

Head Neck Advanced Case #4

FIELD#	FIELD NAME	CODE AND RATIONALE/DOCUMENTATION	
PATIENT IDENTIFICATION			
1	Medical Record #	999908	From record
2	Accession #	2007xxxxx	
3	Sequence #	00	No history other malignancies
4	Patient Name	Green, Julia	From record
5	Race 1	01	White per H&P 6/6/07
6	Spanish Origin	0	No mention of Hispanic origin
7	Sex	2	Female
CANCER IDENTIFICATION			
8	Class of Case	1	Dx at staff surgeon's office
9	DATE 1st Contact	05/30/2007	Radiology report (Discussion: would registry use date of admission 06/06/2007?)
10	DATE Initial Dx	05/18/2007	FNA doctor's office (per RT consult)
11	Primary Site	C079	Parotid gland
12	Laterality	1	Right per H&P, op report
13	Histology	8070	Squamous cell CA
14	Behavior	3	Malignant, primary site
15	Grade	2	Moderately differentiated per path report
16	Diagnostic Confirmation	1	Path report
17	Ambiguous Terminology Dx	0	Definitive statement malignancy
18	Date of Conclusive Dx	88/88/8888	Dx made with definitive statement
19	Date of Multiple Tumors	00/00/0000	Single tumor
20	Mult Tumors Reported as 1 Prim	00	Single tumor
21	Multiplicity Counter	01	1 tumor only
STAGE OF DISEASE AT DIAGNOSIS			
22	DATE Surg Dx/Stage Procedure	05/18/2007	FNA in MD office (per RT consult)
23	Surg Dx/Stage Procedure Code	02	Biopsy of primary site
24	Clinical T	3	CT 4.2 cm, PE extension into neck
25	Clinical N	0	No adenopathy per CT neck
26	Clinical M	0	Neg CXR, CT head, PE rest of body
27	Clinical Stage Group	3	T3 N0 M0
28	Clinical Stage Descriptor	0	No descriptors
29	Clinical Staged By	5	Registrar
30	Pathologic T	4a	Op: Tumor encircles and paralyzes facial nerve, spinal accessory nerve involved
31	Pathologic N	2b	Mult LNs involved (no size noted) per path report
32	Pathologic M	0	Clinical info
33	Pathologic Stage Group	4a	T4a N2b M0
34	Pathologic Stage Descriptor	0	No descriptors
35	Pathologic Staged By	1	Managing physician (RT)
36	SEER Summary Stage 2000	7	Spinal accessory nerve involved
COLLABORATIVE STAGING			
37	CS Tumor Size	075	7.5 cm per path & RT note
38	CS Extension	72	Spinal acc nerve (ext to base skull not proved involved) per Surgery Report
39	CS Tumor Size/Ext Eval	3	Surgical resection
40	CS Lymph Nodes	21	Level II nodes involved. Also stated as N2b (code 29); code 21 is more specific
41	CS Reg Nodes Eval	3	Surg resection LNs
42	Regional Nodes Positive	03	1 superior (Level II) + 2 adjacent (parotid)

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43	Regional Nodes Examined	32	8+17+3+4 LNs noted
44	CS Mets at Dx	00	No mets
45	CS Mets Eval	0	PE and scans
46	CS Site-Specific Factor 1	999	Size of LNs not defined
47	CS Site-Specific Factor 2	000	No extracapsular extension noted
48	CS Site-Specific Factor 3	010	No Level I, yes Level II, no Level III
49	CS Site-Specific Factor 4	000	No involved nodes levels IV, V or retropharyngeal
50	CS Site-Specific Factor 5	000	No involved nodes levels VI, VII or facial
51	CS Site-Specific Factor 6	010	No parapharyngeal, yes parotid, no suboccipital
FIRST COURSE OF TREATMENT (FCOT)			
52	DATE of FCOT	06/06/2007	Date of surgery
53	DATE 1st Surgical Procedure	06/06/2007	Date of surgery
54	DATE Most Definitive Surg Prim	06/06/2007	Date of surgery
55	Surg Procedure Primary Site	42	Total parotidectomy, nerve sacrificed
56	Surg Margins Primary Site	0	Path says lesion extends up TO margin. Surgeon disch sum says not involved
57	Scope Regional LN Surgery	5	> 4 LNs removed
58	Surg Procedure Other Site	0	No other surgery
59	DATE Surg Discharge	06/11/2007	Discharge summary
60	Readmit Same Hosp w/in 30 Days	0	No subsequent admission documented
61	Reason No Surg Primary Site	0	Surgery performed
62	DATE Radiation Started	07/10/2007	Per RT note
63	DATE Radiation Ended	08/24/2007	Per RT note
64	Location of Radiation Treatment	1	Same facility
65	Radiation Treatment Volume	09	Parotid and neck LNs
66	Regional Treatment Modality	31	IMRT per RT note
67	Regional Dose: cGy	06600	66Gy per RT note
68	Boost Treatment Modality	00	No boost
69	Boost Dose: cGy	00000	No boost
70	Number Treatments per Volume	33	Number fractions per RT note
71	Radiation/Surgery Sequence	3	RT after surgery
72	Reason NO Radiation	0	Administered
73	DATE Systemic Therapy Started	07/99/2007	With RT, no date noted
74	Chemotherapy Code	02	Cisplatin (per RT note)
75	Hormone Code	00	Not done
76	Immunotherapy Code	00	Not done
77	Hematologic Trsplt & Endo Code	00	Not done
78	Systemic/Surgery Sequence	3	Chemo after surgery
79	DATE Other Treatment Started	00/00/0000	Not done
80	Other Treatment Code	00	Not done
81	Palliative Treatment Code	00	Not done
RECURRENCE			
82	DATE 1st Recurrence	00/00/0000	No recurrence documented
83	Type 1st Recurrence	00	No recurrence documented
84	DATE Last Contact/Death	08/24/2007	Last date of RT (end RT)
85	Vital Status	1	Pt alive
86	Cancer Status	0	No evidence disease, curative tx given
CASE ADMINISTRATION			
87	Is Case Complete?	Yes	Call Med Oncol for precise chemo start date