

Ready, Set, Go ...

Call for Data & v22 Changes



Presenter



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Housekeeping

- If you have trouble hearing the presentation and are listening through your computer, please check and adjust your volume settings. There will not be a call in feature for this webinar. If your speakers are having issues you may be able to use headphones with your computer.
- The webinar will be approximately 1 hour in length
- CE certificates will be sent to attendees later this week to the email address you provided during registration for this webinar
- A recording of this webinar, along with handouts and the Q&A will be made available to attendees in the coming days

Navigating GTW

- Download handouts and ask questions from the GTW control panel
- Ask questions! All questions will be answered in a follow up Q&A document

The screenshot displays the GTW CHAT interface. On the left is a vertical sidebar containing four icons: a green 'G' logo, an information icon (i), a question mark icon (Q), and a document icon. The question mark and document icons are circled in red. To the right of the sidebar, the word 'CHAT' is at the top. Below it is a large text input field. To the right of the input field is a grey 'SEND' button. Below the input field, the word 'Questions' is written in red, and below that, the word 'Handouts' is written in red. At the bottom of the sidebar is a back arrow icon.

Objectives

- Explore resources available for implementation of 2022 changes
- Familiarize participants with new and changed data items from NAACCR and STORE
- To familiarize CRStar users with the processes involved in answering to the 2022 NCDB Call for Data
- To offer suggestions for Best Practices to help prepare for the Call for Data
- To demonstrate the use of the CRStar exporting application and the GenEDITS Plus 5 software





CoC 2022 Call for Data



NCDB Call for Data

- Information can be found here:
<https://www.facs.org/quality-programs/cancer/ncdb/call-for-data>

NCDB Call for Data

Registrars

Information for Registrars

[Data Submission Information](#)

[How to Submit Data](#)

[GenEDITS Plus 5—Download and install from the CDC website](#)

CoC Program Standard 6.4

[CoC Program Standard 6.4 Compliance](#)

[Schedule for NCDB Data Submission](#)

[Tool—NCDB Call for Data Submission Count Tracking](#)

Configuration/Setup

Metafile and CoC User Dictionary

[NCDB and RCRS v18 Metafile](#)

[NCDB and RCRS v21 Metafile](#)

[NCDB and RCRS v22 Metafile](#)

[V21 CoC User Specific Dictionary for NPI Physician Confidential Data](#)

[V22 CoC User Specific Dictionary with NPI and Breast Surgical Codes](#)

Layouts

Data Submission Information

- Submission Window opens on 3/1/2022 and closes on 3/31/2022 at 11:59 CST
- Required Submission – Existing Programs
 - Analytic cases
 - All new cases diagnosed on or after 2006 through 2020
 - All updated/changed cases diagnosed on or after 2006 through 2019 (Those previously submitted in prior call for data exports)
- Required Submission – New Program
 - All analytic cases diagnosed on or after 2006 or their first accredited date (whichever is shorter) through 2020

Prep Work

- Review instructions on NCDB website
- Review for complete staging, treatment and follow-up information
- Review FIN to verify valid number
- Carefully choose your file name so that you can easily find file for submission
- Zip files will NOT be accepted
- Run file through GenEDITS Plus 5

NCDB Call for Data

Registrars

Information for Registrars

Data Submission Information

How to Submit Data

Prep Work- ACoS FIN number verification

2

Hospitals Registrars Physicians Phys Roster Initialize Acc Follow-

« **Hospital Lookup**

Hosp Nbr:

Hosp Name:

[Clear Search Criteria](#) **Search**

Records: 1

Hosp Nbr	Hosp Name
100048	ST NOWHERE

10 ▾ Records per page

1

System Management

Codes Maintenance

Logout

New Hospital

Hospital Maintenance

Hospital Name:

Contact:

Phone Nbr:

Rpt Hosp Id:

St Name Add:

Acos Hosp Id:

NPI:

Region:

Prep Work: FIN and NPI numbers

- This task can be done after selecting your export population
- Use List for a Population under Adhoc (do not reselect the auto-selected population)
- List the fields to review including Archive FIN and NPI Archive FIN

List for a Population

Population Label: 01-Autoselect-NCDB-All

Report Label: FIN Number review

Choose the Items for Your Report

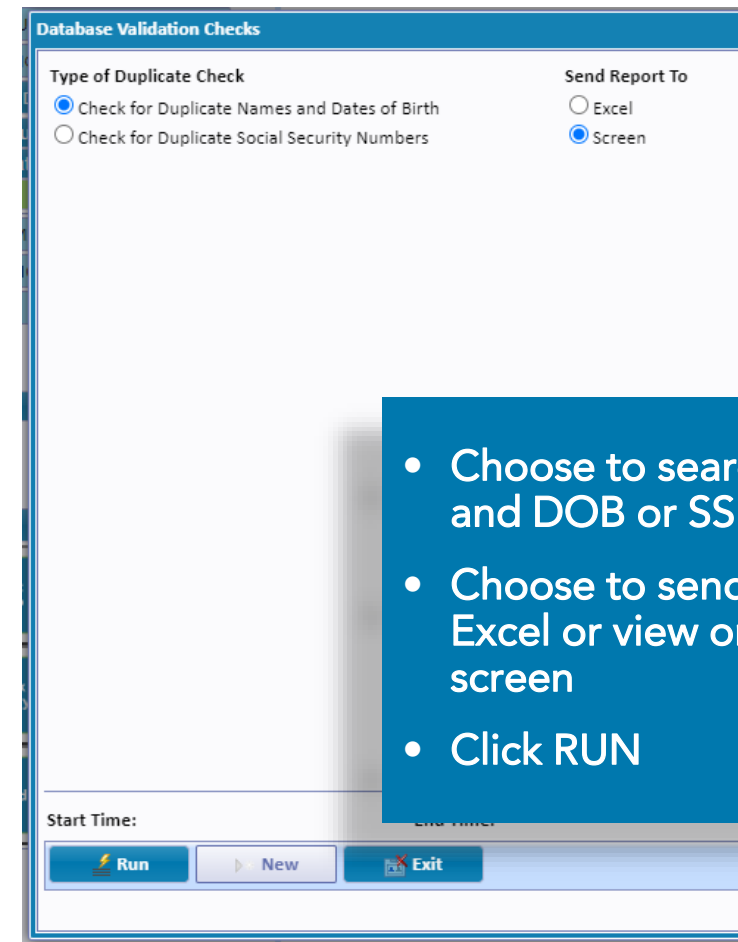
	Item Nbr	Item Description	B/S/L	C/D	Display Length
1	132	Accession Nbr	L	C	20
2	117	Site Code	L	C	20
3	118	Seq of Primary	L	C	20
4	2137	Archive Fin	L	C	20
5	3131	Npi_archive_fin	L	C	20

