

1. *Overview of variables*
  - *Demographics*
  - *Tumor characteristics*
  - *Treatment*
  - *Follow-up and dates*
  - *County attributes*
2. *Cancer type recodes*
3. *Cancer type specific variables*
4. *Staging definitions*
  - *Caution when using over time*

# Concept of Summary Stage (LRD stage) (very simple, very anatomic – began in the 1950s)

## Definition

In situ (I)

Localized only (L)

Regional (R)

Regional by direct extension only (RE)

Regional lymph nodes involved only (RN)

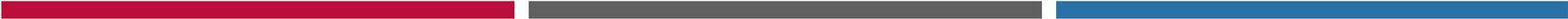
Regional by BOTH direct extension AND lymph node involvement (RE + RN)

Regional, NOS (Not Otherwise Specified) (R, NOS)

Distant site(s)/node(s) involved (D)

Unknown if extension or metastasis (unstaged, unknown, or unspecified) (U)

Death certificate only case



# EOD

**E**xtent **o**f **D**isease

FIELD 20 - EXTENT OF DISEASE  
COLUMNS 67-68

Example of two-digit EOD

OVARY  
830

**PRIMARY TUMOR  
NO DIRECT EXTENSION  
NO DISTANT INVOLVEMENT**

<i>Primary Tumor Description</i>	<i>Local Vessel Invasion</i>	<i>Regional Lymph Nodes</i>	<i>Code</i>
confined strictly to ovarian tissue.....	no	no	<b>10</b>
"localized" to ovarian tissue.....	no	no	<b>4</b>
confined strictly to ovarian tissue.....	yes	no	<b>30</b>
"localized" to ovarian tissue.....	yes	no	<b>39</b>
confined strictly to ovarian tissue.....		yes	<b>50</b>
no detailed information of above.....		yes	<b>59</b>

**TUMOR HAS EXTENDED TO  
OR INFILTRATED THE FOLLOWING:**

	<i>Involvement of regional lymph nodes</i>	
	<i>no</i>	<i>yes</i>
local invasion of peritoneum and/or fallopian tube by extension.....	<b>70</b>	<b>80</b>
implants on ovary of primary site.....	<b>71</b>	<b>81</b>
implants on peritoneum in area immediately adjacent to ovary of primary site.....	<b>72</b>	<b>82</b>
more than one (70-72) or (80-82).....	<b>79</b>	<b>89</b>

**FURTHER DIRECT EXTENSION**

any adjacent extension other than 70 or 80.....	<b>99</b>	<b>-9</b>
---	-----------	-----------

**DISTANT INVOLVEMENT**

distant site involvement.....	<b>&amp;1</b>	<b>&amp;6</b>
distant lymph node involvement.....	<b>&amp;2</b>	<b>&amp;7</b>
distant site and distant lymph node involvement.....	<b>&amp;3</b>	<b>&amp;8</b>

REGIONAL LYMPH NODES FOR THIS SITE (first chain of drainage): internal iliac (hypogastric); inguinal; external iliac; common iliac, including uterosacral lymph nodes; obturator

FIELD 20 - EXTENT OF DISEASE  
COLUMNS 67-68

Example of how historic stage is defined

OVARY 830 -- U<sub>(unstaged)</sub>

**PRIMARY TUMOR  
NO DIRECT EXTENSION  
NO DISTANT INVOLVEMENT**

<i>Primary Tumor Description</i>	<i>Local Vessel Invasion</i>	<i>Regional Lymph Nodes</i>	<i>Code</i>
confined strictly to ovarian tissue.....	no	no	10
"localized" to ovarian tissue.....	no	no	4-
confined strictly to ovarian tissue.....	yes	no	30
"localized" to ovarian tissue.....	yes	no	39
confined strictly to ovarian tissue.....		yes	50
no detailed information of above.....		yes	59

O- I (in situ)

L

RN

**TUMOR HAS EXTENDED TO  
OR INFILTRATED THE FOLLOWING:**

	<i>Involvement of regional lymph nodes</i>	
	<i>no</i>	<i>yes</i>
local invasion of peritoneum and/or fallopian tube by extension.....	70	80
implants on ovary of primary site.....	71	81
implants on peritoneum in area immediately adjacent to ovary of primary site.....	72	82
more than one (70-72) or (80-82).....	79	89

RE

RE +  
RN

**FURTHER DIRECT EXTENSION**

any adjacent extension other than 70 or 80.....	99	-9
---	----	----

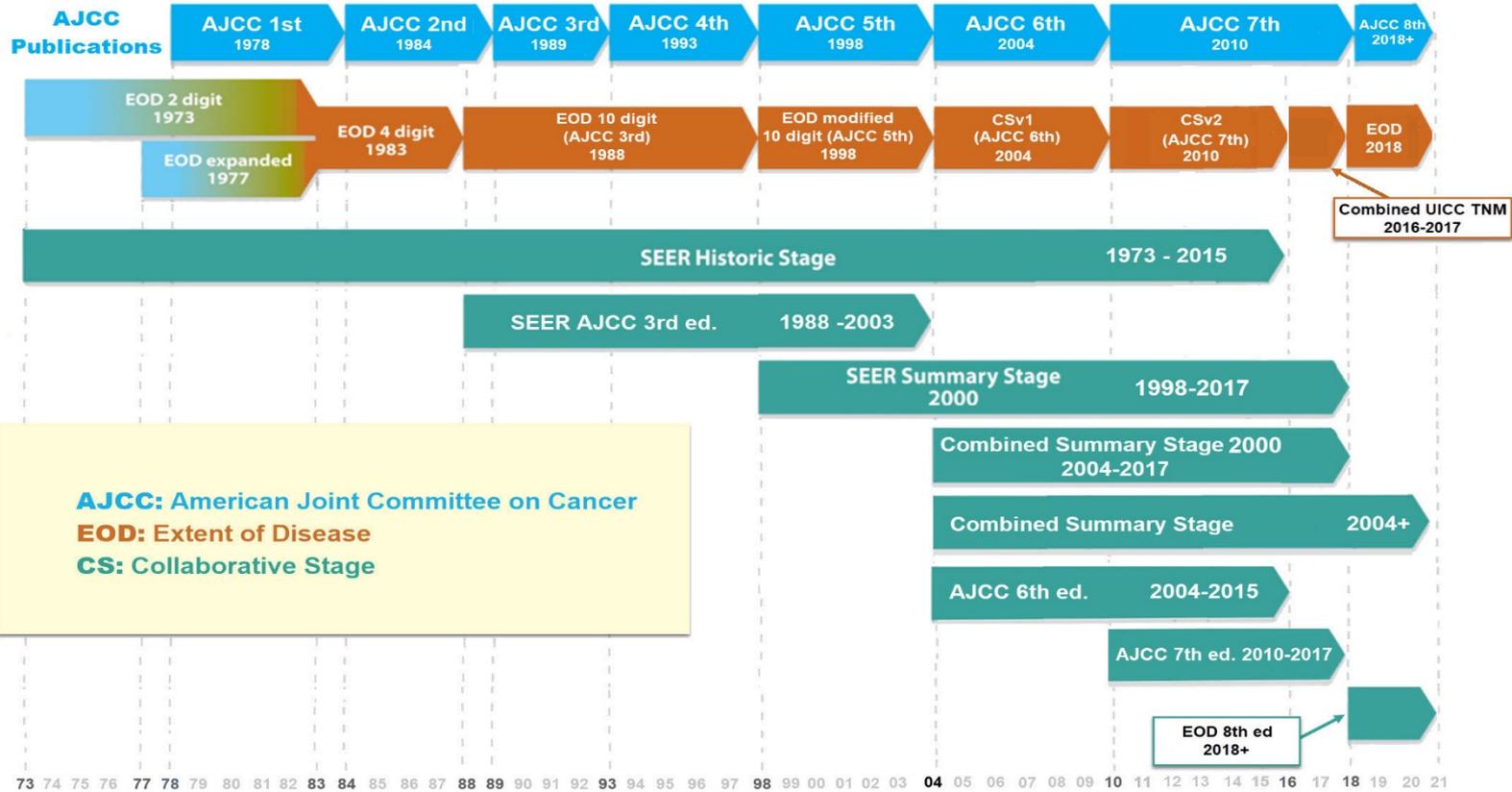
**DISTANT INVOLVEMENT**

distant site involvement.....	&1	&6
distant lymph node involvement.....	&2	&7
distant site and distant lymph node involvement.....	&3	&8

D

REGIONAL LYMPH NODES FOR THIS SITE (first chain of drainage): internal iliac (hypogastric); inguinal; external iliac; common iliac, including uterosacral lymph nodes; obturator





2004-2015

Collaborative  
Staging (CS)

Derived Stages from CS

SEER Summary Stage  
2000

SEER Summary Stage 77

SEER Historic

AJCC 6th ed. Stage, T, N,  
and M (combination of clinical and path)

AJCC 7th ed. Stage, T, N,  
and M (combination of clinical and path) 2010-2015

## 2016-2017

Combination of Directly Assigned and Recoded Summary Stage 2000

Directly assigned TNM 7<sup>th</sup> ed. T, N, M and stage

~~Collaborative Staging (CS)~~

	Percent CS coded	Percent CS coded	Percent CS coded
	2015	2016	2017
SEER 9 1975+	100	53.2	35.3
SEER 13 1992+	100	40.6	26.3
SEER 18 2000+	100	33.2	25.4

Combination of Derived & Directly assigned SS 2000

SEER Summary Stage 2000

~~SEER Summary Stage 77~~

~~SEER Historic~~

~~AJCC 6<sup>th</sup> ed. Stage, T, N, and M~~

~~AJCC 7<sup>th</sup> ed. Stage, T, N, and M~~

# Summary Stage 2000 (SS2000): Percent agreement between SS2000 Derived from CS and Directly Assigned, 2015

<b>SS2000 DirA vs CSder excl two regs and blanks 2015 only in situ malignant cases only</b>							
<b>R not broken into regional subgroups</b>							
		<b>includes unstaged</b>			<b>excludes unstaged</b>		
<b>CS schema</b>	<b>Total</b>	<b># Agree</b>	<b>Percent</b>		<b>Total</b>	<b># Agree</b>	<b>Percent</b>
Bladder	11,823	11,681	98.8		11,348	11,220	98.9
Breast	50,853	50,546	99.4		49,945	49,664	99.4
Colon	15,882	15,544	97.9		14,954	14,647	97.9
HemeRetic	13,286	13,258	99.8		13,042	13,014	99.8
Lung	34,544	33,616	97.3		32,467	31,577	97.3
Lymphoma	12,463	12,065	96.8		11,440	11,085	96.9
MelanomaSkin	28,412	28,204	99.3		27,705	27,570	99.5
Prostate	32,066	31,689	98.8		30,151	29,844	99.0

# 2018

- Summary Stage 2018 – Good news is that it was designed to be as close as possible to SS2000
- Schema ID 2018 – identifies the schema used for EOD 2018
  - reflects the addition of several new schemas based on histology
- EOD 2018 – size, extension, lymph node involvement, distant mets, SSDI, etc.

