

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
1	Preface	Summary of Changes	Listing of major changes updated.	Listed major changes to the manual (additions, deletions, modifications)
4	Preface	Submitting Questions	Note updated.	Note : See the American College of Surgeons Commission on Cancer CANSWER Forum for questions about AJCC TNM staging, the Site-Specific Data Items, and data items not required by SEER. SEER required data items are listed here: http://datadictionary.naaccr.org/?c=8 .
4	Preface	New Data Items Required for 2016	Section removed.	Not included for 2018.
4	Preface	SEER Site-specific Factors 1-6	Site-specific Factor 1 updated.	Added HPV as SEER Site-specific Factor 1
6	Reportability	Dates of Diagnosis/Residency	Text added.	Added: All cases meeting this criteria are reportable to SEER, including non-analytic cases.
6	Reportability	Reportable Diagnosis List	Item 1.a. updated.	Added: and in approved ICD-O-3 updates
6	Reportability	Reportable Diagnosis List	Item 1.a.ii. updated.	Added: (not a complete list) to The following diagnoses are reportable
6	Reportability	Reportable Diagnosis List	Item 1.a.ii. updated.	Added to the reportable diagnoses list: Lobular carcinoma in situ (LCIS) of breast
6	Reportability	Reportable Diagnosis List	Item 1.a.ii. updated.	Added: High grade biliary intraepithelial neoplasia (BiIN III) of the gallbladder (C239) as an example of intraepithelial neoplasia.
6	Reportability	Reportable Diagnosis List	Item 1.a.ii. updated.	Added to Squamous intraepithelial neoplasia III (SIN III) excluding cervix: and skin sites coded to C44_.
7	Reportability	Reportable Diagnosis	Item 1.a.iv. Moved.	Moved item formerly 1.a.iv. to vi.
7	Reportability	Reportable Diagnosis List	Item 1.a.vii. added.	Added: GIST tumors and thymomas are reportable when there is evidence of multiple foci, lymph node involvement or metastasis.
7	Reportability	Reportable Diagnosis List	Item 1.b. updated.	Revised to: Do not report (Exceptions to reporting requirements)
7	Reportability	Reportable Diagnosis List	Item 2.a. added.	Added new a.: See Required Sites for Benign and Borderline Primary Intracranial and Central Nervous System Tumors table; other subsequent items were renumbered.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

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7	Reportability	Reportable Diagnosis List	Item 2.d. updated.	Added: and approved ICD-O-3 updates
8	Reportability	Reportable Examples	Examples moved.	Moved reportable examples to a newly created Appendix E. Refer to Appendix E.1 for reportable examples.
8	Reportability	Non-Reportable Examples	Examples moved.	Moved non-reportable examples to a newly created Appendix E. Refer to Appendix E.2 for non-reportable examples.
9	Reportability	Cases Diagnosed Clinically Are Reportable	Exception 1 note added.	Added: Note : Standard treatments for cancer may be given for non-malignant conditions. Follow back with the physician to clarify if needed.
9	Reportability	Casefinding Lists	Section moved; language about casefinding sources added.	Moved section up from previous location in the manual. Added: It is important to include all casefinding sources when searching for reportable cases. Sources include: (see manual for list).
10	Reportability	Ambiguous Terminology	Text added.	Added: Ambiguous terms not listed below are not reportable.
10	Reportability	Ambiguous Terminology	Note added.	Cytology section Added: Exception: This is a change to previous instructions. The date of a suspicious cytology may be used as the date of diagnosis when a definitive diagnosis follows the suspicious cytology. See Date of Diagnosis for more information.
10	Reportability	Ambiguous Terminology	Title revised.	Revised title with the list of ambiguous terms to: Ambiguous Terms for Reportability
10	Reportability	Ambiguous Terminology	Text added.	There may be ambiguous terms preceded by a modifier, such as “mildly” suspicious. In general, ignore modifiers or other adjectives and accept the reportable ambiguous term.
11	Reportability	Ambiguous Terminology	Section added.	Added: Ambiguous Terminology Lists: References of Last Resort (see manual for additional language added).
12	Reportability	How to Use Ambiguous Terminology for Case Ascertainment	Items 1.c. and d. added.	Added item numbers to existing text.
12	Reportability	How to Use Ambiguous Terminology for Case Ascertainment	Items 1.d.i. Example 2 updated.	Deleted text: CT-guided needle biopsy with final diagnosis Neoplasm suggestive of oncocytoma.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