Adhoc Report FIN Number review for 01-Autoselect-NCDB-All

	Accession Nbr	Site Code	Seq of Primary	Archive Fin	Npi_archive_fin
1	01200900083	50	00	*7DS@	
2	01201300501	20	00		
3	01199600035	50	00		#12
4	01200701756	64	00		
5	03201200161	47	00	123784	1237
6	01201810027	10	12		
7	01200500694	50	00	0006530620	

Best Practices: Database Validation

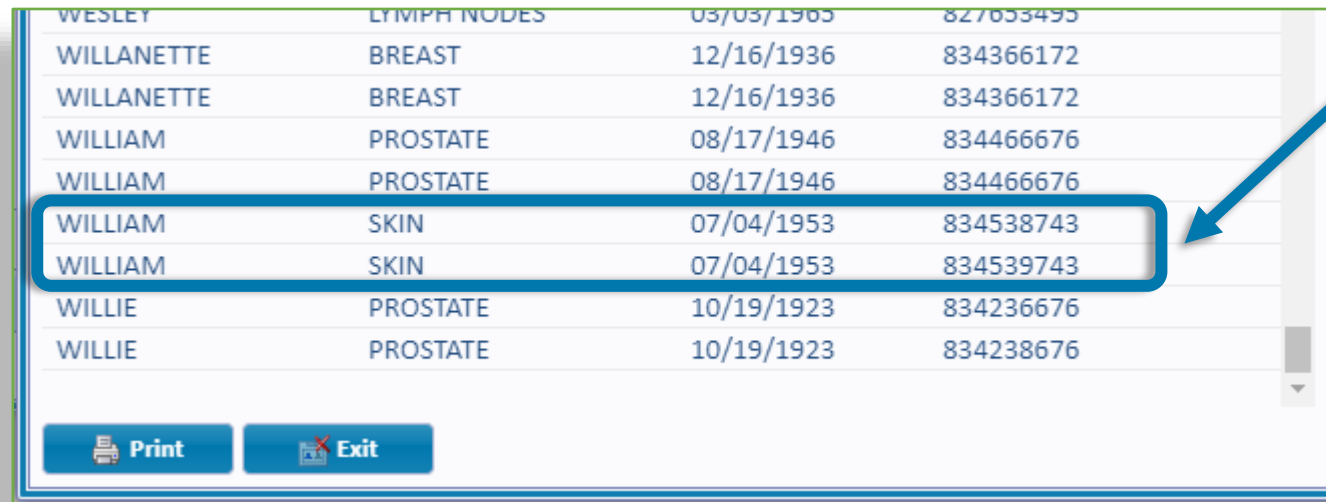
Perform Database Validation Check/Eliminate Duplicates



- Choose to search by name and DOB or SSN
- Choose to send report to Excel or view on your screen
- Click RUN

Best Practices: Database Validation (con't)

- Identify any duplicates. Investigate them in hospital EMR to determine which data is accurate, then combine the patients.



WESLEY	LYMPH NODES	03/03/1963	827653495
WILLANETTE	BREAST	12/16/1936	834366172
WILLANETTE	BREAST	12/16/1936	834366172
WILLIAM	PROSTATE	08/17/1946	834466676
WILLIAM	PROSTATE	08/17/1946	834466676
WILLIAM	SKIN	07/04/1953	834538743
WILLIAM	SKIN	07/04/1953	834539743
WILLIE	PROSTATE	10/19/1923	834236676
WILLIE	PROSTATE	10/19/1923	834238676

Print Exit

Best Practices: Database Validation (con't)

Combine patients

The screenshot displays the ERS Abstract Utilities interface. On the left is a sidebar menu with categories: DASHBOARD, ABSTRACT MANAGEMENT, FOLLOW UP MANAGEMENT, REPORTING, SYSTEM ADMINISTRATION, SYSTEM MANAGEMENT, PREFERENCES, and HELP. The 'Abstract Utilities' option is highlighted under ABSTRACT MANAGEMENT. A blue box with the number '1' points to this menu item. At the top right, a blue box with the number '2' points to the 'Combine Patients' button. The main window is titled 'Merge Patients' and contains two forms for selecting patients. The left form, 'Select Patient 1', has fields for Name, Dob, and SSN, and a table with columns S/A, Site, Seq, Class, and MRN. A blue box with the number '3' points to the 'Seq' column header, with a callout box stating 'Correct pt info verified in EMR'. The right form, 'Select Patient 2', has similar fields. A blue box with the number '4' points to this form, with a callout box stating 'Incorrect pt info verified in EMR'. Between the forms is a 'Merge Primaries into Patient 1 and Delete Patient 2' button. A blue box with the number '5' points to this button. At the bottom of the window are 'New' and 'Exit' buttons.

Best Practices: Follow Up

- Before starting the Call for Data process, get ahead by doing a thorough job of Follow-Up
 - Include applicable follow-up, recurrence, death and updated treatment data
 - Accurately input
 - Edits run
- Serves three purposes:
 - Ensures the most updated cases are submitted
 - Less errors in Follow-Up data
- No harm in pausing FU activities when it's time to submit

Best Practices: GenEdits Plus 5 & Metafile

- The metafile for the 2020 Call for Data is: NCDB v21b
- It is important that everyone on your team has the correct metafile before trying to reconcile any errors identified by the GenEDITS Plus 5 software
- Utilize one person to run the GenEDITS
 - More than one person can process the edits
- Assign one person to run final GenEDITS and submit data

Best Practices: General

- File storage
- Pause all Follow-up and Import activities while completing the final run of edits and submission
- RCRS Platform
 - Make sure the appropriate people have access
 - Check your facility profile for accurate information

Common Errors

- Conflicts in Follow-Up info
 - Recurrence type 70 and Cancer status 1
 - Recurrence type blank and Cancer status 2
 - Recurrence date entered with no Recurrence type
- Conflicts in Class of Case info
 - Class 00 without Referred to facility
 - Class 20-22 without Referred from facility
- Conflicts in Staging data
 - Having both (p) values and (yp) values on same case

What could cause my file to be rejected?

- Your FIN is incorrect in the transmission file or more than one FIN in the file
- File is not formatted for v21 or v22
- Submitted incorrect state export file instead of NCDB export
- More than one period in the file before extension (.xml)
- Special characters in file name. Only hyphen (-) and underscore (_) are accepted

GenEDITS Plus 5

- **Instructions**

https://www.facs.org/-/media/files/quality-programs/cancer/ncdb/2021_genedits_plus_5_installation_v18_and_v21.ashx

- **Download**

<https://www.cdc.gov/cancer/npcr/tools/edits/edits50.htm>

- **Metafile Installation**

<https://www.facs.org/quality-programs/cancer/ncdb/call-for-data>

Hints: Hospital Firewalls can interfere with download.

