

# SEER Inquiry System - Report

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## Question 20000277

### References:

#1: SEER Program Code Man, 3rd Ed, 5

#2: 2004 SEER Manual, 2, 123

### Question:

Ambiguous Terminology: Should SEER's lists of ambiguous terminology be modified to reflect how pathologists and radiologists actually use these terms? See discussion.

### Discussion:

Pathologists and radiologists say the term "suggestive" is used to describe a lesion that may be malignant, and the term "suspicious" is not used to describe lesions that may be malignant. According to the physician director of our Breast Center the FDA governs the use of terminology, and the term "highly suggestive" instead of "highly suspicious" must be used if there is a greater chance that a mass is malignant.

### Answer:

We recognize that the way clinicians and registrars speak is often different, and that the differences vary from region to region.

Our Medical Advisory Board reviewed the lists of ambiguous terminology before they were included in the third edition of the SEER EOD and the SEER Program Coding and Staging Manual 2004. Since that time, specific terminology has been mandated for describing mammography results. We know some of these terms are discrepant with our ambiguous terminology list.

As of 2007, the standard setters (CoC, NPCR, SEER and CCCR) all use the same ambiguous terminology list. Changes to the list must be approved by the NAACCR Uniform Data Standards Committee.

### Cancer Site Category:

N/A

### Data Item Category:

N/A

### Other Category:

Ambiguous terminology

### Year:

2000