

Collaborative Stage (CS) 2014 Updates

A taskforce has been established to develop appropriate implementation plans and processes for the transition from CS to AJCC Staging in 2016.

This group brings together the four data collection agencies/organizations (Statistics Canada/Canadian Council of Cancer Registries, CDC/NPCR, NCI/SEER and CoC), the agency responsible for staging rules (AJCC), the cancer surveillance umbrella organization (NAACCR) and the organization representing cancer registry professionals (NCRA). The CS Transition Group provides a collaborative opportunity to identify the issues involved in the transition and to share the tasks involved in developing best practices for both the overall surveillance community and the individual agencies/organizations in addressing this change.

A few of the key points that I have identified are listed below with the date of CS Transition Newsletter. We will continue to update this as new information becomes available.

3/18/2014 - Q/A section

What staging information will be collected beginning in 2016?

CDC/NPCR, NCI/SEER and COC – directly assigned, T, N, M clinical and pathological and stage group clinical and pathological; specific SSFs; including: selected specific biomarkers and prognostic factors.

NPCR: directly coded Summary Stage

Additional data items will be required including but not limited to: tumor size, lymph nodes examined and positive.

Will SSFs continue to be collected?

CDC/NPCR, NCI/SEER and COC: Yes. Biomarkers and genetic tests are fundamental to cancer diagnosis and staging and will increase in future. Biomarkers and genetic tests will become increasingly important in characterizing cancers and for prognosis and predicting response to therapy. In addition, some SSFs will still be necessary for assigning directly assigned AJCC stage and are therefore essential.

Will SSFs continue to be collected? - (continued)

As you know there are a large number of SSFs in CS v2 and it is not expected that all of those will be collected. A formal review of SSFs will take place over time and the number of biomarkers and prognostic factors refined to those that are collectable and meaningful at a population level or essential to understanding and characterizing the cancer.

Will CTRs directly assign TNM and stage group if they are not in the record?

CDC/NPCR, NCI/SEER and COC: Yes, when the data to do so are available in the record. We recognize that this may be a new skill set for some registrars and are working across the cancer surveillance partners to develop and implement training tools to assure that registrars can attain the necessary skills.

Additional Q/A can be found at the end of this newsletter announcement and can be found on CS homepage at: <https://cancerstaging.org/cstage/Pages/default.aspx>

Many of the responses are specific to the facilities that report to SEER/CDC/NPCR.

Since CoC has consistently collected data items such as Tumor Size, Lymph Nodes Examined and Lymph Nodes Removed, Margin status in addition to other data fields that contribute to staging the transition and training may not be as extensive as needed for non-CoC facilities that do not currently require these data items.