Creating Your Data File

The screenshot shows the ERS (Epidemiology Reporting System) interface. On the left is a navigation menu with categories: DASHBOARD, ABSTRACT MANAGEMENT, FOLLOW UP MANAGEMENT, REPORTING, SYSTEM ADMINISTRATION, SYSTEM MANAGEMENT, PREFERENCES, and HELP. The 'REPORTING' category is expanded, showing options like 'Select a Population', 'Canned Reports', 'CPM Reports', 'Adhoc Reports', 'Miscellaneous Reports', 'Data Exports', and 'Reporting Utilities'. The 'Data Exports' option is highlighted with a blue arrow labeled '1'. In the main content area, there are two buttons: 'State Export' and 'NCDB Export'. The 'NCDB Export' button is highlighted with a blue arrow labeled '2'. To the right, a modal window titled 'Export NCDB Data' is open. It contains several settings: 'Auto Select' is selected (radio button), 'Use Existing Population' is unselected; 'Auto Selection Criteria' includes a 'Hospital' dropdown, 'Cases Diagnosed in 2020' (selected radio button), and 'Cases Diagnosed in' (unselected radio button); 'Exclude Cases Prior to Reference Year' is checked (checkbox) with a 'Year' input field; 'Filename' is 'NCDB Export'; 'Export Data For' has 'NCDB' selected (radio button) and 'RCRS' unselected; and at the bottom, there are 'Start Time' and 'End Time' fields. A blue arrow labeled '3' points to the 'Auto Select' radio button, the 'Hospital' dropdown, the 'Cases Diagnosed in 2020' radio button, and the 'Exclude Cases Prior to Reference Year' checkbox. At the bottom of the modal, there are three buttons: 'Run' (with a lightning bolt icon), 'New' (with a play icon), and 'Exit' (with a red X icon). A blue arrow labeled '4' points to the 'Run' button.

Creating Your Data File

- The 2020 Export file is created and a list of cases is displayed
- At the bottom of the list, a summary of the contents is displayed
- The export list can be printed or saved (printed) as a PDF for reference
- Click on the download indicator at the bottom left of your screen to go to the file

Data Exported

Cases Exported for the NCDB Total Number of Cases: 253 May 20, 2021

Acc Nbr	Med Rec Nbr	Last Name	First Name	Site	Seq	Dx Date
200900083	418563001	LARYNX	BETTY	50	00	01/14/2019
199600035	419186790	PANCREAS	LYDA	50	00	01/13/2018
201200161	422561588	CHECK	Test	47	00	05/15/2018
201810027	263332489	CHECK	B'EVERLY	10	12	06/30/2018
200500694	419963222	BREAST	DEBORAH	50	00	04/12/2018
200900374	424469360	RECTUM	ROBERT	20	00	02/05/2018
201510000	434747222	BREAST	LAURA	50	01	01/01/2015
201100424	419211750	BREAST	PAULA	50	00	03/25/2017
200000148	422174939	RECTUM	RACHEL	20	00	02/23/2018
201600983	425155656	CERVIX	HAPPY	53	01	12/13/2016
199000815	424380390	BREAST	MILDRE			5/07/2018
201201996	421665797	KIDNEY	FRANK			2/04/2018
201795874	087467524	smith	john			4/23/2017
200600347	423620755	BREAST	PATRICIA			8/17/2018
200601508	423368059	BREAST	ANTOIN			0/16/2018
201100534	421743463	LIVER	YVONNE			4/19/2011
200500740	424286197	BREAST	BONNIE			7/26/2018
200700630	420612063	lung	IZAKHAR			5/09/2007
201101152	431826056	CORPUS	DOROTH			8/01/2011
200800135	4199833450	UNKNOWN	LASHAY			1/24/2018
201101467	417580522	lung	MAGGIE			0/07/2018
200801954	424096968	LYMPH NODES	FERRELL			2/22/2018
201101693	423621539	lung	DOROTH			1/15/2018
201001431	417728173	SKIN	MARTHA			9/23/2018
200901305	424822241	PROSTATE	DERRICK			5/09/2018

Diagnosis Year **Nbr of Cases**

2019	59
2018	98
2017	15
2016	30
2015	8
2014	19
2013	5
2012	3
2011	4
2009	2
2008	3
2007	3
2006	1
2004	3

Print **Download** **Exit**

NCDB_Data (2).zip

ERS

Cancer Program
Management & Analytics

Your Auto-Selected Population

- If you need to run other reports on the auto-selected population, it is available in your Population Label drop-down menu, BUT, if you open it, there will be no selection criteria listed
- Do NOT reselect the population here, it will come up with zero cases
- You can, however, create a new label and run a subpopulation as shown in this example:

Population

Population Label: 01-Autoselect-NCDB-All

New Label: Sample Sub Population

Site Codes

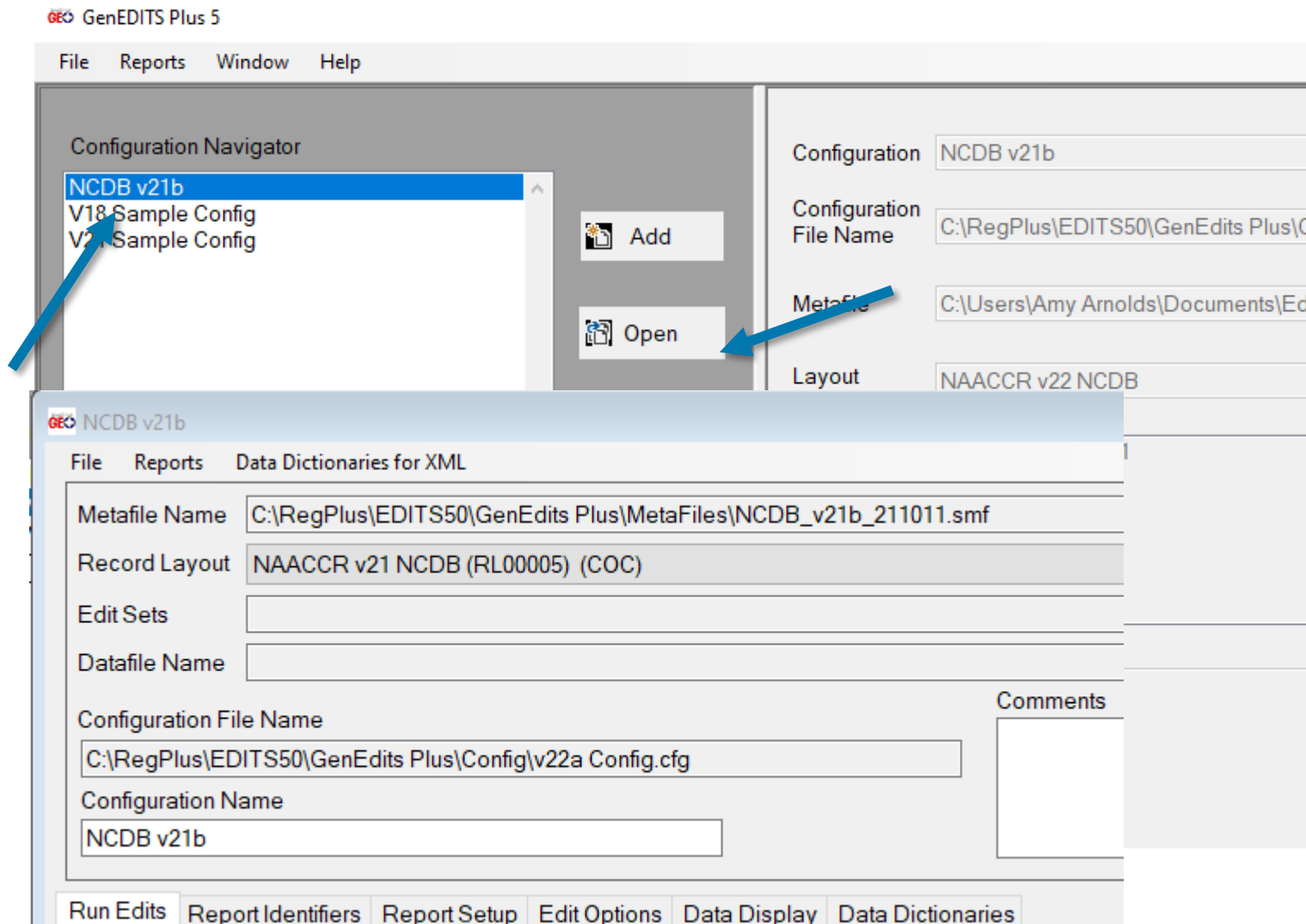
	Site	Site Description
1	50	BREAST
2		
3		

