

**SEER Program Coding and Staging Manual 2013
Summary of Changes**

This table lists the changes made to the 2013 manual. Changes are listed by 2013 manual page number.

Page	Section	Data Item	Change	Notes/Comments
1	Reportability	In Situ and Malignant/Invasive Histologies	Note 2 added: Urine cytology positive for malignancy is reportable.	<ul style="list-style-type: none"> • Code the primary site to C689 in the absence of any other information Exception: When a subsequent biopsy of a urinary site is negative, do not report the case • For 2013 diagnoses and forward, report these cases when they are encountered. Do not implement new/additional casefinding methods to capture these cases. • As always, do not report cytology cases with ambiguous terminology
16	Basic Record Identification	SEER Coding System -- Original	Code D – 2013 SEER Coding Manual added.	
17	Basic Record Identification	SEER Coding System – Current	Code D – 2013 SEER Coding Manual added.	
32	Demographic Information	Birthplace – State	New data item.	For cases diagnosed 1/1/2013 and later – State (#252)and Birthplace – Country (#254) replace Place of Birth (#250)
33	Demographic Information	Birthplace – Country	New data item.	For cases diagnosed 1/1/2013 and later – State (#252)and Birthplace – Country (#254) replace Place of Birth (#250)
41	Demographic Information	Race 1,2,3,4,5	Coding Instruction added.	14. When patient Face-sheet indicates “Race Other”, look for other descriptions of the patient’s race. When no further race information is available, code race as 99 (Unknown) and document

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				that patient Face-sheet indicates "Race Other", and no further race information is available.
71	Description of This Neoplasm	Diagnostic Confirmation	Coding Instruction for Solid Tumors, instruction 3.a. updated	3. Assign code 1 when the microscopic diagnosis is based on a. Tissue specimens from biopsy, surgery, autopsy or D&C. Removed – "frozen section" from instruction.
73	Description of This Neoplasm	Diagnostic Confirmation	Coding Instructions for Hematopoietic & Lymphoid Neoplasms (9590/3-9992/3) have been removed.	See the Hematopoietic Manual for coding instructions.
77	Description of This Neoplasm	Behavior Code	Coding Instruction and Example added under In situ and Invasive.	Re-code the behavior as malignant (/3) when metastases are attributed to a tumor originally thought to be in situ.
78	Description of This Neoplasm	Grade	Description of Cell Indicator codes revised.	Cell Indicator (Codes 5, 6, 7, 8) describes the lineage or phenotype of the cell. Codes 5, 6, 7 and 8 are used only for hematopoietic and lymphoid neoplasms. Code 9 indicates cell type not determined, not stated, or not applicable.
82	Description of This Neoplasm	Multiplicity Counter	Note added.	This data item is not required by SEER for cases diagnosed 1/1/2013 and later. Coding instructions are retained because some registries continue to collect this item.
86	Description of This Neoplasm	Date of Multiple Tumors	Note added.	This data item is not required by SEER for cases diagnosed 1/1/2013 and later. Coding instructions are retained because some registries continue to collect this item.

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89	Description of This Neoplasm	Date of Multiple Tumors Flag	Note added.	This data item is not required by SEER for cases diagnosed 1/1/2013 and later. Coding instructions are retained because some registries continue to collect this item.
90	Description of This Neoplasm	Type of Multiple Tumors Reported as One Primary	Note added.	This data item is not required by SEER for cases diagnosed 1/1/2013 and later. Coding instructions are retained because some registries continue to collect this item.
92	Description of This Neoplasm	Ambiguous Terminology	Note added.	This data item is not required by SEER for cases diagnosed 1/1/2013 and later. Coding instructions are retained because some registries continue to collect this item.
95	Description of This Neoplasm	Date of Conclusive Terminology	Note added.	This data item is not required by SEER for cases diagnosed 1/1/2013 and later. Coding instructions are retained because some registries continue to collect this item.
97	Description of This Neoplasm	Date of Conclusive Diagnosis Flag	Note added.	This data item is not required by SEER for cases diagnosed 1/1/2013 and later. Coding instructions are retained because some registries continue to collect this item.
109	First Course of Therapy	Date Therapy Initiated	Coding instruction 6. updated.	Two new instructions added: 6. Leave Blank a. When no treatment is given during the first course. b. When Treatment Status is coded 2, Active Surveillance.
111	First Course of Therapy	Date Therapy Initiated Flag	Coding Instruction 3. updated.	3. Assign code 11 when no treatment is given during the first

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				course, the first course is active surveillance (watchful waiting) or the initial diagnosis was at autopsy.
118	First Course of Therapy	Scope of Regional Lymph Node Surgery	Coding Instruction 12.a.iii.2, updated.	Histology codes 9727 and 9823 added.
	Appendix B	County and State Codes	Updated to ISO country codes.	
	Appendix C: Coding Guidelines - Breast	Grade	Priority Rules for Grading Breast Cancer updated.	“BR” as added to rule 1. & 2. Removed - Rule 8. Bloom-Richardson (BR).
	Appendix C: Surgery Codes – Breast	Code 30 – Subcutaneous mastectomy	Definition updated.	Also called nipple sparing mastectomy. It is performed to facilitate immediate breast reconstruction. Cases coded 30 may be considered to have undergone breast reconstruction.
	Appendix C: Coding Guidelines – Prostate	Grade	Gleason Score definition updated.	Removed - Primary pattern is doubled when there is no secondary pattern.
	Appendix C: Coding Guidelines – Prostate	Grade	Gleason Conversion Table updated.	Removed – Gleason Pattern column from conversion table.
	Appendix C: Coding Guidelines – Renal Pelvis and Ureter	Grade	Urothelial Carcinoma updated.	Removed – Urothelial Carcinoma Low grade High grade
	Appendix C: Coding Guidelines – Renal Pelvis and Ureter	Grade	Adenocarcinoma and Squamous Cell Carcinoma updated.	Added – Assign the grade code for adenocarcinoma and squamous cell carcinoma.