasia, florid (C41._)
9280	0	Odontoma, NOS (C41._)
9281	0	Compound odontoma (C41._)
9281	0	Odontoma, compound (C41._)
9282	0	Complex odontoma (C41._)
9282	0	Odontoma, complex (C41._)
9290	0	Ameloblastic fibro-odontoma (C41._)
9290	0	Fibroameloblastic odontoma (C41._)
9290	0	Fibro-odontoma, ameloblastic (C41._)
9290	0	Odontoma, fibroameloblastic (C41._)
9290	3	Ameloblastic odontosarcoma (C41._)
9290	3	Odontosarcoma, ameloblastic (C41._)
9290	3	Ameloblastic fibrodentinosarcoma (C41._)
9290	3	Ameloblastic fibro-odontosarcoma (C41._)

9290	3	Fibrodentinosarcoma, ameloblastic (C41._)
9290	3	Fibro-odontosarcoma, ameloblastic (C41._)
9300	0	Adenomatoid odontogenic tumor (C41._)
9300	0	Tumor, adenomatoid, odontogenic (C41._)
9300	0	Tumor, odontogenic, adenomatoid (C41._)
9300	0	Adenomatoid tumor, odontogenic (C41._)
9300	0	Odontogenic adenomatoid tumor (C41._)
9300	0	Odontogenic tumor, adenomatoid (C41._)
9300	0	Adenoameloblastoma (C41._)
9301	0	Calcifying odontogenic cyst (C41._)
9301	0	Cyst, odontogenic, calcifying (C41._)
9301	0	Odontogenic cyst, calcifying (C41._)
9301	0	Cyst, calcifying odontogenic (C41._)
9302	0	Odontogenic ghost cell tumor (C41._)
9302	0	Tumor, ghost cell, odontogenic (C41._)
9302	0	Tumor, odontogenic, ghost cell (C41._)
9302	0	Ghost cell tumor, odontogenic (C41._)
9310	0	Ameloblastoma, NOS (C41._)
9310	0	Adamantinoma, NOS (except of long bones M-9261/3) (C41._)
9310	3	Ameloblastoma, malignant (C41._)
9310	3	Adamantinoma, malignant (except of long bones M-9261/3) (C41._)
9311	0	Odontoameloblastoma (C41._)
9312	0	Squamous odontogenic tumor (C41._)
9312	0	Tumor, odontogenic, squamous (C41._)
9312	0	Tumor, squamous odontogenic (C41._)

9312	0	Odontogenic tumor, squamous (C41._)
9320	0	Odontogenic myxoma (C41._)
9320	0	Myxofibroma, odontogenic (C41._)
9320	0	Myxoma, odontogenic (C41._)
9320	0	Odontogenic myxofibroma (C41._)
9321	0	Central odontogenic fibroma (C41._)
9321	0	Fibroma, central odontogenic (C41._)
9321	0	Fibroma, odontogenic, NOS (C41._)
9321	0	Fibroma, odontogenic, central (C41._)
9321	0	Odontogenic fibroma, NOS (C41._)
9321	0	Odontogenic fibroma, central (C41._)
9321	0	Central fibroma, odontogenic (C41._)
9322	0	Peripheral odontogenic fibroma (C41._)
9322	0	Fibroma, odontogenic, peripheral (C41._)
9322	0	Fibroma, peripheral odontogenic (C41._)
9322	0	Odontogenic fibroma, peripheral (C41._)
9330	0	Ameloblastic fibroma (C41._)
9330	0	Fibroma, ameloblastic (C41._)
9330	3	Ameloblastic fibrosarcoma (C41._)
9330	3	Ameloblastic sarcoma (C41._)
9330	3	Fibrosarcoma, ameloblastic (C41._)
9330	3	Fibrosarcoma, odontogenic (C41._)
9330	3	Odontogenic fibrosarcoma (C41._)
9330	3	Sarcoma, ameloblastic (C41._)
9340	0	Calcifying epithelial odontogenic tumor (C41._)

9340	0	Tumor, odontogenic, calcifying epithelial (C41._)
9340	0	Tumor, Pindborg (C41._)
9340	0	Epithelial tumor, odontogenic, calcifying (C41._)
9340	0	Odontogenic tumor, calcifying epithelial (C41._)
9340	0	Pindborg tumor (C41._)
9340	0	Epithelial odontogenic tumor, calcifying (C41._)
9341	1	Clear cell odontogenic tumor (C41._)
9341	1	Tumor, odontogenic, clear cell (C41._)
9341	1	Odontogenic tumor, clear cell (C44._)
9342	3	Odontogenic carcinosarcoma (C41._)
9342	3	Carcinosarcoma, odontogenic (C41._)
9350	1	Craniopharyngioma (C75.2)
9350	1	Tumor, Rathke pouch (C75.1)
9350	1	Rathke pouch tumor (C75.1)
9350	1	Pouch, Rathke, tumor (C75.1)
9351	1	Craniopharyngioma, adamantinomatous (C75.2)
9351	1	Adamantinomatous craniopharyngioma (C75.2)
9352	1	Craniopharyngioma, papillary (C75.2)
9352	1	Papillary craniopharyngioma (C75.2)
9360	1	Pinealoma, NOS (C75.3)
9361	1	Pineocytoma (C75.3)
9362	3	Pineoblastoma (C75.3)
9362	3	Mixed pineal tumor (C75.3)
9362	3	Mixed pineocytoma-pineoblastoma (C75.3)
9362	3	Pineal parenchymal tumor of intermediatedifferentiation (C75.3)

9362	3	Transitional pineal tumor (C75.3)
9362	3	Differentiation, pineal parenchymal tumor, intermediate (C75.3)
9362	3	Intermediate differentiation, pineal parenchymal tumor (C75.3)
9362	3	Mixed tumor, pineal (C75.3)
9362	3	Tumor, parenchymal, pineal, intermediatedifferentiation (C75.3)
9362	3	Tumor, pineal, mixed (C75.3)
9362	3	Tumor, pineal, parenchymal, intermediatedifferentiation (C75.3)
9362	3	Tumor, pineal, transitional (C75.3)
9362	3	Tumor, transitional pineal (C75.3)
9362	3	Parenchymal tumor, pineal, intermediatedifferentiation (C75.3)
9362	3	Pineal tumor, mixed (C75.3)
9362	3	Pineal tumor, parenchymal, intermediatedifferentiation (C75.3)
9362	3	Pineal tumor, transitional (C75.3)
9362	3	Pineoblastoma-pineocytoma, mixed (C75.3)
9362	3	Pineocytoma-pineoblastoma, mixed (C75.3)
9363	0	Melanotic neuroectodermal tumor
9363	0	Tumor, melanotic neuroectodermal
9363	0	Tumor, neuroectodermal, melanotic
9363	0	Tumor, retinal angle
9363	0	Melanoameloblastoma
9363	0	Melanotic progonoma
9363	0	Neuroectodermal tumor, melanotic
9363	0	Progonoma, melanotic
9363	0	Retinal anlage tumor
9363	0	Anlage tumor, retinal