# Summary Stage variables on SEER Research file (Nov 2020)

- Combined Summary Stage (2004+)
- Summary stage 2000 (1998-2017)
- SEER Combined Summary Stage 2000 (2004-2017)
- SEER historic stage A (1975-2015)

## Summary Stage variables on SEER Research file (Nov 2020)

- Combined Summary Stage (2004+) - doesn't separate into regional categories, benign/borderline CNS coded to N/A; temporarily doesn't include testis; all other sites are included; combination of SS2000 for 2004-2017 and SS2018 for 2018
- Summary stage 2000 (1998-2017) - certain sites not included; 2018 not included; benign/borderline CNS blank; ovary in situ not included (could be corrected);
- SEER Combined Summary Stage 2000 (2004-2017) - similar to Combined SS 2004+ above except 2018 (SS2018) is not included
- SEER historic stage A (1975-2015) – regional not separated; Prostate: loc/reg combined (1995-2015) and blank for 1975-1994, some sites not include for certain years; brain/CNS - unstaged

# What can you do if the definition of a SEER\*Stat variable is unclear?

The screenshot shows the SEER\*Stat 8.3.9 software interface. The main window is titled "Frequency Session-1" and has a menu bar with "File", "Edit", "Session", "Window", "Profile", and "Help". Below the menu bar is a toolbar with various icons and the text "Server Data: ssp://seerstat.imsweb.com:2038". The main area is divided into several sections. On the left, there is a "Display Variables" section with a tree view showing "Page", "Row", and "Column" categories. The "Row" category is expanded, showing "Combined Summary Stage (2004+)" and "Summary stage 2000 (1998-2017)". The "Column" category is also expanded, showing "Year of diagnosis". On the right, there is a "Dictionary" window. The "Dictionary" window has a purple header and contains the following information: "Database: Incidence - SEER Research Data, 18 Registries, Nov 2020 Sub (2000-2018)". Below this, there is a list of variables with a tree view. The "Age at Diagnosis" variable is highlighted in blue. Other variables include "Race, Sex, Year Dx", "Site and Morphology", "Stage - Summary/Historic", "Combined Summary Stage (2004+)", "Summary stage 2000 (1998-2017)", "SEER Combined Summary Stage 2000 (2)", "SEER historic stage A (1973-2015)", and "Stage - 8th edition". To the right of the list are buttons for "Close", "Help", "Create...", "Edit...", and "Delete". A red arrow points from a red circle containing the number "1" to the "Dictionary" window header, with the text "Check the data dictionary" next to it.

SEER\*Stat 8.3.9

File Edit Session Window Profile Help

# Σ % P ÷ IT [Grid] [Folder] [Disk] [Lightning Bolt] [Book] [Question Mark] Server Data: ssp://seerstat.imsweb.com:2038

Frequency Session-1

Data | Statistic | Selection | **Table** | Output

Display Variables

- Page
  - Row
    - Combined Summary Stage (2004+)
    - Summary stage 2000 (1998-2017)
  - Column
    - Year of diagnosis

**Dictionary**

Database: Incidence - SEER Research Data, 18 Registries, Nov 2020 Sub (2000-2018)

- Age at Diagnosis
- Race, Sex, Year Dx
- Site and Morphology
- Stage - Summary/Historic
  - Combined Summary Stage (2004+)
  - Summary stage 2000 (1998-2017)
  - SEER Combined Summary Stage 2000 (2)
  - SEER historic stage A (1973-2015)
- Stage - 8th edition

Close

Help

Create...

Edit...

Delete

1 Check the data dictionary

## Edit Variable - Combined Summary Stage (2004+)

Name:  Category:

Description: Created from SEER Combined Summary Stage 2000 (2004-2017) Derived Summary Stage 2018 (2018+).  
For more information, see <https://seer.cancer.gov/seerstat/variables/seer/lrd-stage>.

### Groupings

In situ  
Localized  
Regional  
Distant  
N/A  
Unknown/unstaged  
Not coded - Testis  
Blank(s)

### Values

(0 Selected)

In situ  
Localized  
Regional  
Distant  
N/A  
Unknown/unstaged  
Not coded - Testis  
Blank(s)

Save to Dictionary

## Localized/Regional/Distant Stage Adjustments

[More information](#)

### Documentation for SEER Data

SEER\*Stat Database Details

Variable & Recode Definitions -

Behavior Recode for Analysis

Cancer Stage Variables -

SEER Combined/AJCC +  
Cancer Staging

Collaborative Stage Site-  
Specific Factors (CS SSF)

Localized/Regional/Distant  
Stage Adjustments

Cancer Type-Specific Recodes +

The SEER Program strives to make all Localized/Regional/Distant stage variables consistent for all cancer sites for the appropriate years. However, there are certain site/year combinations where this is not possible. The following tables detail changes imposed on the SEER Historic and Summary stage variables for each SEER Research Data release.

- [1975-2018 data \(November 2020 Submission\)](#)
- [1975-2017 data \(November 2019 Submission\)](#)
- [1973-2009 SEER Research Data \(November 2011 submission\) and Later Releases up to 1975-2016](#)
- [1973-2008 data \(November 2010 submission\)](#)
- [1973-2007 data \(November 2009 submission\)](#)
- [1973-2006 data \(November 2008 submission\)](#)
- [1973-2005 data \(November 2007 submission\)](#)
- [1973-2004 data \(November 2006 submission\)](#)
- [1973-2003 data \(November 2005 submission\)](#)

The SEER Program strives to make all L/R/D stage variables consistent for all cancer sites for the appropriate years. However, there are certain site/year combinations where this is not possible. The following table details changes imposed on the stage variables by the SEER Program.

Any cases diagnosed in years not covered by the year range indicated in parentheses within the stage variable name are coded as Blank. Cancer sites without notations for a stage variable are fully staged within the year ranges covered by the variable.

Site Recode with Kaposi Sarcoma and Mesothelioma	Combined Summary Stage (2004+) <sup>a</sup>	SEER Summary Stage 2000 (1998-2017)	SEER Historic Stage A (1973-2015) <sup>b, c</sup>
Gum and Other Mouth		All cases are blank	
Nasopharynx		All cases are blank	2004+ all cases are blank
Tonsil		All cases are blank	
Oropharynx		All cases are blank	
Ear			
Larynx			2004+ all cases are blank
Lung and Bronchus			1973-1987 all cases are blank
Pleura		All cases are blank	1973+ all cases are unstaged
Trachea		All cases are blank	2004+ all cases are blank
Bones and Joints		All cases are blank	

<sup>a</sup> Created from SEER Combined Summary Stage 2000 (2004-2017) and Derived Summary Stage 2018 (2018+). Not available for Massachusetts.

<sup>b</sup> In databases prior to the November 2018 submission, this field did not have a year range in the name.

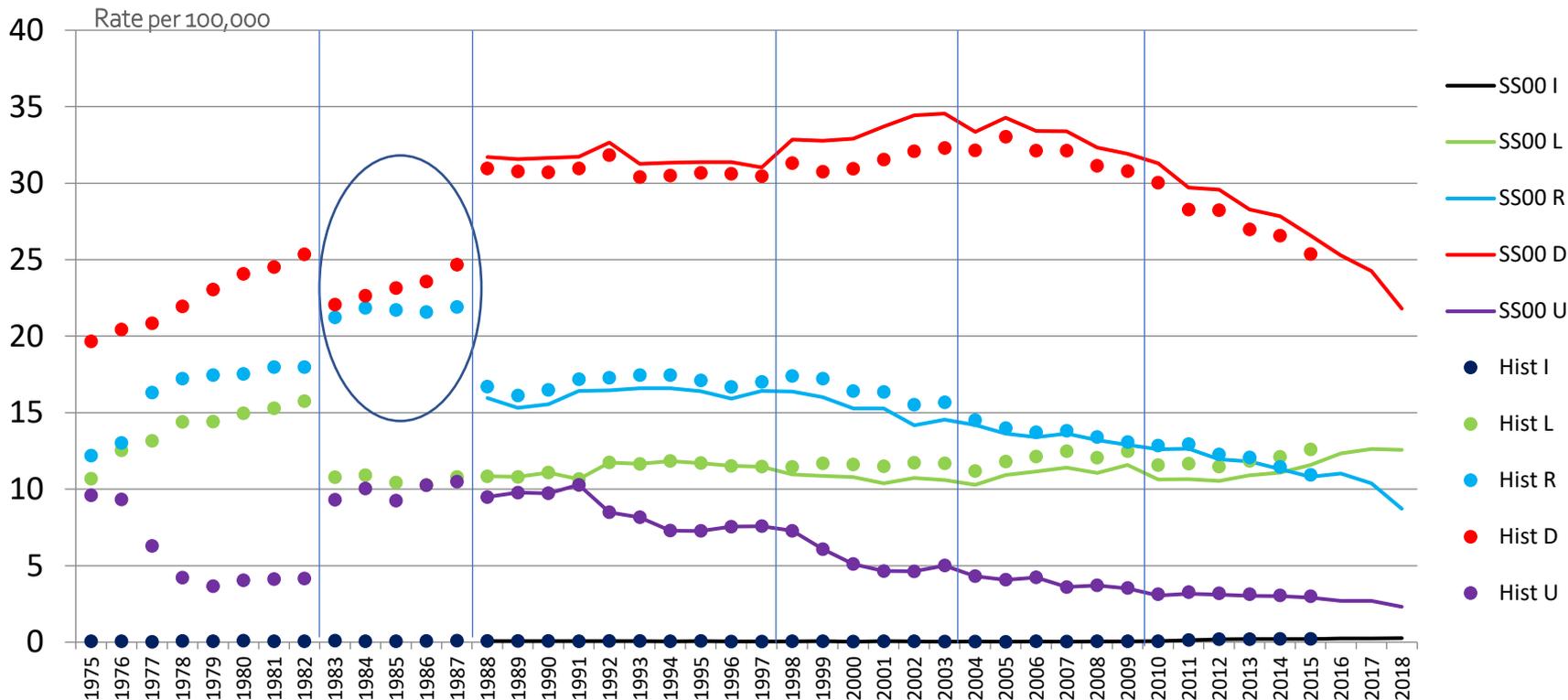
<sup>c</sup> [Historic Stage Coding for 2004-2015](#) (XLS, 355 KB)

# Glitches in long term trends?

- Historic stage may have problems that some of the categories may not be consistent over time
  - Historic stage has been removed for certain years and some sites on the Research file
  - Most problems seem to be between R and D over time.
    - The list of regional nodes for a site may vary over time.
    - There are many small inconsistencies because one EOD code may group entities some of which are R and others which are D.

