

South Carolina Central Cancer Registry Recommendations for Implementation of Changes to Reporting Standards, Effective 2023

Record Layout and Data Standard

Recommendations are based on NAACCR Version 23

Revised **2/3/2023**

Please visit [SCCCR DHEC Website](#) for Cancer Data Collection Standards and Reporting, Education, and Resources

NOTE: This document does not replace the SCCCR Reporting Source Manual. This document should be used in conjunction with it. This document may re-state some of its content and is specifically meant for 2023 reporting guidance. **Recent updates highlighted in yellow.**

1. Preface

Important Notice to South Carolina Cancer Registrars Regarding Abstracting and Reporting of Cancer Cases Diagnosed in 2023 Prior to Release of NAACCRv23 Compliant Software.

There have been extensive changes to the NAACCR layout for 2023. Along with the NAACCR updates, we will implement changes associated with other data standard-setters for reporting.

Reporting facilities in South Carolina should direct any corrections, comments, and suggestions regarding this document to Connie Boone (boonecr@dhec.sc.gov). If individuals or facilities that are not part of the South Carolina reporting system need copies of the reporting manual, they may download the PDF from the [South Carolina Central Cancer Registry website](#). (To open PDF click on the SCCC Reporting Manual link.)

- **Important Reminders for 2023 cases submitted to SCCC**
 1. SCCC will not be able to accept 2023 cases (admit/dx) until **March 2023**. If there are further delays, you will be notified.
 2. SCCC will only be accepting cases after **March 2023 in NAACCR v23 format**. Please contact Michael Castera Electronic Reporting Manager @ SCCC.
 3. 2023 abstracts can be started in NAACCR v23 version but must be completed using NAACCR v23 before submitting to SCCC.
 4. SCCC recommends facilities document details for the new data items for completion of the abstracts in v23 software with the new codes.
 5. The SCCC requires sufficient TEXT to support all codes, especially the new codes (e.g., HISTOLOGY, GRADE, AJCC & Summary STAGE, ETC.). The TEXT will provide an easy reference for coding cases that require v23 software when it becomes available.
 6. 2023 Reportable list: <https://scdhec.gov/CancerRegistry> ([Downloads & Links](#)) [Cancer Standards and Reporting](#)
 7. **Reportable by Agreement changes: Class Case 43 and Class Case 30**

Please remember the SCCC is here to be used as a resource and to support your team. If you have any questions, please email us at boonecr@dhec.sc.gov or call 803-898-8000. We are here to help you.

Thank you for your continued commitment to ensure that the SCCC data is of the highest quality. The data you provide remains the cornerstone of the South Carolina Cancer Registry.

**Connie Boone, BSPH, AAS, CTR
Quality Control Manager/ETC**

South Carolina Central Cancer Registry Resources

- [SCCCR Website](#)
 - Genedits, Electronic Reporting, Resource link Reporting Manual
- Cancer Registrar Education
 - [FLccSc](#) : Stand-alone, web-based learning management system (LMS) to customize a fully-functioning LMS to address our specific educational needs.
 - [ASK a SC REGISTRAR](#) is an interactive Cancer Forum for SCCRA members. Your questions will be answered in a timely manner and posted on SCCRA website for search options to review.

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NAACCR Version 23 Reference Page

Below are links to key resources registries may find useful as they plan to transition to V23.

[HTTPS://WWW.NAACCR.ORG/V23REFERENCEPAGE/](https://www.naacccr.org/v23referencepage/)

- [NAACCR 2023 Implementation Guidelines](#)
- [V23 NAACCR Data Standards and Data Dictionary](#)
- [NAACCR XML Dictionaries](#)
- [NAACCR V23 Edits Metafile \(including Changes Spreadsheet\)](#)
- [SEER Program Coding and Staging Manual \(includes Summary of Changes\)](#)
- [Commission on Cancer STORE Manual](#)
- [Site Specific Data Items \(SSDI\) and Grade Manual v3.0 \(includes change log\)](#)
- [AJCC Cancer Staging System](#)
- [SEER RSA \(EOD, Summary Stage, SSDI's, Grade\) v3.0 \(includes summary of changes\)](#)
- [Summary Stage 2018 \(includes revision history\)](#)
- [Extent of Disease \(EOD\) 2018 \(includes change log\)](#)
- [Solid Tumor Rules \(includes summary and changes\)](#)
- [ICD O 3.2 \(includes new codes, coding guidelines, and changes for 2023 implementation\)](#)
- [SEER Site/Histology Validation List](#)
- [Hematopoietic Manual and Database \(see revision history on the left\)](#)