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12	Reportability	How to Use Ambiguous Terminology for Case Ascertainment	Items 2.b., c. and d. updated.	Benign and borderline primary intracranial and CNS tumors b. Neoplasm and tumor are reportable terms for brain and CNS because they are listed in ICD-O-3 with behavior codes of /0 and /1 c. Accession the case when any of the reportable ambiguous terms precede either the word “tumor” or the word “neoplasm” Example: The mass on the CT scan is consistent with pituitary tumor. Accession the case. d. Mass and lesion are not reportable terms for brain and CNS because they are not listed in ICD-O-3 with behavior codes of /0 or /1
14	Changing Information on the Abstract	Changing Information on the Abstract	New section created.	New section created (moved from Reportability and made into a new, separate section) .
14	Changing Information on the Abstract	Changing Information on the Abstract	Item 3, Example 5 was added.	Example 5 : Rectal polyps excised and found to have adenocarcinoma in situ in a tubulovillous adenoma and a tubulovillous adenoma with focal carcinoma in situ. The behavior code is in situ (/2). Eight months later, a rectal polyp is removed and diagnosed as adenocarcinoma with mucinous features, infiltrating into submucosa, seen in a background of tubulovillous adenoma. Change the behavior code to malignant
14	Changing Information on the Abstract	Changing Information on the Abstract	Item 4, Example 1 was updated.	Updated dates in the example.
15	Determining Multiple Primaries	Solid Tumors	Text updated.	Replaced 2007 Multiple Primary and Histology Coding Rules Manual with 2018 Solid Tumor Rules.
15	Determining Multiple Primaries	Solid Tumors, Primary Site and Topography Codes table	Primary sites and topography codes updated.	Revised primary sites and topography codes to be consistent with the 2018 Solid Tumor Rules (see manual for changes).

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

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15	Determining Multiple Primaries	Solid Tumors, Primary Site and Topography Codes table	Comment under table revised.	The General rules do not apply to hematopoietic primaries (lymphoma and leukemia) of any site or to the reportable benign or borderline intracranial or CNS tumors. The head and neck, colon, rectosigmoid and rectum, breast, kidney, urinary sites, and malignant CNS and peripheral nerves rules exclude lymphoma and leukemia (M9590-M9992) and Kaposi sarcoma (M9140). All other sites rules exclude lymphoma and leukemia (M9590-M9992).
15	Determining Multiple Primaries	Hematopoietic and Lymphoid Neoplasms	Text added.	Added: Updates to the Hematopoietic and Lymphoid Neoplasm Coding Manual and Database have been made for 2018 cases. The updates reflect changes based on updates of the WHO Classification of Tumors (Blue Books), AJCC 8th Edition Staging Manual, and clarifications to current rules.
15	Determining Multiple Primaries	Transplants	Text revised.	Replaced 2007 Multiple Primary and Histology Coding Rules Manual with 2018 Solid Tumor Rules.
17	Section I: Basic Record Identification	Basic Record Identification	Text revised	Revised text: The combination of the SEER Participant Number, Patient ID Number, and Record Number identifies a unique patient record and tumor within a specific geographic location at diagnosis.
18	Section I: Basic Record Identification	SEER Participant	List updated.	Updated list of SEER participants.
21	Section I: Basic Record Identification	Record Type	Code description changed.	Revised Length of codes I to 4048; C to 6154; A to 24194; U to 1543; M to 24194.
22	Section I: Basic Record Identification	SEER Record Number	Text updated.	Added: the highest allowable number is 99; Tumor record number does not change.
23	Section I: Basic Record Identification	SEER Coding System--Original	Code H added.	Code H: 2018 SEER Coding Manual.
23	Section I: Basic Record Identification	SEER Coding System--Original	Footnote revised.	Revised footnote: Death certificate only (DCDO) cases: Assign Code H.
24	Section I: Basic Record Identification	SEER Coding System--Current	Code H added.	Code H: 2018 SEER Coding Manual.
24	Section I: Basic Record Identification	SEER Coding System--Current	Footnote revised.	Revised footnote: Death certificate only (DCO) cases: Assign Code H.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

