

SEER Program Coding and Staging Manual 2014 Summary of Changes

This table lists the changes made to the 2014 manual. Changes are listed by 2014 manual page number.

Page	Section	Data Item	Change	Notes/Comments
1	Reportability	Reportability – Dates of Diagnosis/Residency	Definition of Reportable added.	Meeting the criteria for inclusion in a registry. Reportable cases are cases that the registry is required to collect and report. Reportability for SEER registries is established by NCI SEER. A “Reportable List” includes all diagnoses that are to be reported by the registry.
1	Reportability	In Situ and Malignant/Invasive Histologies	Note 1 updated.	LIN III (laryngeal intraepithelial neoplasia) (C320 - C329) and SIN III (squamous intraepithelial neoplasia excluding cervix) have been added to the Reportable Diagnosis List.
2	Reportability	In Situ and Malignant/Invasive Histologies	Item 1.b.ii. updated.	SIN III of the cervix added to the other non-reportable in situ cervical tumors.
4	Reportability	Reportable Examples	Example 10 added.	Example 10: Dermoid cyst of the brain is reportable.
5	Reportability	Reportable Examples	Example 11 added.	Example 11: Tectal plate lipoma is a reportable brain tumor. It is a benign neoplasm of the mid brain (brain stem).
5	Reportability	Reportable Examples	Example 12 added.	Example 12: Noninvasive mucinous cystic neoplasm (MCN) of the pancreas with high-grade dysplasia is reportable. For neoplasms of the pancreas, the term MCN with high-grade dysplasia replaces the term mucinous cystadenocarcinoma, non-invasive.

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6	Reportability	Not Reportable Examples	Example 4 updated.	Example 4: Carcinoid tumorlets in the lung are not reportable.
6	Reportability	Not Reportable Examples	Example 7 added.	Example 7: Cases designated “BIRADS 4” or “BIRADS 5,” without any additional information, are not reportable.
6	Reportability	Not Reportable Examples	Example 8 added.	Example 8: Squamous cell carcinoma of the canthus (C441) is not reportable.
6	Reportability	Not Reportable Examples	Example 9 added.	Example 9: Low-grade appendiceal mucinous neoplasm (LAMN) is not reportable. The WHO classification designates LAMN as /1 with uncertain malignant potential.
6	Reportability	Not Reportable Examples	Example 10 added.	Example 10: Diffuse idiopathic pulmonary neuroendocrine cell hyperplasia (DIPNECH) is not reportable. It is a generalized proliferation of scattered single cells, small nodules (neuroendocrine bodies), or linear proliferation of pulmonary neuroendocrine cells (PNCs), according to the WHO classification of lung tumors.
6	Reportability	Not Reportable Examples	Example 11 added.	Example 11: Lentiginous melanocytic lesion is not reportable.
6	Reportability	Not Reportable Examples	Example 12 added.	Example 12: Lobular intraepithelial neoplasia grade 1 is not reportable.
6	Reportability	Not Reportable Examples	Example 13 added.	Example 13: Intraductal papillary mucinous neoplasms with low or

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				moderate grade dysplasia, also called IPMN adenomas, are not reportable.
6	Reportability	Not Reportable Examples	Example 14 added.	Example 14: Noninvasive mucinous cystic neoplasm (MCN) of the pancreas with low or intermediate grade dysplasia is not reportable.
6	Reportability	Not Reportable Examples	Example 15 added.	Example 15: Subdural hygroma is not reportable – it is not a neoplasm. Subdural hygroma is a collection of cerebrospinal fluid in the sub-dural space. It may be related to a head injury.
7	Reportability	Not Reportable Examples	Example 16 added.	Example 16: Brain lesions associated with multiple sclerosis are not reportable. These brain lesions are not neoplastic, they are part of the disease process of multiple sclerosis.
7	Reportability	Not Reportable Examples	Example 17 added.	Example 17: HGSIL (high grade squamous intraepithelial lesion) of the vulva or vagina is not reportable.
9	Reportability	How to Use Ambiguous Terminology for Case Ascertainment	Item c. instruction updated.	Changed “other than tumor markers” to “with the exception of tumor markers”.
9	Reportability	How to Use Ambiguous Terminology for Case Ascertainment	Item c. Example, 4 updated.	Changed “focal areas suspicious for adenocarcinoma in situ change” to “focal areas suspicious for adenocarcinoma in situ.”
10	Reportability	Instructions for Hematopoietic and Lymphoid Neoplasms	Added Casefinding Lists section.	CASEFINDING LISTS

