

South Carolina Central Cancer Registry (SCCCR)

Data Reporting Manual

Recommendations for Implementation of Changes to Reporting Standards

Effective 2025

Record Layout and Data Standard

Recommendations are based on NAACCR Version 25

Revised **4/1/2025**

Please visit [SCCCR DPH Website](#) for Cancer Data

Collection Standards and Reporting, Education, and Resources

NOTE: This document does not replace the SCCCR Reporting Source Manual. This document should be used in conjunction with it. This document may re-state some of its content and is specifically meant for 2025 reporting guidance.

Recent updates highlighted in yellow.

SCCCR Data Reporting Manual 2025

1. Preface

Important notice to South Carolina Cancer Registrars regarding abstracting and reporting of cancer cases diagnosed in 2025, prior to release of North American Association of Central Cancer Registries (NAACCR) Volume (v) 25 Compliant Software.

There have been extensive changes to the NAACCR layout for 2025. Along with the NAACCR updates, we will implement changes associated with other data standard-setters for reporting.

Reporting facilities in South Carolina should direct any corrections, comments, and suggestions regarding this document to Kammy Rebl (reblkj@dph.sc.gov). If individuals or facilities that are not part of the South Carolina reporting system need copies of the reporting manual, they may download the PDF from [SCCCR website](#). (To open PDF, click on the SCCCR Reporting Manual link.)

- **Important Reminders for 2025 cases submitted to SCCCR:**
 1. SCCCR will not be able to accept **2025 cases (admit/dx) until mid-April 2025** If there are further delays, you will be notified.
 2. 2025 abstracts can be started in NAACCR v24 **version but must be completed** using NAACCR v25 before submitting to SCCCR.
 3. SCCCR recommends that facilities document details of the new data items to complete the abstracts in v24 software using the new codes.
 4. The SCCCR requires sufficient text to support all codes, especially the new codes (e.g., histology, grade, AJCC & Summary stage, etc.). The text will provide an easy reference for coding cases that require v25 software when it becomes available.
 5. 2025 Reportable list: <https://dph.sc.gov/professionals/health-professionals/meaningful-use/cancer-registry-data-standards-reporting> (Downloads & Links) Cancer Standards and Reporting
 6. Reportable by Agreement Reminder: Class Case 43 and Class Case 30
 7. SEER EOD is no longer required by SCCCR

Please remember SCCCR is a resource and is here to support your team. If you have any questions, please email us at reblkj@dph.sc.gov or call 803-898-8000.

Thank you for your continued commitment to ensure that the SCCCR data is of the highest quality. The data you provide remains the cornerstone of the South Carolina Cancer Registry.

Kammy Rebl, CTR

Quality Control Manager/ETC

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South Carolina Central Cancer Registry Resources

- [SCCCR Website](#)
 - Genedits, Electronic Reporting, Resource link Reporting Manual
- Cancer Registrar Education
 - [FLccSc](#) : Stand-alone, web-based learning management system (LMS) to customize a fully functioning LMS to address our specific educational needs.
 - [Webplus](#): Currently, all NAACCR webinars are uploaded to your account and the general account. User ID: education Password: Educ@ti0n

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NAACCR Version 25 Reference Page

Below is the main link for key resources that registries may find useful as they plan to transition to V25. Please click on this [link](#).

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V25 IMPLEMENTATION REFERENCE

BELOW ARE LINKS TO KEY RESOURCES REGISTRIES MAY FIND USEFUL AS THEY PLAN TO TRANSITION TO V25.

- [NAACCR 2025 Implementation Guidelines](#)
- [NAACCR Data Standards and Data Dictionary \(formerly Volume II\)](#)
- [NAACCR XML Dictionaries](#)
- [NAACCR v25A Edits Metafile \(including Changes Spreadsheet\)](#)
- [SEER Program Coding and Staging Manual \(includes Summary of Changes\)](#)
- [Commission on Cancer STORE Manual](#)
- [Site Specific Data Items \(SSDI\) and Grade Manual v3.2 \(includes change log\)](#)
- [AJCC Cancer Staging System](#)
- [SEER RSA \(EOD, Summary Stage, SSDI's, Grade\) v3.2 also includes summary of changes](#)
- [Summary Stage 2018 \(includes revision history\)](#)
- [Extent of Disease \(EOD\) 2018 Manual \(includes change log\)](#)
- [Solid Tumor Rules \(includes summary and changes\)](#)
- [ICD O 3.2](#) (no update for 2025. Continue to use 2024 Annotated Histology List and 3.2 update).
- [Cancer PathCHART](#) Morphology Validation List and Search tool
- [Hematopoietic Manual and Database \(see revision history on the left\)](#)
- [Surgery Codes and Surgery Code Crosswalks](#) (no changes for 2025)