Start Time: End Time:

Select Delete Label Edit Selection New Exit

Cleaning Up Your Data

- Open GenEDITS Plus 5
- v21b Configuration
- Click Open



Cleaning Up Your Data

The screenshot shows the NCDB v21b software interface. The 'Data Dictionaries for XML' tab is active. The 'Datafile Name' field is highlighted with a blue oval and a blue arrow pointing to it from a blue box with the number '1'. The 'Record Type' is set to 'I', 'NAACCR Version' is '210', and 'Record Count' is '253', which are also highlighted with a blue oval and a blue arrow pointing to it from a blue box with the number '2'. The 'Run Edits' button is highlighted with a blue box with the number '2' and a blue arrow pointing to it. The 'Progress - EDITS running' window is open at the bottom, showing 'Records Processed: 300', 'Errors Reported: 2679', 'Records With Errors: 300', and 'Time Remaining: 00h:02m:53s'. The 'Halt' button is also visible in the progress window.

1. Click Browse & choose your data file
- Confirm that it populates in the Datafile Name box
- Confirm that your Record type, NAACCR version and Record Count are correct
1. Run Edits button should now be activated

Cleaning Up Your Data (con't)

- GenEDITS Plus 5 generates your edit reports as you specified
- The summary report shows you how many of each edit type you have
- The detail report shows you each case that has edits with identifying information so you can clean those edits up in CRStar

Cleaning Up Your Data

- Edit numbers can be looked up in GenEDITS Plus 5 to help clarify what all of this means ...

RX Summ--Treatment Stat, Treatment (COC) [N1601]

E: Conflict between RX Summ--Treatment Status and treatment codes

RX Summ--Treatment Status #1285	(Start Pos: 2224)	Value: [0]
RX Summ--Surg Prim Site #1290	(Start Pos: 2225)	Value: [50]
RX Summ--Surg Oth Reg/Dis #1294	(Start Pos: 2228)	Value: [0]
RX Summ--BRM #1410	(Start Pos: 2247)	Value: [00]
RX Summ--Chemo #1390	(Start Pos: 2243)	Value: [03]
RX Summ--Hormone #1400	(Start Pos: 2245)	Value: [01]
RX Summ--Transplnt/Endocr #3250	(Start Pos: 2241)	Value: [00]
RX Summ--Other #1420	(Start Pos: 2249)	Value: [0]
Reason for No Radiation #1430	(Start Pos: 2250)	Value: [0]
Phase I Radiation Primary Treatment Volume #1504	(Start Pos: 2281)	Value: [40]
Rad--Regional RX Modality #1570	(Start Pos: 2264)	Value: --blank--
Date of Diagnosis #390	(Start Pos: 544)	Value: [20180219]
RX Summ--Scope Reg LN Sur #1292	(Start Pos: 2227)	Value: [5]

Cleaning Up Your Data - Finding 4 digit Edit

1. Go to Edit Options tab
2. Double-click on Edit tag to sort the edit tag numbers numerically
3. Find the edit in the list and highlight it
4. Click Edit Details

NCDB v21b

File Reports Data Dictionaries for XML

Metafile Name: C:\RegPlus\EDITS50\GenEdits Plus\MetaFiles\NCDB_v21b_210505.smf Browse

Record Layout: NAACCR v21 NCDB (RL00005) (COC) v

Edit Sets: NCDB_v21_200901

Datafile Name: Browse

Configuration File Name: C:\RegPlus\EDITS50\GenEdits Plus\Config\NCDB v21b.cfg

Configuration Name: NCDB v21b

Comments:

Run Edits Report Identifiers Report Set Edit Options Data

Edit Details Test Edit

Search term:

Apply All Apply All Apply All Apply All Apply All

Edit Name	Edit Tag	Agency	Use Edit Set Options (1482)	Suppress Edit	Skip Empty	Skip Failed	No Skips
CS SSF 8, SSF 9, Testis (CS)	N1590	CS		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CS SSF 9, SSF 15, Testis (CS)	N1591	CS		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RX Summ-- Treatm Stat, Treatment (COC)	N1601	COC		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Surgery, RX Date Surgery, ICDO3 (COC)	N1606	COC		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multiplicity Ctr, Lymphoma/Leukem/Unk Site (NAACCR)	N1615	NAACCR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Summ Stg 2000, Site, Hist ICDO3, Class (NAACCR)	N1617	NAACCR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mult Tum Rpt, Lymphoma/Leukemia/Unk Site (NAACCR)	N1619	NAACCR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date of Mult Tum, Lymphoma/Leukem/Unk Site (NAACCR)	N1620	NAACCR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CS SSF 16, MerkelCell Schemas (CS)	N1632	CS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CS SSF 17, MerkelCell Schemas (CS)	N1633	CS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Cleaning Up Your Data

Look for keywords like
"must equal", "cannot
be", etc

Edit Name: RX Summ--Treatm Stat, Treatment (COC) (N1601)

Agency: COC

Description Admin Notes Edit Logic

The purpose of this edit is to verify that RX Summ--Treatment Status and treatment fields are coded consistently.