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2 New Data Items

2.1 Site-Specific Data Items

Two new site-specific data items (SSDIs) are added to capture information related to prognosis and/or treatment planning and reflect changes in clinical guidelines. These are required by some standard setters starting in 2023. All new SSDI information is incorporated into the Staging APIs. Please see the [SSDI Manual, Version 3.0](#).

Item #	SSDI Name	Schema
3960	Histologic Subtype	Appendix V9
3961	Clinical Margin Width	Melanoma Skin

2.2 Surgery Primary Site Data Items

Two new data items are added by CoC, RX Hosp--Surg Prim Site 2023 [671] and RX Summ--Surg Prim Site 2023 [1291]. These four-digit alphanumeric data items will replace RX Summ--Surg Prim Site [1290] and RX Hosp--Surg Prim Site [670] for cases diagnosed January 1, 2023, and forward. For cases diagnosed prior to January 1, 2023, RX Hosp--Surg Prim Site 2023 [671] and RX Summ--Surg Prim Site 2023 [1291] data items must be left blank.

Codes starting with A indicate no significant change to the surgery code validation list. Codes starting with B indicates changes to the surgery code(s).

The existing data items, RX Summ--Surg Prim Site [1290] and RX Hosp--Surg Prim Site [670], should be left blank for cases diagnosed January 1, 2023, and forward.

2.3 Information Release Data Items

There are two new central cancer registry data items to capture when patient information is allowed to be released for research or other purposes, **No Patient Contact Flag [1854]** and Reporting Facility Restriction Flag [1856]. No Patient Contact Flag is used to flag when a patient, family member, or provider notifies the central registry that the patient is not to be contacted for research purposes. This data item is assigned at the patient level. Reporting Facility Restriction Flag is used to flag tumor records that the central cancer registry may not be allowed to release for research and certain other types of uses due to the type of reporting facility (e.g., VA or DoD). This data item is assigned at the tumor level.

If a registry currently uses the CRS Plus defined codes for Unusual Follow Up Method, then the registry will need to work with their software vendor to convert existing data into the new field for Reporting Facility Restriction Flag, as well as the affiliated data item No Patient Contact Flag. If a registry has another user-defined field to capture potentially non-releasable records, they will need to work with their software vendor to establish the conversion logic and possibly update their user dictionary. If required by standard setters, or if registries choose to implement, both new data items are to be populated for all diagnosis years and blanks are not allowed.

3 Changed Data Items

3.1 Name Changes

The following two data item names changed to avoid confusion with the new data items in [section 2.2](#):

- RX Hosp--Surg Prim Site [670] to RX Hosp--Surg Prim Site 03-2022 [670]
- RX Summ--Surg Prim Site [1290] to RX Summ--Surg Prim Site 03-2022 [1290] Note: the XML NAACCR ID did not change.

3.2 Race 1 – 5

The following code labels changed for Race 1 through 5 [160, 161, 162, 163 and 164]:

Race Code Label Changes		
Code	Current Label	New Label
02	Black	Black or African American
03	American Indian, Aleutian, or Alaska Native (includes all indigenous populations of the Western hemisphere)	American Indian or Alaska Native
07	Hawaiian	Native Hawaiian
13	Kampuchean (Cambodian)	Cambodian
15	Asian Indian or Pakistani, NOS	Asian Indian, NOS or Pakistani, NOS
21	Chamorro/Chamoru	Chamorro
32	New Guinean	Papua New Guinean
98	Other	Some other race
99	Unknown	Unknown by patient

Label changes for Race 1 through 5 align with the U.S. Office of Management and Budget (OMB) Guidelines ([Federal Register Vol. 62, No 210, 10/30/1997](#)), 2020 U.S. Census coding guidelines ([Appendix F. Hispanic Origin and Race Code List](#)), and other federal government standards.

