

**Division of Cancer Prevention and Control** 

Volume 38 – January, 2008

# **2007 Jean Byers Memorial Award** for Excellence in Cancer Registration



FCDS proudly awards the 2007 Jean Byers Award for Excellence in Cancer Registration to one-hundred thirty-three (133) Florida hospitals in accordance with national standards for evaluating timeliness and completeness. All deadlines with respect to the 2005 cancer case reporting were met in order for a reporting facility (excluding Freestanding Ambulatory Patient Care Centers and Pathology Labs) to be the recipient of the Jean Byers Award for Excellence in Cancer The Florida Department of Health and the Florida Cancer Data System want to thank each and every Cancer Registrar at these hospitals for their dedication and for a job well done.

### Following is a listing of Florida hospitals receiving the 2007 Jean Byers Award for Excellence in Cancer Registration:

1100 Shands University of Florida 1676 Plantation General Hospital Shands Alachua General Hospital 1681 Northwest Medical Center 1105 North Florida Regional Medical Center Florida Medical Center 1686 1170 University Medical Center Shands Starke 1687 1405 Cape Canaveral Hospital 1688 Memorial Hospital West 1505 Fawcett Memorial Hospital Parrish Medical Center 1506 1800 Peace River Regional Medical Center Palm Bay Community Hospital 1836 1508 1546 Holmes Regional Medical Center Wuesthoff Medical Center Rockledge 1547 Wuesthoff Medical Center Melbourne 1548 Hollywood Medical Center 1602 North Ridge Medical Center 1604

Memorial Regional Cancer Center

Imperial Point Medical Center

Memorial Hospital Pembroke

Coral Springs Medical Center

Cleveland Clinic Hospital

Holy Cross Hospital

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1846	Charlotte Regional Medical Center	5205	Munroe Regional Medical Center
1900	Seven Rívers Regional Medical Center	5346	Martin Memorial Medical Center
2000	Orange Park Medical Center	5390	Martin Memorial Hospital South
2246	Lake City Medical Center	5505	Baptist Medical Center Nassau
2305	James M Jackson Memorial Hospital	5606	Twin Cities Hospital
2336	Baptist Hospital of Miami	5607	North Okaloosa Medical Center
2338	Mercy Hospital	5670	Fort Walton Beach Med Center
2347	Cedars Medical Center	5705	Raulerson Hospital
2348	Doctors Hospital	5805	Florida Hospital Apopka
2353	North Shore Medical Center	5836	Florida Hospital Cancer Inst South
2359	Miami Childrens Hospital	5849	Florida Hospital East Orlando
2376	South Miami Hospital	5850	Winter Park Memorial Hospital
2378	Coral Gables Hospital	5970	Florida Hospital Kissimmee
2379	Larkin Community Hospital	6001	Columbia Hospital
2383	Palmetto General Hospital	6003	Delray Medical Center
2405	Desoto Memorial Hospital	6005	Bethesda Memorial Hospital
2605	Baptist Medical Center Beaches	6007	Glades General Hospítal
2606	Shands Jacksonville Medical Center	6036	St Marys Medical Center
2636	Baptist Regional Cancer Center-Jax	6045	West Boca Medical Center
2638	St Vincents Medical Center	6047	Good Samaritan Medical Center
2648	Memorial Hospital Jacksonville	6048	JFK Medical Center
2672	Wolfson Childrens Hospital NCC	6070	Palm Beach Gardens Medical Center
2700	West Florida Hospital	6105	Florida Hospital Zephyrhills
2736	Baptist Hospital of Pensacola	6171	Pasco Regional Medical` Hospital
2738	Sacred Heart Hospital	6172	Regional Med Center Bayonet Point
3505	Florida Hospital Wauchula	6201	Northside Hosp Heart Institute
3705	Brooksville Regional Hospital	6203	Edward White Hospital
3715	Spring Hill Regional Hospital	6205	Helen Ellis Memorial Hospital
3805	Highlands Regional Medical Center	6206	Largo Medical Center
3890	Florida Hospital Lake Placid	6246	All Childrens Hospital
3903	Brandon Regional Hospital	6248	Bayfront Medical Center
3906	Tampa General Hospital	6250	Morton Plant Hospital
3907	University Community Hospital-Tampa	6251	St Anthony Hospital
3937	St Joseph Hospital	6252	Sun Coast Hospital
3947	Kindred Hospital Central Tampa	6274	St Petersburg General Hospital
3973	University Community of Carrollwood	6278	Mease Countryside Hospital
3977	Memorial Hospital of Tampa	6305	Lakeland Regional Medical Center
3978	Town and Country Hospital	6347	Heart of Florida Hospital
3988	South Bay Hospital	6349	Winter Haven Hospital
4170	Sebastian River Medical Center	6446	Putnam Community Medical Center
4206	Jackson Hospítal	6570	Flagler Hospítal
4516	Leesburg Regional Medical Center	6600	Columbia Lawnwood Regional Med Center
4546	South Lake Hospital	6707	Santa Rosa Medical Center
4547	Florida Hospital Waterman	6805	Sarasota Memorial Hospital
4590	Leesburg Regional Medical Center North	6810	Englewood Community Hospital
4601	Cape Coral Hospital	6870	Doctors Hospital
4605	Lee Memorial Health System	6936	Florida Hospital Altamonte
4645	Gulf Coast Hospital	7005	Villages Regional Hospital
4647	Lehigh Regional Medical Center	7105	Shands Live Oak
4690	Lee Memorial Hospital Healthpark	7205	Doctors Memorial Hospital
4705	Tallahassee Memorial Healthcare	7405	Bert Fish Medical Center
5105	Manatee Memorial Hospital	7406	Halifax Hospital Medical Center
5200	Ocala Regional Medical Center	7407	Florida Hospital Deland
5202	West Marion Community Hospital	7446	Florida Hospital Fish Memorial
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#### NPCR CNS CODING GUIDELINES