9364	3	Peripheral neuroectodermal tumor
9364	3	Tumor, neuroectodermal, NOS
9364	3	Tumor, neuroectodermal, peripheral
9364	3	Tumor, peripheral neuroectodermal
9364	3	Neuroectodermal tumor, NOS
9364	3	Neuroectodermal tumor, peripheral
9364	3	Peripheral primitive neuroectodermal tumor, NOS
9364	3	PPNET
9364	3	Neuroectodermal tumor, peripheral primitive, NOS
9364	3	Primitive neuroectodermal tumor, peripheral, NOS
9364	3	Tumor, peripheral, primitive neuroectodermal, NOS
9364	3	Tumor, primitive neuroectodermal, peripheral, NOS
9365	3	Askin tumor
9365	3	Tumor, Askin
9370	3	Chordoma, NOS
9371	3	Chondroid chordoma
9371	3	Chordoma, chondroid
9372	3	Dedifferentiated chordoma
9372	3	Chordoma, dedifferentiated
9373	0	Parachordoma
9380	3	Glioma, malignant (C71._)
9380	3	Glioma, NOS (except nasal glioma, not neoplastic) (C71._)
9381	3	Gliomatosis cerebri (C71._)
9381	3	Cerebri, gliomatosis (C71._)
9382	3	Mixed glioma (C71._)

9382	3	Oligoastrocytoma (C71._)
9382	3	Glioma, mixed (C71._)
9382	3	Anaplastic oligoastrocytoma (C71._)
9382	3	Oligoastrocytoma, anaplastic (C71._)
9383	1	Subependymoma (C71._)
9383	1	Astrocytoma, subependymal, NOS (C71._)
9383	1	Glioma, subependymal (C71._)
9383	1	Subependymal glioma (C71._)
9383	1	Subependymal astrocytoma, NOS (C71._)
9383	1	Mixed subependymoma-ependymoma (C71._)
9383	1	Ependymoma-subependymoma, mixed (C71._)
9383	1	Mixed ependymoma-subependymoma (C71._)
9383	1	Subependymoma-ependymoma, mixed (C71._)
9384	1	Subependymal giant cell astrocytoma (C71._)
9384	1	Astrocytoma, subependymal, giant cell (C71._)
9384	1	Giant cell astrocytoma, subependymal (C71._)
9384	1	Subependymal astrocytoma, giant cell (C71._)
9390	0	Choroid plexus papilloma, NOS (C71.5)
9390	0	Papilloma, choroid plexus, NOS (C71.5)
9390	1	Atypical choroid plexus papilloma (C71.5)
9390	1	Choroid plexus papilloma, atypical (C71.5)
9390	1	Papilloma, choroid plexus, atypical (C71.5)
9390	3	Choroid plexus carcinoma (C71.5)
9390	3	Anaplastic choroid plexus papilloma (C71.5)
9390	3	Choroid plexus papilloma, anaplastic (C71.5)

9390	3	Choroid plexus papilloma, malignant (C71.5)
9390	3	Papilloma, choroid plexus, anaplastic (C71.5)
9390	3	Papilloma, choroid plexus, malignant (C71.5)
9390	3	Carcinoma, choroid plexus (C71.5)
9391	3	Ependymoma, NOS (C71._)
9391	3	Ependymoma, epithelial (C71._)
9391	3	Epithelial ependymoma (C71._)
9391	3	Cellular ependymoma (C71._)
9391	3	Clear cell ependymoma (C71._)
9391	3	Tanycytic ependymoma (C71._)
9391	3	Ependymoma, cellular (C71._)
9391	3	Ependymoma, clear cell (C71._)
9391	3	Ependymoma, tanycytic (C71._)
9392	3	Ependymoma, anaplastic (C71._)
9392	3	Anaplastic ependymoma (C71._)
9392	3	Ependymoblastoma (C71._)
9393	3	Papillary ependymoma (C71._)
9393	3	Ependymoma, papillary (C71._)
9394	1	Myxopapillary ependymoma (C72.0)
9394	1	Ependymoma, myxopapillary (C72.0)
9400	3	Astrocytoma, NOS (C71._)
9400	3	Astrocytic glioma (C71._)
9400	3	Astrocytoma, cystic (C71._) [obs]
9400	3	Astroglioma (C71._) [obs]
9400	3	Cystic astrocytoma (C71._) [obs]

9400	3	Glioma, astrocytic (C71._)
9400	3	Diffuse astrocytoma (C71._)
9400	3	Astrocytoma, low grade (C71._)
9400	3	Diffuse astrocytoma, low grade (C71._)
9400	3	Astrocytoma, diffuse (C71._)
9400	3	Astrocytoma, diffuse, low grade (C71._)
9400	3	Astrocytoma, low grade diffuse (C71._)
9400	3	Low grade astrocytoma (C71._)
9400	3	Low grade diffuse astrocytoma (C71._)
9401	3	Astrocytoma, anaplastic (C71._)
9401	3	Anaplastic astrocytoma (C71._)
9410	3	Protoplasmic astrocytoma (C71._)
9410	3	Astrocytoma, protoplasmic (C71._)
9411	3	Gemistocytic astrocytoma (C71._)
9411	3	Astrocytoma, gemistocytic (C71._)
9411	3	Gemistocytoma (C71._)
9412	1	Desmoplastic infantile astrocytoma (C71._)
9412	1	Desmoplastic infantile ganglioglioma (C71._)
9412	1	Astrocytoma, desmoplastic infantile (C71._)
9412	1	Desmoplastic astrocytoma, infantile (C71._)
9412	1	Desmoplastic ganglioglioma, infantile (C71._)
9412	1	Ganglioglioma, desmoplastic infantile (C71._)
9412	1	Infancy, desmoplastic astrocytoma of (C71._)
9412	1	Infantile astrocytoma, desmoplastic (C71._)
9412	1	Infantile ganglioglioma, desmoplastic (C71._)

