# Cancer Outcomes and Services Dataset (COSD)

Pathology User Guide v4.1.1

# About the NDRS

The National Disease Registration Service (NDRS) is part of NHS Digital (NHSD). Its purpose is to collect, collate and analyse data on patients with cancer, congenital anomalies, and rare diseases. It provides robust surveillance to monitor and detect changes in health and disease in the population. NDRS is a vital resource that helps researchers, healthcare professionals and policy makers make decisions about NHS services and the treatments people receive.

The NDRS includes:
- the National Cancer Registration and Analysis Service (NCRAS); and
- the National Congenital Anomaly and Rare Disease Registration Service (NCARDRS)

Healthcare professionals, researchers and policy makers use data to better understand population health and disease. The data is provided by patients and collected by the NHS as part of their care and support. The NDRS uses the data to help:
- understand cancer, rare diseases and congenital anomalies
- improve diagnosis
- plan NHS services
- improve treatment
- evaluate policy
- improve genetic counselling



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Improving lives with data and technology – NHS Digital support NHS staff at work, help people get the best care, and use the nation's health data to drive research and transform services.

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## Version Control

| Version | Date | Brief Summary of Change | Editors |
|---|---|---|---|
| Version 4.0 Final | 2 August 2019 | Final amended document for publication | Andrew Murphy |
| Version 4.0.4 Final | 15 September 2020 | Updated advice on submitting a pathology report on pg8 and in Appendix A pg89-pg91 | Andrew Murphy |
| Version 4.1.1 Final | 26 January 2022 | Updated user guide using NDRS publication and accessibility standards throughout, plus:<br>• upload testing and support pg17<br>• updated HODS guidance pg60 | Andrew Murphy |

# Executive summary

**Cancer Outcomes and Services Dataset – pathology v4.0 release (April 2020)**

This user guide is one of a suite of documents to aid users in implementing the COSD Information Standard (DCB1521 Amd 13/2019). It includes all the pathological data items in COSD, together with definitions, formats, codes and values and additional guidance on collection and implementation. These documents can be found on our website.

This User Guide is aligned with and should be read in conjunction with version 4.0 of the data set, which is available to download on the NCIN website. Other guidance and supporting documents are also available on the NCIN and NHS Digital websites

This revised version of the User Guide incorporates some amendments to the data set, an extension of scope and a revision of the current schema specification in order to continue to meet the business objectives of the standard.

Ongoing linkage with the Royal College of Pathologists (RC Path) 'Core' data sets is vital and continues to be a priority to ensure clinical accuracy. This data set was reviewed by the chair of the Royal College of Pathologists Working Group on Cancer Services.

> It is important that where a Trust originally records a patient as having cancer and a record is sent during routine data uploads, but this diagnosis changes to a non-registerable condition, that NDRS is immediately informed of this decision. Due to the complex way pathology systems are designed, this change of status may not be sent automatically within the next available upload of data.

I would like to take this opportunity to thank all those who have been involved in the development and implementation of the Standard and encourage you to continue to send us your comments, which help to identify necessary amendments and improvements. A COSD Advisory Board including Trust level representation has been created to help manage change and reports directly to the COSD Governance Board.

*Andy Murphy*

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**NHS**
**Digital**

# Introduction

## What is the cancer outcomes and services dataset?

The Cancer Outcomes and Services Dataset (COSD) is a compiled data set which provides the standard for secondary uses information required to support national cancer registration and associated analysis (at local, regional, national and international level), as well as other national cancer audit programmes.

This standard consists of:
- a set of individual data items with their definitions
- the assemblage of these data items into discrete data sets
- the means of flowing the data items
- compilation of the data items into a single reconciled and verified data set

All patients diagnosed with or receiving cancer treatment in or funded by the NHS in England are covered by the standard. This includes adult and paediatric cancer patients.

Providers of cancer services have been required to provide a monthly return on all cancer patients diagnosed from 1 January 2013 using this data set. Data are collated via the National Disease Registration Service (NDRS) local offices, and formal mechanisms for transmission of data from providers to NDRS have been extended to carry the COSD data set.

More information can be found at the following websites:
- the Change Specification, Requirements Specification and Implementation Guidance are available on the NHS Digital website
- further guidance is published by the National Disease Registration Service on the NDRS website

## Why is it needed?

Periodically we needed to revise the Cancer Outcomes and Services Dataset to ensure that we meet the current information requirements for the NHS. The Cancer Reform Strategy (2007) identified better information and stronger commissioning as two of the key drivers to achieve the goal that cancer services in this country should be amongst the best in the world.

The Achieving World-Class Cancer Outcomes, A Strategy for England 2015 to 2020 (Taskforce Report) further strengthens the need to have strong cancer data collection and empowers both PHE and NHS England to enforce this through the mandate of data

collection. These data will be the base for cancer analysis and research for the next 5 years.