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				<p>Current and previous casefinding lists are available on the SEER website. Use the casefinding lists to screen prospective cases and identify cancer cases for inclusion in the registry.</p> <p>A casefinding list is not the same as a reportable list. Casefinding lists are intended for searching a variety of cases so as not to miss any reportable cases.</p> <p>Definition of Casefinding (case ascertainment): Process of identifying all reportable cases through review of source documents and case listings. Casefinding covers a range of cases that need to be assessed to determine whether or not they are reportable.</p>
17	Basic Record Identification	Record Type	Description of Code U updated.	Length changed from 883 to 1543.
19	Basic Record Identification	SEER Coding System -- Original	Code E - 2014 SEER Coding Manual added.	Code E is assigned for death certificate only (DCO) cases.
20	Basic Record Identification	SEER Coding System -- Current	Code E - 2014 SEER Coding Manual added.	Code E is assigned for death certificate only (DCO) cases.
26	Demographic Information	First Name	Added Data Item.	First name is collected by SEER registries for identification purposes; it is not submitted to NCI SEER.

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				<p>Coding Instructions:</p> <ol style="list-style-type: none"> 1. Truncate first name if longer than 40 characters 2. Blank spaces, hyphens, and apostrophes are allowed <ol style="list-style-type: none"> a. Do not use other punctuation 3. Leave blank if the patient's first name is unknown 4. Update this field if the first name changes
27	Demographic Information	Last Name	Added Data Item.	<p>Last name is collected by SEER registries for identification purposes; it is not submitted to NCI SEER.</p> <p>Coding Instructions:</p> <ol style="list-style-type: none"> 1. Truncate name if longer than 40 characters 2. Blanks spaces, hyphens, and apostrophes are allowed <ol style="list-style-type: none"> a. Do not use other punctuation 3. Code UNKNOWN if the patient's last name is unknown; do not leave blank 4. Update this field if the last name changes
30	Demographic Information	County	Added which manual Appendix A is found ("of this manual").	
	Demographic Information	Census Tract 2000	Data item removed.	

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	Demographic Information	Census Tract Certainty 2000	Data item removed.	
35	Demographic Information	Birthplace – State	Coding Instruction updated.	Removed: The 2013 version of Appendix B lists U.S postal abbreviations for state and Canadian postal abbreviations for province.
36	Demographic Information	Birthplace – Country	Coding Instruction updated.	Removed: Country codes in the 2013 version of Appendix B are supported and maintained by the International Standards Organization (ISO).
37	Demographic Information	Date of Birth	Transmit Instruction 2.a. added.	2.a. Leave the year, month and day blank for death certificate only (DCO) cases when the date of birth is unknown and cannot be calculated.
39	Demographic Information	Date of Birth Flag	Coding Instruction 2.a. added.	2.a. Assign code 12 for death certificate only (DCO) cases when the date of birth is unknown and cannot be calculated.
41	Demographic Information	Race 1, 2, 3, 4, 5	Code 88 added.	88 - No additional races (Race 2 – Race 5)
42	Demographic Information	Race 1, 2, 3, 4, 5	Priorities for Coding Multiple Races, instruction 2 updated.	2. Codes 02-32, 96-98 take priority over code 01.
42	Demographic Information	Race 1, 2, 3, 4, 5	Coding Instructions, 1.a. updated.	1.a. See Coding Instruction 15, Exception, for the only situation in which name is taken into account when coding race.
42	Demographic Information	Race 1, 2, 3, 4, 5	Coding Instructions, 4.a. updated.	4.a. Code 88 for the remaining race fields (Race 2- Race 5) when at least one race, but fewer than five races,