9413	0	Dysembryoplastic neuroepithelial tumor
9413	0	Tumor, dysembryoplastic neuroepithelial
9413	0	Tumor, neuroepithelial, dysembryoplastic
9413	0	Neuroepithelial tumor, dysembryoplastic
9420	3	Fibrillary astrocytoma (C71._)
9420	3	Astrocytoma, fibrillary (C71._)
9420	3	Astrocytoma, fibrous (C71._)
9420	3	Fibrous astrocytoma (C71._)
9421	1	Pilocytic astrocytoma (C71._) [WHO behavior]
9421	1	Astrocytoma, juvenile (C71._) [WHO behavior]
9421	1	Astrocytoma, pilocytic (C71._) [WHO behavior]
9421	1	Astrocytoma, piloid (C71._) [WHO behavior]
9421	1	Spongioblastoma, NOS (C71._) [obs] [WHO behavior]
9421	1	Juvenile astrocytoma (C71._) [WHO behavior]
9421	1	Piloid astrocytoma (C71._) [WHO behavior]
9421	3	Pilocytic astrocytoma (C71._) [N. America behavior]
9421	3	Astrocytoma, juvenile (C71._) [N. America behavior]
9421	3	Astrocytoma, pilocytic (C71._) [N. America behavior]
9421	3	Astrocytoma, piloid (C71._) [N. America behavior]
9421	3	Juvenile astrocytoma (C71._) [N. America behavior]
9421	3	Piloid astrocytoma (C71._) [N. America behavior]
9421	3	Spongioblastoma, NOS (C71._) [obs] [N. America behavior]
9423	3	Polar spongioblastoma (C71._)
9423	3	Spongioblastoma polare (C71._)
9423	3	Primitive polar spongioblastoma (C71._) [obs]

9423	3	Spongioblastoma, primitive polar (C71._) [obs]
9423	3	Polare, spongioblastoma (C71._)
9423	3	Spongioblastoma, polar (C71._)
9423	3	Polar spongioblastoma, primitive (C71._) [obs]
9424	3	Pleomorphic xanthoastrocytoma (C71._)
9424	3	Xanthoastrocytoma, pleomorphic (C71._)
9430	3	Astroblastoma (C71._)
9440	3	Glioblastoma, NOS (C71._)
9440	3	Glioblastoma multiforme (C71._)
9440	3	Spongioblastoma multiforme (C71._)
9440	3	Multiforme, glioblastoma (C71._)
9440	3	Multiforme, spongioblastoma (C71._)
9441	3	Giant cell glioblastoma (C71._)
9441	3	Monstrocellular sarcoma (C71._) [obs]
9441	3	Glioblastoma, giant cell (C71._)
9441	3	Sarcoma, monstrocellular (C71._) [obs]
9442	1	Gliofibroma (C71._)
9442	3	Gliosarcoma (C71._)
9442	3	Glioblastoma with sarcomatous component (C71._)
9442	3	Component, glioblastoma with sarcomatous (C71._)
9442	3	Sarcomatous component, glioblastoma with (C71._)
9444	1	Chordoid glioma (C71._)
9444	1	Chordoid glioma of third ventricle (C71.5)
9444	1	Glioma, chordoid (C71._)
9444	1	Glioma, chordoid, third ventricle (C71.5)

9450 3 Oligodendroglioma, NOS (C71._)

9451 3 Oligodendroglioma, anaplastic (C71._)

9451 3 Anaplastic oligodendroglioma (C71._)

9460 3 Oligodendroblastoma (C71._) [obs]

9470 3 Medulloblastoma, NOS (C71.6)

9470 3 Melanotic medulloblastoma (C71.6)

9470 3 Medulloblastoma, melanotic (C71.6)

9471 3 Desmoplastic nodular medulloblastoma (C71.6)

9471 3 Arachnoidal cerebellar sarcoma, circumscribed (C71.6)

9471 3 Cerebellar sarcoma, arachnoidal, circumscribed (C71.6) [obs]

9471 3 Circumscribed arachnoidal cerebellar sarcoma (C71.6) [obs]

9471 3 Desmoplastic medulloblastoma (C71.6)

9471 3 Medulloblastoma, desmoplastic (C71.6)

9471 3 Sarcoma, arachnoidal cerebellar, circumscribed (C71.6) [obs]

9471 3 Sarcoma, circumscribed arachnoidal cerebellar (C71.6) [obs]

9471 3 Desmoplastic medulloblastoma, nodular (C71.6)

9471 3 Medulloblastoma, desmoplastic nodular (C71.6)

9471 3 Nodular medulloblastoma, desmoplastic (C71.6)

9472 3 Medullomyoblastoma (C71.6)

9473 3 Primitive neuroectodermal tumor, NOS (C71._)

9473 3 Tumor, neuroectodermal, primitive, NOS (C71._)

9473 3 Tumor, primitive neuroectodermal, NOS (C71._)

9473 3 Neuroectodermal tumor, primitive, NOS (C71._)

9473 3 PNET, NOS

9473 3 Central primitive neuroectodermal tumor, NOS (C71._)

9473	3	CPNET (C71._)
9473	3	Supratentorial PNET (C71._)
9473	3	Neuroectodermal tumor, central primitive, NOS (C71._)
9473	3	PNET, supratentorial (C71._)
9473	3	Primitive neuroectodermal tumor, central, NOS (C71._)
9473	3	Tumor, central primitive neuroectodermal, NOS (C71._)
9473	3	Neuroectodermal tumor, primitive, central, NOS (C71._)
9473	3	Tumor, neuroectodermal, central primitive, NOS (C71._)
9473	3	Tumor, primitive neuroectodermal, central, NOS (C71._)
9474	3	Large cell medulloblastoma (C71.6)
9474	3	Medulloblastoma, large cell (C71.6)
9480	3	Cerebellar sarcoma, NOS (C71.6) [obs]
9480	3	Sarcoma, cerebellar, NOS (C71.6) [obs]
9490	0	Ganglioneuroma
9490	3	Ganglioneuroblastoma
9491	0	Ganglioneuromatosis
9492	0	Gangliocytoma
9493	0	Dysplastic gangliocytoma of cerebellum (Lhermitte-Duclos) (C71.6)
9493	0	Gangliocytoma of cerebellum, dysplastic (Lhermitte-Duclos) (C71.6)
9493	0	Lhermitte-Duclos dysplastic gangliocytoma of cerebellum (C71.6)
9500	3	Neuroblastoma, NOS
9500	3	Sympathicoblastoma
9500	3	Central neuroblastoma (C71._)
9500	3	Neuroblastoma, central (C71._)
9501	0	Medulloepithelioma, benign (C69.4)

9501	0	Diktyoma, benign (C69._)
9501	3	Medulloepithelioma, NOS
9501	3	Diktyoma, malignant (C69._)
9502	0	Teratoid medulloepithelioma, benign (C69.4)
9502	0	Medulloepithelioma, teratoid, benign (C69.4)
9502	3	Teratoid medulloepithelioma (C69.4)
9502	3	Medulloepithelioma, teratoid (C69.4)
9503	3	Neuroepithelioma, NOS
9504	3	Spongioneuroblastoma
9505	1	Ganglioglioma, NOS
9505	1	Glioneuroma [obs]
9505	1	Neuroastrocytoma [obs]
9505	3	Ganglioglioma, anaplastic
9505	3	Anaplastic ganglioglioma
9506	1	Central neurocytoma
9506	1	Neurocytoma, NOS
9506	1	Cerebellar liponeurocytoma (C71.6)
9506	1	Lipomatous medulloblastoma (C71.6)
9506	1	Neurolipocytoma (C71.6)
9506	1	Medullocytoma (C71.6)
9506	1	Liponeurocytoma, cerebellar (C71.6)
9506	1	Medulloblastoma, lipomatous (C71.6)
9506	1	Neurocytoma, central
9507	0	Pacinian tumor
9507	0	Tumor, Pacinian