Implementation of the Standard is carried out by the National Disease Registration Service (NDRS) and queries regarding implementation should initially be raised with the Data Liaison staff at the local offices of the NDRS.

Queries regarding the Standard itself should be addressed in the first instance to nhsdigital.COSDenquiries@nhs.net or your local NDRS Liaison Manager (their details can be obtained from the CancerStats portal).

All Providers have access to their current monthly position via CancerStats (NHS Health and Social Care Network [HSCN] connections only), which has been established by the NDRS. This provides feedback on files submitted (Level 1).

## Other guidance documentation

Technical Guidance and Implementation Guidance is provided separately and is available on the NCIN website.

## What diagnoses does COSD apply to?

For the purposes of COSD the term 'cancer' relates to all conditions defined as registerable by the UK and Ireland Association of Cancer Registries (UKIACR) and these are listed in Appendix C.

These are in addition to Appendix B – Cancer Waiting Times ICD10 Codes and Tumour Groups for Primary Diagnoses. COSD requires that all new diagnoses and secondary/metastatic cancer are recorded.

All recurrences diagnosed at each Trust must now also be included.

## What data items should be completed?

All registerable pathological conditions should be reported as defined in Appendix A. This includes submitting all pathology reports for these cases.

In addition to the core data set, most cases will also require a site specific data set to be completed.

The 'CORE LINKAGE' items are Mandatory and must be submitted for all records. (Please note that the core linkage for pathology differs from the main COSD linkage items).

All other applicable data in each section marked as 'required' should be submitted for each record as soon as available.

## How is pathology recorded?

There is a specific schema for reporting COSD pathology data items. These data should be reported by the pathologist, directly from their Laboratory Information Management Systems (LIMS) and sent to the NDRS (from the pathology department) in structured COSD XML.

It is not expected therefore that MDT Coordinators or other non-clinical staff, should attempt to read and transcribe these reports and information into COSD. From v9 (April 2020), pathological data items have been removed from the main COSD data set (v9.0) and can only be submitted through the COSD Pathology data set and associated schema packs.

The reduction in their workload by removing this duplication is estimated to be approximately up to 30%, and this time should be used to ensure full compliance for data collection across all other data-items.

Ongoing linkage with the Royal College of Pathologists (RCPath) 'CORE' data sets is vital and continues to be a priority to ensure clinical accuracy. This data set was reviewed by the chair of the Royal College of Pathologists Working Group on Cancer Services.

## When should the data be submitted?

The extraction criteria are based solely on the date authorised field.

The deadline for submitting a pathology report/record is 25 working days after the end of each month and should only be submitted once the pathologist has finished assessing each sample and authorises the report.

It is acceptable for pathology records to be submitted quicker than 25 working days, and in some cases are submitted in real-time as the pathologist authorises each report using the direct submission method through the NDRS API portal.

The reporting dates can be found on the COSD website.

## Feedback and queries

This User Guide provides additional information to support the COSD Specification and should also be used in conjunction with the COSD Pathology v4.0.2 data set.

Implementation and Technical Guidance documents are also available for further information on the NCIN website.

Feedback and questions relating to the COSD are welcomed and should be emailed to: nhsdigital.COSDenquiries@nhs.net.

# Using this guide

This COSD Pathology User Guide document provides additional information to support the COSD Specification and should also be used in conjunction with the COSD Pathology data set v4.0.2. Implementation and Technical Guidance documents are also available for further information on the NCIN website.

**Layout of the user guide**

The guide includes a generic chapter for 'Core' data set items followed by individual chapters for each of the site specific data sets applicable to each tumour group.

**Schema specification**

Mandatory:
- the 'Core' linkage items are 'mandatory' and must be submitted for all records
- it is vital that these are always available so that the correct information can be linked to the right patient and the correct tumour
- a record will not be able to be submitted if any mandatory data item is missing
- these records should not be added to the main file otherwise the whole file will fail the schema

Required:
- most other data-items are set as 'required', this means that if they are applicable to the reported tumour or patient pathway they must be completed and treated as a mandatory item
- not every data-item however will be applicable to every patient or tumour, by using 'required', this allows for a more accurate and inclusive collection of data
- therefore, all applicable data in each section marked as 'required' must be submitted for each record as soon as available

Pilot:
- in some cases, new data-items maybe piloted by a small group of Trusts

- these data do not have to be completed by any other Trust unless you are part of the pilot

Optional:
- there are a few data-items that are optional, any Trust can submit these data, but there is no requirement to enforce this data collection at this point
- all optional data-items are under review and may change in future version controls of COSD

Meaning of 'Not Known' value:
- 'Not known' includes both 'not recorded' and for example 'test not done', this is usually coded 9 or 99 (depending on the data item format)