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Page	Section	Data Item	Change	Notes/Comments
				are reported.
43	Demographic Information	Race 1, 2, 3, 4, 5	Coding Instruction 12 added.	12. Do not use code 96, 97, or 98 for "multi-racial." See Coding Examples below.
44	Demographic Information	Race 1, 2, 3, 4, 5	Coding Instruction 14 added.	14. Assign code 99 for death certificate only (DCO) cases when race is unknown.
44	Demographic Information	Race 1, 2, 3, 4, 5	Coding Instruction 17 added.	17. Patient photographs may be used with caution to determine race in the absence of any other information. <ul style="list-style-type: none"> • Use caution when interpreting a patient photograph to assist in determining race. Review the patient record for a statement to verify race. The use of photographs alone to determine race may lead to misclassification of race.
46	Demographic Information	Race 1, 2, 3, 4, 5	History note 2 updated.	Changed "multiple records" to "multiple tumors".
46	Demographic Information	Race 1, 2, 3, 4, 5	History note 2.b. updated.	Changed "multiple records" to "multiple tumors"
50	Demographic Information	Spanish Surname or Origin	Coding Instruction 5 added.	5. Assign code 9 for death certificate only (DCO) cases when Spanish/Hispanic origin is unknown.
54	Demographic Information	Sex	Opening sentence updated.	Code the sex (gender) of the patient. Removed: "at the time of

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Page	Section	Data Item	Change	Notes/Comments
				diagnosis.”
54	Demographic Information	Sex	Coding Instruction 1 added.	1. Code the natal sex when known over transsexual or transgender.
54	Demographic Information	Sex	Coding Instruction 4 added.	4. When the patient’s gender is not known a. Assign code 1 when the primary site is C600-C639 b. Assign code 2 when the primary site is C510-C589 c. Assign code 9 for primary sites not included above.
55	Demographic Information	Marital Status At Diagnosis	Coding Instruction 2 added.	2. Assign code 6 when the patient is not married and is in a domestic partner relationship excluding common law.
51	Demographic Information	Marital Status At Diagnosis	Definition of code 6 revised	Unmarried or Domestic Partner (same sex or opposite sex, registered or unregistered, other than common law marriage)
55	Demographic Information	Marital Status At Diagnosis	Coding Instruction 3 added.	3. Assign code 9 for death certificate only (DCO) cases when marital status at the time of diagnosis is unknown.
57	Demographic Information	Primary Payer at Diagnosis	Coding instruction 5 added.	5. Assign code 99 for death certificate only (DCO) cases when the primary payer at diagnosis is unknown.
59	Description of this neoplasm	Date of Diagnosis	First introductory sentence updated.	Changed “tumor” to “reportable neoplasm”.

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Page	Section	Data Item	Change	Notes/Comments
59	Description of this Neoplasm	Date of Diagnosis	Transmit Instruction 4 updated.	4. Most SEER registries collect the month, day, and year of diagnosis. When the full date (YYYYMMDD) is transmitted, the seventh and eighth digits (day) will be held confidentially and only used for survival calculations when received by NCI SEER. The corresponding date flag is not affected (it will remain blank).
60	Description of this Neoplasm	Date of Diagnosis	Coding Instruction 1.a. added.	1.a. When the first diagnosis includes reportable ambiguous terminology, record the date of that diagnosis. <i>Example:</i> Area of microcalcifications in breast suspicious for malignancy on 2/13/14. Biopsy positive for ductal carcinoma on 2/28/14. The date of diagnosis 2/13/14.
61	Description of this Neoplasm	Date of Diagnosis	Coding Instruction 6 updated.	6. Do not use cytology as a basis for diagnosis when ambiguous terms are used. Ambiguous cytology is not diagnostic of cancer. Use the date of clinical, histologic, or positive cytologic confirmation as the date of diagnosis.
62	Description of this Neoplasm	Date of Diagnosis	Coding Instruction 9 updated.	Removed: See the NAACCR Death Clearance Manual, pg 42, for coding instructions. Added: a. Use information on the death certificate to estimate the