9508	3	Atypical teratoid/rhabdoid tumor (C71._)
9508	3	Rhabdoid/teratoid tumor, atypical (C71._)
9508	3	Teratoid/rhabdoid tumor, atypical (C71._)
9508	3	Tumor, atypical teratoid/rhabdoid (C71._)
9508	3	Tumor, rhabdoid/teratoid, atypical (C71._)
9508	3	Tumor, teratoid/rhabdoid, atypical (C71._)
9510	0	Retinocytoma (C69.2)
9510	3	Retinoblastoma, NOS (C69.2)
9511	3	Retinoblastoma, differentiated (C69.2)
9511	3	Differentiated retinoblastoma (C69.2)
9512	3	Retinoblastoma, undifferentiated (C69.2)
9512	3	Undifferentiated retinoblastoma (C69.2)
9513	3	Retinoblastoma, diffuse (C69.2)
9513	3	Diffuse retinoblastoma (C69.2)
9514	1	Retinoblastoma, spontaneously regressed (C69.2)
9514	1	Regressed, spontaneously, retinoblastoma (C69.2)
9514	1	Spontaneously regressed retinoblastoma (C69.2)
9520	3	Olfactory neurogenic tumor
9520	3	Tumor, olfactory neurogenic
9520	3	Neurogenic tumor, olfactory
9520	3	Tumor, neurogenic, olfactory
9521	3	Olfactory neurocytoma (C30.0)
9521	3	Esthesioneurocytoma (C30.0)
9521	3	Neurocytoma, olfactory (C30.0)
9522	3	Olfactory neuroblastoma (C30.0)

9522	3	Esthesioneuroblastoma (C30.0)
9522	3	Neuroblastoma, olfactory (C30.0)
9523	3	Olfactory neuroepithelioma (C30.0)
9523	3	Esthesioneuroepithelioma (C30.0)
9523	3	Neuroepithelioma, olfactory (C30.0)
9530	0	Meningioma, NOS (C70._)
9530	0	Microcystic meningioma (C70._)
9530	0	Secretory meningioma (C70._)
9530	0	Lymphoplasmacyte-rich meningioma (C70._)
9530	0	Metaplastic meningioma (C70._)
9530	0	Meningioma, lymphoplasmacyte-rich (C70._)
9530	0	Meningioma, microcytic (C70._)
9530	0	Meningioma, secretory (C70._)
9530	0	Meningioma, metaplastic (C70._)
9530	1	Meningiomatosis, NOS (C70._)
9530	1	Diffuse meningiomatosis (C70._)
9530	1	Meningiomas, multiple (C70._)
9530	1	Meningiomatosis, diffuse (C70._)
9530	1	Multiple meningiomas (C70._)
9530	3	Meningioma, malignant (C70._)
9530	3	Leptomeningeal sarcoma (C70._)
9530	3	Meningeal sarcoma (C70._)
9530	3	Meningothelial sarcoma (C70._)
9530	3	Sarcoma, leptomeningeal (C70._)
9530	3	Sarcoma, meningeal (C70._)

9530	3	Sarcoma, meningothelial (C70._)
9530	3	Meningioma, anaplastic (C70._)
9530	3	Anaplastic meningioma (C70._)
9531	0	Meningothelial meningioma (C70._)
9531	0	Endotheliomatous meningioma (C70._)
9531	0	Meningioma, endotheliomatous (C70._)
9531	0	Meningioma, meningothelial (C70._)
9531	0	Meningioma, syncytial (C70._)
9531	0	Syncytial meningioma (C70._)
9532	0	Fibrous meningioma (C70._)
9532	0	Fibroblastic meningioma (C70._)
9532	0	Meningioma, fibroblastic (C70._)
9532	0	Meningioma, fibrous (C70._)
9533	0	Psammomatous meningioma (C70._)
9533	0	Meningioma, psammomatous (C70._)
9534	0	Angiomatous meningioma (C70._)
9534	0	Meningioma, angiomatous (C70._)
9535	0	Hemangioblastic meningioma (C70._) [obs]
9535	0	Angioblastic meningioma (C70._) [obs]
9535	0	Meningioma, angioblastic (C70._) [obs]
9535	0	Meningioma, hemangioblastic (C70._) [obs]
9537	0	Transitional meningioma (C70._)
9537	0	Meningioma, mixed (C70._)
9537	0	Meningioma, transitional (C70._)
9537	0	Mixed meningioma (C70._)

9538	1	Clear cell meningioma (C70._)
9538	1	Chordoid meningioma (C70._)
9538	1	Meningioma, chordoid (C70._)
9538	1	Meningioma, clear cell (C70._)
9538	3	Papillary meningioma (C70._)
9538	3	Meningioma, papillary (C70._)
9538	3	Rhabdoid meningioma (C70._)
9538	3	Meningioma, rhabdoid (C70._)
9539	1	Atypical meningioma (C70._)
9539	1	Meningioma, atypical (C70._)
9539	3	Meningeal sarcomatosis (C70._)
9539	3	Sarcomatosis, meningeal (C70._)
9540	0	Neurofibroma, NOS
9540	1	Neurofibromatosis, NOS
9540	1	von Recklinghausen disease (except of bone)
9540	1	Multiple neurofibromatosis
9540	1	Neurofibromatosis, multiple
9540	1	Recklinghausen disease (except of bone)
9540	1	Disease, Recklinghausen (except of bone)
9540	1	Disease, von Recklinghausen (except of bone)
9540	3	Malignant peripheral nerve sheath tumor
9540	3	Neurofibrosarcoma [obs]
9540	3	Neurogenic sarcoma [obs]
9540	3	Neurosarcoma [obs]
9540	3	Sarcoma, neurogenic [obs]

9540	3	MPNST, NOS
9540	3	MPNST with glandular differentiation
9540	3	Epithelioid MPNST
9540	3	MPNST with mesenchymal differentiation
9540	3	Melanotic MPNST
9540	3	Melanotic psammomatous MPNST
9540	3	Differentiation, MPNST with glandular
9540	3	Differentiation, MPNST with mesenchymal
9540	3	Glandular differentiation, MPNST with
9540	3	Melanotic MPNST, psammomatous
9540	3	Mesenchymal differentiation, MPNST with
9540	3	MPNST, epithelioid
9540	3	MPNST, melanotic
9540	3	MPNST, melanotic psammomatous
9540	3	Nerve sheath tumor, malignant peripheral
9540	3	Psammomatous MPNST, melanotic
9540	3	Tumor, malignant, peripheral nerve sheath
9540	3	Tumor, nerve sheath, malignant peripheral
9540	3	Tumor, peripheral nerve sheath, malignant
9540	3	Peripheral nerve sheath tumor, malignant
9541	0	Melanotic neurofibroma
9541	0	Neurofibroma, melanotic
9550	0	Plexiform neurofibroma
9550	0	Neurofibroma, plexiform
9550	0	Neuroma, plexiform

