

Data Items by Diagnosis Year 1995-2017

Item #	Record ID and Demographic Section—(Name and [Number])	Required Status 1995–2017	New Changed	Foot note
10	Record Type	Y		
20	Patient ID Number (unique)	Y		
40	Registry ID	Y		
50	NAACCR Record Version	Y		
80	Address at Dx—State	Y		
89	County at DX Analysis	Y	New	<u>28</u>
90	County at Dx Reported	Y	Name Change	<u>1</u>
94	County at Dx GeoCode 1990	Y		
95	County at Dx GeoCode 2000	Y		
96	County at Dx GeoCode 2010	Y		
3300	Rural-Urban Continuum/Beale Code 1993	Y		1
3310	Rural-Urban Continuum/Beale Code 2003	Y		1
3312	Rural-Urban Continuum/Beale Code 2013	Y		1
100	Address at Dx—Postal Code	Y		_
110	Census Tract 1970/80/90	Y		
120	Census Cod Sys 1970/80/90	Y		
130	Census Tract 2000	Y		<u>2</u>
135	Census Tract 2010	Y		2
145	Census Tract Poverty Indicator	Y		21
364	Census Tr Cert 1970/80/90	Y		
365	Census Tr Certainty 2000	Y		2
367	Census Tr Certainty 2010	Y		2
160	Race 1	Y		_
161	Race 2	Y		
190	Spanish/Hispanic Origin	Y		
191	NHIA Derived Hisp Origin	Y		3
192	IHS Link	Y		<u>4</u>

193	RaceNAPIIA	Y		<u>3</u>
220	Sex	Y		<u>ა</u>
230	Age at Diagnosis	Y		
240	Date of Birth	Y		
241	Date of Birth Flag	Y		
252	Birthplace State	Y		
254	Birthplace Country	Y		
Item #	Cancer Identification Section—(Name and [Number])	Required Status		
π		1995–2017		
380	Sequence Number—Central	Y		
390	Date of Diagnosis	Y		
391	Date of Diagnosis Flag	Y		
400	Primary Site	Y		
410	Laterality	Y		
440	Grade	Y		
490	Diagnostic Confirmation	Y		
500	Type of Reporting Source	Y		
501	Casefinding Source	As available		<u>19</u>
522	Histologic Type ICD-O-3	Y		<u>5</u>
523	Behavior Code ICD-O-3	Y		<u>5</u>
630	Primary Payer at DX	As available		
Item		Required		
#	Treatment First Course Section—(Name and [Number])	Status 1995–2017		
1260	Date of Initial Rx—SEER	Y		6
1261	Date of Initial Rx Flag	Y		<u> </u>
1270	Date of 1st Crs Rx—COC	Y		<u> </u>
1271	Date of 1st Crs Rx Flag	Y		<u> </u>
1290	Rx Summ—Surg Primary Site	Y		<u> </u>
1292	Rx Summ—Scope Reg LN Sur	Y		<u>.</u> 7
1294	Rx Summ—Surg Oth Reg/Dis	Y		<u>.</u> 7
1340	Reason for No Surgery	Y		<u>.</u> 7
1360	RX Summ—Radiation	Y		<u>.</u> 7
1380	RX Summ—Surg/Rad Seq	Y		<u> </u>
		* * * * * * * * * * * * * * * * * * *		
1390	Rx Summ—Chemo	Y	l	/
1390 1400	Rx Summ—Chemo Rx Summ—Hormone	Y		<u>7</u> 7
				<u>7</u> <u>7</u> <u>7</u>