These label changes are not considered sufficient to warrant a new coding system value, so there will be no new codes for Race Coding Sys--Current [170] or Race Coding Sys--Original [180].

Note: These code label changes are also made in Race—NAPIIA (Derived API) [193].

3.3 Site-Specific Data Items

Some SSDI codes and code descriptions are changed to reflect changes in clinical management and/or staging and to improve clarity or to address questions that were raised in the various forums. Code changes for SSDIs are applicable to cases diagnosed January 1, 2018, and forward, but registrars will not be required to update previously coded information.

p16 [3956], which is an existing SSDI for the cervix V9 schema (09520), is added to the Anus V9 schema (09210) (see [section 5.8](#)). For cases diagnosed prior to January 1, 2023, p16 should be left blank for Anus V9.

New SSDIs and code changes are incorporated in the AJCC Cancer Surveillance DLL and the SEER Staging RSA API/library. Other than updating the staging API that you use, there is no need for action for these types of changes. They are documented in the change log which can be accessed on <https://apps.naaccr.org/ssdi/list/>. Also, the SSDI Manual, Version 3.0 (<https://apps.naaccr.org/ssdi/list/>) provides the changes to existing notes, codes, and code descriptions.

3.4 Tobacco Use Smoking Status

For Tobacco Use Smoking Status [344], the code label “1 Current Some Day Smoker” changed to “1 Current Smoker”.

3.5 Coding System Data Items

- Morph Coding Sys--Current [470] and Morph Coding Sys—Original [480]: Code D is added for ICD-O-3.2, plus WHO new terms used for conditions effective January 1, 2023***
- Schema ID Version Current [2117] and Schema ID Version Original [2118]: Code 3.0 is added. Schema ID Version Current should be updated to the new value for all cases in the database diagnosed January 1, 2018, or later when the system is updated to include the new EOD 2018 version. Schema ID Version Original should be set to the version in use when the case is collected. While this version is required for the 2023 diagnosis year, if a 2018-2022 case is collected after the system is updated, the schema ID Version Original should be set to 3.0.
- AJCC Cancer Surveillance DLL Version Current [2158] and AJCC Cancer Surveillance DLL Version Original [2159]: Code 09.01.00.0001 is added. AJCC Cancer Surveillance DLL Version Current [2158] should be updated to the new value for all cases in the database diagnosed January 1, 2018, or later when the system is updated to NAACCR V23. AJCC Cancer Surveillance DLL Version Original [2159] should be set to the version in use when the case is collected. While this version is required for the 2023 diagnosis year, if a 2018-2022 case is collected after the system is updated, the AJCC Cancer Surveillance DLL Version Original [2159] should be set to 09.01.00.0001.
- AJCC API Version Current [2156] and AJCC API Version Original [2157]: Code 09.01.00 is added. AJCC API Version Current [2156] should be updated to the new value for all cases in the database diagnosed January 1, 2018, or later when the system is updated to NAACCR V23. AJCC API Version Original [2157] should be set to the version in use when the case is collected. While this version is required for the 2023 diagnosis year, if a 2018-2022 case is collected after the system is updated, the AJCC API Version Original [2157] should be set to 09.01.00.

3.6 Text Data Items

The allow Unlimited Text attribute is retired in NAACCR XML Data Exchange Standard v1.6. Instead, the following text field lengths changed from 1,000 to 4,000 characters.

Data Items with Text Field Length Changes	
Item #	Item Name
2508	EHR Reporting
2520	Text--Dx Proc--PE
2530	Text--Dx Proc--X-ray/Scan
2540	Text--Dx Proc--Scopes
2550	Text--Dx Proc--Lab Tests
2560	Text--Dx Proc--Op
2570	Text--Dx Proc--Path
2600	Text--Staging
2610	RX Text--Surgery
2620	RX Text--Radiation (Beam)
2630	RX Text--Radiation Other
2640	RX Text--Chemo
2650	RX Text--Hormone
2660	RX Text--BRM
2670	RX Text--Other
2680	Text--Remarks

4 Retired Data Items

Several data items are retired in v23. SEER retired five data items, the grouped data items (the grouped data items not the specific data items within the groups) and all date flag fields are retired.

For the Date data items the retirement of the Date Flag data items does not mean to transmit 0s, 8s, or 9s. Transmit a full date or a partial date. If a full date is unknown or missing, nothing is transmitted.