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Page	Section	Data Item	Change	Notes/Comments										
				date of diagnosis b. If no information is available, record the date of death as the date of diagnosis										
66	Description of This Neoplasm	Sequence Number – Central	Code 35 changed to 59 in In Situ/Malignant table.	59 - Fifty-ninth or higher or fifty-nine or more primaries.										
67	Description of this Neoplasm	Sequence number – Central	Type of Neoplasm/Sequence number series table updated.	Series 1: In situ/malignant as Federally required – Numeric Series updated to 00-59 (was 00-35).										
71	Description of this Neoplasm	Primary Site	Site-Specific Topography Terms Instruction 8 added.	8. See the site-specific Coding Guidelines in Appendix C for primary site coding guidelines for the following: Bladder Breast Colon Esophagus Kaposi sarcoma Lung Rectosigmoid, rectum										
72	Description of this Neoplasm	Primary Site	Site-Specific Topography Terms Instruction 9 added.	9. See below for primary site coding guidelines for Sarcoma.										
72	Description of this Neoplasm	Primary Site	Site-Specific Topography Terms Instruction 12 added.	12. In the absence of any additional information, assign the codes listed for these primary sites <table style="width: 100%; border: none;"> <tr> <td style="width: 70%;">Primary site</td> <td style="width: 30%;">Code</td> </tr> <tr> <td>Anal margin</td> <td>C445</td> </tr> <tr> <td>Angle of the stomach</td> <td>C162</td> </tr> <tr> <td>Book-leaf lesion (mouth)</td> <td>C068</td> </tr> <tr> <td>Colored / lipstick portion of upper lip</td> <td>C000</td> </tr> </table>	Primary site	Code	Anal margin	C445	Angle of the stomach	C162	Book-leaf lesion (mouth)	C068	Colored / lipstick portion of upper lip	C000
Primary site	Code													
Anal margin	C445													
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				Distal conus C720 Edge of tongue C021 Frontoparietal (brain) C718 Gastric angular notch C163 Infrahilar area of lung C349 Leptomeninges C709 Masticatory space C069 Nail bed, thumb C446 Pancreatobiliary C269 Parapharyngeal space C490 Perihilar bile duct C240
	Description of this Neoplasm	Primary Site	Esophagus instruction removed.	Moved to Instruction 8 – Appendix C.
	Description of this Neoplasm	Primary Site	Kaposi Sarcoma instruction removed.	Moved to Instruction 8 – Appendix C.
74	Description of this Neoplasm	Laterality	Coding Instruction 1 added.	1. Assign code 0 when laterality is unknown for a death certificate only (DCO) case and the primary site is NOT C079-C081, C090-C091, C098-C099, C301, C310, C312, C341-C349, C384, C400-C403, C441-C443, C445-C447, C471-C472, C491-C492, C500-C509, C569, C570, C620-C629 C630-C631, C649, C659, C669, C690-C699, C700, C710-C714, C722-C725, C740-C749, or C754
74-75	Description of this Neoplasm	Laterality	Coding Instruction 5 updated.	5. Assign code 5 when the tumor originates in the midline of a site listed in 5.a. a. C700, C710-C714, C722-C725, C443, C445

