

**QUIZ 1**  
**FOR 2010 UPDATES: STANDARDS VOLUME II, VERSION 12**

Mark the following statements as True or False.

- \_\_\_\_\_ 1. The expansion of codes for the data item, class of case, allows for tracking of facility use by cancer patients.
- \_\_\_\_\_ 2. Existing class of case codes cannot be converted to 2010 class of case codes.
- \_\_\_\_\_ 3. Code 5 can only be assigned to the laterality data item to describe midline tumors of paired organs diagnosed January 1, 2010 and after.
- \_\_\_\_\_ 4. Code 5 is assigned to the data item, laterality, if stated that the patient had a melanoma of the skin in the middle of the back.
- \_\_\_\_\_ 5. At a minimum, all central registry race variables assigned code 09 (Asian Indian, Pakistani) will be recoded to 15 (Asian Indian or Pakistani, NOS).
- \_\_\_\_\_ 6. The expansion of text fields for primary site and histology to 100 characters addresses the concern of information being cut off during data transmission.
- \_\_\_\_\_ 7. Retired data items have been deleted from the Standards Volume II Version 12 data transmission layout.
- \_\_\_\_\_ 8. The new data item, RX Hosp--Surg App 2010, can be derived from data collected from the old field, RX Summ--Surgical Approach.
- \_\_\_\_\_ 9. The new data item, RX Summ--Treatment Status, provides a place for the registrar to collect active surveillance (watchful waiting).
- \_\_\_\_\_ 10. MX is not a valid classification in the AJCC Cancer Staging Manual 7th Edition.
- \_\_\_\_\_ 11. The AJCC Cancer Staging Manual 7<sup>th</sup> Edition chapter on colon is used to assign the T, N, M, and stage group classifications for primary gastrointestinal tumor (GIST) of the colon.
- \_\_\_\_\_ 12. Substantive changes have been made to the Multiple Primary and Histology (MP/H) Coding Rules.
- \_\_\_\_\_ 13. Some hematopoietic diseases assigned behavior code /1 in ICD-O-3 will be assigned behavior code /3 and will be reportable for cases diagnosed January 1, 2010 and after.
- \_\_\_\_\_ 14. A reportable myeloproliferative disease that transforms to leukemia January 1, 2010 or after is a new primary.
- \_\_\_\_\_ 15. The date flag data items allow for interoperability of date data items.

**Quiz 2**  
**QUIZ FOR “WHAT’S NEW IN VERSION 2” PRESENTATION**

Mark the following statements as True or False.

- \_\_\_\_\_ 1. CSv2 has added 19 more site-specific factors for a total of 25, but not all of them are used.
- \_\_\_\_\_ 2. All of the changes and updates in CSv2 are based on the 7th Edition of the AJCC Cancer Staging Manual.
- \_\_\_\_\_ 3. There will be separate coding schemas for mucosal melanomas of head and neck sites.
- \_\_\_\_\_ 4. Registrars will be able to code the presence or absence of specific types of distant metastases, such as mets to bone, brain, liver and lung.
- \_\_\_\_\_ 5. Data fields to code extent of disease both pre- and post-neoadjuvant therapy will be added in 2010.
- \_\_\_\_\_ 6. CSv2 includes schemas for sites that may not be reportable to population-based registries.
- \_\_\_\_\_ 7. Among the new site-specific factors, some are collected for special interest or future research.
- \_\_\_\_\_ 8. If information regarding a site-specific factor is not in the pathology report or medical record, the Registrar is not required to go looking for it.
- \_\_\_\_\_ 9. Late cases (diagnosed prior to 2010) will continue to be coded in CS Version 1.
- \_\_\_\_\_ 10. Every case will map to TNM 6th edition and TNM 7th edition.
- \_\_\_\_\_ 11. The presence of human papillomavirus (HPV) is a known risk factor for cancers of mucosal surfaces like cervix, anus, and oral cavity.
- \_\_\_\_\_ 12. Each standards setter will publish a list of the data fields it requires to be collected and submitted.
- \_\_\_\_\_ 13. CSv2 is designed to improve the clinical relevance of the cancer registry to physicians.
- \_\_\_\_\_ 14. HER-2 information will be one of the site-specific factors for breast.
- \_\_\_\_\_ 15. CSv2 must be used for cases diagnosed January 1, 2010 and after.