9550	0	Plexiform neuroma
9560	0	Neurilemoma, NOS
9560	0	Acoustic neuroma (C72.4)
9560	0	Neurinoma
9560	0	Neuroma, acoustic (C72.4)
9560	0	Pigmented Schwannoma
9560	0	Schwannoma, NOS
9560	0	Schwannoma, melanotic
9560	0	Schwannoma, pigmented
9560	0	Melanotic schwannoma
9560	0	Plexiform schwannoma
9560	0	Cellular schwannoma
9560	0	Degenerated schwannoma
9560	0	Ancient schwannoma
9560	0	Psammomatous schwannoma
9560	0	Schwannoma, ancient
9560	0	Schwannoma, cellular
9560	0	Schwannoma, degenerated
9560	0	Schwannoma, plexiform
9560	0	Schwannoma, psammomatous
9560	1	Neurinomatosis
9560	3	Neurilemoma, malignant [obs]
9560	3	Neurilemosarcoma [obs]
9560	3	Schwannoma, malignant, NOS [obs]
9560	3	Malignant Schwannoma, NOS [obs]

9561	3	Malignant peripheral nerve sheath tumor with rhabdomyoblastic differentiation
9561	3	Tumor, Triton, malignant
9561	3	Triton tumor, malignant
9561	3	Schwannoma, malignant, with rhabdomyoblastic differentiation
9561	3	Schwannoma with rhabdomyoblastic differentiation, malignant
9561	3	Malignant Schwannoma with rhabdomyoblastic differentiation
9561	3	MPNST with rhabdomyoblastic differentiation
9561	3	Differentiation, malignant peripheral nerve sheath tumor with rhabdomyoblastic
9561	3	Differentiation, malignant schwannoma with rhabdomyoblastic
9561	3	Differentiation, MPNST with rhabdomyoblastic
9561	3	Nerve sheath tumor, malignant peripheral with rhabdomyoblastic differentiation
9561	3	Rhabdomyoblastic differentiation, malignant peripheral nerve sheath tumor with
9561	3	Rhabdomyoblastic differentiation, malignant schwannoma with
9561	3	Rhabdomyoblastic differentiation, MPNST with
9561	3	Tumor, nerve sheath, malignant peripheral, with rhabdomyoblastic differentiation
9561	3	Tumor, nerve sheath, malignant, with rhabdomyoblastic differentiation
9561	3	Peripheral nerve sheath tumor with rhabdomyoblastic differentiation, malignant
9562	0	Neurothekeoma
9562	0	Myxoma, nerve sheath
9562	0	Nerve sheath myxoma
9570	0	Neuroma, NOS
9571	0	Perineurioma, NOS
9571	0	Intraneural perineurioma
9571	0	Soft tissue perineurioma
9571	0	Perineuroma, intraneural

9571	0	Perineuroma, soft tissue
9571	3	Perineurioma, malignant
9571	3	Perineural MPNST
9571	3	MPNST, perineural
9580	0	Granular cell tumor, NOS
9580	0	Tumor, granular cell, NOS
9580	0	Granular cell myoblastoma, NOS
9580	0	Myoblastoma, granular cell, NOS
9580	3	Granular cell tumor, malignant
9580	3	Tumor, granular cell, malignant
9580	3	Granular cell myoblastoma, malignant
9580	3	Myoblastoma, granular cell, malignant
9581	3	Alveolar soft part sarcoma
9581	3	Sarcoma, alveolar soft part
9581	3	Soft part sarcoma, alveolar
9582	0	Granular cell tumor of the sellar region (C75.1)
9582	0	Sellar region granular cell tumor (C75.1)
9582	0	Tumor, granular cell, sellar region (C75.1)
9863	3	Chronic myeloid leukemia, NOS (C42.1)
9875	3	Chronic myelogenous leukemia, BCR/ABL positive (C42.1)
9876	3	Atypical chronic myeloid leukemia, BCR/ABL negative (C42.1)
9876	3	Atypical chronic myeloid leukemia, Philadelphia chromosome (Ph1) negative (C42.1)
9876	3	Leukemia, atypical chronic myeloid, BCR/ABL negative(C42.1)
9876	3	Leukemia, atypical chronic myeloid, Philadelphia chromosome Ph 1 negative (C42.1)

9876	3	Leukemia, BCR/ABL negative, atypical chronic myeloid (C42.1)
9876	3	Leukemia, chronic, atypical myeloid, BCR/ABLnegative (C42.1)
9876	3	Leukemia, chronic, atypical myeloid, Philadelphia chromosome Ph 1 negative (C42.1)
9876	3	Leukemia, chronic, myeloid, BCR/ABL negative, atypical (C42.1)
9876	3	Leukemia, chronic, myeloid, Philadelphia chromosome Ph 1 negative, atypical (C42.1)
9876	3	Leukemia, myeloid, atypical chronic, BCR/ABLnegative (C42.1)
9876	3	Leukemia, myeloid, atypical chronic, Philadelphia chromosome Ph 1 negative (C42.1)
9876	3	Leukemia, myeloid, chronic, BCR/ABL negative, atypical (C42.1)
9876	3	Leukemia, myeloid, chronic, Philadelphia chromosome Ph 1 negative, atypical (C42.1)
9876	3	Leukemia, Philadelphia chromosome Ph 1 negative, atypical chronic myeloid (C42.1)
9945	3	Chronic myelomonocytic leukemia, NOS (C42.1)
9945	3	Chronic myelomonocytic leukemia, Type I (C42.1)
9945	3	Chronic myelomonocytic leukemia, Type II (C42.1)
9945	3	Chronic myelomonocytic leukemia in transformation (C42.1) [obs]
9945	3	Leukemia, myelomonocytic, chronic, NOS (C42.1)
9945	3	Leukemia, chronic, myelomonocytic, NOS (C42.1)
9945	3	Leukemia, chronic, myelomonocytic, in transformation (C42.1) [obs]
9945	3	Leukemia, chronic, myelomonocytic, Type I (C42.1)
9945	3	Leukemia, chronic, myelomonocytic, Type II (C42.1)
9945	3	Leukemia, myelomonocytic, chronic, in transformation (C42.1)
9945	3	Leukemia, myelomonocytic, chronic, Type I (C42.1)
9945	3	Leukemia, myelomonocytic, chronic, Type II (C42.1)