NPCR conducted a quality control review of all CNS data for 2004 (both malignant and non-malignant) with the first non-malignant Central Nervous System cases received in the 2007 call for data. The review identified the need for additional training regarding the coding of primary site and histology for both malignant and non-malignant CNS tumors. As a result of the review, NPCR developed the following CNS coding guidelines.

#### NPCR CNS CODING GUIDELINES—2007

- Always use the behavior code listed in the ICD-O-3 unless otherwise directed by a pathologist.
- Meningiomas are always coded to meninges (C70.-) unless specifically directed otherwise by a pathologist.
  - Intraparenchymal meningiomas are exceedingly rare.
  - Meningioma can also occur as a tumor of the **choroid plexus** in rare cases.
- **Solitary fibrous tumor** is a rare, usually <u>dural based</u> lesion of cranium or spinal canal; occasionally occurring in the lateral ventricle or spinal cord. They should be coded to <u>meninges (70.-)</u> unless specifically directed otherwise by a pathologist.

#### • Nerve Sheath Tumors

- Malignant: all tumors are reportable. Always code to nerve of origin (C47.- or (C72.-).
- Nonmalignant: reportable <u>for intracranial segment of cranial nerves only</u>. Always code to the nerve of origin, (C72.2, .3, .4, & .5)
- Neurofibroma, neurilemmoma and neuroma are always peripheral nerve and thus can be either cranial nerve or nerve root.
- **Pacinian tumor** (M9507/0) is a <u>non-malignant</u> peripheral nerve tumor. The only reportable pacinian tumors are those arising intracranially.
- **Germ cell tumors:** Intracranially, these tumors are usually located in the **pineal gland (C75.3)** and suprasellar region (C71.9 Brain, NOS), and posterior 3<sup>rd</sup> ventricle (C71.5). Code to site of origin.
  - A **teratoma** (M908-) is always a germ cell tumor. It may be malignant or non-malignant. The only <u>nonmalignant</u> teratomas that are reportable are those occurring intracranially.

#### Vascular tumors

- Malignant: all tumors are reportable
- Nonmalignant: reportable for blood vessels of brain and spinal cord only
  - Code to CNS site of occurrence, not blood vessel.