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26	Section II: Information Source	Type of Reporting Source	Text edited.	Revised first paragraph: The Type of Reporting Source identifies the source documents that provided the most complete information when abstracting the case. This is not necessarily the original document that identified the case; rather, it is the source that provided the most complete information.
29	Section II: Information Source	CoC Accredited Flag	Item added.	See manual.
31	Section III: Demographic Information	First Name	Text edited.	Added additional text in first paragraph: for matching.
32	Section III: Demographic Information	Last name	Text edited.	Added additional text in first paragraph: for matching.
34	Section III: Demographic Information	Place of Residence at Diagnosis: Persons in the Armed Forces and on Maritime Ships	Format fixed.	Corrected formatting of the section relating to persons in the armed forces.
36	Section III: Demographic Information	County at Diagnosis Geocode 1970/80/90	Item name and text updated.	Changed 1990 to 1970/80/90. Added to first paragraph: computer generated.
36	Section III: Demographic Information	County at Diagnosis Geocode 1970/80/90	Code description changed.	Updated code 998: Known town, city, state, or country of residence but county code not known AND a resident outside of the state of reporting institution (must meet all criteria). Use this code for Canadian residents.
37	Section III: Demographic Information	County at Diagnosis Geocode 2000	Text edited.	Added: computer generated. Added: This code should be used for county and county-based rates and analysis for all cases diagnosed in 2000-2009.
37	Section III: Demographic Information	County at Diagnosis Geocode 2000	Code descriptions changed.	Updated code 998: Known town, city, state, or country of residence but county code not known AND a resident outside of the state of reporting institution (must meet all criteria). Use this code for Canadian residents. Updated code 999: County unknown. The county of the patient is unknown, or the patient is not a United States resident. County is not documented in the patient's medical record.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
38	Section III: Demographic Information	County at Diagnosis Geocode 2010	Text edited.	Added: County at Diagnosis Geocode 2010 stores a computer generated geocoded value for the county of residence at the time of diagnosis. Added: This code should be used for county and county-based rates and analysis for all cases diagnosed in 2010-2019.
38	Section III: Demographic Information	County at Diagnosis Geocode 2010	Code descriptions changed.	Updated code 998: Known town, city, state, or country of residence but county code not known AND a resident outside of the state of reporting institution (must meet all criteria). Use this code for Canadian residents.
NA	Section III: Demographic Information	County at Diagnosis Geocode 2020	Data item removed.	Removed the 2020 data item.
39	Section III: Demographic Information	County at Diagnosis Analysis	Data item added.	See manual.
41	Section III: Demographic Information	State at Diagnosis Geocode 1970/80/90	Data item added.	See manual.
42	Section III: Demographic Information	State at Diagnosis Geocode 2000	Data item added.	See manual.
43	Section III: Demographic Information	State at Diagnosis Geocode 2010	Data item added.	See manual.
44	Section III: Demographic Information	Census Tract 2010	Text edited.	Added: It is computer generated using patient address information.
48	Section III: Demographic Information	Geo Location ID 1970/80/90	Data item added.	See manual.
49	Section III: Demographic Information	Geo Location ID 2000	Data item added.	See manual.
50	Section III: Demographic Information	Geo Location ID 2010	Data item added.	See manual.
52	Section III: Demographic Information	Rural Urban Commuting Area - Tract Level 2000	Data item added.	See manual.
53	Section III: Demographic Information	Rural Urban Commuting Area - Tract Level 2010	Data item added.	See manual.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

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54	Section III: Demographic Information	Urban Rural Indicator Code-Tract Level 2000	Data item added.	See manual.
55	Section III: Demographic Information	Urban Rural Indicator Code-Tract Level 2010	Data item added.	See manual.
61	Section III: Demographic Information	Place of Death--State	Data item added.	See manual.
62	Section III: Demographic Information	Place of Death--Country	Data item added.	See manual.
64	Section III: Demographic Information	Race 1,2,3,4,5	Coding Instruction added.	Under coding instructions, added instruction 18; Under Coding Examples, added 2 examples.
67	Section III: Demographic Information	Race 1,2,3,4,5	Examples added.	Added two examples under Coding Examples
72	Section III: Demographic Information	Spanish Surname or Origin	Coding Instruction 2. added.	Assign code 6 when there is more than one ethnicity/origin (multiple codes), such as Mexican (code 1) and Dominican Republic (code 8). There is no hierarchy among the codes 1-5 and 8. Renumbered existing coding instructions.
76	Section III: Demographic Information	Sex	Definitions deleted.	The definitions of transgender and transgendered person were removed.
76	Section III: Demographic Information	Sex	Definitions updated	Updated intersex definition with example. Edited the definition of transsexual.
76	Section III: Demographic Information	Sex	Coding Instruction 3 added.	Codes 5 and 6 have priority over codes 1 and 2. Renumbered of existing coding instructions.
77	Section III: Demographic Information	Marital Status at Diagnosis	Justification for Continued Collection edited.	Deleted paragraphs on Availability and Utility.
79	Section III: Demographic Information	Primary Payer at Diagnosis	Coding Instructions 5 and 6 added.	Added: 5. Use code 02 when the only information available is "self-pay" 6. Use code 10 for prisoners when no further information is available Renumbered existing coding instruction.
81	Section IV: Description of this Neoplasm	Date of Diagnosis	Text edited.	Replaced diagnosed with identified in first paragraph.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

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83	Section IV: Description of this Neoplasm	Date of Diagnosis	Coding Instructions updated.	Changed dates in examples to 2018.
83	Section IV: Description of this Neoplasm	Date of Diagnosis	Coding Instructions reordered.	Moved Coding Instruction 4 to 10; Coding Instructions numbering shifted.
83	Section IV: Description of this Neoplasm	Date of Diagnosis	Coding Instruction 5 updated.	Added to Coding Instruction 5: Exception: Use the date of the suspicious cytology when the diagnosis is proven by subsequent biopsy.
85	Section IV: Description of this Neoplasm	Date of Diagnosis	Note added.	Added note to Cases Diagnosed Before Birth: Note: Prenatal diagnoses: Reportable when there is a live birth.
87	Section IV: Description of this Neoplasm	Sequence Number--Central	Code description changed.	Added to Code 98 description under Non-malignant Tumor as Federally Required based on Diagnosis Year: Note: Submission of cervical carcinoma in situ is no longer required as of 2018 NCI SEER data submission.
88	Section IV: Description of this Neoplasm	Sequence Number--Central	Note added.	Note: Submission of cervical carcinoma in situ is no longer required as of 2018 data submission. Added to: Type of Neoplasm/Sequence Number Series table, under Series 1, 00-59; Series 2, 60-87 and 98; In situ/ Malignant Coding Instructions 3.b., second bullet and 3.b. examples 1 and 2; and Non-Malignant Coding Instruction 6.
88	Section IV: Description of this Neoplasm	Sequence Number--Central	In situ/Malignant Coding Instruction 3.b. updated.	Added bullet under Coding Instruction 3.b. Exception: Borderline tumors of the ovary were reported for 1992-2000: Sequence 00-59.
91	Section IV: Description of this Neoplasm	Primary Site	Text added.	Added to the first paragraph: The 2018 Solid Tumor Rules contain additional coding instructions for some primary sites, including Head and Neck, Lung, and Urinary.
91	Section IV: Description of this Neoplasm	Primary Site	Text added.	Added to Coding Instructions for Solid Tumors, first paragraph: Refer also to the 2018 Solid tumor Rules for selected primary site coding instructions.
92	Section IV: Description of this Neoplasm	Primary Site	Coding Instruction 8 updated.	Revised primary site names: Rectosigmoid, rectum changed to Rectosigmoid Junction, and added "of all sites" to Kaposi Sarcoma.
93	Section IV: Description of this Neoplasm	Primary Site	Coding Instruction 10.a. updated.	Removed text; now reads: Code C422 (spleen) as the primary site for angiosarcoma of spleen