NAACCR Data Standards and Data Dictionary v23

Retired Data Items

	Item #	Item Name	Source of Standard
Grouped Data Items	351	GeoLocation ID 1970/80/90	NAACCR
	352	GeoLocationID 2000	NAACCR
	353	GeoLocation ID 2010	NAACCR
	354	GeoLocation ID 2020	NAACCR
	419	Morph--Type&Behav ICD-O-2	
	521	Morph--Type&Behav ICD-O-3	
	779	Extent of Disease 10-Dig	
	1670	Subsq RX 2nd Course Codes	
	1690	Subsq RX 3rd Course Codes	
	1710	Subsq RX 4th Course Codes	
	1970	Morph (73-91) ICD-O-1	
Date Flags	241	Date of Birth Flag	NAACCR
	391	Date of Diagnosis Flag	NAACCR
	439	Date of Mult Tumors Flag	NAACCR
	448	Date Conclusive DX Flag	NAACCR
	581	Date of 1st Contact Flag	NAACCR
	591	Date of Inpt Adm Flag	NAACCR
	601	Date of Inpt Disch Flag	NAACCR
	683	Date Regional Lymph Node Dissection Flag	NAACCR
	833	Date of Sentinel Lymph Node Biopsy Flag	SEER
	1201	RX Date Surgery Flag	NAACCR
	1211	RX Date Radiation Flag	NAACCR
	1221	RX Date Chemo Flag	NAACCR
	1231	RX Date Hormone Flag	NAACCR
	1241	RX Date BRM Flag	NAACCR
	1251	RX Date Other Flag	NAACCR
	1261	Date Initial RX SEER Flag	NAACCR
	1271	Date 1st Crs RX CoC Flag	NAACCR
	1281	RX Date DX/Stg Proc Flag	NAACCR
	1661	Subsq RX 2ndCrs Date Flag	NAACCR
	1681	Subsq RX 3rdCrs Date Flag	NAACCR
1701	Subsq RX 4thCrs Date Flag	NAACCR	

NAACCR Data Standards and Data Dictionary v23

Retired Data Items

	Item #	Item Name	Source of Standard
	1751	Date of Last Contact Flag	NAACCR
	1756	Date of Death--CanadaFlag	NAACCR
	1773	Date of Last Cancer (Tumor) Status Flag	NAACCR
	1861	Recurrence Date--1st Flag	NAACCR
	3171	RX Date Mst Defn Srg Flag	NAACCR
	3181	RX Date Surg Disch Flag	NAACCR
	3221	RX Date Rad Ended Flag	NAACCR
	3231	RX Date Systemic Flag	NAACCR
SEER	1980	ICD-O-2 Conversion Flag	SEER
	2120	SEER Coding System-Current	SEER
	2130	SEER Coding System-Original	SEER
	2180	SEER Type of Follow-up	SEER
	2190	SEER Record Number	SEER

5 Other Changes

5.1 LN Status Femoral-Inguinal, Para-Aortic, Pelvic [3884]

LN Status Femoral-Inguinal, Para-Aortic, Pelvic [3884] (Cervix 8th, Cervix V9, Vagina, Vulva) is removed from all applicable schemas - no data changes are necessary.

5.2 ICD-O-3

The Guidelines for 2023 ICD-O-3.2 Histology Code and Behavior, effective January 1, 2023, developed by the NAACCR ICD-O-3 Implementation Work Group and approved by the High-Level Strategic Group (HLSG), address implementation of updated histology terms and new codes for cases diagnosed on or after January 1, 2023. Members of the work group represent standard setting organizations, central registries, hospital registries, and cancer registry software vendors.

The 2023 ICD-O-3.2 update includes changes identified during review of recently published World Health Organization's International Histological Classification of Tumors 5th Edition books (WHO "Blue Books"). This series covers all principal sites of cancer and includes ICD-O morphology codes for each neoplasm. Each new edition underwent thorough review to identify new histologies and ICD-O codes, behavior changes to existing ICD-O codes, and new terminology. The ICD-O-3 Implementation Work Group recommended adopting the changes for 2023 and implementation of the changes was approved by the standard setting agencies.