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Page	Section	Data Item	Change	Notes/Comments
75	Description of this Neoplasm	Laterality	Coding Instruction 6 updated.	6.a. The neoplasm originated in a paired site and
75	Description of this Neoplasm	Laterality	Coding Instruction 6.b. added.	6.b. Laterality is unknown for a death certificate only (DCO) case with primary site C079-C081, C090-C091, C098-C099, C301, C310, C312, C341-C349, C384, C400-C403, C441-C443, C445-C447, C471-C472, C491-C492, C500-C509, C569, C570, C620-C629 C630-C631, C649, C659, C669, C690-C699, C700, C710-C714, C722-C725, C740-C749, or C754
81	Description of This Neoplasm	Histologic Type ICD-O-3	2014 ICD-O-3 Update added.	See the NAACCR Guidelines for ICD-O-3 Update Implementation for new terms and synonyms for existing ICD-O-3 histology codes.
82	Description of This Neoplasm	Behavior Code	Second introductory sentence removed.	Removed: Behavior is the fifth digit of the morphology code after the slash (/). See ICD-O-3 (pages 27-28) for a discussion of behavior.
83	Description of This Neoplasm	Behavior Code	ICD-O-3 Histology/Behavior Code Listing section updated.	Added: Behavior is the fifth digit of the morphology code after the slash (/). The standard reference for coding behavior is the ICD-O-3. Pages 27 through 30 discuss behavior. The following general rules are found on pages 29-30. <ul style="list-style-type: none"> • Usually a histologic term carries a clear indication of the likely behavior of the tumor, whether malignant or benign, and this is reflected in the behavior code assigned to it in the ICD-O.

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				<ul style="list-style-type: none"> • Although only a few histologic types of in situ neoplasms are actually listed in the ICD-O, the behavior code /2 could be attached to any histology code if an in situ form of the neoplasm is diagnosed. • If the pathologist disagrees with the ICD-O behavior assignment in a particular case, code the behavior according to the pathologist's description of the behavior even if that histology/behavior combination is not listed in the ICD-O.
83-84	Description of This Neoplasm	Behavior Code	Synonyms for in situ added.	Added: LIN III (C320-C329) SIN III
85	Description of This Neoplasm	Grade, Differentiation or Cell Indicator	Hematopoietic and Lymphoid Neoplasms Cell Indicator (Codes 5, 6, 7, 8, 9) updated.	All coding instructions updated (see manual).
85-89	Description of This Neoplasm	Grade, Differentiation or Cell Indicator	Solid Tumors Grade, Differentiation (Codes 1, 2, 3, 4, 9) updated.	All coding instructions updated (see manual).
89-93	Description of This Neoplasm	Grade, Differentiation or Cell Indicator	Special Grade Systems Rules added.	Special Rules added for Breast, Kidney, Soft Tissue, Prostate (see manual).
	Description of This Neoplasm	Multiplicity Counter	Data item removed.	
	Description of This Neoplasm	Date of Multiple Tumors	Data item removed.	

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Page	Section	Data Item	Change	Notes/Comments
	Description of This Neoplasm	Date of Multiple Tumors Flag	Data item removed.	
	Description of This Neoplasm	Date of Multiple Tumors Reported as One Primary	Data item removed.	
	Description of This Neoplasm	Ambiguous Terminology	Data item removed.	
	Description of This Neoplasm	Date of Conclusive Terminology	Data item removed.	
	Description of This Neoplasm	Date of Conclusive Diagnosis Flag	Data item removed.	
95	Description of This Neoplasm	ICD-O-3 Conversion Flag	Instructions added.	Code 0 is assigned for death certificate only (DCO) cases Leave blank for cases coded in prior ICD-O version and not converted to ICD-O-3.
98	Collaborative Stage Data Collection System	General information	SEER requirements added and links to manuals updated.	See manual.
100	First Course of Therapy	Treatment Timing	Example 1 from instruction 1 removed.	Removed: Example 1: First course of treatment for childhood leukemia typically spans two years from induction, progressing to consolidation, and then to maintenance.
104	First Course of Therapy	Date Therapy Initiated	Transmit Instruction 2.a. added.	2.a. Leave the year, month and day blank for death certificate only (DCO) cases when the date of therapy is unknown and cannot be estimated.
107	First Course of Therapy	Date Therapy Initiated	Coding Instruction 6.e. added. (Separate instruction removed)	6.e. For death certificate only (DCO) cases when the date is unknown and cannot be estimated.