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
93	Section IV: Description of this Neoplasm	Primary Site	Coding Instruction 13 Primary Site/Histology table updated.	Added the following to the Primary Site table: Anal verge C211 Angular incisura of stomach C163 Incisura, incisura angularis C163 Testis, descended post orchiopexy C621 Updated: Gastric angular notch (incisura) C163
94	Section IV: Description of this Neoplasm	Primary Site	Coding Instruction 14.a. and b. updated.	14. When the medical record does not contain enough information to assign a primary a. Consult a physician advisor to assign the site code b. Use the NOS category for the organ system or the Ill-Defined Sites (C760 C768) if the physician advisor cannot identify a primary site
94	Section IV: Description of this Neoplasm	Primary Site	Coding Instruction 14.c. updated.	c. Assign the NOS code for the body system when there are two or more possible primary sites documented and all are within the same system Example: Two possible sites are documented in the GI system such as colon and small intestine; code to the GI tract, NOS (C269). Document the possible primary sites in a text field. For lymph node biopsy positive for squamous cell carcinoma deemed to be a head and neck primary with no head and neck tumor found, see the Schema Discriminator in the SSDI manual
94	Section IV: Description of this Neoplasm	Primary Site	Coding Instruction 14.d. and e. updated.	d. Code unknown primary site when there is a physician statement of unknown primary site ONLY when none of the above instructions can be applied e. Code Unknown Primary Site (C809) if there is not enough information to assign an NOS or Ill-Defined Site category
96	Section IV: Description of this Neoplasm	Laterality	Sites for coding laterality revised.	Removed Tonsillar fossa and Tonsillar pillar from 'Sites for Which Laterality Codes Must Be Recorded' Table
98	Section IV: Description of this Neoplasm	Diagnostic Confirmation	Text edited.	Revised the note, the second paragraph: See the section Codes for Hematopoietic and Lymphoid Neoplasms for hematopoietic and lymphoid neoplasms diagnostic confirmation codes.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
98	Section IV: Description of this Neoplasm	Diagnostic Confirmation	Coding Instructions for Solid Tumors 3.a. revised.	3.a. Tissue specimens from fine needle aspirate, biopsy, surgery, autopsy, or D&C
99	Section IV: Description of this Neoplasm	Diagnostic Confirmation	Coding Instructions for Solid Tumors 10.b. added.	10.b. For death certificate only case
102	Section IV: Description of this Neoplasm	Histologic Type ICD-O-2	Text edited.	Replaced 2007 Multiple Primary and Histology Coding Rules Manual with 2018 Solid Tumor Rules
102	Section IV: Description of this Neoplasm	Histologic Type ICD-O-3	ICD-O-3 updated.	Added two sections: 2018 ICD-O-3 Update and ICD-O-3.1
103	Section IV: Description of this Neoplasm	Histologic Type ICD-O-3	Table of Primary Site and Topography revised.	Updated Primary Site and Topography table sites and codes.
104	Section IV: Description of this Neoplasm	Behavior Code	Coding Instructions revised.	Added under Metastatic or Non-primary Sites: Metastasis could be regional, nodal, or distant. The exception is with in situ breast cancer; code as non-invasive (/2) in the presence of isolated tumor cells or if cells are artifactually displaced from a previous procedure.
107	Section IV: Description of this Neoplasm	Grade Clinical	Item added.	Added new data item; it replaces Grade, Differentiation or Cell Indicator. See manual.
108	Section IV: Description of this Neoplasm	Grade Pathological	Item added.	Added new data item; it replaces Grade, Differentiation or Cell Indicator. See manual.
109	Section IV: Description of this Neoplasm	Grade Post Therapy	Item added.	Added new data item; it replaces Grade, Differentiation or Cell Indicator. See manual.
110	Section IV: Description of this Neoplasm	Tumor Size--Clinical	Item moved.	Added item to the main manual; was previously located in a separate file from the main manual.
113	Section IV: Description of this Neoplasm	Tumor Size--Pathologic	Item moved.	Added item to the main manual; was previously located in a separate file from the main manual.
119	Section V: Stage of Disease at Diagnosis	Section V	Section revised.	Added section to the main manual; was previously located in a separate file from the main manual. See revised section with data items related to staging. Includes Stage Data Items, Extent of Disease Data Items, and Summary Stage.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
121	Section V: Stage of Disease at Diagnosis	Lymph-vascular Invasion	Codes added.	Added new codes: 2-Lymphatic and small vessel invasion only (L) 3-Venous (large vessel) invasion only (V) 4-BOTH lymphatic and small vessel AND venous (large vessel) invasion
122	Section V: Stage of Disease at Diagnosis	Lymph-vascular Invasion	Coding Instruction 4.c. updated.	4.c. Plasma Cell Myeloma
123	Section V: Stage of Disease at Diagnosis	Mets at Diagnosis--Bone	Item moved.	Added item to the main manual; was previously located in a separate file from the main manual.
123	Section V: Stage of Disease at Diagnosis	Mets at Diagnosis--Bone	Coding Instruction 1 updated.	Added: Do not record contiguous bone invasion by primary tumor in this field.
125	Section V: Stage of Disease at Diagnosis	Mets at Diagnosis--Brain	Item moved.	Added item to the main manual; was previously located in a separate file from the main manual.
127	Section V: Stage of Disease at Diagnosis	Mets at Diagnosis--Liver	Item moved.	Added item to the main manual; was previously located in a separate file from the main manual.
127	Section V: Stage of Disease at Diagnosis	Mets at Diagnosis--Liver	Coding Instruction 1 updated.	Added: Do not record contiguous involvement of liver by primary tumor in this data item.
129	Section V: Stage of Disease at Diagnosis	Mets at Diagnosis--Lung	Item moved.	Added item to the main manual; was previously located in a separate file from the main manual.
131	Section V: Stage of Disease at Diagnosis	Mets at Diagnosis--Distant Lymph Node(s)	Item moved.	Added item to the main manual; was previously located in a separate file from the main manual.
133	Section V: Stage of Disease at Diagnosis	Mets at Diagnosis--Other	Item moved.	Added item to the main manual; was previously located in a separate file from the main manual.
136	Section V: Stage of Disease at Diagnosis	Extent of Disease--Primary tumor	Item added.	See manual.
137	Section V: Stage of Disease at Diagnosis	Extent of Disease--Regional Nodes	Item added.	See manual.
138	Section V: Stage of Disease at Diagnosis	Extent of Disease--Metastases	Item added.	See manual.
140	Section V: Stage of Disease at Diagnosis	Summary Stage 2018	Item added.	See manual.
141	Section V: Stage of Disease at Diagnosis	Derived Summary Stage 2018	Item added.	See manual.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
142	Section VI: Stage-related Data Items	Section VI	Section added.	Added new section for stage-related data items including SEER Site-specific Factor 1 and Additional Stage-related Data Items for 2018 including Site-specific Data Items (SSDIs).
143	Section VI: Stage-related Data Items	SEER Site-specific Factor 1	Item added.	See manual. This item is reserved for human papilloma virus (HPV) status.
144	Section VII: First Course of Therapy	Additional Stage-related Data Items for 2018	Sub-section added.	Added listing of schema discriminators, corresponding NAACCR items, and sites. Also added listing of new data items (SSDIs) required for staging by schema.
145	Section VII: First Course of Therapy	First Course of Therapy Definitions	Definition updated.	Disease recurrence: Replaced Multiple Primary and Histology Coding Rules Manual with Solid Tumor Rules.
147	Section VII: First Course of Therapy	First Course of Therapy Definitions	Definition added.	Hospice: A program that provides special care for people who are near the end of life and for their families, either at home, in freestanding facilities, or within hospitals. Hospice care may include treatment that destroys or modifies cancer tissue. If performed as part of the first course, treatment that destroys or modifies cancer tissue is collected when given in a hospice setting. "Hospice, NOS" is not specific enough to be included as first course treatment.
148	Section VII: First Course of Therapy	Treatment Timing	Instruction 1 updated.	1. Deleted Example 1.
149	Section VII: First Course of Therapy	Treatment Timing	Coding Instruction 4 updated.	4. Code all treatment that was started and administered, whether completed or no. Document treatment discontinuation in text fields.
152	Section VII: First Course of Therapy	Date Therapy Initiated	Coding Instruction 3 updated.	Changed dates from 2016 to 2018 in example.
156	Section VII: First Course of Therapy	Date of First Surgical Procedure	Coding Instruction 4 added.	4. Record the polypectomy date as the date of first surgical procedure when a surgical procedure to remove polyps is performed without removing the entire tumor, and a subsequent surgery is performed. a. When reportable tumor is found in the specimen, polypectomies are surgery for the purposes of cancer registry data collection regardless of whether or not there is residual tumor after the polypectomy