1570	Rad—Regional Rx Modality	Y	7
1639	RX Summ—Systemic/Sur Seq	Y	7
3250	RX SummTransplant/Endocr	Y	7
1285	RX SummTreatment Status	Y	7
Item #	Stage/Prognostic Factors Section—(Name and [Number])	Required Status 1995–2017	
820	Regional Nodes Positive	Y	18
830	Regional Nodes Examined	Y	18
759	SEER Summary Stage 2000	Y	8
760	SEER Summary Stage 1977	Y	8
756	Tumor Size Summary	Y	9
2800	CS Tumor Size	Y	9
2810	CS Extension	Y	10
2820	CS Tumor Size/Ext Eval	Y	10
2830	CS Lymph Nodes	Y	10
2840	CS Lymph Nodes Eval	Y	11
2850	CS Mets at DX	Y	10
2860	CS Mets Eval	Y	10
	CS Site-Specific Factor 1 for:		
	C50 (breast)	Y	12
	C70.0-C70.9, C71.0-C71.9, C72.0-C72.9, C75.1-C75.3 (brain, CNS)	Y	22
2880	C34 (lung)	Y	13
	C384 (pleura)	Y	13
	C692 with 9510/3, 9511/3, 9512/3, 9513/3	Y	10
	(retinoblastoma)		13
	C619 (prostate)	As Available	<u></u>
	CS Site-Specific Factor 2 for:		
2890	C50 (breast)	Y	12
	C54, C55 (corpus uteri)	Y	13
2900	CS Site-Specific Factor 3 for C619 (prostate)	Y	13
	CS Site-Specific Factor 8		
2862	C50 (breast)	Y	12
	C619 (prostate)	As Available	
2863	CS Site-Specific Factor 9 for C50 (breast)	Y	12
2864	CS Site-Specific Factor 10 for C619 (prostate)	As Available	
2865	CS Site-Specific Factor 11 for C50 (breast)	Y	12
2867	CS Site-Specific Factor 13 for C50 (breast)	Y	12

2868	CS Site-Specific Factor 14 for C50 (breast)	Y		12
2869	CS Site-Specific Factor 15 for breast (C50)	Y		23
2879	CS Site-Specific Factor 25	Y		24
2937	CS Version Input Current	Y		
3020	Derived SS2000	Y		<u>13</u> 17
3769	Over-ride CS 20	Y		17
3000	Derived AJCC-6 Stage Grp	As available		14
3430	Derived AJCC-7 Stage Grp	As available		14
880	TNM Path T	Y		25
890	TNM Path N	Y		25
900	TNM Path M	Y		<u>25</u>
910	TNM Path Stage Group	Y		25
920	TNM Path Descriptor	Y		25
940	TNM Clin T	Y		<u>25</u>
950	TNM Clin N	Y		<u>25</u>
960	TNM Clin M	Y		<u>25</u>
970	TNM Clin Stage Group	Y		<u>25</u>
980	TNM Clin Descriptor	Y		25
1060	TNM Edition	Y		<u>25</u>
3650	NPCR Derived Clin Stage Group	Y		<u>25</u>
3655	NPCR Derived Path Stage Group	Y		25
Item #	Follow-Up/Recurrence/Death Section—(Name and [Number])	Required Status		
π	[ramber])	1995–2017		
1750	Date of Last Contact	Y		
1751	Date of Last Contact Flag	Y		
1760	Vital Status	Y		
1784	Survival Months Active Followup	As available	New	<u>26</u>
1787	Survival Months Presumed Alive	As available	New	<u>26</u>
1790	Follow-Up Source	As available		<u>15</u>
1791	Follow-Up Source Central	Y		<u>15</u>
1910	Cause of Death	Y		
1920	ICD Revision Number	Y		
Item #	Over-Rides/Conversion/System Admin. Section—(Name and [Number])	Required Status		
1000		1995–2017 Y		
1990	Over-Ride Age/Site/Morph	1		<u> </u>

2000	Over-Ride SeqNo/DxConf	Y	
2010	Over-Ride Site/Lat/Sequence Number	Y	
2020	Over-Ride Surg/Dxconf	Y	
2030	Over-Ride Site/Type	Y	
2040	Over-Ride Histology	Y	
2050	Over-Ride Report Source	Y	
2060	Over-Ride Ill-define Site	Y	
2070	Over-Ride Leuk, Lymphoma	Y	
2071	Over-Ride Site/Behavior	Y	
2074	Over-Ride Site/Lat/Morph	Y	

