



Commission
on Cancer

Flash



A Monthly News Update from the Commission on Cancer of the American College of Surgeons

CoC Flash - November/December 2009

- **2009 Standards Page Added to the Web site**
- **CS and AJCC Staging – Determining Accuracy**
- **FORDS Revised for 2009 Sections Available**
- **Do You Know Where Your Data Are? Taking the Final Steps for the NCDB Call for Data**
- **NEW CLP Focus Area**
- **Cancer Liaison Physician Facts**
- **2009 Web conference Schedule for The Role of the Cancer Liaison Physician**
- **Web Conference enhancements coming in 2009**
- **Welcome New State Chair**
- **Who am I?**
- **CoC Staff Departure: Kate Phair**
- **CoC Staff Departure: Tracy Rausch**
- **CURE Magazine/ Reminder to Order**
- **Spotlight on CoC Member Organization: American College of Radiology**
- **A Sneak Peek into the AJCC 7th Edition**
- **NAPBC Exhibits**
- **National Institutes of Health (NIH) Cancer Report**
- **NCI Symposium Addresses Impact of Biospecimens on Cancer Research**
- **Third International Symposium on Cancer Metastasis and the Lymphovascular System: Basis for Rational Therapy**
- **NAACCR CTR Exam Readiness Webinar Series Registration is Open**
- **NAACCR Continues Registration for the 2008-2009 Webinar Series**
- **Survivorship Modules Available for Health Care Education**
- **CoC Flash Changes coming in 2009**

2009 Standards Page Added to the Web site

A new Web page has been added to the ACoS Web site that provides easy access to all information describing the 2009 changes to the Cancer Program Standards. The page includes links to the July 2008 special issue of the *CoC Flash*, which provided an overview of the changes and the updated August 1, 2008, letter addressed to all approved programs that further described the changes. The page also includes ready access to the replacement pages for each of the standards that have changed and FAQ documents addressing the new requirements for standards 4.3 and 4.6.

Watch for the addition of the synoptic reporting definition and best practice examples which will be posted after the first of the year. Other information will be posted as it becomes available and advertised in future issues of the *CoC Flash*.

The link to this page can be found at <http://www.facs.org/cancer/coc/programresources.html>

CS and AJCC Staging – Determining Accuracy

Standard 2.10 set forth in *Cancer Program Standards 2004, Revised Edition*, has been revised for 2009 to require physician review of Collaborative Staging (CS) derived stage for assessment of accuracy. When physicians are conducting this review, it is important to keep in mind the variances in staging. The physician assigned American Joint Committee on Cancer (AJCC) clinical stage, pathologic stage, or y pathologic stage will not always match the CS derived stage. The compatibility of these stages depends on the first course of treatment.

The physician clinical stage should be utilized to determine the treatment plan for the patient. Clinical stage will closely match the CS derived stage if the patient does not have surgical treatment. The physician pathologic stage usually matches the CS derived stage when the patient has a surgical resection. For patients receiving neoadjuvant therapy, the CS stage is based on the more extensive or worst categories. If the cancer responds then CS closely matches the AJCC clinical stage. If the cancer does not respond then CS closely matches the AJCC y pathologic stage.

An example of the physician's clinical stage for a small breast primary with negative sentinel nodes would be T1b N0 M0, Stage I. After surgical resection, positive nodes were identified on permanent section pathology, making the CS derived stage pT1 pN1 cM0, Stage IIA. These N categories and stage groups do not match due to the additional information from the lymph node pathologic findings.

In summary, it is important to understand the information being coded in CS and the definition of the AJCC staging basis documented by the physician. The CS derived stage can be a mix of clinical and/or pathologic information, and that is shown by the staging basis attached to each of the T, N, and M categories. It is vital that the registrar work with the physician reviewer to correctly interpret the information. Only in those circumstances can a determination be made of the accuracy of the CS derived stage.