The 2023 ICD-O-3.2 histology code and behavior update includes comprehensive tables listing all changes made after the 2022 update and is effective for cases diagnosed January 1, 2023, and forward. As introduced in 2022, the 2023 update tables include columns for each standard setter which indicates if that code and/or term are required for data collection and submission.

The ICD-O-3 Implementation Work Group created a guide for users which provides important information on the background and issues for this update along with how to use the tables. The 2023 guidelines have been modified to include only two tables, numeric and alpha, listing new ICD-O codes, terminology, behavior changes, and required status. The Work Group strongly recommends that users read the guidelines to efficiently use ICD-O-3.2 and the 2023 Update tables.

Note: Use of these guidelines is required for determining reportability and accurate coding.

The following histologies are approved by the Mid-Level Tactical Group for use with primaries of the cervix (C53.X) for diagnosis year 2021. Previously, registrars had been instructed to use these histologies for cervical primaries for cases diagnosed January 1, 2022, and forward.

- 8085 Squamous cell carcinoma, HPV-associated C51.9; C52.9; C53.X_

- 8086 Squamous cell carcinoma, HPV-independent C51.9; C52.9; C53.X_
- 8483 Adenocarcinoma, HPV-associated
- 8484 Adenocarcinoma, HPV-independent, NOS
- 8482 Adenocarcinoma, HPV-independent, gastric type
- 8310 Adenocarcinoma, HPV-independent, clear cell type
- 9110 Adenocarcinoma, HPV-independent, mesonephric type C53.X; C56.9

See [section 13.4](#) for instructions to manually review the cervix cases diagnosed January 1, 2021, and forward.

Following the release of the 2022 Guidelines for ICD-O-3.2 Histology Code and Behavior Update, the ICDO-3 Implementation Work Group reviewed the recent 5th Ed WHO Blue Books published after the creation of ICD-O-3.2. The Work Group submitted their implementation recommendations to the MidLevel Technical Group (MLTG) and High-level Strategic Group (HLSG) in March 2022. The MLTG and HLSG reviewed the recommendations and accepted them for implementation in 2023.

The ICD-O-3 Implementation Work Group is charged with developing the implementation documents and acting as the clearinghouse for the review and resolution of new histology code implementation questions. If there are any questions, they are to be submitted through [Ask A SEER Registrar](#).

Implementation guidelines and updates will be posted on NAACCR's [website](#). The Work Group will also be communicating updates via email using the NAACCR listserv and mailing lists of all organizations.

5.3 Site/Histology Validation List

The SEER Site/Histology Validation List is updated to reflect new ICD-O-3.2 histology codes and behaviors identified in the 2023 ICD-O-3 Update guidelines and is posted on the SEER [website](#).

5.4 Solid Tumor Rules

The 2018 Solid Tumor Rules are a comprehensive revision to the 2007 site specific Multiple Primary and Histology Rules (MP/H), which were developed to promote consistent and standardized coding for cancer surveillance. In 2018, eight site groups were revised: Malignant and Non-malignant CNS, Breast, Colon, Head & Neck, Kidney, Lung, and Urinary. Since their implementation in 2018, these site groups continue to be updated to reflect changes in histology coding. In 2021, Cutaneous Melanoma MP/H site rules were revised as Solid Tumor Rules and became effective for cases

diagnosed January 1, 2021, and forward. Beginning January 1, 2022, the 2018 Solid Tumor Rules are now called “Solid Tumor Rules” and no longer include year. The General Instructions and each site-specific module include instructions on which rules to use depending on diagnosis date.

General: The addition of new terminology, clarifications to equal/equivalent terms, and clarifications to terms that are not equal/equivalent comprise most of the changes for 2023.

CNS: Both the malignant and non-malignant CNS rules include new instructions for Pilocytic Astrocytoma.

Breast: There are clarifications to Breast rule M10 and the applicable H rules for coding lobular/ductal tumors.

Head and Neck: Table 9 in the H&N module has been redesigned for easier use.

Other Sites: The Other Sites rules are completely revised and now follow the same format, histology coding requirements, and timing instructions as the current site-specific solid tumor rules. Site-specific histology tables have been added to Other Sites to assist with accurate histology coding, similar to the H&N tables.