Item #	NPCR Site-Specific Field	Required Status 1995–2017		
9980	EDP MDE Link	Y		<u>16</u>
9981	EDP MDE Link Date	Y		<u>16</u>
9960	Height	As available		<u>14</u> <u>20</u>
9961	Weight	As available		<u>14</u> <u>20</u>
9965	Tobacco Use Cigarettes	As available		<u>14</u> <u>20</u>
9966	Tobacco Use Smoke	As available		<u>14</u> <u>20</u>
9967	Tobacco Use Smokeless	As available		<u>14</u> 20
9968	Tobacco Use NOS	As available		<u>14</u> <u>20</u>
9990	IHS Purchased/Referred Care Delivery Area (PRCDA)	Y	New	<u>27</u>
9991	Urban Indian Health Organization (UIHO)	Y	New	<u>27</u>
9992	Urban Indian Health Organization (UIHO) Facility	Y	New	<u>27</u>

NOTE 1: Code "999" for unknown and invalid. Do not include cases with code "998" in the submission file. **If State law** precludes the registry from identifying specific counties on a file of individual records, recode all valid county codes to "000" and convert county codes to the derived Rural Urban Continuum variables. **The Rural Urban Continuum variables are required only if County at Dx Reported is not submitted.** See Submission Specifications document for more details.

	County at Liv Reported	Y		
3300 1	County at Dx Reported Rural-Urban Continuum/Beale Code 1993	Y		
3310 F	Rural-Urban Continuum/Beale Code 1993	Y		
	Rural-Urban Continuum/Beale Code 2003	Y		
			ana diama	d: 1009
2002 an	2: Census Tract 2000 [130] is recommended jud required for reportable cases diagnosed in red for reportable cases diagnosed in 2010 ar	2003 and later.		
130	Census Tract 2000	Y		
135	Census Tract 2010	Y		
365 C	Census Tr Certainty 2000	Y		
367 C	Census Tr Certainty 2010	Y		
unknowi	rations document and/or Atachment 1 for more in, is not a valid code for the NHIA data item. NHIA Derived Hisp Origin	y	noie inai coc	ie 9,
	RaceNAPIIA	Y		
	4: Report the results of cases submitted for IH sion Specifications document for further details.		codes 0 or 1.	See the
			T	1
	THS Link	Y		
NOTE 3 O-3 man before 2 ICD-O-2	5: For reportable cases diagnosed in 2001 or nual and submitted with these original ICD-C 2001, data are to be coded using the ICD-O-2 codes to ICD-O-3 codes.	later, data are O-3 values. For manual. Prior t	reportable ca	ises diagnosed
NOTE 5 O-3 man before 2 ICD-O-2 522 H	5: For reportable cases diagnosed in 2001 or nual and submitted with these original ICD-C2001, data are to be coded using the ICD-O-2 codes to ICD-O-3 codes. Histologic Type ICD-O-3	later, data are O-3 values. For manual. Prior t	reportable ca	ises diagnosed
NOTE 5 O-3 man before 2 ICD-O-2 522 H 523 H	5: For reportable cases diagnosed in 2001 or nual and submitted with these original ICD-C2001, data are to be coded using the ICD-O-2 codes to ICD-O-3 codes. Histologic Type ICD-O-3 Behavior Code ICD-O-3	later, data are O-3 values. For manual. Prior t Y	reportable ca	ses diagnosed , convert these
NOTE 5 O-3 man before 2 ICD-O-2 522 H 523 H NOTE 6 submit a	5: For reportable cases diagnosed in 2001 or nual and submitted with these original ICD-C2001, data are to be coded using the ICD-O-2 codes to ICD-O-3 codes. Histologic Type ICD-O-3 Behavior Code ICD-O-3 6: Submit either the SEER or COC field; for ras available.	later, data are O-3 values. For manual. Prior t Y	reportable ca	ses diagnosed , convert these
NOTE 3 O-3 man before 2 ICD-O-2 522 H 523 H NOTE 6 submit 6	5: For reportable cases diagnosed in 2001 or nual and submitted with these original ICD-C2001, data are to be coded using the ICD-O-2 codes to ICD-O-3 codes. Histologic Type ICD-O-3 Behavior Code ICD-O-3 6: Submit either the SEER or COC field; for ras available. Date of Initial Rx—SEER	Plater, data are O-3 values. For manual. Prior t Y Y Y Peportable cases	reportable ca	ses diagnosed , convert these
NOTE 3 O-3 man before 2 ICD-O-2 522	5: For reportable cases diagnosed in 2001 or nual and submitted with these original ICD-C2001, data are to be coded using the ICD-O-2 codes to ICD-O-3 codes. Histologic Type ICD-O-3 Behavior Code ICD-O-3 6: Submit either the SEER or COC field; for ras available. Date of Initial Rx—SEER Date of Initial Rx Flag	Y eportable cases	reportable ca	ses diagnosed , convert these
NOTE 5 O-3 man before 2 ICD-O-2 522 H 523 H NOTE 6 submit 6 1260 H 1261 H 1270 H	5: For reportable cases diagnosed in 2001 or nual and submitted with these original ICD-C2001, data are to be coded using the ICD-O-2 codes to ICD-O-3 codes. Histologic Type ICD-O-3 Behavior Code ICD-O-3 6: Submit either the SEER or COC field; for ras available. Date of Initial Rx—SEER Date of Initial Rx Flag Date of 1st Crs Rx—COC	Y eportable cases Y Y Y Y Y Y Y Y Y Y Y Y	reportable ca	ses diagnosed , convert these
NOTE 5 O-3 man before 2 ICD-O-2 522 H 523 H NOTE 6 submit 6 1260 H 1261 H 1270 H	5: For reportable cases diagnosed in 2001 or nual and submitted with these original ICD-C2001, data are to be coded using the ICD-O-2 codes to ICD-O-3 codes. Histologic Type ICD-O-3 Behavior Code ICD-O-3 6: Submit either the SEER or COC field; for ras available. Date of Initial Rx—SEER Date of Initial Rx Flag	Y eportable cases	reportable ca	ses diagnosed , convert these
NOTE 3 O-3 man before 2 ICD-O-2 522	5: For reportable cases diagnosed in 2001 or nual and submitted with these original ICD-C2001, data are to be coded using the ICD-O-2 codes to ICD-O-3 codes. Histologic Type ICD-O-3 Behavior Code ICD-O-3 6: Submit either the SEER or COC field; for ras available. Date of Initial Rx—SEER Date of Initial Rx Flag Date of 1st Crs Rx—COC	Y Y Peportable cases Y Y Y Y reportable cases Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	reportable ca	ses diagnosed , convert these
NOTE 3 O-3 man before 2 ICD-O-2 522 H 523 H NOTE 6 submit a 1260 H 1270 H 1271 H NOTE 7 availably years an all treat	5: For reportable cases diagnosed in 2001 or nual and submitted with these original ICD-C2001, data are to be coded using the ICD-O-2 codes to ICD-O-3 codes. Histologic Type ICD-O-3 Behavior Code ICD-O-3 6: Submit either the SEER or COC field; for ras available. Date of Initial Rx—SEER Date of Ist Crs Rx—COC Date of 1st Crs Rx Flag 7: For reportable cases diagnosed prior to 20 le. Report the following treatment information and primary sites indicated below. CCRs should	Y Y Peportable cases Y Y Y Y reportable cases Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	reportable ca o submission diagnosed pr	rior to 2006, Primary