# Lung (both sexes): SS2000 fixed (lines) 1988-2018 and Historic (circles) 1975-2015

Lung primary site: 340-343,348-349  
 Hist: 8000-8700,8720-8790,8972,8980



# Lung EOD 1983-1987

## EXTENSION

- 0 IN SITU: Noninvasive; intraepithelial
- 1 Invasive tumor confined to main stem bronchus or carina
- 2 Tumor(s) of main stem bronchus >2 cm from carina
- 3 Main stem bronchus, NOS;  
Localized, NOS
- 4 Extension to:  
Visceral pleura, pleura NOS Parietal pericardium or NOS Pulmonary ligament  
Atelectasis/obstructive pneumonitis involving < entire lung or NOS; no pleural effusion
- 5 Tumor(s) of main stem bronchus <2.0 cm from carina
- 6 Extension to:  
Carina to MSB; MSB to carina  
Trachea; Esophagus  
Nerve(s):  
Recurrent laryngeal; vagus; phrenic; cervical sympathetic (Horner's syndrome)  
Major blood vessel(s):  
Pulmonary artery or vein  
Superior vena cava; aorta Extrapulmonary mediastinum or NOS
- 7 Extension to:  
Contralateral main stem bronchus Heart; visceral pericardium Pleura, parietal  
Pleural effusion\*  
Rib, sternum, vertebra  
Chest (thoracic) Wall  
Skeletal muscle  
Skin of chest  
Diaphragm  
Abdominal organs  
Atelectasis/obstructive pneumonitis involving entire lung
- 8 Further Extension or Metastasis
- 9 UNKNOWN if extension or metastasis

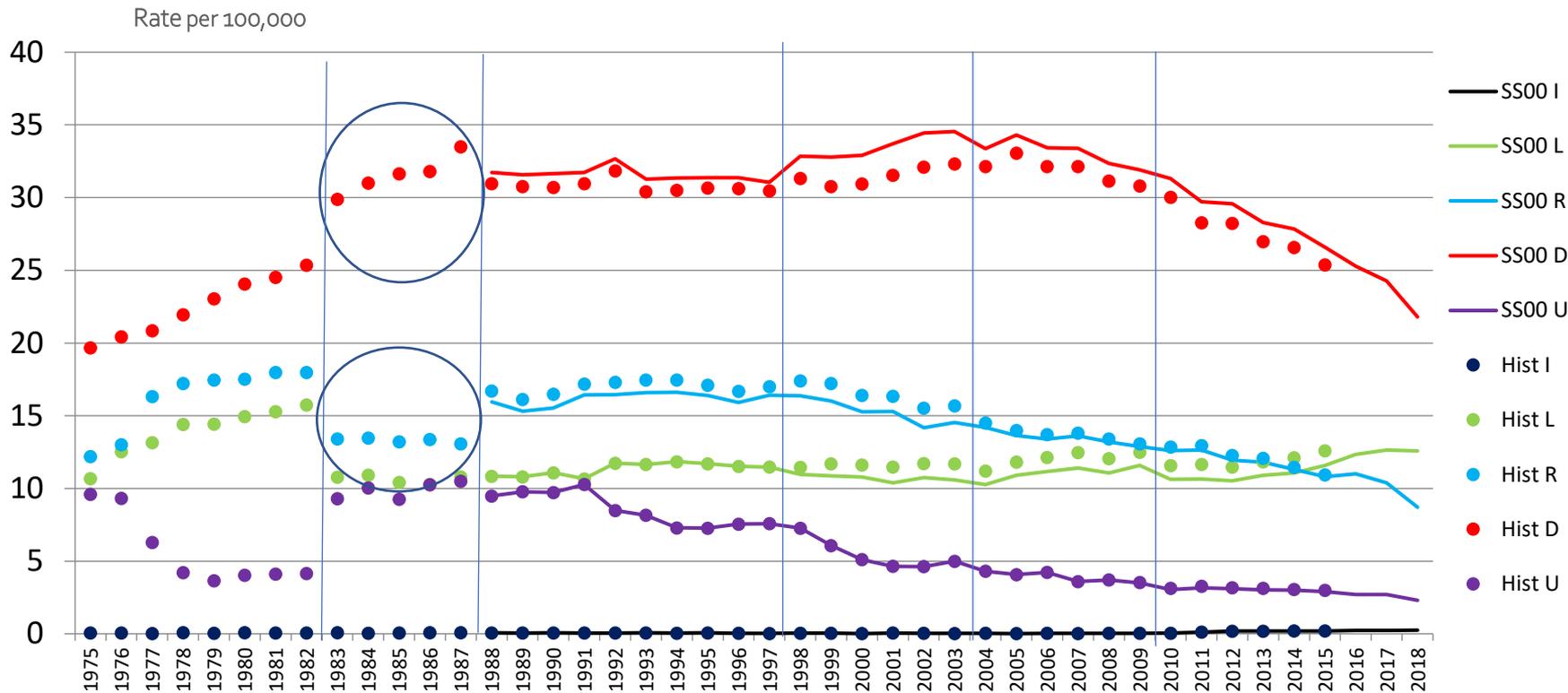
## Lung EOD 1983-1987

### Code 7:

- RE:
  - Chest (thoracic) wall
    - Pleura, parietal
- D:
  - Contralateral main stem bronchus
  - Heart (RE in historic)
  - Visceral pericardium
  - Pleural effusion
  - Rib, sternum, vertebra
  - Skeletal muscle
  - Skin of chest
  - Diaphragm, Abdominal organs
  - Atelectasis/obstructive pneumonitis involving entire lung

# Lung (both sexes): SS2000 fixed (lines) 1988-2018 and Historic (circles) 1975-2015

Lung primary site: 340-343,348-349  
 Hist: 8000-8700,8720-8790,8972,8980



# What can you do if the definition of a SEER\*Stat variable is unclear?

SEER\*Stat 8.3.9

File Edit Session Window Profile Help

# Σ % P ÷ IT [Grid] [Folder] [Disk] [Lightning Bolt] [Book] [Question Mark] Server Data: ssp://seerstat.imsweb.com:2038

Frequency Session-1

Data | Statistic | Selection | **Table** | Output

Display Variables

- Page
  - Row
    - Combined Summary Stage (2004+) **2**
    - Summary stage 2000 (1998-2017) **2**
  - Column
    - Year of diagnosis

**2 Create a SEER\*Stat table to compare two of the Summary Stage variables (row) over time (column)**

**1 Check the data dictionary**

Dictionary

Database: Incidence - SEER Research Data, 18 Registries, Nov 2020 Sub (2000-2018)

- Age at Diagnosis
- Race, Sex, Year Dx
- Site and Morphology
- Stage - Summary/Historic
  - Combined Summary Stage (2004+)
  - Summary stage 2000 (1998-2017)
  - SEER Combined Summary Stage 2000 (2000-2015)
  - SEER historic stage A (1973-2015)
- Stage - 8th edition