5.5 Solid Tumor Revision History

The Solid Tumor download page includes a section for revision history which includes comprehensive change logs for each update. The change logs are for reference only and should not be used in place of the rules.

Questions regarding the Solid Tumor Rules should be directed to [Ask A SEER Registrar](#).

5.6 Reportability

Reportability for cases diagnosed in 2023 is based on the ICD-O Third Edition, Second Revision Morphology (ICD-O-3.2) plus the ICD-O-3.2 updates posted on the NAACCR website.

The 2023 ICD-O update tables have columns for each standard setter (SEER, NPCR, CoC, and Canada) to indicate reportability for each of the new codes, terms, etc.

5.7 Surgery Codes

For cases diagnosed January 1, 2003 – December 31, 2022, use RX Hosp--Surg Prim Site 03-2022 [670] and RX Summ--Surg Prim Site 03-2022 [1290].

For cases diagnosed January 1, 2023, and forward use RX Hosp--Surg Prim Site 2023 [671] and RX Summ-Surg Prim Site 2023 [1291].

The Site-Specific Surgery Codes for Skin C44 are updated to align with the Synoptic Operative Report and revised to a four-digit, alphanumeric code for cases diagnosed January 1, 2023, and forward. These surgery codes are in **Appendix A of the STORE Manual and Appendix C of the SEER Manual.**

The CoC-specific breast surgery and reconstruction codes [10104, 10105, 10106, 10107] introduced in 2022 as user-defined fields will continue to be collected as user-defined fields in 2023 effective with diagnosis January 1, 2022. The rules and instructions are in STORE v2022 and v2023.

5.8 Extent of Disease (EOD)

For cases diagnosed January 1, 2023, and forward, new schemas are added to align with changes in AJCC version 9 (V9):

- Appendix [V9: 2023+] (09210)
- Anus [V9: 2023+] (09190)
- Brain [V9: 2023+] (09721)
- CNS Other [V9: 2023+] (09722)
- Intracranial Gland [V9: 2023+] (09723)

The existing related schemas are “[8th: 2018-2022]” appended to the name (for example, Anus [8th: 2018-2022]) and their schema IDs remain unchanged. The 8th schemas continue to be used for cases diagnosed from January 1, 2018, through December 31, 2022.

Additional histologies for behavior /3 are added to the new version 9 schemas for Brain, CNS Other and Intracranial Gland. These histologies continue to be included in the original schemas for cases diagnosed from January 1, 2018, through December 31, 2022, so no conversions are necessary. The original schema include:

- Soft Tissue Head & Neck (00400)
- Soft Tissue Other (00459)
- Orbital Sarcoma (00700)
- Lymphoma (00790)
- Plasma Cell Disorder (00822)

- HemeRetic (00830)

One new schema is added

- Medulloblastoma [V9: 2023+] (09724)

Medulloblastoma includes site and histology combinations that used to be part of the Brain, CNS Other and Intracranial Gland Schema. It is for cases diagnosed on or after January 1, 2023, and therefore no conversion is required.

The following schemas had codes added to EOD Primary Tumor [772], but no conversion of older data is necessary:

- Bile Duct Intrahepatic: Code 400
- Lymphoma, Lymphoma CLL/SLL: Code 575
- Pleural Mesothelioma: Code 000

Some Extent of Disease fields changed to improve clarity or to address questions that were raised in the various forums. These changes are applicable to cases diagnosed January 1, 2018, and forward, but registrars are not required to update previously coded information. The new information is incorporated in the SEER Staging REST API/library. Other than updating the staging API that you use, there is no need for action for these types of changes. They are documented in the change log which can be accessed on <https://seer.cancer.gov/tools/staging/eod/>.

5.9 Summary Stage 2018

A new Summary Stage 2018 chapter for Medulloblastoma is added which will apply to cases diagnosed from January 1, 2023, and forward. Modifications to Prostate Summary Stage was made (mostly to the notes) based on changes to the notes for EOD Primary Tumor [772] and EOD Prostate Pathologic Extension [3919]. Code 0 is added to Pleural Mesothelioma for in situ cases. Also, the Summary Stage 2018 [764] notes and code descriptions for some schemas are updated similarly to the EOD fields to improve clarity. Registrars are not required to update previously coded information. Again, this information is incorporated in the SEER Staging REST API/library and will be available once the staging API has been updated.