The 2009 replacement pages for standard 2.10 are available at http://www.facs.org/cancer/coc/programstandards.html#_2009

FORDS Revised for 2009 Sections Available

Modifications to the ***Facility Oncology Registry Data Standards (FORDS)*** for 2009 include the Commission on Cancer rule changes for staging implemented in 2008, rule changes for coding *in utero* diagnosis and treatment adopted for 2009 implementation by all cancer registry standard setters, and some clarifications to existing rules. No new items or codes for existing items are being introduced in 2009. The following issues are addressed:

- **In utero diagnoses.** Beginning in 2009, the dates of diagnosis and treatment for tumors developed while *in utero* should reflect the dates on which they occur. In the past, these dates were assigned to the date the baby was born.
- **Physician AJCC Staging.** Changes in coding requirements based on the new CoC Approvals rules implemented in 2008 that altered the previous requirements for reporting physician staging have been clarified and incorporated into this volume. The changes were initially posted as separate addenda.
- **Embolization.** Instructions have been added in Sections I and II for coding the various types of embolization used with cancer patients. These instructions incorporate the information circulated by all registry standard setters in December 2007.
- **Codes to use for removal of single lymph nodes for lymphomas.** While the rules have not changed, the instructions for handling these procedures have been clarified. SEER and NPCR rules are now consistent with those in ***FORDS***.
- **Collaborative Stage input items.** Detailed instructions for coding CS input items were removed. Use the most current instructions in the ***Collaborative Stage Coding Manual and Instructions***.
- Numerous other clarifications have been incorporated into this volume. See **Appendix C** for a list of all changes to ***FORDS*** since it was originally published in 2002.

Except for the rule regarding diagnosis and treatment dates for *in utero* care that goes into effect with 2009 diagnoses, ***FORDS Revised for 2009*** can be used immediately. All individual sections are available in pdf form for download from <http://www.facs.org/cancer/coc/fordsmanual.html> A single file incorporating the full updated document will be posted in 2009. An updated ***Registry Plus Online Help*** that will include these revisions is in progress. No hardcopy version of ***FORDS Revised for 2009*** will be printed by CoC, but the downloaded files can be printed if desired.

Do You Know Where Your Data Are? Taking the Final Steps for the NCDB Call for Data

Processing of all on-time NCDB Call for Data submissions is complete. Counting off-cycle submissions and resubmissions, NCDB processed approximately 4.4 million records during the initial submission period.

Now is the time to double-check that your submission was processed the way you expected. If you have not already done so, log into Datalinks and check the Detail in "Submission History" under "History and Edits of Patient Level Data Submission to the NCDB." Verify each of the following:

1. Does the Detail show that you submitted each required year (2007, 2002, 1997, 1992, 1987) since your Reference Date? Is the number of cases what you expect it to be?
2. Are there any edit errors affecting 2007 cases? Three percent of CoC programs have edit errors to correct. The deadline for correcting those to comply with Standard 3.7 is June 1, 2009, but NCDB strongly recommends that you make any needed corrections now.
3. Were any cases rejected? Rejected cases are not added to the NCDB database and, therefore, are technically "not submitted". Please correct and resubmit rejected cases as soon as possible. It is *not* necessary to resubmit cases or files that were rejected because they should not have been submitted, such as Class of Case 3 cases that were submitted inadvertently.
4. Are any cases submitted this fall still "being processed"? If so, please contact NCDB for assistance.

The 2007 FIPS Level II site by stage tables will be available for review in February, based on submissions and resubmissions made through January 15, 2009.

Please direct any questions about the Call for Data to Anna Delev at adelev@facs.org or 312-202-5339.

NEW CLP Focus Area

With the recent changes to CoC standards on staging, the Committee on Cancer Liaison felt it was necessary to involve Cancer Liaison Physicians in ensuring compliance with these revisions.

The committee has added the following focus area to the CLPs' responsibilities:

Ensure the cancer committee develops and implements a process to evaluate physician use of cancer stage and evidence-based national treatment guidelines in treatment planning for cancer patients.