This edit is skipped under the following conditions:

- a. RX Summ--Treatment Status is blank
- b. Date of Diagnosis is blank (unknown) or invalid

1. If any of the treatment fields indicate treatment given, then RX Summ--Treatment Status must equal 1 (treatment given). Treatment is considered "given" if any of the following is true:

RX Summ--Surg Prim Site = 10-90
RX Summ--Surg Oth Reg/Dis = 1-5
RX Summ--BRM = 01
RX Summ--Chemo = 01-03
RX Summ--Hormone = 01
RX Summ--Transplnt/Endocr = 10-40
RX Summ--Other = 1, 2, 3, 6
Reason for No Radiation = 0

2. If Treatment Status = 1 (treatment given), at least one of the following fields must equal treatment given. Treatment is considered "given" if any of the following is true:

RX Summ--Surg Prim Site = 10-90
RX Summ--Scope Reg LN Sur = 1-7
RX Summ--Surg Oth Reg/Dis = 1-5
RX Summ--BRM = 01
RX Summ--Chemo = 01-03
RX Summ--Hormone = 01
RX Summ--Transplnt/Endocr = 10-40
RX Summ--Other = 1, 2, 3, 6
Reason for No Radiation = 0

Cleaning Up Your Data

- Run edits on every case you touch during the cleanup process
- Review and clear all edits
- Run export again and pass through GenEDITS
 - If edits are clear, data can be submitted
 - If edits aren't clear they will need to be worked on then re-exported until clear

Submitting the Call for Data

- Instructions to Submit Data: <https://www.facs.org/-/media/files/quality-programs/cancer/ncdb/how-to-submit-data.ashx>
- Questions or Issues? ACSTechsupport@iqvia.com

Determining Submission Completeness

- Keep track of how many cases were in each Export batch you created
- Errors & Rejected Cases - Any rejected cases are considered not submitted. Correct them and re-submit prior to the deadline 3/31/2021
- Compare to the number of cases received by the NCDB after submitting

Determining Submission Completeness

The NCDB uses this formula and these percentages to determine if a facility’s data submission meets the expectations for submission based on year.

The NCDB monitors the frequency of updated cases that were submitted by facilities for the earlier years, and evaluates the completeness of reporting of cases for these diagnosis years based on a thorough analysis of data submitted from all facilities to determine an expected number of cases:

Diagnosis Years 2004-2018

The expected number of cases for each facility is based on a percentage that is calculated as follows:

cases submitted for the diagnosis year (e.g., 2017)

cases submitted for the most recent diagnosis year (e.g., 2018)

X 100 = ZZ%

Percent of case submission expectations for Standard 5.5 Compliance:

Year	Percentage
2018	100
2017	85
2016	50
2015	30
2014	25
2013	20
2012	15
2011	10
2004-2010	5

Determining Submission Completeness

NCDB Call for Data Submission Count Tracking by Diagnosis Year

Call for Data 2022			
Dx year	CFD 2022 # Cases	CFD 2021 # Cases	% Annual Caseload
First dx year	Enter # of cases submitted for	Enter # of cases submitted for	#VALUE!

Enter the number of cases submitted for each diagnosis year for your program's annual caseload will be automatically calculated

Call for Data 2022			
Dx year	CFD 2022 # Cases	CFD 2021 # Cases	% Annual Caseload
2020			
2019			#DIV/0!
2018			#DIV/0!
2017			#DIV/0!
2016			#DIV/0!
2015			#DIV/0!
2014			#DIV/0!
2013			#DIV/0!
2012			#DIV/0!
2011			#DIV/0!
2010			#DIV/0!
2009			#DIV/0!
2008			#DIV/0!
2007			#DIV/0!
2006			#DIV/0!

Responsibilities During the Call For Data (Vendor Responsibilities)

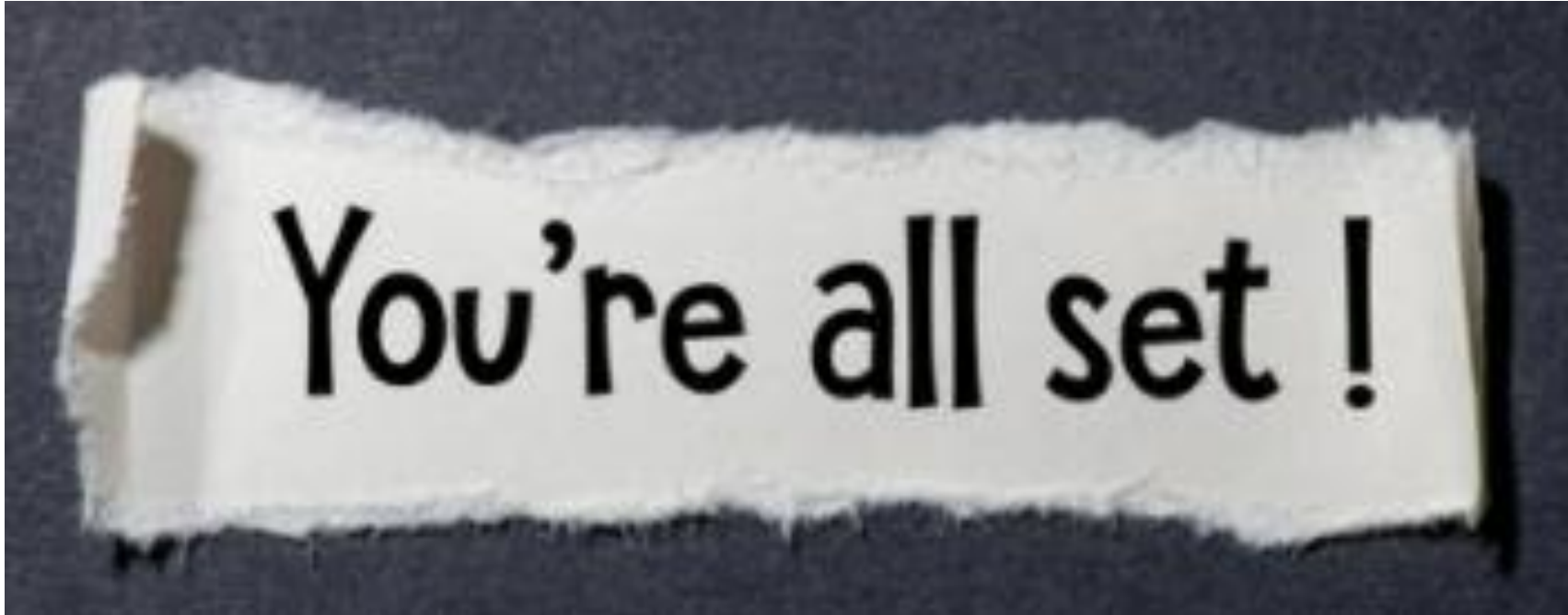
- Support tickets will be answered in the order received. We may need to limit the amount of time spent on each call
- ERS will not provide support for GenEDITS Plus 5 software
- ERS will gladly assist with any *software related edits*. However, we are unable to provide clean-up services for data entry errors
- ERS will assist with global data changes if applicable and the amount of any one edit is over 75 errors.
 - The edits below require manual review and globals are not indicated:
 - Recurrence Type – 1st, Cancer Status (COC)
 - Date Case Completed - CoC, Date of Diagnosis (NCDB)
 - Rx Summ - Treat Stat, Date 1st Crs RX COC (COC)