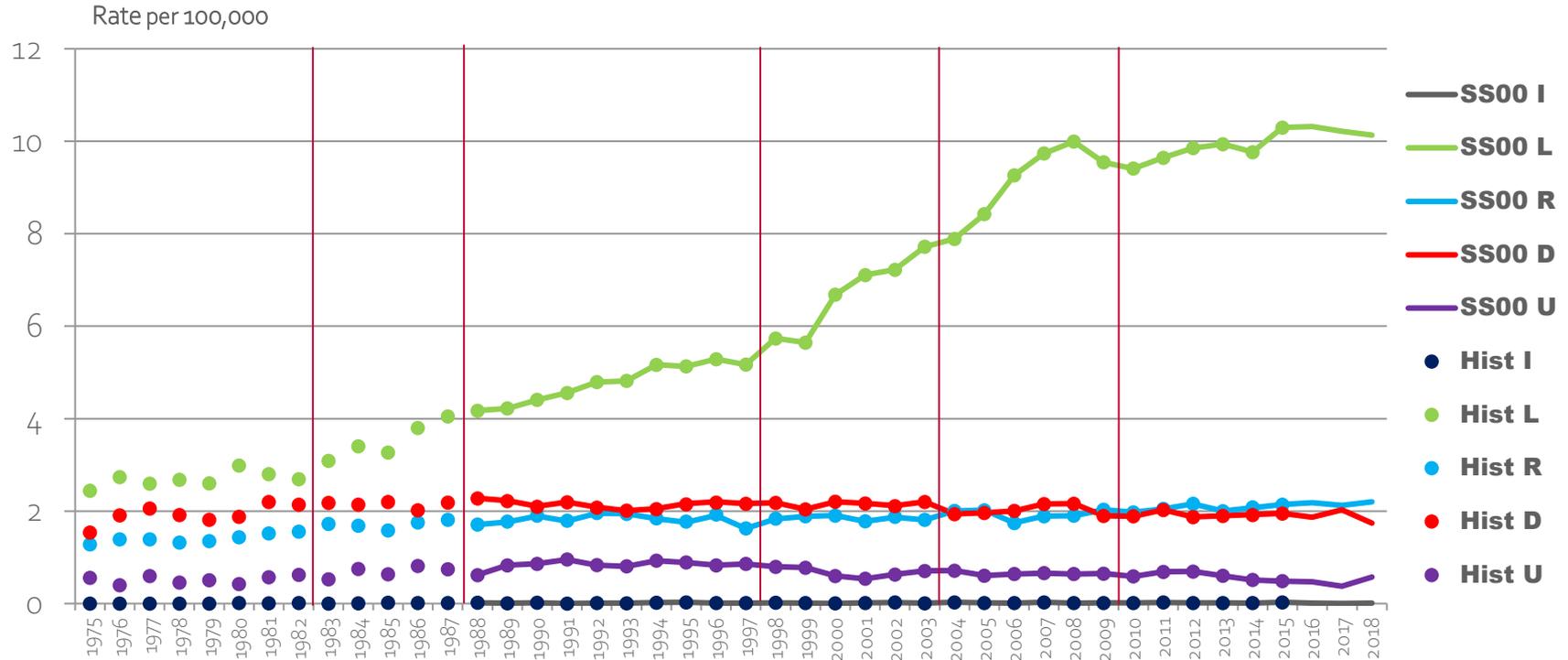
Close Help Create... Edit... Delete

# Long term trends

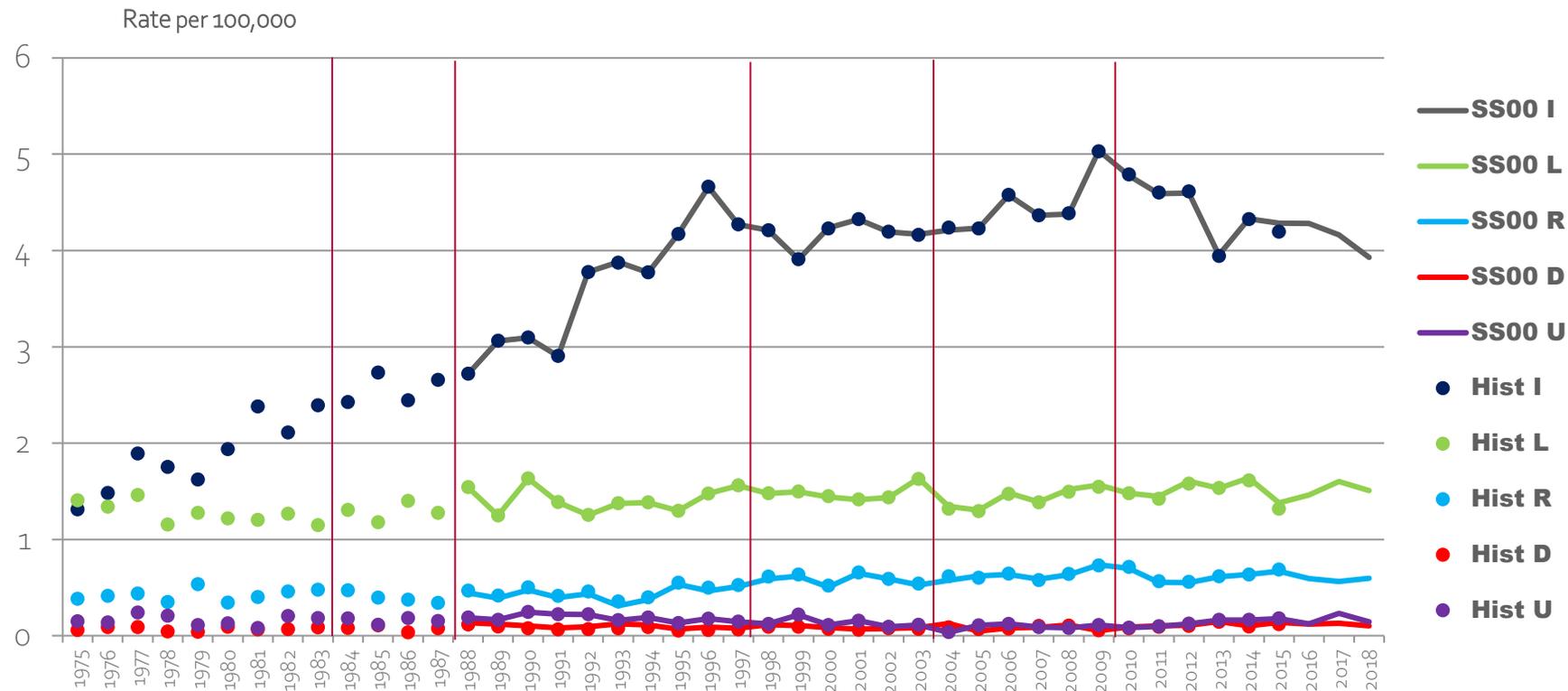
- Long-term trends in Summary Stage can be problematic
  - Certain sites where SEER Historic Stage and SS2000 are identical or very similar: could be combined for a longer trend, 1975-2018. SEER is evaluating longer time trends.

# Kidney Parenchyma: SS2000 (lines) and Historic (circles) 1975-2015

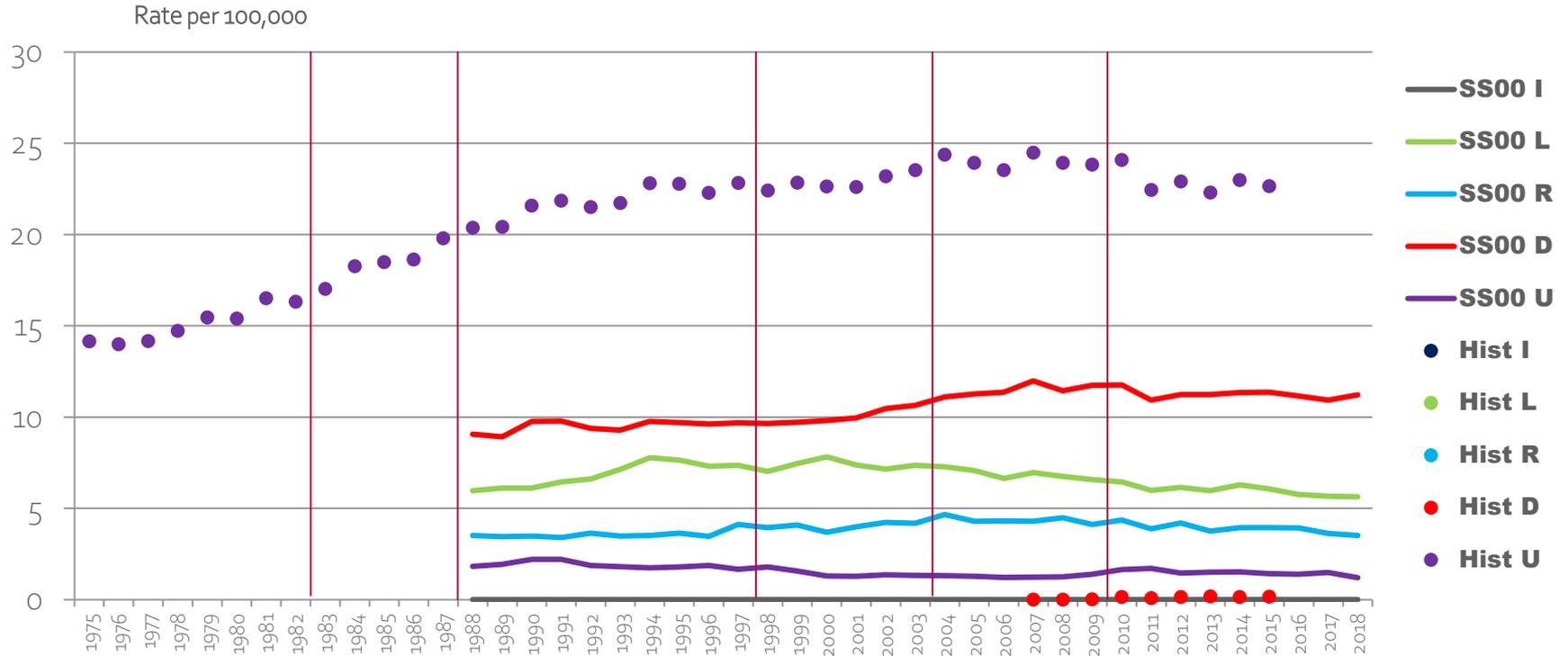
Kidney parenchyma Site:649 Hist:000-8700,8720-8790