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2. New Data Items

See Appendix A for the new data items table, including the XML specifics. All new site-specific data items (SSDI) information is incorporated into the Staging APIs. See the SSDI Manual, Version 3.2. New data items for the Pediatric Data Collection System are in section 3.

2.1 PD-L1 PD-L1 [1174] is added as an SSDI to Lung V9 (09360) as it is recommended by treatment guidelines for lung cancer to determine if the patient may benefit from checkpoint inhibitor drugs (immunotherapy). It is to be collected for cases diagnosed on or after January 1, 2025.

2.2 PTLD PTLD [1172] or Post Transplant Lymphoproliferative Disorder, when identified in conjunction with the schemas below, is added as an SSDI. The presence of PTLD, either polymorphic or monomorphic, has clinical significance and prognostic value, especially in Pediatric, Adolescent, and Young Adult (AYA) populations. It is to be collected for cases diagnosed on or after Jan. 1, 2025. This SSDI has been added to the following schemas:

- Lymphoma (00790)
- Lymphoma-CLL/SLL (00795)
- Plasma Cell Disorders (00822)
- Plasma Cell Myeloma (00821)
- Primary Cutaneous Lymphoma (00812)

Note: PTLD identified not in conjunction with these schemas would be abstracted as a separate primary; refer to Hematopoietic Manual for additional information.

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3. v25 Retired Data Items

V25 Retired Data Items		
Item #	Item Name	Source of Standard
170	Race Coding Sys--Current	NAACCR
180	Race Coding Sys--Original	NAACCR
270	Census Occ Code 1970-2000	Census/NPCR
280	Census Ind Code 1970-2000	Census/NPCR
330	Census Occ/Ind Sys 70-00	NPCR
605	Inpatient Status	NAACCR
1510	Rad--Regional Dose: cGy	CoC
1520	Rad--No of Treatment Vol	CoC
1540	Rad--Treatment Volume	CoC
1741	Subsq RX--Reconstruct Del	CoC
1780	Quality of Survival	CoC
2155	RQRS NCDB Submission Flag	CoC
2200	Diagnostic Proc 73-87	SEER
2310	Military Record No Suffix	CoC
3200	Rad--Boost RX Modality	CoC
3210	Rad--Boost Dose cGy	CoC
3440	Derived PreRx-7 T	AJCC
3442	Derived PreRx-7 T Descrip	AJCC
3450	Derived PreRx-7 N	AJCC
3452	Derived PreRx-7 N Descrip	AJCC
3460	Derived PreRx-7 M	AJCC
3462	Derived PreRx-7 M Descrip	AJCC
3470	Derived PreRx-7 Stage Grp	AJCC
3480	Derived PostRx-7 T	AJCC
3482	Derived PostRx-7 N	AJCC
3490	Derived PostRx-7 M	AJCC
3492	Derived PostRx-7 Stg Grp	AJCC
3600	Derived Neoadjuv Rx Flag	AJCC
3650	NPCR Derived Clin Stg Grp	NPCR
3655	NPCR Derived Path Stg Grp	NPCR

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4. Guidelines for Further Information

Reportability:

4.1 Reportability for cases diagnosed in 2025 is based on the ICD-O Third Edition, Second Revision Morphology (ICD-O-3.2) plus the ICD-O-3.2 updates posted on the NAACCR website. As of January 1, 2025, Post Transplant Lymphoproliferative Disorder (PTLD) 9971/1 is reportable as 9971/3. Refer to the Hematopoietic Manual for additional information.