Responsibilities During the Call for Data (Client Responsibilities)

- Please submit a support ticket if assistance is needed with an ERS issue. Please do not email or call the support staff directly
- For assistance with GenEDITS Plus 5 software, contact the CDC as this software is developed and supported by the CDC. For assistance with the NCDB submission portal, contact the NCDB
- During this time, it is imperative for Registrars and Follow-Up clerks to run NCDB edits after entering Follow-Up and subsequent treatment information. If new FU is entered, the case becomes eligible for this Call for Data. Make sure it passes edits
- A backup of the database must be done prior to any global changes

Quick Review

- Get organized. Review the 2022 Call for Data Requirements
- Do some preliminary data reviews
- Check for incorrect FIN and NPI numbers
- Install GenEDITS Plus 5
- Download the NCDB v21b metafiles and import them into GenEDITS
- Create the NCDB 2022 CFD Configuration
- Create the 2020 and earlier Data Export files in CRStar
- Run edits on the Export files in GenEDITS Plus 5 (repeat until clean) and save a copy of the final clean report
- Submit data through NCDB Datalinks portal
- Determine Submission Completeness



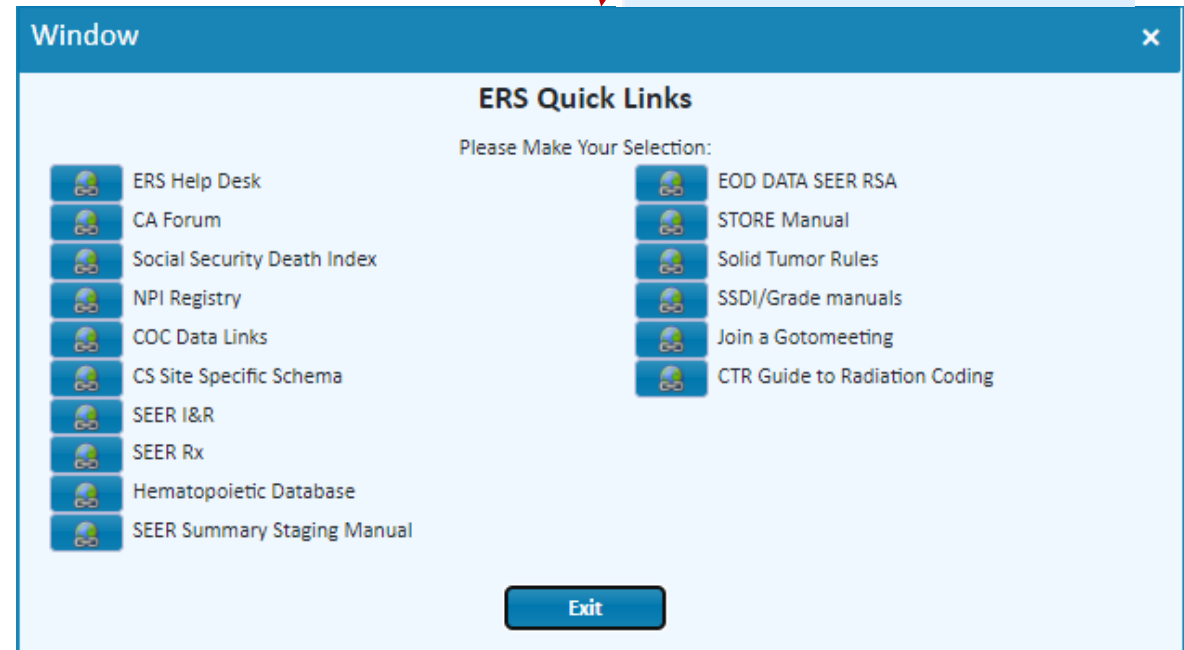
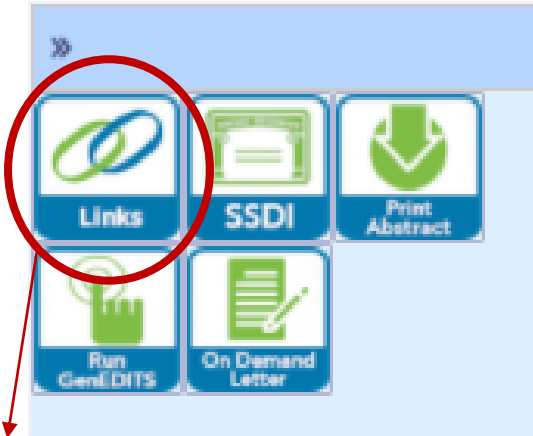


*“Quality means doing it right
when no one is looking.”*
/HENRY FORD/

www.luxafor.com

Resources - Updated Quick Links

- Links will go to the most current version of the standard setters' sites and manuals
- Use caution to make sure you are looking at the correct version for the year of the case being abstracted



SEER Information Hub



NATIONAL CANCER INSTITUTE

Surveillance, Epidemiology, and End Results Program

Reporting Guidelines	Casefinding Lists
Casefinding Lists	Use the casefinding lists to screen prospective cases and identify cancer cases for inclusion in the registry.
2018 SEER Coding Manual —	SEER Program Coding and Staging Manual
Appendix C for 2018 Manual	The 2021 manual includes data item descriptions, codes, and coding instructions for cases diagnosed January 1, 2021 and forward as reported by SEER registries.
2021 Coding Manual +	Hematopoietic Project
Hematopoietic Project +	This site provides data collection rules for hematopoietic and lymphoid neoplasms for 2010+.
ICD-O-3 Coding Materials	ICD-O-3 Coding Materials
2018 Solid Tumor Rules —	This site/type list is provided in both PDF and Excel formats.
2020 Revision History	2018 Solid Tumor Rules
Revision Archive	Use the 2018 Solid Tumor coding rules to determine the number of primaries to abstract and the histology to code for cases diagnosed 2018 and forward.
Histology Coding Clarifications	Historical Staging and Coding Manuals
Historical Staging and Coding Manuals +	These manuals are historical coding instructions. The files on this page are archived and provided for reference purposes only.
Grade Coding Instructions 2014	Grade Coding Instructions 2014
SEER Data Submission Requirements	These instructions are valid for cases diagnosed through December 31, 2017 for CoC, SEER, and NPCR.
COVID-19 Abstraction Guidance +	SEER Data Submission Requirements
	Current guidelines and required SEER data items for the annual data submissions.
	COVID-19 Abstraction Guidance
	Technical guidance regarding the implementation of COVID-19 data abstraction.

