

SEER Inquiry System - Report

Produced: 03/29/2024 3:15 AM

Question 20021028

References:

#1: AJCC Cancer Staging Manual, 310. Sixth Edition

#2: AJCC Cancer Staging Manual, 220. Fifth Edition

Question:

EOD-Clinical Extension--Prostate: If the tumor arises in the prostatic apex, does that take priority over coding clinical extension based on the stage of cT1c? See discussion.

Discussion:

Physician states prostate primary is a cT1c. Pathology states adenocarcinoma, Gleason 3+3, right apex. All other biopsies were negative. Because the primary appears to be in the prostatic apex, do we code 33 or 15 for clinical extension? Which is more important for SEER? Do you want to capture the "apex" information or the "cT1c" information?

Answer:

For cases diagnosed 1998-2003:

Code the EOD-Clinical Extension field to 33 [arising in prostatic apex]. Apex information takes priority. The only statement we have is cT1c by the urologist, and we don't know how that stage was determined.

Cancer Site Category:

Prostate

Data Item Category:

N/A

Other Category:

N/A

Year:

2002