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
158	Section VII: First Course of Therapy	Date of Most Definitive Surgical Resection of the Primary Site	Item added.	See manual.
159	Section VII: First Course of Therapy	Date of Most Definitive Surgical Resection of the Primary Site Flag	Item added.	See manual.
162	Section VII: First Course of Therapy	Surgical Margins of the Primary Site	Coding Instructions 4 and 5 updated.	4. Assign code 2 for involvement of margins microscopically but not grossly (cannot be seen by the naked eye). Use the Margins section of the CAP protocol or the Microscopic Description from the pathology report to identify microscopic findings. 5. Assign code 3 for involvement of margins grossly (seen by the naked eye). Use the Margins section of the CAP protocol or the Gross Description from the pathology report to identify macroscopic findings.
163	Section VII: First Course of Therapy	Scope of Regional Lymph Node Surgery	Coding Instruction 2.a. updated.	a. Include lymph nodes that are regional in the current AJCC Staging Manual or EOD 2018
168	Section VII: First Course of Therapy	Date of Sentinel Lymph Node Biopsy	Item added.	See manual.
169	Section VII: First Course of Therapy	Date of Sentinel Lymph Node Biopsy Flag	Item added.	See manual.
170	Section VII: First Course of Therapy	Sentinel Lymph Nodes Examined	Item added.	See manual.
171	Section VII: First Course of Therapy	Sentinel Lymph Nodes Positive	Item added.	See manual.
172	Section VII: First Course of Therapy	Date of Regional Lymph Node Dissection	Item added.	See manual.
173	Section VII: First Course of Therapy	Date of Regional Lymph Node Dissection Flag	Item added.	See manual.
174	Section VII: First Course of Therapy	Regional Nodes Positive	Item moved.	Added item to the main manual; was previously located in a separate file from the main manual.
174	Section VII: First Course of Therapy	Regional Nodes Positive	Coding Instructions 1.a. and 11.viii. updated.	1. a. Include lymph nodes that are regional in the current AJCC Staging Manual or EOD 2018 11.viii. Plasma Cell Myeloma