At the October Cancer Liaison Physician meeting, former Committee Chair, Dr. Jon Greif reviewed several steps to help CLPs get started. These steps included the following:

- Assist in developing strategies to ensure that physicians are recording clinical and working stage
- Ensure that physicians are utilizing staging information for the selection of appropriate treatment options.
- Develop a method to compare assigned stage with the appropriate treatment.
- Ensure that one of the annual educational activities focuses on presentations of AJCC or other appropriate staging in clinical practice, site specific prognostic factors, or evidence-based national treatment guidelines.

A document is posted on the CLP General Information page at <http://www.facs.org/cancer/coc/liaison.html> that discusses the CLP Focus Area on staging in more detail.

Additionally, each of the six CLP focus areas has been discussed in depth on a variety of CLP Web Conferences in the past year. All CLP Web Conferences are recorded and available on the Cancer Liaison Program Web page at <http://www.facs.org/cancer/coc/clpwebconferences.html>. Spend time with your CLP to listen to these Web conferences; the ideas shared will greatly benefit your CLP's role.

Cancer Liaison Physician Facts

Cancer Liaison Physicians (CLPs) serve a three-year term and are eligible to serve an unlimited number of terms based on performance and evaluation data collected at the time of survey. The terms of more than 194 CLPs will expire in January 2009, and each cancer committee must determine whether the current CLP is appropriately serving in this role or if another candidate

would better suit the position. Expectations are that CLPs complete at least one activity in each of the six focus areas every year during his/her three-year term. Suggested activities and strategies to accomplish these goals are listed on our Web site at http://www.facs.org/cancer/coc/pdf/focus_areas_0710.pdf

Within the next week, the CoC will send letters to the cancer committee chairs of programs with a CLP whose term is expiring; cancer registrars will be notified as well. The letters will include a reappointment/replacement form. The facility must either reappoint the CLP for another three-year term or recommend a replacement to fill the role.

Important Reminders for Approved Programs:

- Following a new CLP appointment, the facility must update the staff contact information in CoCDatalinks.
- CLPs can be replaced at any point during their three-year term. If a facility's cancer committee would like to replace its CLP, then a CLP Membership Application Form should be completed and faxed or e-mailed to Carolyn Jones at (312)202-5009 or cjones@facs.org. A copy of this application may be found on our Web site at <http://www.facs.org/cancer/coc/liaison.html>

Please note: A facility cannot appoint a new CLP by simply changing contact information within Datalinks; the CoC must receive a signed application.

2009 Web conference Schedule for The Role of the Cancer Liaison Physician

The **"Role of the Cancer Liaison Physician"** web conference is an in-depth overview of what is expected of the CLP. This web conference serves as guide for the new CLP or as a refresher course for the veteran CLP. Facility staff and American Cancer Society representatives are also welcome to participate.

2009 Web conferences:

1. Thursday, February 12, 2009 – 4:00 pm to 5:00 pm CST
Facilitator: Lynn Dyess, MD, FACS, Alabama State Chair
2. Wednesday, April 8, 2009 - 11 :00am to 12:00 pm CST
Facilitator: Terry Sarantou, MD, FACS, North Carolina State Chair
3. Tuesday, June 16, 2009 – 9:00 am to 10:00 am CST
Facilitator: Robert Goulet, MD, FACS, Indiana State Chair
4. Monday, August 10, 2009 – 8:00 am to 9:00 am CST
Facilitator: Ramesh Patwardhan, MD, FACS, Georgia State Chair
5. Thursday, October 22, 2009 – 5:00 pm to 6:00 pm CST
Facilitator: Kirsten Edmiston, MD, FACS, Virginia State Chair
6. Wednesday, December 9, 2009 – 11:00am to 12:00 pm CST
Facilitator: Ujwala Rajgoopal, MD, FACS, California State Chair

Audience Participation Instructions:

Audio Dial-in: 1-877-218-2987; Passcode 9227382#

Go to <http://web.meetme.net/audience>

Enter the Meeting Key: **7 0 5 4 1 6 9 2 0 0 8 0 5 7**

For a complete list of dates and times, visit our Web site at <http://www.facs.org/cancer/coc/clpwebconferences.html>. Questions about any of the Web conferences for CLPs may be directed to Carolyn Jones at (312) 202-5183 or cjones@facs.org.

