Summary of Changes to 2018 PUF

The following changes have been made to the 2018 PUF.

Diagnosis Years

An additional diagnosis year of data was added and follow-up was updated. PUF data files now include patients diagnosed between 2004 and 2018.

Follow up

Variable Name: PUF Vital Status (PUF_VITAL_STATUS)
This item is now available for cases diagnosed through 2017.

Variable Name: Last Contact or Death, Months from Dx (DX_LASTCONTACT_DEATH_MONTHS)
This item is now available for cases diagnosed through 2017.

Variable Name: Ninety Day Mortality (PUF_90_DAY_MORT_CD)
This item is now available for cases diagnosed through 2017.

Variable Name: Thirty Day Mortality (PUF_30_DAY_MORT_CD)
This item is now available for cases diagnosed through 2017.

Variable Changes

1. AJCC 8th Edition Staging.  AJCC 8th Edition staging rules are used for patients diagnosed in 2018 and later. Changes in the AJCC 8th edition staging manual are summarized in the AJCC 8th Edition Chapter 1, Principles of Cancer Staging. Selected items from that chapter are listed below. Site Specific changes are found in the 8th Edition Site Specific Chapters. See https://cancerstaging.org/Pages/default.aspx

   a. Revisions to Staging Schema.  Any site specific staging changes are noted in the AJCC 8th edition Site specific chapters.

   b. Unknown primary or no evidence of primary tumor.

      i. If there is no evidence of the primary tumor or the site of the primary tumor is unknown, staging may be based on clinical suspicion of the primary tumor, with tumor categorized as T0. Rules for staging T0 cancers are found in the site specific chapters.

      ii. New: The T0 category for squamous Head and Neck cancer sites is no longer used. Such patients with an involved lymph node are staged as unknown primary cancers using the 8th edition staging system for cervical nodes and unknown primary tumors of the Head and Neck. (T0 remains a valid category for HPV- and EVB-associated oropharyngeal and nasopharyngeal cancers).
c. **New: Post-therapy or Post Neoadjuvant Therapy TNM**

i. A new classification system for classification of TNM after systemic or radiation treatment intended as definitive therapy, or after neoadjuvant therapy followed by surgery, is denoted by use of a lower case yc or yp prefix. The new prefixes include: ycT, ycN, c/pM, and ypT, ypN, c/pM. The c/pM category may include cM0, cM1, or pM1. See the AJCC 8th edition Chapter 1 for more details.

ii. The yc prefix is used after primary systemic and/or radiation therapy without subsequent surgical resection, or after neo-adjuvant and before planned surgical resection.

iii. The yp prefix is used when staging after neoadjuvant therapy and planned post neoadjuvant therapy surgery.

2. **STORE Manual Changes**

Other major changes to the 2018 STORE manual are summarized below.

a. **Site Specific Data Items (SSDI).** A major change in the 2018 STORE manual is that Collaborative Stage (CS) Site Specific Factors are no longer being collected. Instead, new variables called Site Specific Data Items (SSDI) were created that replaced Site Specific Factors collected in CS. Each Site Specific factor is now a separate variable for the cancer site with which it is associated. Note that some SSFs previously collected are no longer collected. There are 120 Site Specific Data Items in 2018. An example of the new SSDIs, is PSA. PSA for Prostate is no longer Site Specific Factor 1, it is now called PSA Lab Value. In 2018 and later diagnosis years, the new SSDIs will need to be used. The CS Site Specific Factors will still be used for 2004-2017 diagnosis years. There are also some new Site Specific Factors that were added in 2018. For example, Summary S Category Clinical and Pathological for Testis is now collected.

**Examples of New SSDIs:**

- Breast biomarkers: Nine new SSDIs were developed for collection of ER, PR and HER2 laboratory test results [NAACCR Items 3826, 3828, 3850-3854, 3914 and 3916]. These replace Breast SSFs 4-6 and 8-14 which were not brought over from CS due to changes in laboratory methods and interpretation.

- Brain biomarkers: One new SSDI, Brain Molecular Markers [3816], was developed at the request of CBTRUS to collect data on specific markers needed to define clinically important histological subtypes that are not differentiated in updated ICD-O-3 codes.

Each SSDI applies only to selected schemas. SSDI fields should be blank for schemas where they do not apply.

A description of the SSDIs can be found at the following link [https://www.naaccr.org/SSDI/SSDI-Manual.pdf](https://www.naaccr.org/SSDI/SSDI-Manual.pdf)
b. **Sentinel Lymph Nodes Examined.** This is a new variable that records the number of lymph nodes sampled during sentinel lymph node biopsy and examined by the pathologist for cases diagnosed in 2018 and later. **This data item is required for breast and melanoma cases only.**

c. **Sentinel Lymph Nodes Positive.** This item records the exact number of sentinel lymph nodes biopsied by the pathologist and found to contain metastases for cases diagnosed in 2018 and later. **This data item is required for breast and melanoma cases only.**

d. **Number of days from diagnosis to Sentinel Lymph Node biopsy.** This data item is required for breast and melanoma cases only.

e. **Number of days from diagnosis to Regional Lymph Node dissection.** This data item is required for all primary sites.

f. **New Radiation Treatment data items.** Extensive changes have been made to the radiation treatment items. These were optional in 2017 and required in 2018. See pages 4-5, 34-35 and 275-344 in the STORE manual at [https://www.facs.org/~/media/files/quality%20programs/cancer/ncdb/store_manual_2018.ashx](https://www.facs.org/~/media/files/quality%20programs/cancer/ncdb/store_manual_2018.ashx)

3. **Primary sites.** Myelodysplastic syndrome added.