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
177	Section VII: First Course of Therapy	Regional Nodes Examined	Item moved.	Added item to the main manual; was previously located in a separate file from the main manual.
177	Section VII: First Course of Therapy	Regional Nodes Examined	Coding Instructions 1, 1.a., and 12.viii. updated.	1. Regional lymph nodes only. Record information only about regional lymph nodes in this field. a. Include lymph nodes that are regional in the current AJCC Staging Manual or EOD 2018 12.viii. Plasma Cell Myeloma
180	Section VII: First Course of Therapy	Surgical Procedure of Other Site	Coding Instruction 5 added.	5. Do not code removal of uninvolved contralateral breast in this data item. See Surgery Codes for Breast in Appendix C.
182	Section VII: First Course of Therapy	Reason for No Surgery of Primary Site	Coding Instruction 2.iii. updated.	2.iii. Patient elected to pursue no treatment following the discussion of surgery. Discussion does not equal a recommendation. Patient's decision not to pursue surgery is not a refusal of surgery in this situation.
186	Section VII: First Course of Therapy	Radiation Treatment Modality--Phase I, II, III	Items added.	See manual.
190	Section VII: First Course of Therapy	Reason for No Radiation	Item added.	See manual.
196	Section VII: First Course of Therapy	Chemotherapy	Examples updated.	Revised examples associated with drugs previously categorized as chemotherapy but are now BRM/Immuno. Example 1: Patient diagnosed with HER2 positive breast cancer December 15, 2017, and was placed on planned Herceptin February 2, 2018. Code Herceptin in the BRM/Immuno field (as the patient was diagnosed after January 1, 2013).
196	Section VII: First Course of Therapy	Chemotherapy	Coding Instruction 2 updated.	2. When chemotherapeutic agents are used as radiosensitizers or radioprotectants, they are given at a much lower dosage and do not affect the cancer. Radiosensitizers and radioprotectants are classified as ancillary drugs. See SEER*Rx. Do not code as chemotherapy. Review the radiation-oncology progress notes for information about radiosensitizing chemotherapy.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
196	Section VII: First Course of Therapy	Chemotherapy	Coding Instruction 3.b. updated.	3.b. Do not code the new agent as first course therapy when the original chemotherapeutic agent is changed to one that is NOT in the same group. Code only the original agent as first course. When the new agent is in a different group, it is second course therapy.
196	Section VII: First Course of Therapy	Chemotherapy	Coding Instruction 5.d. updated.	5. d. Patient elects to pursue no treatment following the discussion of chemotherapy. Discussion does not equal a recommendation. Patient's decision not to pursue chemotherapy is not a refusal of chemotherapy in this situation.
203	Section VII: First Course of Therapy	Hormone Therapy	Coding Instructions 1. and 1.a. updated.	1. Code the hormonal agent given as part of combination chemotherapy (e.g., R-CHOP), whether it affects the cancer cells or not a. Check SEER*Rx to determine if a hormone agent is part of a combination chemotherapy regimen
204	Section VII: First Course of Therapy	Hormone Therapy	Coding Instructions 2.d. updated.	2.d. Patient elected to pursue no treatment following the discussion of hormone therapy treatment. Discussion does not equal a recommendation. Patient's decision not to pursue hormone therapy is not a refusal of hormone therapy in this situation.
204	Section VII: First Course of Therapy	Hormone Therapy	Coding Example 5 added.	Example 5: Lupron is hormone therapy that has been approved as an ovarian suppressor for pre-menopausal breast cancer.
205	Section VII: First Course of Therapy	Hormone Therapy	Hormone Categories updated.	Deleted octreotide
209	Section VII: First Course of Therapy	Immunotherapy	Example updated.	Example: Patient diagnosed with breast cancer January 5, 2018, and begins receiving Herceptin as part of first course therapy on January 30, 2018. Code the Herceptin in the BRM/Immunotherapy data field.
209	Section VII: First Course of Therapy	Immunotherapy	Definitions moved.	Moved section on Immunotherapy is designed to, to the Definitions section.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
210	Section VII: First Course of Therapy	Immunotherapy	Coding Instruction 1.d. updated.	1.d. Patient elects to pursue no treatment following the discussion of immunotherapy. Discussion does not equal a recommendation. Patient's decision not to pursue immunotherapy is not a refusal of immunotherapy in this situation.
211	Section VII: First Course of Therapy	Hematologic Transplant and Endocrine Procedures	Code 20 revised.	Code 20 Stem cell harvest and infusion (stem cell transplant)
212	Section VII: First Course of Therapy	Hematologic Transplant and Endocrine Procedures	Definition updated.	Stem cell transplant: Procedure to replenish supply of healthy blood-forming cells. Also known as bone marrow transplant, PBSCT, or umbilical cord blood transplant, depending on the source of the stem cells. When stem cells are collected from bone marrow and transplanted into a patient, the procedure is known as a bone marrow transplant. If the transplanted stem cells came from the bloodstream, the procedure is called a peripheral blood stem cell transplant—sometimes shortened to stem cell transplant.
212	Section VII: First Course of Therapy	Hematologic Transplant and Endocrine Procedures	Coding Instructions 1.d. and 2 updated.	1.d. Patient elects to pursue no treatment following the discussion of transplant procedure or endocrine therapy. Discussion does not equal a recommendation. Patient's decision not to pursue transplant procedure or endocrine therapy is not a refusal of transplant procedure or endocrine therapy in this situation. 2. Assign code 10 if the patient has a bone marrow transplant and it is unknown if autologous or allogeneic (BMT, NOS) or "mixed chimera transplant (mini-transplant or non-myeloablative transplant). These transplants are a mixture of the patient's cells and donor cells.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
213	Section VII: First Course of Therapy	Hematologic Transplant and Endocrine Procedures	Coding Instructions 5 and 8 updated.	5. Assign code 20 for a. allogeneic stem cell transplant b. peripheral blood stem cell transplant c. umbilical cord stem cell transplant (single or double) 8. Assign code 88 when the a. The only information available is that the patient was referred to an oncologist for consideration of hematologic transplant or endocrine procedure b. A bone marrow or stem cell harvest was undertaken, but it was not followed by a rescue or reinfusion as part of first course treatment
216	Section VII: First Course of Therapy	Date Other Treatment Started	Text edited.	Removed transfusion from list of examples in the first paragraph.
218	Section VII: First Course of Therapy	Other Therapy	Coding Instructions 1.d. and 2.a. updated.	1.d. Patient elects to pursue no treatment following the discussion of other therapy. Discussion does not equal a recommendation. Patient's decision not to pursue other therapy is not a refusal of other therapy in this situation. 2.a. Hematopoietic treatments such as: phlebotomy or aspirin (See SEER*Rx) and Hematopoietic and Lymphoid Neoplasm Coding Manual and Database for specific guidance on coding)
219	Section VII: First Course of Therapy	Other Therapy	Coding Instruction 2.b. Note added.	Note: Code UVB phototherapy for mycosis fungoides as photodynamic therapy under Surgery of Primary Site for skin. Assign code 11 [Photodynamic therapy (PDT)] if there is no pathology specimen. Assign code 21 [Photodynamic therapy (PDT)] if there is a pathology specimen.
219	Section VII: First Course of Therapy	Other Therapy	Coding Instructions 5.a.-d. revised.	See manual for assigning code 6 (Other-Unproven) under Other Therapy.
227	Section VIII: Follow Up Information	Vital Status	Code and Coding Instruction revised; text edited.	Added: The code for Dead has been changed from 4 to 0 beginning with cases diagnosed in 2018. Earlier cases may be converted if desired. Code 0 Dead (was Code 4) 1. Assign code 0 for death certificate only (DCO) cases