Chordomas (9370-9372) are <u>malignant</u> tumors so ALL chordomas are reportable. These tumors usually start in the bone at the back of the skull (C41.0 bones of skull) or at the lower end of the spinal column (C41.2 vertebral column). 35% occur at the base of the skull. Intracranially, the tumors occur at the clivus (bones of skull: C41.0), and occasionally in the parasellar and sellar area (C71.9 Brain, NOS). All chordomas should be **coded to the bone of origin** unless otherwise directed by a pathologist.

**Chondrosarcoma** is a <u>malignant</u> tumor of cartilage cells so ALL chondrosarcomas are reportable. When these tumors develop in the skull base, they usually arises in the parasellar area, cerebellopontine angle, or paranasal sinuses. These tumors may also arise in the clivus.

Clivus chordomas and chondrosarcomas may extend into the sella tursica, the clinoids, the nasopharynx, the posterior fossa, the foramen magnum, and may effect C1-2, the cranio-cervical junction. These tumors rarely may occur in the segmental spine arising from the vertebrae and commonly occur in the sacrum. These tumors should be coded to the bone of origin such as skull base/clivus (bones of skull: C41.0), spine: C3-L5 (C41.2), or sacrum (C41.4).

Chondromas (M9220/0 & M9221/0) are rare, slowly growing <u>nonmalignant</u> tumors which are only reportable if the primary tumor is in an intracranial site. In the cranial region, this includes the bones of the skull base and paranasal sinuses. These tumors should be coded to bones of skull (C41.0). Reportablility of these tumors is an area of "Unresolved Issues". Expert neurosurgeons and neuropathologists believe that they should be reported and included in analysis of CNS tumors.

**Paragangliomas** are rare <u>nonmalignant</u> tumors. The only reportable paragangliomas are those arising intracranially. Paraganglia are located in several areas along the cervical nerves. (Continued on page 4)

(Continued from page 3: NPCR CNS Coding Guidelines—2007)

Carotid body tumors or chemodectoma comprise the majority of head and neck paragangliomas. These are coded to carotid body (C75.4).

In the ICD-O, aortic body and other praganglia are in the same section as paragangliomas and are coded C75.5.

**Glomus** tumors arise from paraganglionic tissue in glomus bodies. These tumors are also coded to Aortic body and other paraganglia (**C75.5**).

Reportability of non-malignant intracranial paragangilomas is another area of "Unresolved Issues". Again, excpert neurosurgeons and neuropathologists believe that they should be collected and reported with CNS tumors.

#### HISTOLOGIES THAT ARE SITE-SPECIFIC

- Choroid plexus tumors
  - Located in the ventricular system
    - Code to ventricle (C71.5) unless otherwise directed by a pathologist.
- Pituitary adenoma (M8272/0) & Pituitary carcinoma (M8272/3)
  - Always code to pituitary (C75.1) unless otherwise directed by a pathologist.
- Craniopharyngiomas (M9350/1)
  - All craniopharyngiomas are non-malignant
  - Very few of these tumors actually arise in the craniopharyngeal duct. Most are either suprasellar (C71.9 Brain, NOS), or in the 3<sup>rd</sup> ventricle (C71.5).
- **Pineal Parenchymal tumors**: Always code to <u>Pineal gland</u> (C75.3) unless otherwise directed by a pathologist. This includes:
  - Pineocytomas (M9361/1)

9520/3

- Pineoblastomas (M9362/3)
- Mixed pineocytoma-pineoblastoma (M9362/3)

OLFACTORY NEUROGENIC TUMOR

• Pineal astrocytomas (M9400/3)

A **dermoid** (M9084) is usually a mal-developmental tumor that can be either malignant or non-malignant. The only <u>nonmalignant</u> nant dermoids that are reportable are those occurring intracranially.

A **desmoid tumor** is a <u>nonmalignant</u> fibrous tumor that <u>does not occur intracranially</u>, but is found on the neck. These tumors are not reportable.

A **myxoma** (M 9562) never occurs intracranially. However, something very similar to it does occur and is usually a <u>scarred over meningioma</u>.