9945	3	Leukemia, myelomonocytic, in transformation, chronic (C42.1)
9946	3	Juvenile myelomonocytic leukemia (C42.1)
9946	3	Juvenile chronic myelomonocytic leukemia (C42.1)
9946	3	Leukemia, chronic, juvenile myelomonocytic (C42.1)
9946	3	Leukemia, chronic, myelomonocytic, juvenile (C42.1)
9946	3	Leukemia, juvenile myelomonocytic (C42.1)
9946	3	Leukemia, myelomonocytic, chronic, juvenile (C42.1)
9946	3	Leukemia, myelomonocytic, juvenile (C42.1)
9946	3	Leukemia, myelomonocytic, juvenile, chronic (C42.1)

Appendix E: Site-Specific Surgery Codes

BREAST C50.0–C50.9

(Except for M-9727, 9733, 9741-9742, 9764-9809, 9832, 9840-9931, 9945-9946, 9950-9967, and 9975-9992)

Codes

00 None; no surgery of primary site; autopsy ONLY

19 Local tumor destruction, NOS

No specimen was sent to pathology for surgical events coded 19 (principally for cases diagnosed prior to January 1, 2003).

20 Partial mastectomy, NOS; less than total mastectomy, NOS
- 21 Partial mastectomy WITH nipple resection
- 22 Lumpectomy or excisional biopsy
- 23 Reexcision of the biopsy site for gross or microscopic residual disease
- 24 Segmental mastectomy (including wedge resection, quadrantectomy, tylectomy)

Procedures coded 20–24 remove the gross primary tumor and some of the breast tissue (breast-conserving or preserving). There may be microscopic residual tumor.

30 Subcutaneous mastectomy

A subcutaneous mastectomy, also called a nipple sparing mastectomy, is the removal of breast tissue without the nipple and areolar complex or overlying skin. It is performed to facilitate immediate breast reconstruction. Cases coded 30 may be considered to have undergone breast reconstruction.

40 Total (simple) mastectomy
- 41 WITHOUT removal of uninvolved contralateral breast
  - 43 With reconstruction NOS
    - 44 Tissue
    - 45 Implant
    - 46 Combined (Tissue and Implant)
- 42 WITH removal of uninvolved contralateral breast
  - 47 With reconstruction NOS
    - 48 Tissue
    - 49 Implant
    - 75 Combined (Tissue and Implant)

A total (simple) mastectomy removes all breast tissue, the nipple, and areolar complex. An axillary dissection is not done, but sentinel lymph nodes may be removed.

For single primaries only, code removal of the involved contralateral breast under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294) and/or *Surgical Procedure/Other Site at This Facility* (NAACCR Item #674).

If the contralateral breast reveals a second primary, each breast is abstracted separately. The surgical procedure is coded 41 for the first primary. The surgical code for the contralateral breast is coded to the procedure performed on that site.

Reconstruction that is planned as part of first course treatment is coded 43-49 or 75, whether it is done at the time of mastectomy or later.

76 Bilateral mastectomy for a single tumor involving both breasts, as for bilateral inflammatory carcinoma.

50 Modified radical mastectomy
- 51 WITHOUT removal of uninvolved contralateral breast
  - 53 Reconstruction, NOS
    - 54 Tissue
    - 55 Implant
    - 56 Combined (Tissue and Implant)
- 52 WITH removal of uninvolved contralateral breast
  - 57 Reconstruction, NOS
    - 58 Tissue
    - 59 Implant
    - 63 Combined (Tissue and Implant)

Removal of all breast tissue, the nipple, the areolar complex, and variable amounts of breast skin in continuity with the axilla. The specimen may or may not include a portion of the pectoralis major muscle. If only sentinel lymph nodes are removed, the procedure should be coded as a simple mastectomy.

If contralateral breast reveals a second primary, it is abstracted separately. The surgical procedure is coded 41 or 51 for the first primary. The surgical code for the contralateral breast is coded to the procedure performed on that site.

For single primaries only, code removal of involved contralateral breast under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294) or *Surgical Procedure/Other Site at This Facility* (NAACCR Item #674).

60 Radical mastectomy, NOS
- 61 WITHOUT removal of uninvolved contralateral breast
  - 64 Reconstruction, NOS
    - 65 Tissue
    - 66 Implant
    - 67 Combined (Tissue and Implant)
- 62 WITH removal of uninvolved contralateral breast
  - 68 Reconstruction, NOS
    - 69 Tissue
    - 73 Implant
    - 74 Combined (Tissue and Implant)

70 Extended radical mastectomy
- 71 WITHOUT removal of uninvolved contralateral breast
- 72 WITH removal of uninvolved contralateral breast

80 Mastectomy, NOS

Specimen sent to pathology for surgical events coded 20-80.

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

CHRONIC MYELOID LEUKEMIA (CML)
Hematopoietic/ Reticuloendothelial/ Immunoproliferative/Myeloproliferative Disease
C42.0, C42.1, C42.3, C42.4 (with any histology)
or
M-9727, 9733, 9741-9742, 9764-9809, 9832, 9840-9931, 9945-9946, 9950-9967, and 9975-9992 **(with any site)**

Code

98 All hematopoietic/reticuloendothelial/immunoproliferative/myeloproliferative disease sites and/or histologies, WITH or WITHOUT surgical treatment.

Surgical procedures for hematopoietic/reticuloendothelial/immunoproliferative/ myeloproliferative primaries are to be recorded using the data item *Surgical Procedure/Other Site* (NAACCR Item #1294) or *Surgical Procedure/Other Site at This Facility* (NAACCR Item #674).

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294).

Codes

00 None; no surgery of primary site; autopsy ONLY

10 Local tumor destruction, NOS
- 11 Photodynamic therapy (PDT)
- 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
- 13 Cryosurgery
- 14 Laser

No specimen sent to pathology from surgical events 10–14.

20 Local tumor excision, NOS
- 27 Excisional biopsy
- 26 Polypectomy, NOS
- 28 Polypectomy-endoscopic
- 29 Polypectomy-surgical excision

Any combination of 20 or 26–29 WITH
- 21 Photodynamic therapy (PDT)
- 22 Electrocautery
- 23 Cryosurgery
- 24 Laser ablation

25 Laser excision

30 Partial colectomy, segmental resection
- 32 Plus resection of contiguous organ; example: small bowel, bladder

40 Subtotal colectomy/hemicolectomy (total right or left colon and a portion of transverse colon)
- 41 Plus resection of contiguous organ; example: small bowel, bladder

50 Total colectomy (removal of colon from cecum to the rectosigmoid junction; may include a portion of the rectum)
- 51 Plus resection of contiguous organ; example: small bowel, bladder

60 Total proctocolectomy (removal of colon from cecum to the rectosigmoid junction, including the entire rectum)
- 61 Plus resection of contiguous organ; example: small bowel, bladder

70 Colectomy or coloproctotectomy with resection of contiguous organ(s), NOS (where there is not enough information to code 32, 41, 51, or 61)
Code 70 includes: Any colectomy (partial, hemicolectomy, or total) WITH a resection of any other organs in continuity with the primary site. Other organs may be partially or totally removed. Other organs may include, but are not limited to, oophorectomy, partial proctectomy, rectal mucosectomy, or pelvic exenteration.