Web Conference enhancements coming in 2009

Be on the lookout in early 2009 for new Web Conference topics, as well as a new, enhanced registration process. We are listening and have considered your input in the development of topic offerings and your requests for a more streamlined, user friendly registration experience. A special CoC Flash will be sent when the 2009 Web Conference topics become available.

Welcome New State Chair

Please join the CoC in welcoming Teresa Ponn, MD, FACS, Elliot Breast Health Center, Manchester, NH as the newest State Chair to the Cancer Liaison Program.

State Chair contact information is located on the Cancer Liaison Program General Information page at <http://www.facs.org/cancer/coc/liaison.html>

Who am I?

- I surveyed cancer programs for 15 years
- I surveyed 429 cancer programs
- 305 of the programs once
- 81 of the programs twice
- 34 of the programs three times
- 9 of the programs four times
- I have visited 218 different cities as a surveyor
- I have visited 37 different states as a surveyor
- I currently live in Washington State
- I plan to move to Scotland in the near future
- 25% of all our approved cancer programs have been in contact with this surveyor

Ann Carter, MD, PhD, is retiring from the Commission on Cancer as a surveyor and based upon the above statistics and the fantastic feedback we have received from cancer programs, she will be dearly missed. Dr. Carter has touched many of us with her unique style of surveying programs and helping to educate so many of us on various ways to improve quality care close to home. We celebrate the dedication she has given the Commission on Cancer and wish her and her husband a happy and healthy future in their new home abroad. Thank you Dr. Carter!

CoC Staff Departure: Kate Phair

The Commission on Cancer wants to recognize the contributions and accomplishments of Kate Phair, Cancer Liaison Program Administrator, who has been with the CoC for five years. Under Kate's direction, the Cancer Liaison Program has been completely revamped and is flourishing with many new and ongoing initiatives and activities. She has raised the visibility of the state chair network at the state and national levels, and of the cancer liaison physicians in place in each of the CoC-approved cancer programs-- so much so that these physician groups are now recognized as active advocates working on behalf of the CoC.

Kate has elevated the quality of the Facility Information Profile System by developing training guides, presentations, and communications that have enhanced its value to CoC-approved cancer programs. Kate has been an active member and CoC representative to the National Partnership for Comprehensive Cancer Control and state cancer planning efforts, and to the American Cancer Society. She has been instrumental in enhancing and solidifying our relationship with the American Cancer Society at the national, division, and facility levels, most recently completing development and dissemination of a training guide for all ACS Divisions that provides a consistent framework for establishing and maintaining effective CoC and ACS

relationships at the local level.

This is just a sample of the many contributions Kate has made to the CoC, and we want to wish her the best of luck in her future endeavors.

CoC Staff Departure: Tracy Rausch

Tracy Rausch, a valued member of the CoC Staff for over one year, is moving on in her personal and professional endeavors. Her last day at the CoC, as Meetings and Training Assistant, will be Friday, December 12, 2008. We would like to thank Tracy for her contributions to the CoC as we wish her much happiness and success on her future endeavors. Best of luck to you Tracy!

CURE Magazine/ Reminder to Order

CURE: Cancer Updates, Research & Education is a free, award-winning, quarterly magazine that provides information on diagnosis, treatment, and survivorship for cancer patients and their caregivers.

Cancer Program Administrators at CoC-approved facilities received a copy of *CURE* last month and a form that allows the facility to indicate the number of issues needed for future distribution. We ask that you follow up on this information and ensure your patient educator knows about this free, award-winning magazine. If you need an additional order form, go to the Web site at www.curetoday.com. The Web site has added a new feature on the subscription page that makes it very easy to manage bulk orders. If your facility did not receive a copy of *CURE*, please e-mail Darlene Card, circulation specialist at subs@curetoday.com for a free copy.

Spotlight on CoC Member Organization: American College of Radiology (ACR)

The American College of Radiology (ACR) has been a member organization of the Commission of Cancer (CoC) since 1953. The current representatives are Ellen B. Mendelson, MD, from Northwestern Memorial Hospital in Chicago, IL, and Louis Potters, MD, FACR, from Long Island Jewish Medical Center in New Hyde Park, NY.