# Vulva (female): SS2000 (lines) 1988-2018 and Historic (circles) 1975-2015



# Lymphoma: SS2000 fixed (lines) 1988-2018 and Historic (circles) 1975-2015 added SS2000 for 1983-87

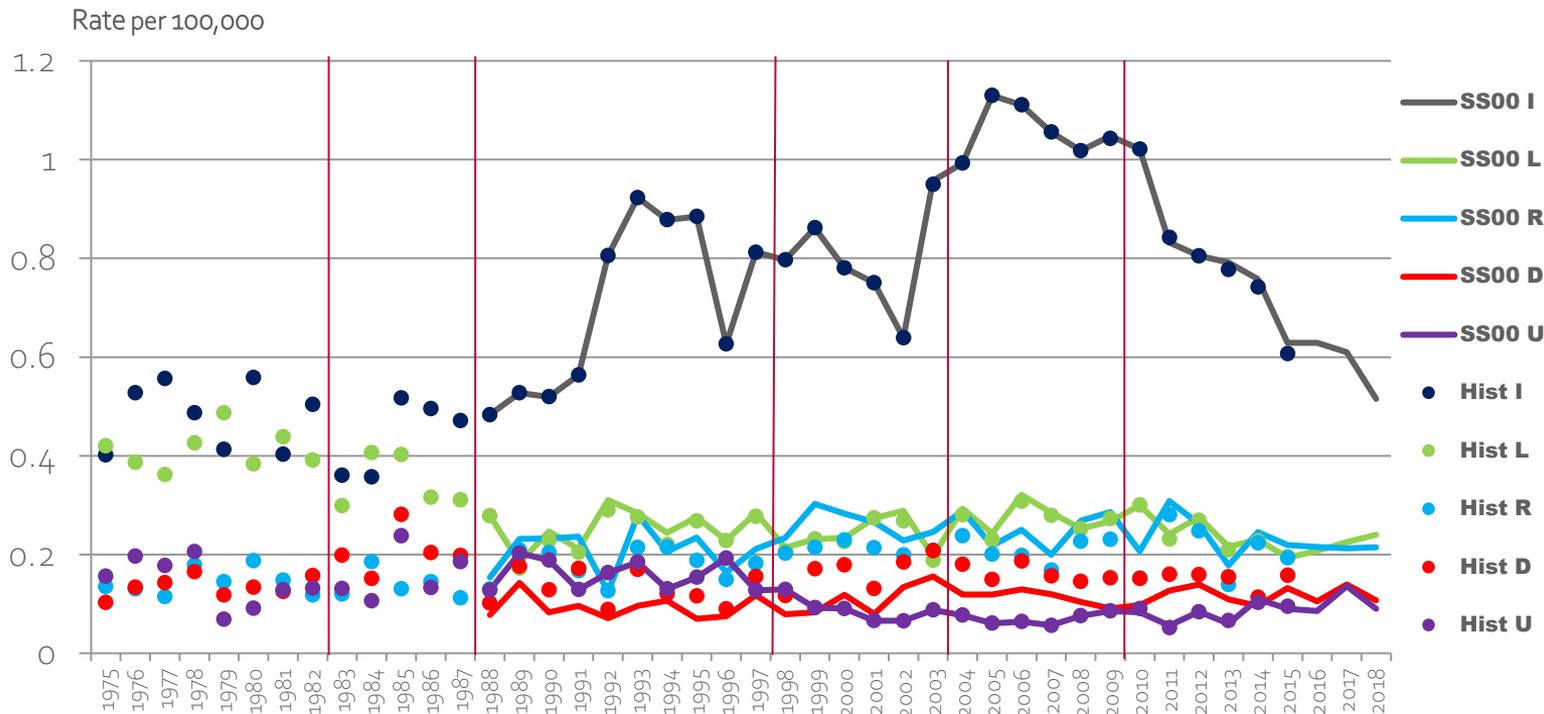


# Reportability Issues

- There have been many changes to reportability over time
  - These affect incidence rates, but they may also affect staging
- Some examples (not exhaustive list):
  - NET tend to be more localized than other histologies
  - GIST currently only reportable if malignant but in 2021 all GIST are reportable
  - VIN, VAIN, AIN increase the in situ rate only
  - CNS benign/borderline (2004+); currently NA or blank in Summary Stage recodes
  - MDS
  - Thyroid

# Vagina (female): SS2000 fixed (lines) 1988-2018 and Historic (circles) 1975-2015

Vagina: Site:529 Hist:8000-8700,8720-8790,8933,8980,9071,9110



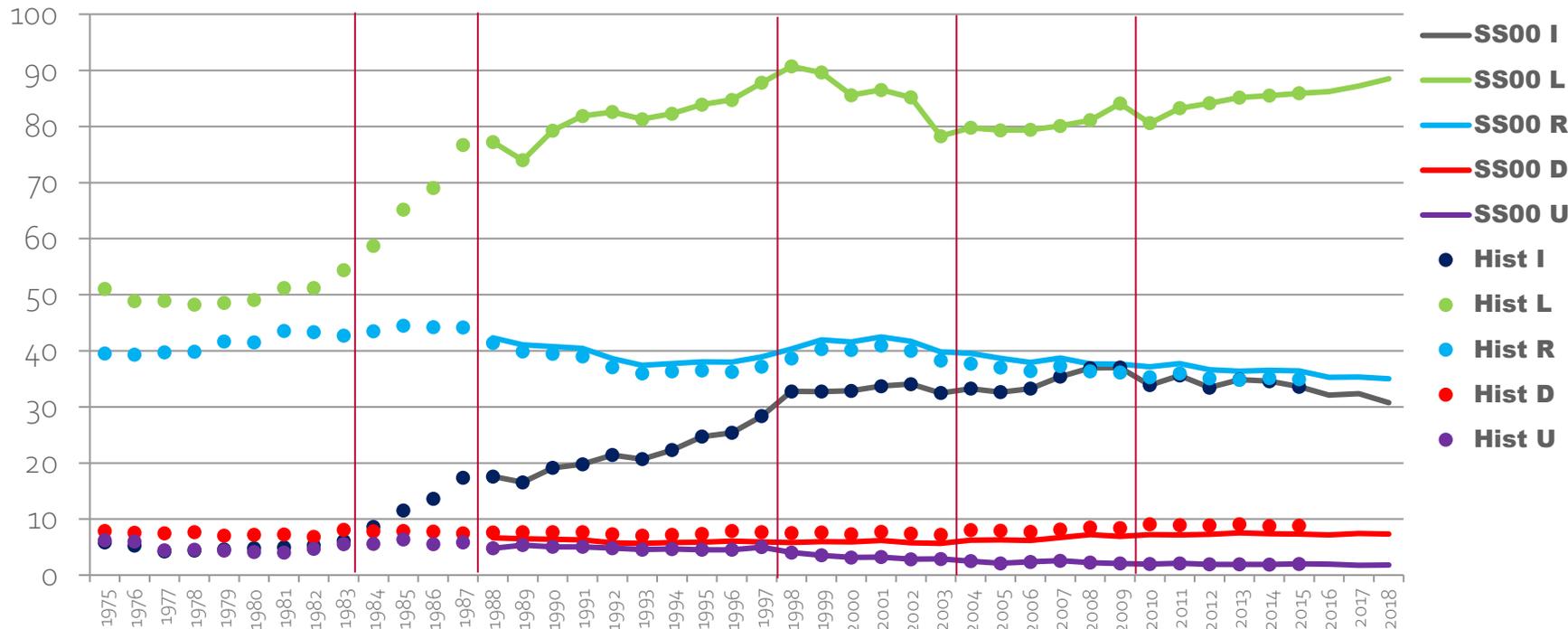
Source: SEERg areas, NCI

# Breast (female) : SS2000 (lines) 1988-2018 and Historic (circles)

1975-2015

Breast: Primary 501-506,508-509 Hist:8000-8700,8720-8790,8982-8983 or  
Primary 500 Hist: 8000-8700,8982-8983

Rate per 100,000

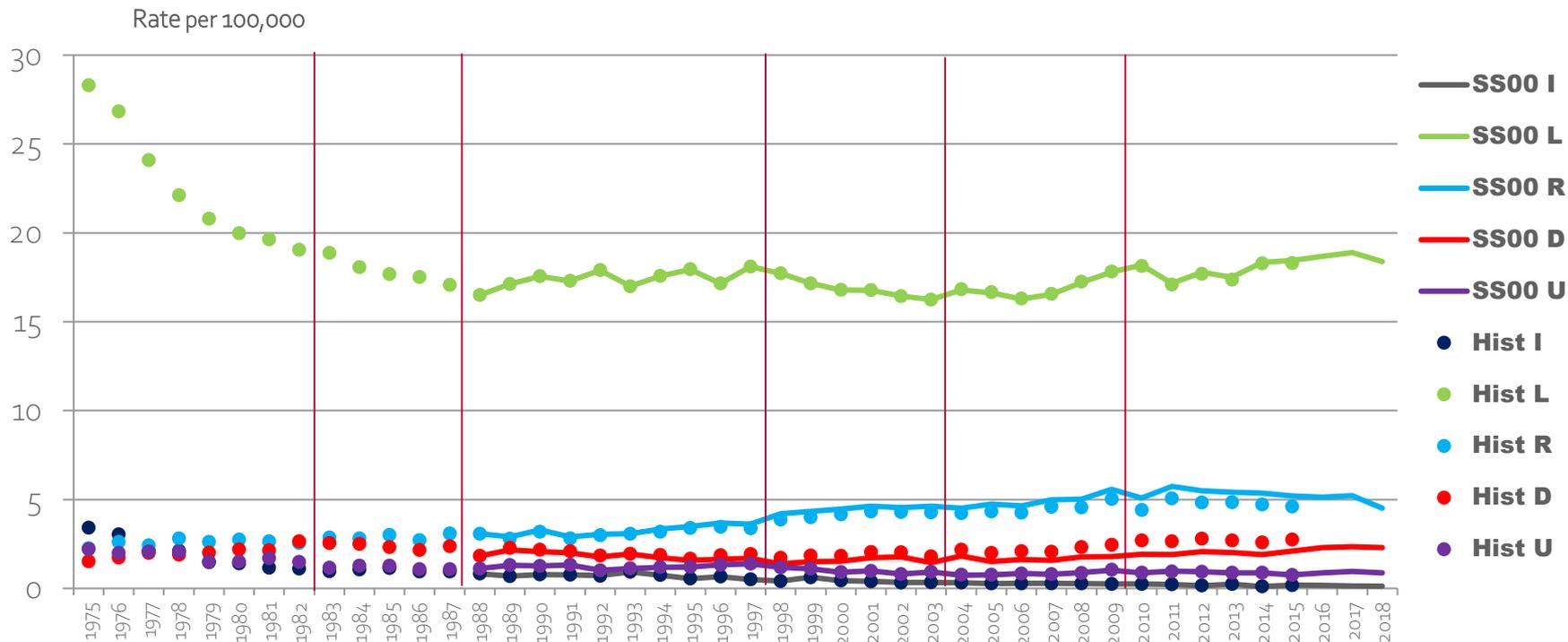


# Breast Cancer Possible issues

- **Inflammatory:** definition change over time
- **Infraclavicular Lymph Nodes:** regional for SS2000 and distant for historic but can't be separated from supraclavicular in some EOD