THE FOLLOWING HISTOLOGIES SHOULD BE EXCLUDED FROM ALL BRAIN AND CNS (C70.0-72.9 AND C75.1-75.3) SITES:

8041/3	SMALL CELL CARCINOMA
8070/3	SQUAMOUS CELL CARCINOMA, NOS
8130/3	PAPILLARY TRANSITIONAL CELL CARCINOMA
8360	MULTIPLE ENDOCRINE ADENOMAS
8370	ADRENAL CORTICAL ADENOMA (these are sometimes coded to C75.1 (pituitary) site, but should be coded to
	C74.0 Adrenal)
8410	SEBACEOUS ADENOMA
8700	PHEOCHROMOCYTOMA (these sometimes are coded to C71.x and C72.x sites, but should be coded to C74.1
	Medulla of adrenal gland)
8726	MAGNOCELLULAR NEVUS
8832/0, /3	DEMATOFIBROMA/SARCOMA
8891	EPITHELIAL LEIOMYOMA
8894	ANGIOMYOMA/MYOSARCOMA
8940/0	PLEOMORPHIC ADENOMA
9000	BRENNER TUMOR
9050	MESOTHELIOMA
9160	ANGIOFIBROMA, NOS

## CALENDAR OF EVENTS

## HOSPITAL REGISTRY WEBINAR SERIES JANUARY —SEPTEMBER 2008 ♦ 9:00AM—1:00PM

#### Dates

January 10, 2008: Hospital Cancer registry Operations

**February 14, 2008:** Cancer Treatment and How to Code It: Surgery, Radiation, Systemic and Other

March 6, 2008: Abstracting Thyroid Cancer Incidence and Treatment Data

May 8, 2008: Data Quality and Data Use

July 10, 2008: Abstracting Upper Gastrointestinal Tract Cancer Incidence and Treatment Data

September 11, 2008: Abstracting Other Digestive System Cancer Incidence and Treatment Data

#### **Locations**

Boca Raton Community Hospital (Boca Raton, FL) Moffitt Cancer Center (Tampa, FL) Shands University of Florida (Gainesville, FL)

#### Contact

Meg Herna at 305-243-2625 or mherna@med.miami.edu

#### **To Register**

http://fcds.med.miami.edu

## NAACCR CTR EXAM READINESS WEBINAR

#### **Dates**

January - March 2008

#### Locations

University of Miami Miller School of Medicine (Miami, FL) Memorial Hospital Jacksonville (Jacksonville, FL) Moffitt Cancer Center (Tampa, FL)

#### **Contact**

Meg Herna at 305-243-2625 or mherna@med.miami.edu

#### To Register

http://fcds.med.miami.edu

## CTR Exam Review & Basic Skills Workshop

#### <u>Date</u>

January 31–February 1, 2008

#### Location

University of Miami Miller School of Medicine (Miami, FL)

#### **Contact**

Mary O'Leary, FCRA Education Chair at 305-992-6546 or learymo1@bellsouth.net



## Newly Certified Tumor Registrars in the state of Florida

Debra Evans
Johanna Haneline
Peter Pierce
April Rease
Michelle Touiz
Susan Vergauwen
Vonetta Williams
Sharon Wilson

### COMPLETENESS REPORT—2007 CASE REPORTING

Month	Complete	Expected
July 2007	1%	8%
August 2007	6%	17%
September 2007	12%	25%
October 2007	18%	33%
November 2007	23%	41%

#### <u>UMSylvester</u>

#### Fig. 5 Florida Concer Data System

HEALTH



A joint project of the Sylvester Comprehensive Cancer Center

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The FCRA/FCDS Task Force is actively working on many issues that all registrars are facing. If you have any questions, issues or suggestions that you would like the task

force to review, please email them to <code>taskforce@fcra.org</code>.

The task force meets the first Thursday of every month. We will respond back to your inquiries as quickly as possible.

Florida Cancer Data System

A Joint Project of the Sylvester Comprehensive Cancer Center and the Florida Department of Healti

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