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Page	Section	Data Item	Change	Notes/Comments
108	First Course of Therapy	Date Therapy Initiated Flag	Coding Instruction 2.a. added.	2. Assign code 10 when it is unknown whether any treatment was administered. a. For death certificate only (DCO) cases.
109	First Course of Therapy	Treatment Status	Coding Instructions 1 and 2 added.	1. Assign code 1 when the patient receives treatment collected in any of the following fields a. Surgery of primary site b. Scope of regional lymph node surgery c. Surgical procedure of other site d. Radiation e. Chemotherapy f. Hormone therapy g. Immunotherapy h. Hematologic transplant and endocrine procedures i. Other therapy 2. Assign code 9 for death Certificate only (DCO) Cases.
110	First Course of Therapy	Surgery of Primary Site	Coding Instruction 4, Note 2 added.	Note 2: Shave or punch biopsies are most often diagnostic. Code as a surgical procedure only when the entire tumor is removed and margins are clear.
111	First Course of Therapy	Surgery of Primary Site	Coding Instruction 10 added. (Separate instruction removed)	10. Code 99 for death certificate only (DCO) cases.
115	First Course of Therapy	Scope of Regional Lymph Node Surgery	Coding Instruction 12.a.iv. added. (Separate instruction removed)	a. Assign code 9 for iv. Death certificate only (DCO) cases.

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117	First Course of Therapy	Surgical Procedure of Other Site	Coding Instruction 5 added. (Separate instruction removed)	5. Assign code 9 for death certificate only (DCO) cases
120	First Course of Therapy	Reason For No Surgery of Primary Site	Coding Instruction 3.b. added. (Separate instruction removed)	3. Assign code 9 b. For death certificate only (DCO) cases
121	First Course of Therapy	Radiation	Second introductory paragraph updated.	Added: Radiation Regional Treatment Modality [NAACCR Item #1570] and/or Radiation Boost Treatment Modality [NAACCR Item #3200]
122	First Course of Therapy	Radiation	Coding Instruction 2.a. updated.	Added: “intensity modulated radiation therapy (IMRT)” and “cyberknife.”
122	First Course of Therapy	Radiation	Coding instruction 4 and 5 combined into one instruction 4 – Assign code 3.	
122	First Course of Therapy	Radiation	Coding Instruction 6 added.	6. Assign code 7 when a. The patient refused recommended radiotherapy b. The patient made a blanket refusal of all recommended treatment and radiotherapy is a customary option for the primary site/histology c. The patient refused all treatment before any was recommended and radiotherapy is a customary option for the primary site/histology
123	First Course of Therapy	Radiation	Coding Instruction 8.b. added. (Separate instruction removed)	8. Assign code 9 when b. For death certificate only (DCO) cases when it is unknown whether or not radiation was administered.

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Page	Section	Data Item	Change	Notes/Comments
126	First Course of Therapy	Radiation Sequence With Surgery	Coding Instruction 1.d. bullet added. (Separate instruction removed)	1. Assign code 0 when d. It is unknown whether or not the patient had surgery and/or radiation o For death certificate only (DCO) cases
128	First Course of Therapy	Chemotherapy	Important update effective for diagnosis date January 1, 2013 forward section added.	List of drugs that have changed Category (see manual).
130	First Course of Therapy	Chemotherapy	Coding Instruction 8 added.	8. Assign code 87 when a. The patient refused recommended chemotherapy b. The patient made a blanket refusal of all recommended treatment and chemotherapy is a customary option for the primary site/histology c. The patient refused all treatment before any was recommended and chemotherapy is a customary option for the primary site/histology
131	First Course of Therapy	Chemotherapy	Coding Instruction 10.a. added. (Separate instruction removed)	10. Assign code 99 when there is no documentation that chemotherapy was recommended or administered a. For death certificate only (DCO) cases
135	First Course of Therapy	Hormone Therapy	Coding Instruction 3 added.	3. Assign code 87 when a. The patient refused recommended hormone therapy b. The patient made a blanket refusal of all recommended