1292	Rx Summ—Scope Reg LN Sur	Y	2001-2017	All sites
1294	Rx Summ—Surg Oth Reg/Dis	Y	2001-2017	All sites
1340	Reason for No Surgery	Y	2001-2017	All sites
1360	RX Summ—Radiation	Y	2006-2011	All sites
		Y	2012-2014	Breast,
				Colon,
		Y	2015-2017	Rectum
1200	DV C			All sites
1380	RX Summ—Surg/Rad Seq	Y	2006-2011	All sites
		Y	2012-2014	Breast, Colon,
				Rectum
		Y	2015-2017	All sites
1390	Rx Summ—Chemo	Y	2006-2011	All sites
		Y	2012-2014	Breast,
				Colon,
				Rectum
		Y	2015-2017	All sites
1400	Rx Summ—Hormone	Y	2006-2011	All sites
		Y	2012-2014	Breast,
				Colon,
		***	2015 2015	Rectum
		Y	2015-2017	All sites
1410	Rx Summ—BRM	Y	2006-2011	All sites
		Y	2012-2014	Breast,
				Colon,
		Y	2015-2017	Rectum All sites
1420	Dry Cryman Oth on			
1420	Rx Summ—Other	Y	2006-2011	All sites
		Y	2012-2014	Breast, Colon,
				Rectum
		Y	2015-2017	All sites
1570	Rad—Regional Rx Modality	Y	2006-2011	All sites
	Ç	Y	2012-2014	Breast,
				Colon,
				Rectum
		Y	2015-2017	All sites
1639	RX Summ—Systemic/Sur Seq	Y	2006-2011	All sites
		Y	2012-2014	Breast,
				Colon,