AJCC Version 9 Protocols:

4.2 AJCC Version 9 Protocols AJCC Cancer Staging System will release four Version 9 Protocols to go into effect with cases diagnosed January 1, 2025, and forward: • Thymus Version 9, AJCC ID 9013 • Lung Version 9, AJCC ID 9014 • Diffuse Pleural Mesothelioma Version 9, AJCC ID 9015 • Nasopharynx Version 9, AJCC ID 9016 These Version 9 protocols replace the current AJCC 8th edition chapters for these disease sites.

AJCC Histology Changes

4.3 There are no Histology ICD-O-3 [522] code changes for the AJCC ID [995] for 2025.

Summary Stage 2018

4.4 The notes for Summary Stage 2018 [764] were restructured to add titles. This modification should improve readability and help end users find relevant notes more quickly. Some Summary Stage 2018 [764] notes were updated, similar to the EOD fields, to improve clarity or address questions raised in various forums. Registrars are not required to update previously coded information. This information is incorporated into the SEER Staging REST API/library and will be available once the staging API is updated.

Hematopoietic and Lymphoid Neoplasms Manual and Database

4.6 Post Transplant Lymphoproliferative Disorder (PTLD) was previously reportable as 9971/3 for 2010-2020 when it was the only diagnosis. In 2021, based on the 4th edition of the WHO Hematopoietic Blue Book, PTLD was listed as 9971/1, which was reportable only if it occurred in the brain. Starting in 2025, PTLD, as the only diagnosis, will again be a /3 (malignant) and will be reportable for all cases. In addition, a new SSDI has been added to several schemas (Lymphoma, Lymphoma-CLL/SLL, Primary Cutaneous Lymphoma (excluding MF/SS), Plasma Cell Disorders, Plasma Cell Myeloma) for when a PTLD is diagnosed WITH a lymphoma, plasmacytoma, or multiple myeloma. (See the Hematopoietic Manual, Rules M14, PH1).

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5. Standard Setters' Reporting Requirements 2025

CDC NPCR Reporting Requirements

5.1 Beginning with cases diagnosed Jan. 1, 2025, and forward, the Centers for Disease Control and Prevention National Program of Cancer Registries (CDC-NPCR) will adopt the new record format and data collection requirements as published in the Data Standards and Data Dictionary, v25. Refer to the CDC-NPCR requirements listed in the Data Standards and Data Dictionary, v25, Required Status Table. Share these requirements with your software vendors and key stakeholders. CDC-NPCR will require site-specific data items Post Transplant Lymphoproliferative Disorder-PTLD [1172] and PD-L1 [1174] as information is available for the identified sites. CDC continues to follow the NAACCR Guidelines for 2024 ICD-O-3.2 Histology Code and Behavior Update (published for 2024).

CoC Reporting Requirements

5.2 Beginning with cases diagnosed Jan. 1, 2025, and forward, all CoC-accredited programs should follow the rules and instructions in STORE 2025. A summary of the STORE 2025 changes is included in the STORE Manual chapter "Summary of Changes". The wording for Palliative Care [3270] and Palliative Care at this Facility [3280] was updated to indicate that hospice care is included under these data items. Appendix A guidance on contralateral breast procedures has been updated to align with SEER guidance and will no longer be coded to the data item Surgical Procedure/Other Site [1294]. CoC Accredited programs will effectively collect the following SSDI for cases diagnosed Jan. 1, 2025, and forward. • PTLD [1172] – Post-transplant lymphoproliferative disorder • PD-L1 [1174] – Lung

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6. Staging Requirements for 2025

Staging Requirements for 2025 Diagnosis

CDC-NPCR continues to require the directly assigned Summary Stage 2018 [764] (most current version). NPCR requirements for Summary Stage 1977 [760], Summary Stage 2000 [759], and CS Derived Summary Stage 2000 [3020] have not changed. If voluntarily capturing AJCC TNM and/or SEER EOD stage data items, rules and requirements provided by those sources should be followed. NPCR will not require the Pediatric Data System; however, if NPCR-funded central cancer registries elect to capture these data items, rules and requirements provided by those sources should be followed. NOTE: Registry Plus will make these data items available in software applications; however, the content of the data items, including definitions, may not be available. NPCR is unable to provide IT support for PDS data items. Central registries will inform state reporters of their individual state requirements.