TEXT FIELD DOCUMENTATION WITHIN ABSTRACT

With COVID-19 abstraction guidance and required text

History/Physical:

Date | Age of patient, Sex, Race (must be document if not noted type NS) & Ethnicity if coded other than "0". Info from Physical Exam, Impression, Complaints or Symptoms that relate to the primary site diagnosis. {Document co-morbidity if it affects treatment plan} Text past medical history for sequencing a new primary or if affects cancer diagnosis. {Example: 9/1/2019 58yo WF presents with...} This is the first date seen at your hospital with cancer. PTA scans, xrays, biopsies all go in those labeled text fields; not here.

TIP: Remember to document negative exam findings as well as positive finding if pertinent to site.

X-ray/scan: (<u>Date</u> all procedures)

Date | X-ray and Scans: Diagnostic and work-up used to R/O metastatic disease Document the location of the tumor, tumor size/extension, involvement of lymph nodes and any extension detail(s) noted in XRs/Scans. Include any PTA scans/results. Do not text info unrelated to the diagnosis or treatment of the primary cancer.

Scopes/Manipulative procedures/Diagnostic proc: (*Date all procedures*)

Date | Scope/laparoscopy: procedures that do not meet 1st course surgical guidelines; but provide diagnostic and/or staging info. i.e. FNA; colonoscopy w/bx. Stereotactic needle biopsy, CT guided needle biopsy of liver or lung or other sites. Include results done PTA.

Surgery/OP Reports: (<u>Date</u> all procedures) Date | Name of Procedure: Information and <u>findings</u> related to tumor extension and staging from operative report, i.e. tumor size & location. Include surgeries done PTA. {9/1/2019 Sigmoid colon segmental resection:_____}} Pathology: (<u>Date</u> all procedures) Date | <u>Type of tissue</u>: Final DX- final morphology; CAP Summary, Addendums or Revisions

Labs: (<u>Date</u> all procedures) Interpretation and date of SARS-CoV-2 viral testing and antibody testing.

Date | Labs relative to primary site diagnosis, Cytology specimens, Tumor markers,

Colon: CEA, KRAS; Breast: Markers, genetics; etc. Most SSDI results go here.

{9/1/2019 Sigmoid colon Final Dx: } Path reports done PTA go here.

{9/1/2019 ER pos 97%, Allred Score 8. PR pos, 80%, Allred score 6. HER2 by IHC 1+ pos.

Oncotype DX Score 35} **See more examples on page 3**

COVID-19 viral POS 05/09/2020

COVID-19 viral NEG 03/09/2020 antibody POS 05/09/2020

Staging Text:

Date | Include text of stage and staged by, i.e. {T1N0M0, Stage I by Med Onc}

REMARKS:

Date of discharge, brief final diagnosis, summary of treatment plan. If last known follow-up date is different from the discharge date note why patient was seen and CA status if known. Any subsequent visits, path reports not related to first course.

COVID-19 TEXT REQUIREMENTS EXAMPLES:

U07.1 [date: mm/dd/yyyy]

Record treatment in general here. If specific, record in specific treatment fields.

FCOT CHG D/T COVID-19 [when first course of treatment changed due to COVID-19]

Z75.3 mm/dd/yyyy [When dx, staging, treatment or management delayed because of

limited access or postponement due to COVID-19]

First Course treatment text fields:

Provide brief description to support code:

Surgery: 9/1/2019 R lumpectomy with SLN biopsy and axillary dissection.

SURG TX delayed D/T COVID-19

SURG TX delayed D/T COVID-19 & given as subsequent TX after progression

SURG TX delayed & CHG D/T COVID-19

SURG TX CHG D/T COVID-19 SURG TX DC D/T COVID-19

Radiation: 9/1/2019 EBRT with boost

EBRT [XRT; RT] DC D/T COVID-19 Or EBRT [XRT; RT] CHG D/T COVID-19

EBRT [XRT; RT] delayed D/T COVID-19

EBRT [XRT] delayed D/T COVID-19 & given as subsequent TX after progression

Radiation other:

RT DC D/T COVID-19 or RT CHG D/T COVID-19

ICB DC D/T COVID-19 or ICB CHG D/T COVID-19 {ICB = intracavitary brachytherapy}

RT delayed d/T COVID-19 or ICB delayed D/T COVID-19

RT delayed D/T COVID-19 & given as subsequent TX after progression or

ICB delayed D/T COVID-19 & given as subsequent TX after progression

Chemotherapy: 9/1/2019 CHOP

CHEMO DC D/T COVID-19

CHEMO CHG D/T COVID-19

CHEMO delayed D/T COVID-19

CHEMO delayed D/T COVID-19 & given as subsequent TX after progression

Hormone Therapy: 9/1/2019 Prednisone

HORMONE DC D/T COVID-19

HORMONE CHG D/T COVID-19

HORMONE delayed D/T COVID-19

HORMONE delayed D/T COVID-19 & given as subsequent TX after progression

*BRM/Immunotherapy: 9/1/2019 Rituxan

BRM DC D/T COVID-19 or BMT DC D/T COVID-19

BRM CHG D/T COVID-19

BRM delayed D/T COVID-19 or BMT delayed D/T COVID-19

BRM delayed D/T COVID-19 & given as subsequent TX after progression

Hematology Transplant & Endo: 9/1/2019 Stem Cell Transplant

Other: Date | What was done (i.e. herbs and vitamins)

TIPS

- Chronological order if several tests, surgeries, pathology reports.
- Avoid using too many abbreviations
- Be intentional with text, don't need a story, just facts, brief.
- Place text in appropriate text fields.

HEMATOPOIETIC MALIGNANCIES:

Hematopoietic malignancies are abstracted based on a diagnosis made by a physician; either by a pathologist based on a pathology report, hematologist on blood work, the managing physician, or an oncologist. Documentation of lab values in abstract such as RBC, WBC, platelets, etc. is not necessary.

FOLLOW-UP

For follow-up purposes, if the registry is not to contact a person because of his/her "mental health status, HIV/AIDS, and/or substance abuse (drugs and alcohol)" put the text in the follow-up area "DO NOT CONTACT, SPECIAL RELEASE REQUIRED".

Use these texting practices along with the detailed COVID-19 Abstraction Guidance document dated 6/2020 located here https://seer.cancer.gov/tools/covid-19/index.html Begin with 1/1/2020 dx cases.

*Please note change of location for BMT/SCT and place in the text field for BRM even though the codes are with the hormone text field.

Revised 6/25/2020 *COVID-19