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
228	Section VIII: Follow Up Information	ICD Code Revision Used for Cause of Death	Codes revised; text edited.	Added: This field is populated by the central registry. Code 7 ICD-7 (1958-1967) Code 8 ICDA-8 (1968-1978) Code 9 ICD-9 (1979-1988)
229	Section VIII: Follow Up Information	Underlying Cause of Death	Text edited.	Added: This field is populated by the central registry.
243	Section IX: Administrative Codes	Over-ride Flag for Name/Sex	Item added.	See manual.
244	Section IX: Administrative Codes	Over-ride Flag for Site/Behavior (IF39)	Item name updated.	Changed name of data item from Flag Site/Behavior (IF39) to Over-ride Flag for Site/Behavior (IF39).
248	Section IX: Administrative Codes	Over-ride Flag for TNM Tis	Item added.	See manual.
240	Section IX: Administrative Codes	Over-ride Flag for Site/TNM-Stage Group	Item added.	See manual.
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Breast	Primary Site section modified	Deleted topography code list and terms and revised Primary Site section.
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Breast	Priority list modified	Revised the priority list of procedures used in the Coding Subsites section.
	Appendix C: Site Specific Coding Modules	Coding Guidelines: Melanoma	Reportability section revised	Revised text: As of cases diagnosed January 1, 2018, early or evolving melanoma of any type is not reportable. This includes both invasive and in situ melanomas; early or evolving are not reportable.
	Appendix C: Site Specific Coding Modules	Surgery Codes: Breast	Note revised	Revised SEER Note associated with codes 20-24: SEER Note: When a patient has a procedure coded to 20-24 (e.g., lumpectomy) with reconstruction, code only the procedure (e.g., lumpectomy , code 22) as the surgery.
	Appendix C: Site Specific Coding Modules	Surgery Codes: Breast	Note added	Added SEER Note associated with codes 20-24: SEER Note: Assign code 23 for lumpectomy and additional margin excision during the same procedure.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
	Appendix C: Site Specific Coding Modules	Surgery Codes: Breast	Note added	Added SEER Note associate with code 40: SEER Note: Assign code 43 for a simple mastectomy with tissue expanders and acellular dermal matrix/AlloDerm. The tissue expander indicates preparation for reconstruction. The acellular dermal matrix/AlloDerm is not coded because, while they often accompany an implant procedure, they are not the principle element of reconstructive procedures. The principle elements would be tissue from the patient and/or prosthetics (e.g., gel implants).
	Appendix C: Site Specific Coding Modules	Surgery Codes: Breast	Note added	Added SEER Note associated with code 76 SEER Note: For a simple bilateral mastectomy, assign code 41 with code 1 in Surgical Procedure of Other Site. Assign code 76 for a more extensive bilateral mastectomy. Assign code 0 in Surgical Procedure of Other Site.