The mission of the ACR is to serve patients and society by maximizing the value of radiology, radiation oncology, interventional radiology, nuclear medicine and medical physics by advancing the science of radiology, improving the quality of patient care, positively influencing the socio-economics of the practice of radiology, providing continuing education for radiology and allied health professions and conducting research for the future of radiology. The 32,000 members of the ACR include radiologists, radiation oncologists, medical physicists, interventional radiologists and nuclear medicine physicians. For over three quarters of a century, the ACR has devoted its resources to making imaging safe, effective and accessible to those who need it.

We invite you to learn more about the ACR and its institutes and programs by visiting their Web site at <http://www.acr.org/>. The ARC AC may also be accessed on the ARC web site at <http://www.acr.org/ac>

A Sneak Peek into the AJCC 7th Edition

New Year's Day is right around the corner, and a few months after the 7th Edition of the *AJCC Cancer Staging Manual* will be published! Updates to this edition will provide more specificity for a particular histology, anatomic site or section of a site, or will more accurately reflect the chapter contents. Further changes include new chapters and chapter name changes in addition to the following changes: 1) the Exocrine Pancreas chapter will now include endocrine pancreatic tumors, 2) the Carcinoma of the Skin chapter has been renamed Cutaneous Squamous Cell Carcinoma.

New chapters include:

Merkel Cell Carcinoma

Mucosal Melanoma of the Head and Neck

Ocular Lymphoma

Neuroendocrine Tumors

Gastrointestinal Stromal Tumors (GIST)

Perihilar (promixal) Bile Duct

Distal Bile Duct

Appendix

Adrenal gland

Many suggestions provided over the past years will also be incorporated, including more color, the addition of chapter headings, and an improved staging form, to name a few. Don't forget, the 7th Edition will be effective for 2010 cases.

Watch upcoming issues of the *CoC Flash* for more "7th Edition Sneak Peeks."

NAPBC Exhibits

The National Accreditation Program for Breast Centers (NAPBC) will exhibit at the following December meeting:

- San Antonio Breast Cancer Symposium (SABCS)

December 11-14

Henry B. Gonzalez Convention Center; San Antonio, TX

Please stop by the booth to speak with Cindy Burgin and view new materials.

National Institutes of Health (NIH) Cancer Report

The NIH has issued an annual report to the Nation on the Status of Cancer, 1975-2005, Featuring Trends in Lung Cancer, Tobacco Use, and Tobacco Control: Questions and Answers. Link to full report:

<http://www.cancer.gov/newscenter/pressreleases/ReportNation2008QandA>

NCI Symposium Addresses Impact of Biospecimens on Cancer Research

The National Cancer Institute is sponsoring its 2nd Annual Biospecimen Research Network (BRN) Symposium, "Advancing Cancer Research Through Biospecimen Science", March 16-18, 2009, in Bethesda, MD. The symposium will address the significant impact of pre-analytical biospecimen variables on cancer research and molecular medicine. Hosted by NCI's Office of Biorepositories and Biospecimen Research, this symposium brings together the broad range of stakeholders whose work involves biospecimens, including research investigators, clinicians, pathologists, industry representatives, hospital administrators and patient advocates. Register today at <http://brnsymposium.com>

Third International Symposium on Cancer Metastasis and the Lymphovascular System: Basis for Rational Therapy

Recent developments in the sentinel lymph node (SLN) concept and technology have resulted in the application of such a procedure to define the first draining node or SLN that the cancer will metastasize to. In the upcoming Third International Symposium on Cancer Metastasis and the Lymphovascular System: Basis for Rational Therapy to be held in San Francisco from May 6-9, 2009, being presented by the UCSF Department of Surgery, the process of lymphangiogenesis and hemangiogenesis induced by cancer cells will be carefully addressed. The symposium will

be held in the newly built Intercontinental San Francisco Hotel located in the heart of San Francisco at 888 Howard Street. Please visit the Web site at <http://www.cme.ucsf.edu> for more information and for online early bird registration. To register by phone or to inquire about registration status, please call UCSF's CME Registration Office at (415) 476-5808. The symposium will bring the basic scientists, radiologists, and clinicians together resulting in cross fertilization between these disciplines. Such cross fertilization will enhance the translation of basic science into clinical application and bring clinical problems to challenge the basic scientists. Basic scientists and clinicians interested in recent advances in cancer metastasis through the lymphovascular system and molecular therapeutics against cancer metastasis are encouraged to attend.