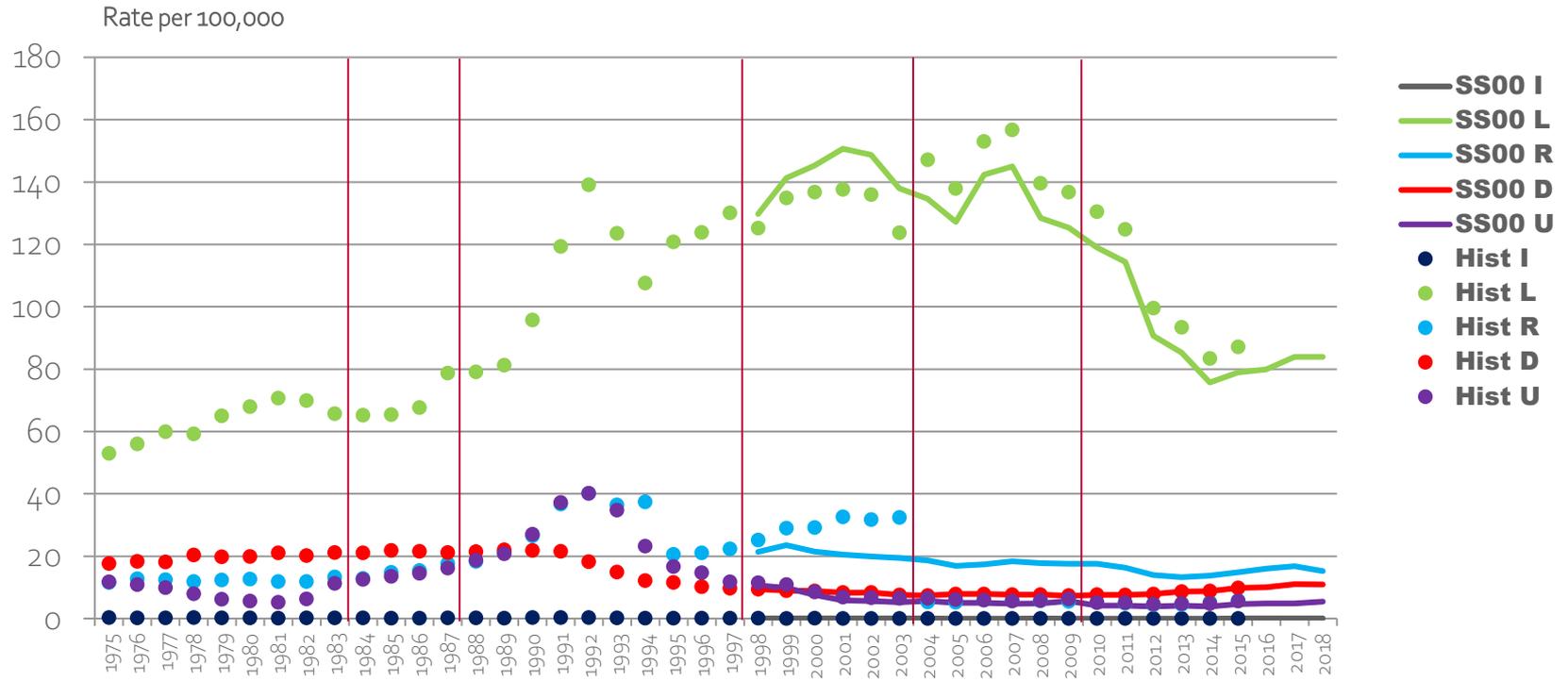
# Corpus Carcinoma (female): SS2000 (lines) 1988-2018 and Historic (circles) 1975-2015

Corpus carcinoma & carcinosarcoma: Site:540-543,548-549,559  
 Hist:8000-8700,8720-8790,8950,8980



Source: SEER g areas, NCI

# Prostate (males): SS2000 (lines) and Historic (circles) 1975-2015



Source: SEER g areas, NCI

# Prostate issues impacting LRD stage

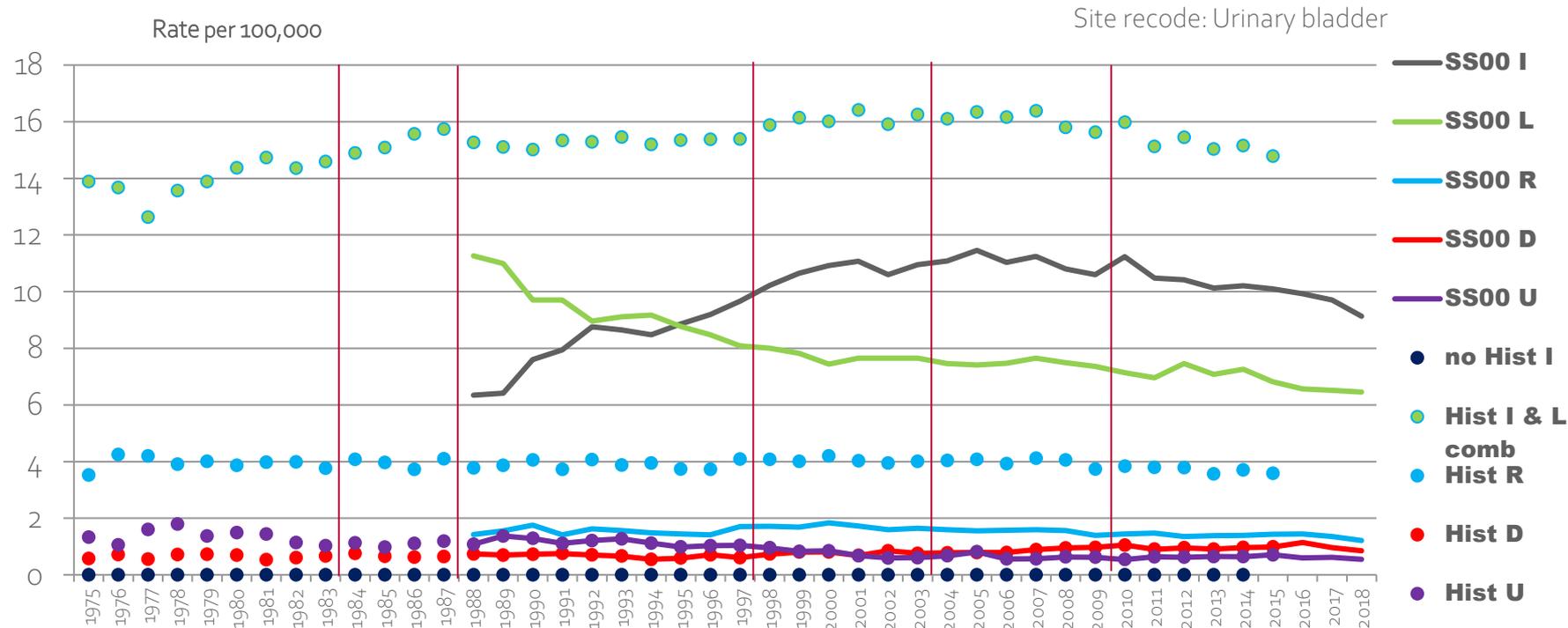
- Prostatectomy: as these increased, increase in regional disease because better evaluation of extracapsular extension
- Apex involvement: historic (regional) and SS2000 (localized). Between 1995-2003, tripling of cases extending into the apex.
- Random needle biopsy and elevated PSA: around 1981 increase in unstaged disease.
- EOD change in 1995: split extension into two codes: clinical and pathologic evaluation.

# Glitches in long term trends?

- Specific 'site groups'
  - Bladder:
    - Usually localized and in situ are combined.
    - What year was criteria specified? Implementation 1/1/1999 for terminology to distinguish in situ and localized.
    - They can be separated out based on EOD.