			T	<u> </u>
				Rectum
		Y	2015-2017	All sites
3250	RX SummTransplant/Endocr	Y	2006-2011	All sites
		Y	2012-2014	Breast,
				Colon,
			2015 2015	Rectum
		Y	2015-2017	All sites
	E 8: For reportable cases diagnosed prior to 2			
	1977. For reportable cases diagnosed in 200. ary Staging Manual 2000. Report Summary St			~
2004-		age 2000 as ava	nabie jor aiaş	gnosis years
759	SEER Summary Stage 2000	Y		
760	SEER Summary Stage 1977	Y		
	E 9: For reportable cases diagnosed 2008-201		<u> </u>	eauired For
	diagnosed prior to 2008, submit as available.			
	omitted for reportable cases diagnosed 2016 a		<i>y</i>	1
756	Tumor Size Summary	Y		
2800	CS Tumor Size	Y		
	E 10: Required to be submitted for reportable of		<u> </u> 2010-2015 S	uhmit as
	able for reportable cases diagnosed 2004-2009	· ·	2010-2013. 5	aomii as
2810	CS Extension	Y	T	
2820	CS Tumor Size/Ext Eval	Y		
		Y		
2830	CS Lymph Nodes			
2850	CS Mets at DX	Y		
2863	CS Site-Specific Factor 9 for C50 (breast)	Y		
	E 11: Required to be submitted for reportable of	cases diagnosed	2011-2015. S	ubmit as
avana	ble for cases diagnosed 2004-2010.			
			T	T
2840	CS Lymph Nodes Eval	Y		
2860	CS Mets Eval	Y		
	E 12: Required to be submitted for reportable			r. Submit
SSF 1	and SSF 2 as available for reportable cases d	iagnosed 2004-2	2009.	
2880	CS Site-Specific Factor 1 for:			
	C50 (breast)	Y		
2890	CS Site-Specific Factor 2 for:			
	C50 (breast)	Y		
2862	CS Site-Specific Factor 8			
	C50 (breast)	Y		
2865	CS Site-Specific Factor 11 [2865] for C50	Y		
		ì	1	i

20.17		T	T	
2867	CS Site-Specific Factor 13 [2867] for C50	Y		
2060	(breast)	37		
2868	CS Site-Specific Factor 14 [2868] for C50 (breast)	Y		
NOTI	[(bleast) E 13: Required to be submitted for reportable o	 rasas diagnosad	2004-2015	
2880	-	uses aiagnosea	2004-2013.	T
2000	CS Site-Specific Factor 1 for:	X7		
	C34 (lung)	Y		
	C384 (pleura)	Y		
	C692 with 9510/3, 9511/3, 9512/3, 9513/3	Y		
2000	(retinoblastoma)	X 7		
2890	CS Site-Specific Factor 2 for C54, C55	Y		
2900	(corpus uteri) CS Site-Specific Factor 3 for C619	Y		
2900	(prostate)	1		
3020	Derived SS2000	Y		
	E 14: Submit as available for reportable cases		-2017.	_L
3000	Derived AJCC-6 Stage Grp	As available		
3430	Derived AJCC-7 Stage Grp	As available		
9960	Height	As available		
9961		As available		
9965	Tobacco Use Cigarettes	As available		
9966	Tobacco Use Smoke	As available		
9967	Tobacco Use Smokeless	As available		
9968	Tobacco Use NOS	As available		
NOTI	E 15: For reportable cases diagnosed 2006 and	later, Follow-U	p Source Ce	ntral [1791] is
	red. For cases diagnosed prior to 2006, Follow			
1790	Follow-Up Source	As available		
1791	Follow-Up Source Central	Y		
	E 16: For linkage results of reportable breast, of		orectal cance	r cases
	et the EDP MDE Link Variable and EDP MDE			
_	priate NAACCR Record layout version as speci		v	
	fications.	V		
9980	EDP MDE Link	Y		
9981	EDP MDE Link Date	Y		
NOTI	E 17: Over-Ride CS 20 [3769] is designated as	a flag to identif	y cases direct	ly coded using
	Summary Stage 2000 [759]. Use code 1 to indi			•
	ly coded, rather than derived using the Collabo	rative Staging I	Data Collectio	on System.
Other	wise, "Over-Ride CS 20" must be blank.			
2760	Over ride CS 20	V		
3769	Over-ride CS 20	Y		
3020	Derived SS2000	Y		