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Page	Section	Data Item	Change	Notes/Comments
				treatment and hormone therapy is a customary option for the primary site/histology c. The patient refused all treatment before any was recommended and hormone therapy is a customary option for the primary site/histology
135	First Course of Therapy	Hormone Therapy	Coding Instruction 5.a. added. (Separate instruction removed)	5. Assign code 99 when there is no documentation that hormone therapy was recommended or performed. a. For death certificate only (DCO) cases
136	First Course of Therapy	Hormone Therapy	Hormone Categories – Thyroid hormone added.	Added: Synthroid
137	First Course of Therapy	Immunotherapy	Second introductory paragraph updated.	Changed “lessen” to “reduce”.
	First Course of Therapy	Immunotherapy	Description of code 00 revised	None, immunotherapy was not part of the planned first course of therapy
138	First Course of Therapy	Immunotherapy	Important update effective for diagnosis date January 1, 2013 forward section added.	List of drugs that have changed Category (see manual).
	First Course of Therapy	Immunotherapy	Instruction 2.c. revised	The patient refused all treatment before any was recommended and immunotherapy is a customary option for the primary site/histology
139	First Course of Therapy	Immunotherapy	Coding Instruction 4.c. added. (Separate instruction removed)	4. Assign code 99 when c. Or for death certificate only (DCO) cases

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142	First Course of Therapy	Hematologic Transplant and Endocrine Procedures	Coding Instruction 9.a. added. (Separate instruction removed)	9. Assign code 99 when there is no documentation that transplant procedure or endocrine therapy was recommended or performed a. For death certificate only (DCO) cases
143	First Course of Therapy	Systemic Treatment/Surgery Sequence	Example(s)/Notes added to code 0. (Separate instruction removed)	Death certificate only (DCO) case
146	First Course of Therapy	Other Therapy	Coding Instruction 2.c. added.	2. Assign code 1 for c. Photophoresis. This treatment is used ONLY for thin melanoma or cutaneous T-cell lymphoma (mycosis fungoides).
146	First Course of Therapy	Other Therapy	Coding Instruction 7.a. added. (Separate instruction removed)	7. Assign code 9 when there is no documentation that other therapy was recommended or performed a. For death certificate only (DCO) cases
149	Follow Up Information	Date of Last Follow Up or of Death	Transmit Instruction 3 updated.	3. Most SEER registries collect the month, day, and year. When the full date (YYYYMMDD) is transmitted, the seventh and eighth digits (day) will be held confidentially and only used for survival calculations when received by NCI SEER. The corresponding date flag is not affected (it will remain blank).
150	Follow Up Information	Date of Last Follow Up or of Death	Coding Instruction 4 added. (Separate instruction removed)	4. Record the date of death for death certificate only (DCO) cases

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152	Follow Up Information	Vital Status	Coding Instruction added.	1. Assign code 4 for death certificate only (DCO) cases
153	Follow Up Information	ICD Code Revision Used for Cause of Death	Coding Instruction added.	1. Assign code 1 for death certificate only (DCO) cases

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Appendices**

This table lists the changes made to Appendices to the 2014 manual. Changes are listed by 2014 manual page number where applicable.