# Urinary bladder: SS2000 (lines) 1988-2018 and Historic (circles) 1975-2015

## Historic shows In situ and Localized combined



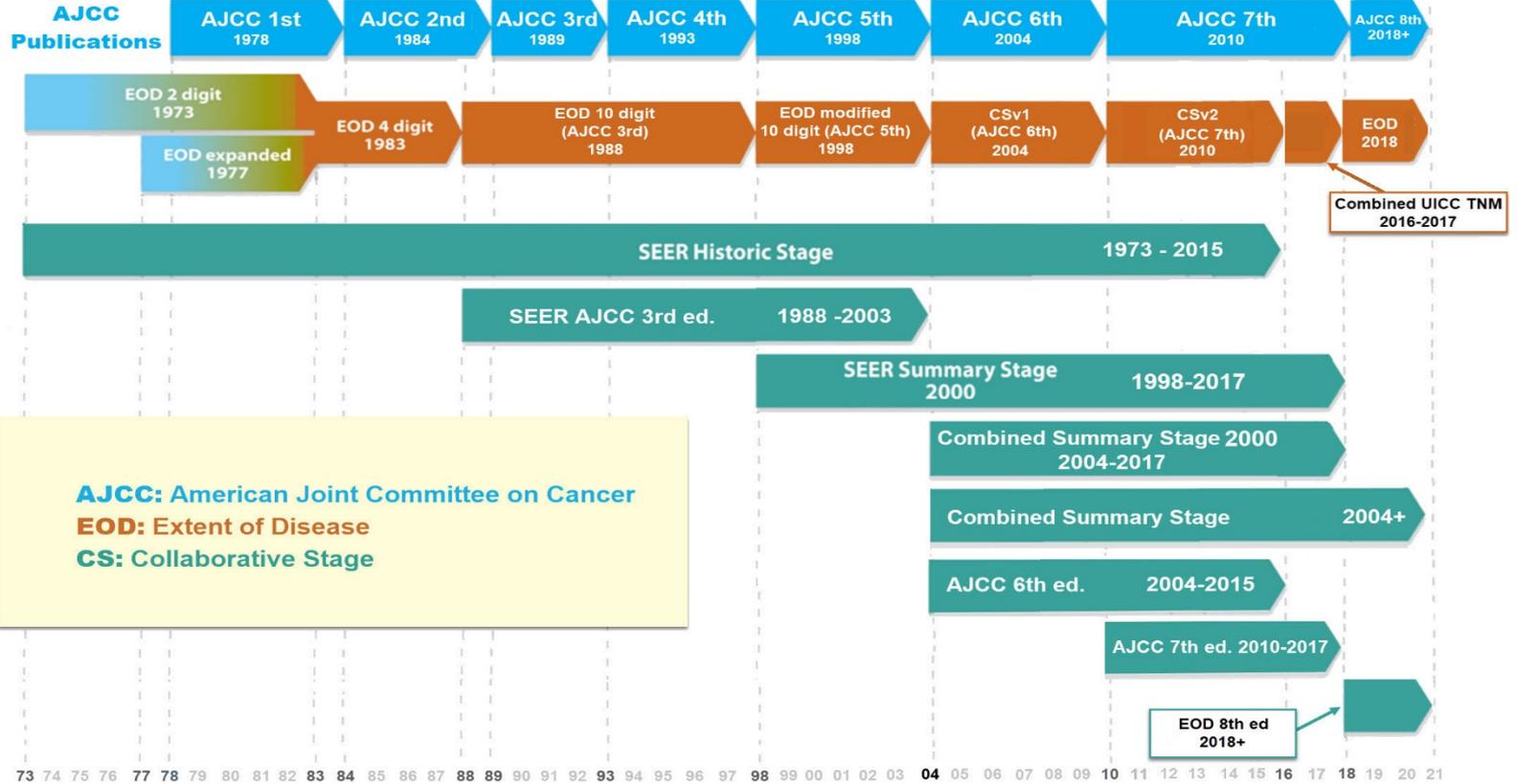
Source: SEER g areas, NCI



**New terminology for in situ vs. localized implemented 1/1/1999**

# Glitches in long term trends?

- Changes in reportability over time affect long term trends:
  - ICD-O-2 changes
  - ICD-O-3 changes
  - NAACCR histology updates (various years)
  - SEER 2010 updates to leukemias and lymphomas
  - ICD-O-3.2
  - Notable issues:
    - Ovary: borderline tumors were included only during ICD-O-2; excluded from Research file since Nov 2020 submission
    - Benign brain: only reportable since 2004
    - MDS
    - Carcinoids of all except appendix became reportable and later included appendix
    - Addition of new histology terms can be change reportability such as some dysplasias



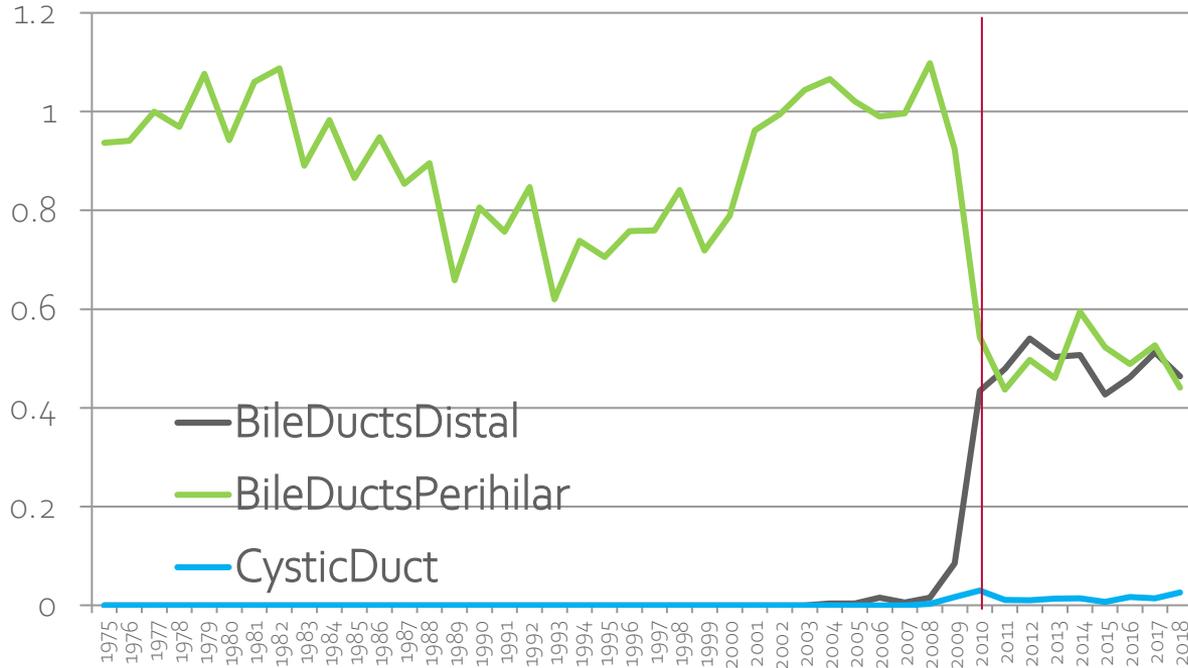
# Site recodes & Schema IDs

- Schema IDs can be confusing but are **NECESSARY** to understand under which set of criteria the EOD and stage were coded.
  - EOD Schema ID Recode (2010+)
  - TNM 7/CS v0204+ Schema recode – 1975-2018 (except bile ducts)
- Site recodes:
  - The current SEER site recode is mostly site based with a few histology-based groupings like leukemias, lymphomas, etc.
  - The International Classification of Childhood Cancer (ICCC-3) (2017) and the Adolescent and Young Adult Classification (AYA) are very histology based

## Bile ducts (C24.0): by subgroup 1975-2018

### Discriminator added in 2010

Rate per 100,000



Source: SEERg areas, NCI

Note: intrahepatic C24.1 not included

# Possible choices for site/histology for long-term trends

- If there is a particular site/histology group of interest, check to make sure whether it involves multiple schemas with differing EOD/staging criteria.
- Site recode is consistent over time but also may include multiple schemas (as above) and may include unwanted histologies. Don't use Site recode for T, N, M or TNM stage or "site-specific" information (SSDI or SSF).
- If SS2018 or EOD 2018 schema criteria are of interest, there isn't an EOD 2018 schema ID recode that goes back before 2010 but the on-line documentation can help define exactly the site/histology group over time.

# SEER\*RSA

Welcome to the SEER\*RSA (SEER Registrar Staging Assistant) website. This site is to be used by cancer registrars who abstract and code extent of disease information, and important site-specific predictive and prognostic factors. Instructional manuals are [provided elsewhere](#).

## Usage

Use the information on this site to:

- › Code EOD 2018 data items
- › Code Summary Stage 2018
- › Code Site-Specific Data Items (SSDIs)
- › Code TNM or CS data items, as appropriate, for 2017 and prior cases

In addition to this site, SEER\*RSA data are provided via both an API and software libraries. To learn more, choose from the following links:

[EOD data access](#)   [TNM data access](#)   [CS data access](#)



[View EOD Data \(2018+\)](#)

Current Version: 2.0



[View TNM 7th Data \(2016-2017\)](#)

Current Version: 1.9



[View CS Data \(2004-2015\)](#)

Current Version: 02.05.50

## APPENDIX

8000-8700, 8720-8790

histology



C181

C181 Appendix

primary  
site



Summary  
Stage 2018

**Note 1:** The following sources were used in the development of this chapter

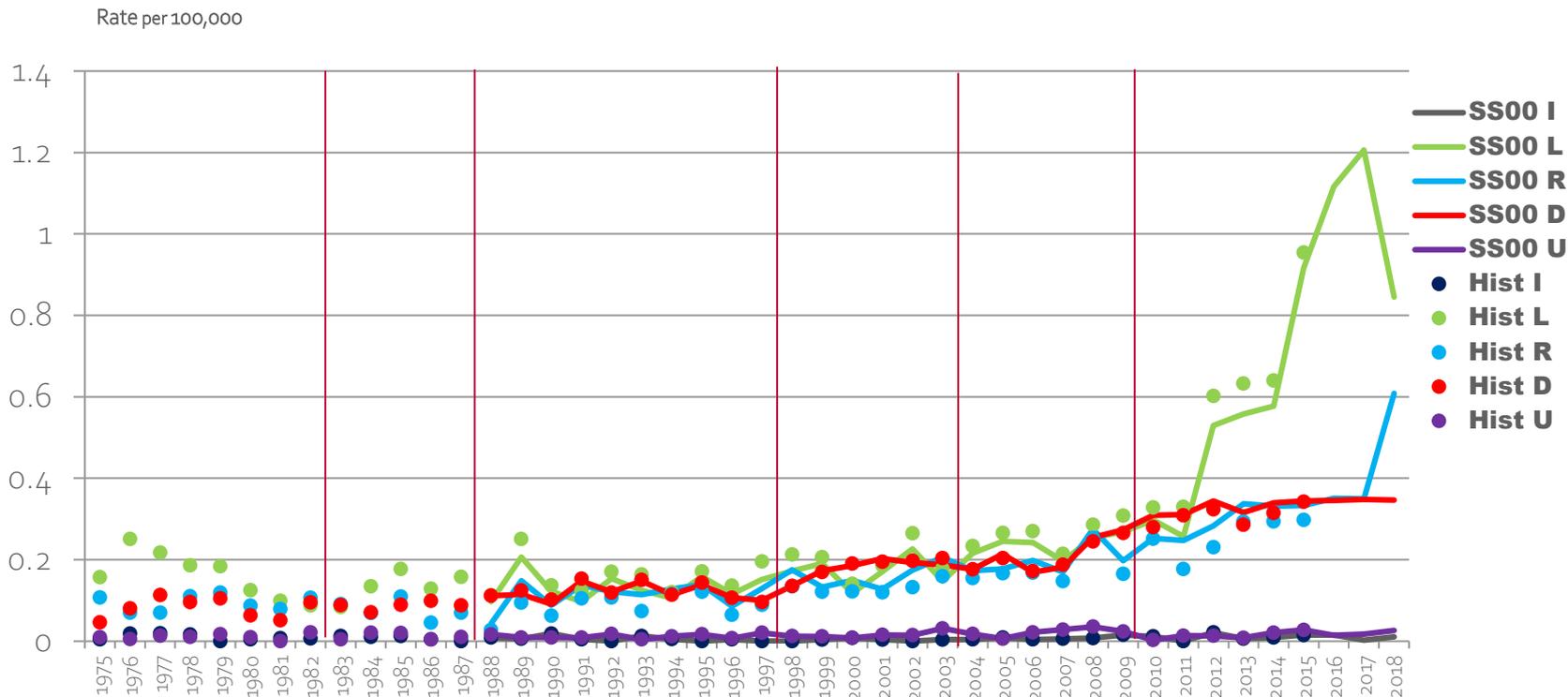


**Note 2:** See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9138, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*
- 9700-9701: *Mycosis Fungoides*