80 Colectomy, NOS

Specimen sent to pathology from surgical events 20–80.

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294).

Codes

00 None; no surgery of primary site; autopsy ONLY

10 Local tumor destruction, NOS
- 11 Photodynamic therapy (PDT)
- 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
- 13 Cryosurgery
- 14 Laser ablation

No specimen sent to pathology from surgical events 10–14.

20 Local tumor excision, NOS
- 26 Polypectomy
- 27 Excisional biopsy

Combination of 20 or 26–27 WITH
- 21 Photodynamic therapy (PDT)
- 22 Electrocautery
- 23 Cryosurgery
- 24 Laser ablation

25 Laser excision

30 Wedge or segmental resection; partial proctosigmoidectomy, NOS
- 31 Plus resection of contiguous organs; example: small bowel, bladder

Procedures coded 30 include, but are not limited to:
- Anterior resection
- Hartmann operation
- Low anterior resection (LAR)
- Partial colectomy, NOS
- Rectosigmoidectomy, NOS
- Sigmoidectomy

40 Pull through WITH sphincter preservation (colo-anal anastomosis)

50 Total proctectomy

51 Total colectomy

55 Total colectomy WITH ileostomy, NOS
- 56 Ileorectal reconstruction
- 57 Total colectomy WITH other pouch; example: Koch pouch

60 Total proctocolectomy, NOS
65 Total proctocolectomy WITH ileostomy, NOS
66 Total proctocolectomy WITH ileostomy and pouch

Removal of the colon from cecum to the rectosigmoid or a portion of the rectum.

70 Colectomy or proctocolectomy resection in continuity with other organs; pelvic exenteration

80 Colectomy, NOS; Proctectomy, NOS

Specimen sent to pathology from surgical events 20–80.

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

Code removal/surgical ablation of single or multiple liver metastases under the data item *Surgical Procedure/Other Site* (NAACCR Item #1294).

Codes

00 None; no surgery of primary site; autopsy ONLY

10 Local tumor destruction, NOS
- 11 Photodynamic therapy (PDT)
- 12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)
- 13 Cryosurgery
- 14 Laser

No specimen sent to pathology from surgical events 10-14.

20 Local tumor excision, NOS
- 27 Excisional biopsy
- 26 Polypectomy

Any combination of 20 or 26–27 WITH
- 21 Photodynamic therapy (PDT)
- 22 Electrocautery
- 23 Cryosurgery
- 24 Laser ablation

- 25 Laser excision
- 28 Curette and fulguration

30 Wedge or segmental resection; partial proctectomy, NOS

Procedures coded 30 include, but are not limited to:
- Anterior resection
- Hartmann's operation
- Low anterior resection (LAR)
- Transsacral rectosigmoidectomy
- Total mesorectal excision (TME)

40 Pull through WITH sphincter preservation (coloanal anastomosis)

50 Total proctectomy

Procedure coded 50 includes, but is not limited to:
- Abdominoperineal resection (Miles Procedure)

60 Total proctocolectomy, NOS

70 Proctectomy or proctocolectomy with resection in continuity with other organs; pelvic exenteration

80 Proctectomy, NOS

Specimen sent to pathology from surgical events 20–80.

90 Surgery, NOS

99 Unknown if surgery performed; death certificate ONLY

Appendix F: Chemotherapy Coding Example

The following chemotherapy treatment example is used throughout the data dictionary to illustrate how data collection for the non-NAACCR standard chemotherapy variables was completed. Abstractors collected data for up to six chemotherapy agents given as first course of treatment. Please use the following link to access the SEER Program Code Manual for the full definition of first course of treatment:

http://seer.cancer.gov/manuals/2007/SPCSM_2007_maindoc.pdf

Non-NAACCR standard chemotherapy variables being collected are:

- Chemotherapy NSC* number
- Chemotherapy Number of Doses Planned
- Chemotherapy Total Dose Planned
- Chemotherapy Number of Doses Received
- Chemotherapy Total Dose Received
- Chemotherapy Received Start Date
- Chemotherapy Received End Date

*For NSC Number, the data dictionary refers abstractors to the most current SEER*Rx (http://seer.cancer.gov/tools/seerrx/). SEER*Rx allows you to look up the treatment category for over 1600 drugs and the individual treatment categories for the drugs in over 700 regimens. The SEER*Rx screen provides information on generic name, brand name, NSC number, drug category and subcategory, cancer sites where the drug is used, and other details, including whether or not the drug should be coded as treatment.

Please note that the term "NSC" [number] refers to (part of) the acronym of the Cancer Chemotherapy National Service Center (CCNSC)). The NSC number is a National Service Center assigned number from the National Cancer Institute (NCI). This number is assigned to a drug during its investigational phase, prior to the adoption of a United States Adopted Name (USAN). A full list of NSC codes is maintained in SEER*Rx.

Example:
Patient's first course of therapy is consistent with the FLOX treatment protocol for stage II and III colon cancer. FLOX consists of FULV regimen (5-FU, 500 mg/m^2 iv bolus weekly x 6; LV, 500 mg/m^2 iv weekly x 6, each 8 week cycle x 3) with oxaliplatin 85 mg/m^2 iv administered on weeks 1, 3, and 5 of each 8 week cycle x 3. Patient's first treatment was on May 24, 2010.