NOTI	E 18: For reportable COLORECTAL CANCER	CASES ONLY;	submit Regional Nodes
	ve [820] and Regional Nodes Examined [830]		
	iagnosis year 2012 and later, Regional Nodes I	Positive [820] a	nd Regional Nodes
Exam	ined [830] are required for all sites .		
820	Regional Nodes Positive	Y	
830	Regional Nodes Examined	Y	
NOTE	E 19: For reportable cases diagnosed 2012 for	rward, submit as	s available.
501	Casefinding Source	As available	
NOTI	E 20: Report the following data items in the col	lumns for the ap	propriate NAACCR Record
layou	t version as specified in the 2017 NPCR-CSS S	ubmission Speci	fications.
9960	Height	As available	
9961	Weight	As available	
9965	Tobacco Use Cigarettes	As available	
9966	Tobacco Use Smoke	As available	
9967	Tobacco Use Smokeless	As available	
9968	Tobacco Use NOS	As available	
NOTI	E 21: Required to be submitted for reportable of	ases diagnosed	2014 and forward. Submit
as ava	uilable for reportable cases diagnosed prior to	2014.	
145	Census Tract Poverty Indicator	Y	
	E 22: Required to be submitted for reportable of	~	2011 and forward. Submit
as ava	uilable for reportable cases diagnosed 2004-20	010.	
2880	CS Site-Specific Factor 1 for:		
	C70.0-C70.9, C71.0-C71.9, C72.0-C72.9,	Y	
	C75.1-C75.3 (brain, CNS)		
	E 23: Required to be submitted for reportable of	cases diagnosed	2011 and forward. Submit
as ava	uilable for reportable cases diagnosed 2010.		
2869	CS Site-Specific Factor 15 for breast (C50)	Y	
NOTI	E 24: Required to be submitted for reportable	cases diagnosed	l 2010 and forward.
2879	CS Site-Specific Factor 25	Y	
	E 25: Required to be submitted for reportable c	rases diagnosed	2016 and forward. Submit
	uilable for reportable cases diagnosed 2015.	Ö	J
880	TNM Path T	Y	
890	TNM Path N	Y	
900	TNM Path M	Y	
910	TNM Path Stage Group	Y	
920	TNM Path Descriptor	Y	
940	TNM Clin T	Y	
950	TNM Clin N	Y	
150	11111 CIII 11	1	

1995–2017 Diagnosis Years

960	TNM Clin M	Y	
970	TNM Clin Stage Group	Y	
980	TNM Clin Descriptor	Y	
1060	TNM Edition	Y	
3650	NPCR Derived Clin Stage Group	Y	
3655	NPCR Derived Path Stage Group	Y	

NOTE 26: Submit Survival Months Active Follow-up only if active follow-up is conducted on all cases. Submit Survival Months Presumed Alive only if linkage with the NDI is conducted and match results included in the submission file.

1784	Survival Months Active Follow-up	As available		
1787	Survival Months Presumed Alive	As available		
NOTE 27: Report the results derived using NAACCR*Prep in columns 1370-1372.				
9990	IHS Purchased/Referred Care Delivery Area	Y		
	(PRCDA)			
9991	Urban Indian Health Organization (UIHO)	Y		
9992	Urban Indian Health Organization (UIHO)	Y		
	Facility			

NOTE 28: Report the results for County at DX Analysis as derived using NAACCR Prep in columns 2355-2357.