NAACCR CTR Exam Readiness Webinar Series Registration is Open

With so much riding on them, professional certification exams like the CTR Exam will never be stress free, but with proper preparation they can be *less stressful!* Let the NAACCR CTR Exam Readiness Webinar Series help you and/or your staff prepare for the March 2009 CTR exam. The Webinar series includes:

- Online interactive 'live' instruction with experienced instructors
- Eight two-hour sessions carefully prepared to reflect the changes to the 2009 CTR exam
- Q & A session, study materials, take home tests
- A timed practice test

The Webinar series will be presented once a week on Tuesdays, January 13, through March 3, 2009, from 1-3 p.m. Eastern Time (ET). Online registration and a course syllabus can be accessed from the NAACCR website, <http://www.naacccr.org>

NAACCR Continues Registration for the 2008-2009 Webinar Series

The NAACCR 2008-2009 Webinar series began in October 2008, and there are 10 more Webinars to be presented monthly through September 2009. Topics include site-specific data collection and other aspects of cancer surveillance and data collection pertinent to hospital and central registry staff. Registration is still open for nine and six webinar subscriptions as well as for individual webinars. Please go to the NAACCR website, <http://www.naacccr.org> for more information including a registration form and course schedule.

Survivorship Modules Available for Health Care Education

Modules for continuing education about several topics prioritized in *A National Action Plan for Cancer Survivorship* are now available from the creators of the Emmy Award-winning documentary, *A LION IN THE HOUSE*. Real-life scenes following five families fighting pediatric cancer over the course of six years; the modules offer an intimate look at many real-life treatment challenges for health care teams and their patients.

The modules are appropriate for physicians, nurses, chaplains, palliative care professionals, psychologists, social workers, allied health care providers, and students. They were created with support from the CDC, Division of Cancer Control & Prevention.

The modules are:

- **Childhood Cancer Survivorship Stories** (*fully accredited for CE/CME*) - about late effects of pediatric cancer treatment and psychosocial impact. This module is for general practitioners who may be the first line of defense in recognizing late-effects, as well as for specialists, including psychologists and social workers.
- **Cancer Health Disparities** – how socioeconomic disparities impact families' abilities to comply with treatment. This module offers insight into many barriers to access and compliance outside the medical setting.
- **Pediatric End-of-Life Case Studies** - when patients, families and health care professionals need to communicate around a child's end of life. This powerful module is for the entire medical team who may be responsible during curative care, palliative care, and hospice.

- **Case Studies in Spirituality & Childhood Cancer** – a tool to help develop the sensitivity required by the entire medical team toward cancer survivors' diverse spiritual needs. The materials broaden the definition of spirituality to encompass not only religious faith, but purpose and hope as well.
- **Siblings Issues** – Created with SuperSibs, this module promotes interventions to avoid long-term complications for siblings of childhood cancer survivors.
- **Nurse-Patient Boundaries** – Nurses have long-term relationships with patients and families. When the personal and professional get intertwined, ethical issues are raised.
- **Childhood Cancer & School Issues** –for school personnel. This module examines cognitive late effects and psychosocial issues when survivors and their siblings return to school. It promotes integration of care by medical and education specialists.

All modules, as well as the acclaimed two-part LION IN THE HOUSE film and companion book can be purchased at <http://www.aquariusproductions.com/lion> or 888-440-2963.

CoC Flash Changes coming in 2009

We are happy to announce that the CoC Flash will have a new look and enhancements for your viewing pleasure! Please be on the lookout for our new CoC Flash in early 2009!



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