- <https://seer.cancer.gov/registrars/guidelines.html>
- Each section has information / links for previous versions and 2022 version

v22 Implementation Updates

NAACCR 2022 Implementation Guidelines & Recommendations

https://www.naaccr.org/wp-content/uploads/2021/12/2022-Implementation-Guidelines_20211129-1.pdf

Reminder: Most v22 changes discussed apply to cases dx 1/1/2022 and later

v22 - New Data Items

- Tobacco Smoking Status - Patient Screen
- SSDI

Item #	SSDI Name	Schema
3955	Derived Rai Stage*	Lymphoma CLL/SLL
3956	p16**	Cervix V9
3957	LN Status Pelvic***	Cervix 8th, Cervix V9, Vagina, Vulva
3958	LN Status Para-Aortic***	Cervix 8th, Cervix V9, Vagina
3959	LN Status Femoral-Inguinal***	Vagina, Vulva

v22 - New Data Items - CoC

- CoC -Macroscopic Evaluation of Mesorectum
- CoC - Breast Surgical (2022 only)
 - RX Hosp - Surg Breast
 - RX Summ Surg Breast
 - RX Hosp - Recon Breast
 - RX Summ - Recon Breast

Surgical Screen

<https://www.facs.org/quality-programs/cancer/events/ondemand/canswer-forum-live>

v22 - Changed Data Items

- Phrases -
 - Examples: API to DLL; Alaska Native, etc.
- SSDI - *Cases Dx 1/1/2018 forward*
 - Blanks
 - New Codes
 - Schemas: Esophagus, Esophagus Squamous, Stomach, Prostate, Kidney Parenchyma, Pancreas, Plasma Cell Myeloma, Lymphoma CLL/SLL, Plasma Cell Myeloma
 - Removed
 - Schemas: Cervix 8th, Cervix V9, Vulva, Vagina

v22 - Solid Tumor Rules

- The 8 site groups have been updated:
 - New histologies, codes & terms
 - Updated equal/equivalent and not equal/equivalent terms
- New section added “Changes from 2018 Solid Tumor Rules” for Colon and Head & Neck
- Timing requirement updates for Colon
- Solid Tumor General instructions apply to all sites

v22 - Solid Tumor Rules (con't)

- Head & Neck
 - p16 can be used to determine HPV positivity for squamous cell carcinoma
 - 1/1/2022 and forward - Non-keratinizing squamous cell ca, HPV pos is 8085 for sites listed in Table 5 ONLY; non-keratinizing squamous cell ca, NOS = 8072
 - 1/1/2022 and forward - Keratinizing squamous cell ca, HPV neg = 8086 for sites listed in Table 5 ONLY; keratinizing squamous cell ca, NOS = 8071

v22 - ICD-O-3

- Review v22 Implementation Guide for updates
- Reportable
 - Clear cell papillary renal cell carcinoma has been reclassified as /1 but remains reportable for Urinary system & Male Genital organs
 - Low-grade appendiceal mucinous neoplasm (LAMN) now /2 or /3 - reportable
- Not Reportable
 - High grade dysplasia /2 (colon)
 - Adenoca in situ, HPV-associated /2 (cervix)
 - Adenoca in situ, HPV-independent /2 (cervix)

v22 - Extent of Disease (EOD)

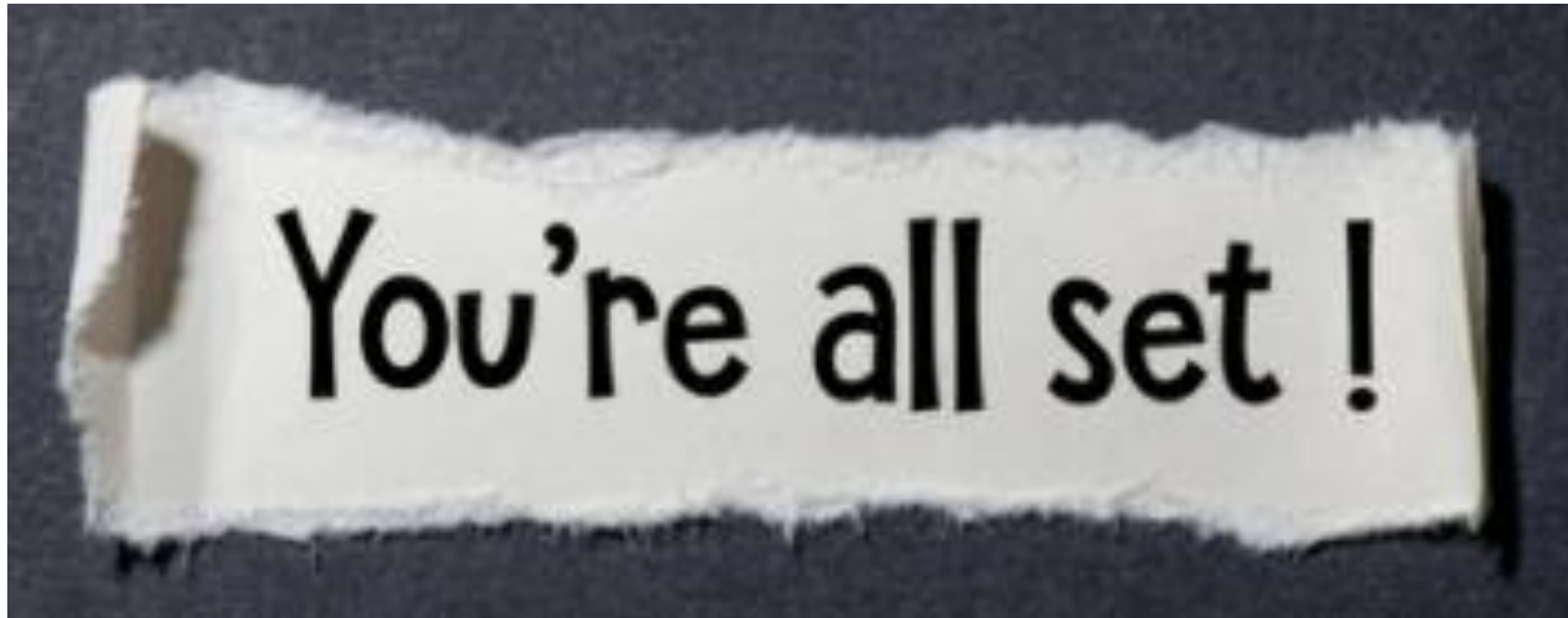
- Cervix Sarcoma - new schema
- Soft Tissue Other is now split
 - Soft Tissue Rare
 - Soft Tissue Other
- Pleural Mesothelioma
 - 05 is a new code for positive pleural effusion only