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
	Appendix C: Site Specific Coding Modules	Surgery Codes: Breast	Note revised	<p>Revised the SEER Note below code 50: SEER Note: "In continuity with" or "en bloc" means that all the tissues were removed during the same procedure, but not necessarily in a single specimen. "Tissue" for reconstruction is defined as human tissue such as muscle (latissimus dorsi or rectus abdominis) or skin in contrast to artificial prostheses (implants). Placement of a tissue expander at the time of original surgery indicates that reconstruction is planned as part of the first course of treatment.</p> <p>Code the most invasive, extensive, or definitive surgery in Surgery of Primary Site.</p> <p>Assign code 51 or 52 if a patient has an excisional biopsy and axillary dissection followed by a simple mastectomy during the first course of therapy. Code the cumulative result of the surgeries, which is a modified radical mastectomy in this case.</p>
	Appendix C: Site Specific Coding Modules	Surgery Codes: Skin	Note revised	<p>Added to the existing SEER Note associated with code 34: Assign code 34 for Mohs surgery with unknown margins.</p>
	Appendix C: Site Specific Coding Modules	Surgery Codes: Skin	Note added	<p>Added SEER Note below codes 35 and 36: SEER Note: Assign code 35 for shave biopsy followed by Mohs with 1 cm margin or less. Assign code 36 for shave biopsy followed by Mohs with more than 1 cm margin.</p>

SEER Program Coding and Staging Manual 2018 - Summary of Changes

This table lists the changes in the draft 2018 manual by page number.

Page	Section	Data Item	Change	Notes/Comments
	Appendix C: Site Specific Coding Modules	Surgery Codes: Skin	Note revised	SEER Note: Codes 30 to 35 include less than a wide excision and less than or equal to 1 cm margin, or status of margin is unknown. If it is stated to be a wide excision or reexcision, but the margins are unknown, code to 30. Assign a surgery code from the 30-35 range when any margin is less than 1 cm. Example: Melanoma with surgical margins greater than 1 cm for length and width but less than 1 cm for depth. Assign a surgery code in the 30-35 range. Since tumor thickness is an important prognostic factor for cutaneous melanoma, the deep margin is of particular importance. Use code 45 when there is a wide excision AND it is known that the margins of excision are greater than 1 cm.]
	Appendix E	Reportable Examples and Non-reportable Examples	Appendix added	Added new Appendix E that includes both the reportable examples (Appendix E1) and non-reportable examples (Appendix E2) previously listed in the main document under the Reportability section. Reportable examples are broken out in malignant and non-malignant sections.
	Appendix E1	Reportable Examples	Examples added, revised; formerly in Reportability section	Added, revised, or removed, and renumbered examples. The examples were in the Reportability section of the manual. See manual for Appendix E.
	Appendix E2	Non-Reportable Examples	Examples added, revised; formerly in Reportability section	Added, revised, or removed, and renumbered examples. The examples were in the Reportability section of the manual. See manual for Appendix E.