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B-6	Appendix B	Country and State Codes	Korea, NOS added.	Korea, NOS = KOR
B-13	Appendix B	Country and State Codes	Korea, NOS added.	Korea, NOS = KOR
B-24	Appendix B	Country and State Codes	Korea, NOS added.	Korea, NOS = KOR
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Bladder	Primary Site – “Internal urethral/uretero orifice” added to C675.	
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Bladder	Primary Site – “Urachal remnant” added to C677.	
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Bladder	Additional instructions added to Behavior Code instructions.	Code the behavior as malignant /3, not in situ/2 when: Added: or <ul style="list-style-type: none"> • the pathology report says the submucosa is invaded with tumor or <ul style="list-style-type: none"> • the pathology report does not mention whether the submucosa is free of tumor or has been invaded by tumor
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Bladder	Grade instructions deleted.	See Grade, Differentiation or Cell Indicator instructions in main manual.
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Bones, Joints, Cartilage	Grade instructions deleted.	See Grade, Differentiation or Cell Indicator instructions in main manual.
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Brain, Central Nervous System,	Grade instructions deleted.	See Grade, Differentiation or Cell Indicator instructions in main

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Appendices**

This table lists the changes made to Appendices to the 2014 manual. Changes are listed by 2014 manual page number where applicable.

Page	Section	Data Item	Change	Notes/Comments
		Malignant and Benign and Borderline		manual.
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Brain, Central Nervous System, Malignant and Benign and Borderline	Histology instruction added.	Code low grade neuroepithelial neoplasm to 9505/1 (ganglioglioma NOS).
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Breast	Grade instructions deleted.	See Grade, Differentiation or Cell Indicator instructions in main manual.
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Kaposi Sarcoma of All Sites	Primary Site instructions added.	<p>Kaposi sarcoma that is not AIDS-related is a rare condition. It usually presents as localized disease with an easily recognized primary site.</p> <p>AIDS-related Kaposi sarcoma usually presents as a disseminated disease with involvement of mucosal surfaces, visceral surfaces of organs, and skin. It is important to review consecutive records carefully to determine the extent of involvement at diagnosis. Review of a single record may reveal only the site being treated during that admission.</p> <p>Kaposi sarcoma is coded to the site in which it arises. If Kaposi sarcoma arises in skin and another site simultaneously, code to skin (C44_). If no primary site is stated, code to skin (C44_).</p> <p>1. Code the Kaposi sarcoma to</p>

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				<p>the primary site in which it arises.</p> <p>2. If the Kaposi sarcoma is present in the skin and another site simultaneously, code to the specified skin site, (C44_).</p> <p>3. If the primary site is unknown or cannot be determined, code skin, NOS (C449).</p>
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Colon	Grade instructions deleted.	See Grade, Differentiation or Cell Indicator instructions in main manual.
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Kidney	Grade instructions deleted.	See Grade, Differentiation or Cell Indicator instructions in main manual.
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Melanoma	New Coding Guidelines for Melanoma	
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Renal Pelvis and Ureter	Grade instructions deleted.	See Grade, Differentiation or Cell Indicator instructions in main manual.
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Prostate	Removed Coding Guidelines for prostate	
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Urethra	Grade instructions deleted.	See Grade, Differentiation or Cell Indicator instructions in main manual.
	Appendix C: Surgery Codes	Surgery Codes: Rectosigmoid	Surgery code 27 moved before surgery code 26	Previously, the order of these surgery codes was change for colon and rectum (27 before 26) and the same change should have been made for rectosigmoid.

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	Appendix C: Surgery Codes	Surgery Codes: All other sites	Added SEER Note to code 14	SEER Note: Assign code 14 for laser hyperthermia of eye for retinoblastoma
	Appendix C: Surgery Codes	Surgery Codes: Skin	Added SEER Note to code 34	SEER Note: Assign code 34 for shave biopsy followed by MOHS surgery for melanoma of the skin.
	Appendix C: Surgery Codes	Surgery Codes: Ovary	Added SEER Note to codes 28 and 57	<p>SEER Note: Use code 28 for current unilateral (salpingo-) oophorectomy with previous history of hysterectomy.</p> <p>SEER Note: Use code 57 for current unilateral (salpingo-) oophorectomy with previous history of hysterectomy.</p>
	Appendix C: Surgery Codes	Surgery Codes: Pancreas	Added SEER Note to code 90	SEER Note: Assign code 90 for NanoKnife, or irreversible electroporation (IRE)