Patient became too ill to finish third cycle (as planned), and missed the last two doses of 5-FU and LV, and the last dose of oxaliplatin. Last day chemotherapy administered was October 4, 2010 for 5-FU and LV (patient missed October 11 and 18 planned treatments) and September 27 for oxaliplatin (patient missed October 11 planned treatment). See chart for full listing of how dates correspond to 3 cycles, 8 weeks each:

Listing of chemotherapy dates associated with each cycle for complete first course of treatment:
Cycle 1: Week 1 (Day 1): May 24, 2010 Start 5-FU, LV; oxaliplatin
Week 2 (Day 8): May 31, 2010 Continue 5-FU, LV

Week 3 (Day 15): June 7, 2010 Continue 5-FU, LV; oxaliplatin
Week 4 (Day 22): June 14, 2010 Continue 5-FU, LV
Week 5 (Day 29): June 21, 2010 Continue 5-FU, LV; oxaliplatin
Week 6 (Day 36): June 28, 2010 Continue 5-FU, LV
Week 7 (Day 43): July 5, 2010 No chemo agents scheduled
Week 8 (Day 50): July 12, 2010 No chemo agents scheduled

Cycle 2: Week 1 (Day 1): July 19, 2010 Start 5-FU, LV; oxaliplatin
Week 2 (Day 8): July 26, 2010 Continue 5-FU, LV
Week 3 (Day 15): August 2, 2010 Continue 5-FU, LV; oxaliplatin
Week 4 (Day 22): August 9, 2010 Continue 5-FU, LV
Week 5 (Day 29): August 16, 2010 Continue 5-FU, LV; oxaliplatin
Week 6 (Day 36): August 23, 2010 Continue 5-FU, LV
Week 7 (Day 43): August 30, 2010 No chemo agents scheduled
Week 8 (Day 50): September 6, 2010 No chemo agents scheduled

Cycle 3: Week 1: September 13, 2010 Start 5-FU, LV; oxaliplatin
Week 2: September 20, 2010 Continue 5-FU, LV
Week 3: September 27, 2010 Continue 5-FU, LV; oxaliplatin
Week 4: October 4, 2010 Continue 5-FU, LV
Week 5: October 11, 2010 Continue 5-FU, LV; oxaliplatin -- Patient became too ill to finish third cycle and missed this treatment
Week 6: October 18, 2010 Continue 5-FU, LV *-- Patient became too ill to finish third cycle and missed this treatment*
Week 7: October 25, 2010 No chemo agents scheduled
Week 8: November 1, 2010 No chemo agents scheduled

Table of *Planned* Chemotherapy

Drug	Dose	Schedule (D=Day #)	# of Cycles	Total # Doses **Planned**	Total Dose **Planned**
5-FU	500 mg/m2	Weekly x 6 weeks (i.e., D 1, 8, 15, 22, 29, 36)	3	6 x 3 = 18	500 mg/m2 x 18 = **9000** mg/m2
Folinic Acid/ Leucovorin*	500 mg/m2	Weekly x 6 weeks (i.e., D 1, 8, 15, 22, 29, 36)	3	6 x 3 = 18	500 mg/m2 x 18 = **9000** mg/m2
Oxaliplatin	85 mg/m2	Week 1, 3, and 5 (D 1, 15, 29)	3	3 x 3 = 9	85 mg/m2 x 9 = **765** mg/m2

*Folinic Acid is considered an ancillary agent, no information related to it will be collected.

Table of *Received* Chemotherapy

Drug	Dose	Schedule (D=Day #)	# of Cycles	Total # Doses **Received**	Total Dose **Received**
5-FU	500 mg/m2	Weekly x 6 weeks (i.e., D 1, 8, 15, 22, 29, 36)	3	6 x 3 = 18 less 2 doses = 16 total	500 mg/m2 x 16 = **8000** mg/m2
Folinic Acid/ Leucovorin*	500 mg/m2	Weekly x 6 weeks (i.e., D 1, 8, 15, 22, 29, 36)	3	6 x 3 = 18 less 2 doses = 16 total	500 mg/m2 x 16 = **8000** mg/m2
Oxaliplatin	85 mg/m2	Week 1, 3, and 5 (D 1, 15, 29)	3	3 x 3 = 9 less 1 dose = 8 total	85 mg/m2 x 8 = **680** mg/m2

*Folinic Acid is considered an ancillary agent, no information related to it will be collected.

Appendix G: How to Obtain SES Data from the U.S. Census Bureau

Source: US Census Bureau (publicly available files)

Available from the following web site - http://factfinder2.census.gov
Specific directions to download the files are included later in this appendix.

Data files used for linking Socio Economic Status indicators to cancer registry abstracted data:

2010, American Community Survey, 5 year – multiple tables

- Table DP02, Social Characteristics (file name ACS_10_5YR_DP02_metadata.csv)
- Table DP03, Economic Characteristics (file name ACS_10_5YR_DP03_metadata.csv)
- Table DP04, Housing Characteristics (file name ACS_10_5YR_DP04_metadata.csv)
- Table DP05, Basic Demographic Characteristics (file name ACS_10_5YR_DP02_metadata.csv)

2010, American Community Survey, 3 year – in order to obtain insurance estimates at the county level[1], Table DP03, Economic Characteristics

- Table DP03, Economic Characteristics (file name ACS_10_3YR_DP03_metadata.csv)

2010 Census, Summary File 1 – in order to obtain urban/rural variable

- Table P2 for Urban/Rural variables (file name DEC_10_SF1_P2_metadata.csv)

The characteristics obtained from the above tables include:

- Urban/rural indicators
- Education
- Employment status
- Income ranges
- Health insurance coverage
- Poverty level indicators

[1]Based on correspondence with staff from the American Community Survey, insurance data is not yet available at the census tract level, and is only available at the county level in the three year estimate files at this point. Per ACS staff: "The American Community Survey (ACS) does produce estimates at the sub-county level. However, the ACS did not start collecting health insurance information until 2008, so a full five years of data has not been collected. This is the reason that the health insurance sections of tables from the 2006-2010 ACS 5-year estimates contain 'X'. Geographies that are available in the 2008-2010 ACS 3-year estimates (those with a population of 20,000 or more) will include health insurance estimates." The census tract geography is not available in the ACS 3-year estimates and is "missing" for all census tracts in the ACS 5-year estimates at this point. Health insurance data at the county is available in the 2008-2010 ACS 3-year estimates.

Steps to download data:

Go to http://factfinder2.census.gov

- Click on Advanced Search, Show Me All
- Under 'Search Using the Options Below,'
    - Click on Geographies
    - Select Census Tracts – 140
    - Click a State
    - Click All Census Tracts within State
    - Close the selection box
- Under 'Topics'
    - Click on Data Set
    - Select the data sets you want (e.g., 2010 ACS 5-year estimates, 2010 SF1 100% Data, 2010 SF2 100% Data)
    - Close the selection box
- Hit "Go"
- In "Search" box above the tables, search on a topic of interest (e.g., "education" or "poverty") or go to the tables listed above (DP02, DP03, DP04, DP05, and P2)
- Click on the table of interest and there will be options to view and download the data

For the health insurance variables, since they are only available at the geography of county, do the following steps:

- Click on Advanced Search, Show Me All
- Under 'Search Using the Options Below,'
    - Click on Geographies
    - Select County – 05
    - Click a State
    - Click All Counties within State
    - Close the selection box
- Under 'Topics'
    - Click on Data Set
    - Select the data sets you want (e.g., 2010 ACS 3-year estimates)
    - Close the selection box
- Hit "Go"
- In "Search" box above the tables, search on a topic of interest (e.g., "insurance") or go to the tables listed above (DP03)

Click on the table of interest and there will be options to view and download the data

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