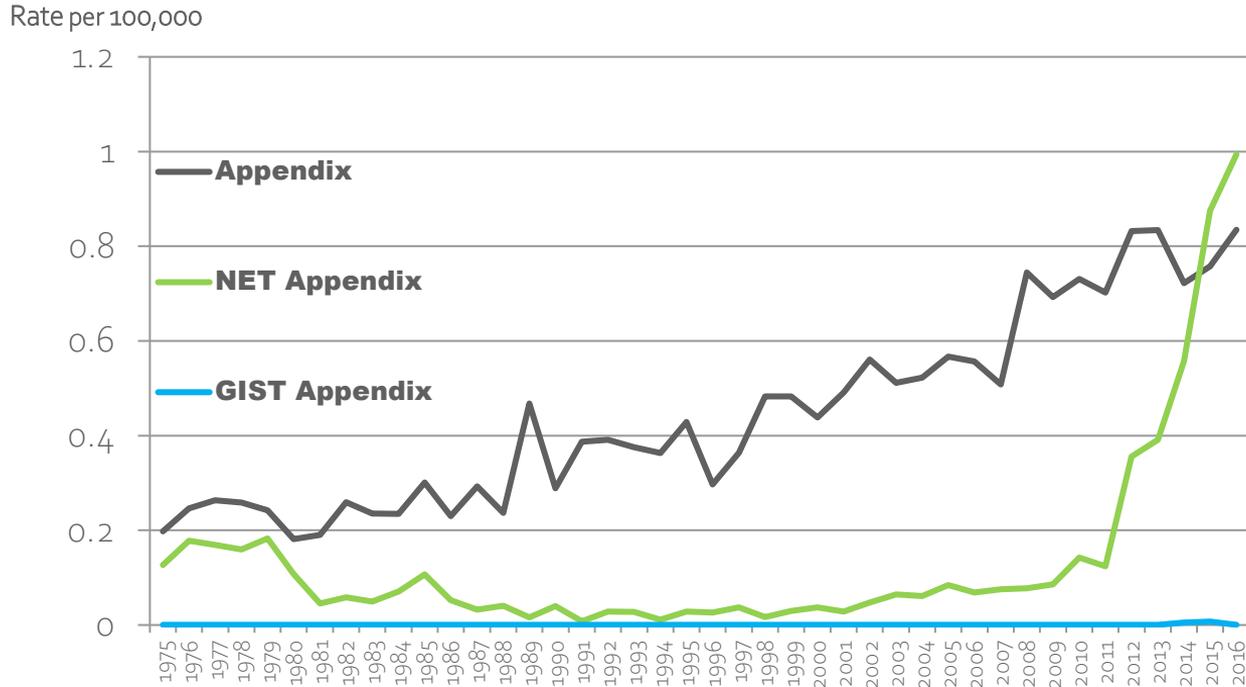
## Appendix (including NET) : SS2000 (lines) 1988-2018 and Historic (circles) 1975-2015

Appendix including NET Site:181  
 Histology: 8000-8700,8720-8790



Source: SEERg areas, NCI

# Appendix, NET and GIST appendix: 1975-2016, SEER 9



Source: SEER 9 areas, NCI

## SUMMARY STAGE 2018 CHAPTERS

The Summary Stage site-specific chapters are based on historical staging, Summary Stage 2000 and the AJCC 8<sup>th</sup> Edition. Some of the AJCC 8<sup>th</sup> edition chapters were divided to line up with historical Summary Stage chapters.

Schema ID	SS Chapter	EOD Schema	AJCC Chap. No	AJCC Chapter Name
00190	Appendix (including NET)	Appendix	19	Appendix-Carcinoma
00320	Appendix (including NET)	NET Appendix	32	Neuroendocrine Tumors of the Appendix

## Appendix (excluding NET)

Primary Site	Histology
C181	8000-8149, 8154, 8160-8231, 8243-8248, 8250-8682, 8690-8700, 8720-8790, 9700-9701

### Notes

8000-8149, 8154, 8160-8231, 8243-8248, 8250-8682, 8690-8700, 8720-8790, 9700-9701

C181 Appendix

**Note 1:** The following sources were used in the development of this schema

**Note 2:** See the following schemas for the listed histologies

- > 8150-8153, 8155-8156, 8158, 8240-8242, 8249, 8683: *NET Appendix*
- > 8710-8714, 8800-8803, 8810-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9043, 9045-9138, 9141-9230, 9240-9580, 9582: *Soft Tissue Abdomen and Thoracic*
- > 8804-8806, 8930-8931, 8991-8992, 9020, 9044, 9231, 9581: *Soft Tissue Other*
- > 8935-8936: *GIST*
- > 9140: *Kaposi Sarcoma*

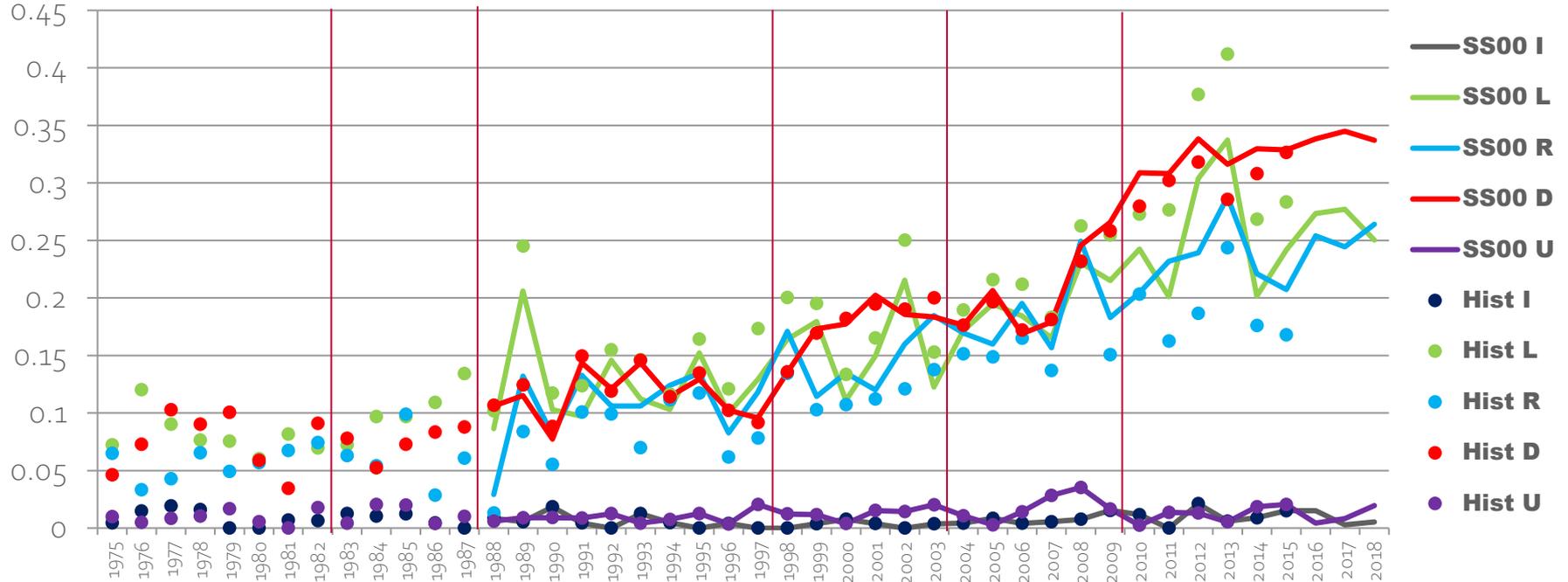
NET Appendix

## Appendix excluding NET : SS2000 (lines) 1988-2018 and Historic (circles) 1975-2015

Rate per 100,000

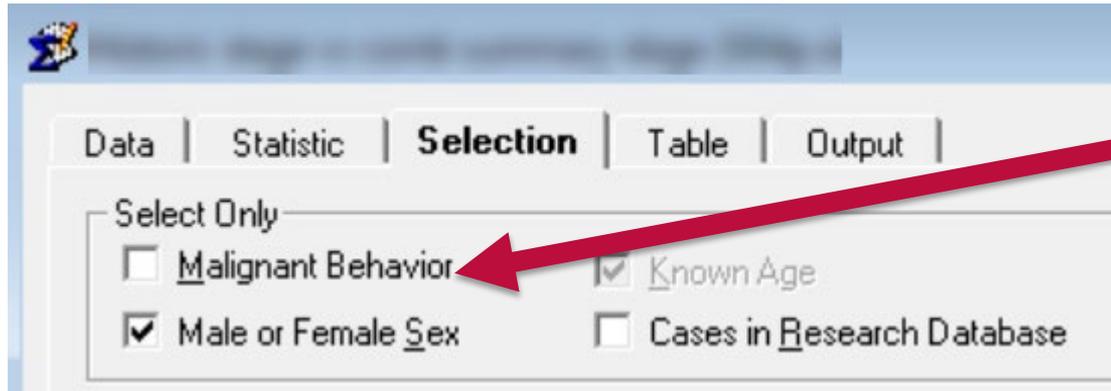
Appendix excluding NET Site:181

Histology: 8000-8149,8154,8160-8231,8243-8248,8250-8682,8690-8700,8720-8790,9700-9701



Source: SEERg areas, NCI

## Please note especially for long-term trends



In SEER\*stat to access the in situ cases and CNS benign/borderline cases, uncheck the 'Malignant Behavior' box on the Selection Tab.

- Decide which set of registries. It is easier to check frequencies over time when the same registries are used., i.e. consider using the SEER 9 Research file to have the same registries from 1975-2018.

# Final summary

- There is a wealth of information available for analyses.
- Summary stage may be the first step, but further analysis may uncover important details.
  - Check the detailed EOD information underlying the stage to help explain trends.



**NATIONAL  
CANCER  
INSTITUTE**

[www.cancer.gov](http://www.cancer.gov)

[www.cancer.gov/espanol](http://www.cancer.gov/espanol)