v22 - Metafile

- v22 metafile will only be available for selection if your state is accepting v22 NAACCR layout for submissions

v22 - CoC

- STORE v2022 for all cases dx on/after 1/1/2022
- COVID-19 Fields - not required for cases dx on/after 1/1/2022
- Histologies no longer collected
 - 8210/2 Adenomatous polyp, high grade dysplasia (C160 – C166, C168-C169, C170-C173, C178-C179)
 - 8211/2 Tubular adenoma, high grade
 - 8261/2 Villous adenoma, high grade
 - 8263/2 Tubulovillous adenoma, high grade
 - 8483/2 Adenocarcinoma in situ, HPV-associated (C530-C531, C538-C539)
 - 8484/2 Adenocarcinoma in situ, HPV-independent, NOS C530-C531, C538-C539)
 - 8590/1 Uterine tumor resembling ovarian sex cord tumor
 - 9200/1 Osteoblastoma
 - 9261/1 Osteofibrous dysplasia-like adamantinoma



Converted Data Items

- NAACCR v22 upgrade required conversion of several previously coded fields
 - Some require manual review
 - Specifications are in the 2022 Implementation guidelines Appendix B
 - ERS has provided you with population lists of cases that had conversions executed

Schemas that require review:

- **13.1 AJCC [995] changes within Schema ID [3800] (Recalculation)** Schema ID changed and cases are now eligible for AJCC staging. AJCC T, N, M and Stage Group should be reviewed and restaged
- **13.2 Schema ID [3800] = 00421 (Soft Tissue Abdomen & Thoracic) - C474 (Recalculation)** Schema ID changed. AJCC T, N, M and Stage Group should be reviewed and restaged
- **13.3 Schema ID[3800] = 00450 (Soft Tissue Rare), 00459 (Soft Tissue Other) - New Schema (Recalculation)** Schema ID changed. AJCC T, N, M and Stage Group should be reviewed and restaged
- **13.4 Schema ID [3800] = 00450 (Soft Tissue Rare) - C530-C539 (Recalculation)** Schema ID changed. AJCC T, N, M and Stage Group should be reviewed and restaged
- **13.5 Schema ID [3800] = 00528 (Cervix Sarcoma) - New Schema (Recalculation)** Schema ID changed. AJCC T, N, M and Stage Group should be reviewed and restaged
- **13.10 Schema ID [3800] = 09520 (Cervix Version 9) and p16[3956]** Text will need to be checked for p16 test results and SSDI updated accordingly

Managing the Conversion Cases

Populations have been created for you to use to manage the manual review process for cases that require it

Search: <input type="text" value="v22"/> <input type="button" value="Search"/> <input type="button" value="All"/>				
Hospital Code	Population Label ▲	Request Date	Requested By	Nbr Cases
	V22 Schema resets and manual review of newly eligible Histologies	01/27/2022	Automated v22	21
	v22 SchemaID 00421 Topo C474 Review	01/27/2022	Automated v22	21
	v22 SchemaID 00450 Topo C530-C539 Recalculation	01/27/2022	Automated v22	75
	v22 SchemaID 00528 New Schema Recalculation	01/27/2022	Automated v22	17
	v22 SchemaID 00700 Histo 9222_ to SchemaID 00450 or 00459	01/27/2022	Automated v22	35
	v22 SchemaID 09520 p16 Manual Review	01/27/2022	Automated v22	38

**IMPORTANT: Use the populations in reports as they are.
DO NOT RESELECT THE POPULATIONS!
Reselecting will select 0 cases.**

Managing the Conversion Cases

- Use the populations we created for you to generate Adhoc reports
- Review the cases in each report according to Appendix B in the NAACCR Implementation Guidelines

Section Number	Population Name	Items to Review
13.1a	V22 Schema resets and manual review of newly eligible Histologies	AJCC T,N,M & Staging Group all categories
13.2	V22 SchemaID 00421 Topo C474 Review	AJCC T,N,M & Staging Group all categories
13.3c	V22 SchemaID 00700 Histo 9222_ to SchemaID 00450 or 00459	AJCC T,N,M & Staging Group all categories
13.4	V22 SchemaID 00450 Topo C530-C539 Recalculation	AJCC T,N,M & Staging Group all categories, SSDI
13.5	V22 SchemaID 00528 New Schema Recalculation	AJCC T,N,M & Staging Group all categories , SSDI
13.10	V22 SchemaID 09520 p16 Manual Review	p16 SSDI, Lab/Path Text

Suggested Report Review #1 - AJCC Review

List for a Population

Population Label: V22 Schema resets and manual review of newly eligible t

Report Label: v22 AJCC Review

Requested On: 01/28/2022

Created By: Amy Arnold

Choose the Items for Your Report

	Item Nbr	Item Description	B/S/L	C/D	Display Length	Limiting Values
1	132	Accession Nbr	L	C	20	
2	1	Last Name	L	C	20	
3	20	First Name	L	C	20	
4	117	Site Code	L	C	20	
5	150	Date of Diagnosis	L	C	20	
6						
7						
8						
9						
10						

Heading:

File Name:

☒ Include Column Headers

Reporting Device
☐ Excel
☐ File Delimited
☐ File Fixed-Width
☒ Screen
☐ Xml

v21 Compatibility Mode

Staging and SSDI v21 Compatibility Mode

Staging AJCC ID: XX

TNM Edition Nbr:

SEER Sum Stage:

Bone:

Brain:

Liver:

Lung:

Dist LN:

Other Mets:

Size Summary:

EOD Prim Tumor:

EOD Reg Nodes:

EOD Mets:

AJCC Clinical

Grade:

c T:

c N:

c M:

c Group:

yc T:

yc N:

yc M:

yc Group:

Suffix

AJCC Pathological

Grade:

p T:

p N:

p M:

p Group:

yp T:

yp N:

yp M:

yp Group:

Suffix

Schema ID: 09520

Schema Discriminator 1:

Bone Invasion:

Adenopathy:

Anemia

This case underwent NAACCR conversion: 13.4

Cancel

Save & Exit

Only SSDI applicable to the schema will appear here

ERS
Cancer Program
Management & Analytics

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Resources

- NAACCR 2022 Implementation Guidelines and Recommendations
https://www.naaccr.org/wp-content/uploads/2021/12/2022-Implementation-Guidelines_20211129-1.pdf
- SEER Information Hub - <https://seer.cancer.gov/registrars/guidelines.html>
- NCDB Call for Data - <https://www.facs.org/quality-programs/cancer/ncdb/call-for-data>
- Contact Information
 - ncdb@facs.org - questions regarding data submission
 - ACSTechsupport@iqvia.com - RCRS login or upload issues



THANK YOU

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