5.10 Hematopoietic and Lymphoid Neoplasms Manual and Database

The Hematopoietic and Lymphoid Neoplasms Manual and Database (Heme manual) is effective for cases diagnosed 2010+.

There are some minor changes to the Heme manual, for example some notes are modified; however, there are no changes to histologies or rules. There is no change log for these minor changes.

6 Standard Setters Reporting Requirements for 2023

Each standard setting agency provided their respective information for this section.

6.0 SCCCR New Reporting Requirements: Monthly data submissions

Analytic cases, VIN, VAIN, AIN and Class of Case 30 & 43 will be required non-analytic reporting.

6.1 CoC Reporting Requirements

Beginning with cases diagnosed January 1, 2023, and forward, all CoC accredited programs should follow the rules and instructions in STORE v2023. A summary of the STORE 2023 changes is included in the STORE Manual. Two new data items are added RX Hosp Surg-- Prim Site 2023 [671] and RX Summ-- Surgery Prim Site 2023[1291] replacing data items RX Summ--Surg Prim Site [1290] and RX Hosp--Surg Prim Site [670] effective with diagnosis January 1, 2023. All surgical codes in Appendix A of STORE 2023 are now a four-digit alphanumeric character, [starting with letter A or B and followed with a three-digit number] effective with diagnosis January 1, 2023.

CoC & SCCCR will continue to collect all previous required SSDI's and the following SSDIs effective with cases diagnosed January 1, 2023, and forward: *** see [SCCCR 2022 Manual Data Reporting Guidelines pg 7](#).

- Histology Subtype [3960] - Low Grade appendiceal mucinous neoplasm (LAMN) in Appendix V9
- p16 [3956] - in Anus V9
- Clinical Margin Width [3961] in Melanoma Skin.

CoC & SCCCR programs will collect Ht & WT, Tobacco Use Smoking Status [344] effective with cases diagnosed January 1, 2023, and forward.

The following data items are removed from STORE 2023:

Data Items Removed from STORE 2023		
Item #	CoC Item Name	NAACCR Item Name
241	Date of Birth Flag	Date of Birth Flag
581	Date of First Contact Flag	Date of 1st Contact Flag
670	Surgical Procedure of Primary Site at this Facility	RX Hosp--Surg Prim Site
1201	RX Date Surgery Flag	RX Date Surgery Flag
1221	RX Date Chemo Flag	RX Date Chemo Flag
1231	RX Date Hormone Flag	RX Date Hormone Flag
1241	RX Date BRM Flag	RX Date BRM Flag
1281	RX Date Dx/Stg Proc Flag	RX Date DX/Stg Proc Flag
1290	Surgical Procedure of Primary Site	RX Summ--Surg Prim Site

CoC will continue to collect custom data items RX Hosp--Surg Breast [10104], RX Summ--Surg Breast [10105], RX Hosp--Recon Breast [10106] and RX Summ--Recon Breast [10107] effective with cases diagnosed January 1, 2022, for breast primary sites only. These custom data items will be submitted to NCDB/RCRS.

Questions related to STORE can be submitted to the CA Forum. The STORE Manual 2023 will be released to the NCDB Call for Data website in August 2022.

6.2 CDC NPCR Reporting Requirements

Beginning with cases diagnosed January 1, 2023, and forward, CDC-NPCR will adopt the new record format and data collection requirements as published in the [Data Standards and Data Dictionary](#), Version 23. Refer to the CDC-NPCR requirements listed in the Data Standards and Data Dictionary, Version 23, Chapter VIII Required Status Table. Share these requirements with your software vendors and key stakeholders.

CDC is following the NAACCR Guidelines for 2023 ICD-O-3.2 Histology Code and Behavior Update (published for 2023).

6.2.1 Staging Requirements for 2023 Diagnosis

CDC-NPCR continues to require directly assigned Summary Stage 2018 [764] (most current version). NPCR requirements for Summary Stage 1977 [760], Summary Stage 2000 [759], and CS Derived Summary Stage 2000 [3020] have not changed. If voluntarily capturing AJCC TNM and/or SEER EOD stage data items, rules and requirements provided by those sources should be followed.

Central registries will inform state reporters of their individual state requirements.