**Key to data item tables**

All data items are listed as follows:
- data item No:
  - the reference number for the COSD data item
  - from v4 all pathology data items have a prefixed 'p', all other data items remain interoperable with the main COSD data set
- data Item section:
  - the section in which the data item appears
- data Item name:
  - the name of the data item
  - please refer to the data set and schema for the [Data Dictionary Item Name], which will be written in purple italics if different
- format:
  - format required for submission of the data item

**National codes**

Where there is a defined list of values for a data item, the code appears on the left of the table and the definition appears on the right, as shown in the example tbl-1 below.

tbl-1

| National code | National code definition |
|---|---|
| 1 | 1 to 3 |
| 2 | 4 or more |
| U | Number uncertain |

**Demographics**

Demographic details are required for every record in order to ensure that the correct patient can be identified, and information can be correctly linked.

The demographics section should be completed by every Provider the first time a record is submitted.

There will only be one demographics section completed for each record. Demographic linkage items will be required each time the record is submitted. Almost all patients should have an NHS Number, and this should always be included where available. For those who do not have an NHS Number, the hospital number ('Local Patient Identifier') must be provided.

**Diagnosis**

Both 'Topography' and 'Morphology' (SNOMED and/or ICD) must be completed for all cases.

**Pathology**

Pathological diagnosis and grade (where applicable) are recorded on biopsies and may be amended after surgical resection (if appropriate), when pathological staging should also be available. Full text pathology reports should always be submitted.

**Linkage data items**

In order to ensure that records submitted can be linked appropriately some key data fields must be completed for each record submitted. These are shown in the Core Linkage section. For pathology records this includes both Patient Identity and Pathology details.

There will be 1 linkage section completed each time the record is submitted.

**Key to Data Item Tables**

All data items are listed as follows:

| Data item No. | The reference number for the COSD data item |
|---|---|
| Data item name | The name of the data item. Please refer to the data set and/or schema for the data dictionary names |
| Format | Format required for submission of the data item |

| Data item No. | The reference number for the COSD data item |
|---|---|
| Schema specification (M/R/O/X/P) | The detailed schema for submission of the data is included in the Technical Guidance. This column identifies whether items are required for the extract to pass validation rules when submitted in XML format. (Note that all applicable data should be submitted as soon as possible).<br><br>Detailed explanation of each schema type are listed on page 9. |
| Moved data items | All data items that have moved within the data set since the last version will be indicated using bullet points following each data item description. |
| New data items | All new data items for v9, or those with a new description or attribute in an existing data item, are indicated throughout the user guide in bullet points following each data item description. In some data items this may also indicate a change in the data item number, format or schema specification. |

# CORE

These items are Mandatory for every record in order to link patient records.

In order to ensure that records submitted can be linked appropriately some key data fields must be completed for each record submitted. These are shown in the 'CORE Linkage' section.

There will be one linkage section completed each time the record is submitted.

Note:
- it is important to refer to the pathology user guide if reporting pathology direct from the LIMS as there are different linkage items required

## CORE – Linkage

These items are Mandatory for every record in order to link patient records.

In order to ensure that records submitted can be linked appropriately some key data fields must be completed for each record submitted. These are shown in the 'CORE Linkage' section.

There will be one linkage section completed each time the record is submitted.

## CORE – Patient Identity Details

One of the following 'Core - Linkage' Identifier sections must be provided per record (1..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| CR0010 | NHS Number | n10 | M* |
| CR0020 | Local Patient Identifier | min an1 max an20 | M* |
| CR1350 | NHS Number Status Indicator Code | an2 | M |
| CR0100 | Person Birth Date | an10 ccyy-mm-dd | M |
| CR0030 | Organisation Identifier (Code of Provider) | min an3 max an5 | M |

**\*** A combination of either 'NHS Number' and/or 'Local Patient Identifier' are mandatory for the schema. Both can be submitted, but a record cannot be submitted without at least one of these data items.

NHS Number:
The 'NHS Number' is a unique identifier for a patient within the NHS in England and Wales. This will not vary between any organisations of which a person is a patient.

Local Patient Identifier:
For linkage purposes, 'NHS Number' and/or 'Local Patient Identifier' are required. This is a number used to identify a patient uniquely within a health care provider. It may be different from the patient's case note number and may be assigned automatically by the computer system.

NHS Number Status Indicator Code:
The 'NHS Number Status Indicator Code' indicates the verification status of the NHS number provided.

| National code | National code definition |
|---|---|
| 01 | Number present and verified |
| 02 | Number present but not traced |
| 03 | Trace required |
| 04 | Trace attempted - No match or multiple match found |
| 05 | Trace needs to be resolved - (NHS Number or patient detail conflict) |
| 06 | Trace in progress |
| 07 | Number not present and trace not required |
| 08 | Trace postponed (baby under 6 weeks old) |

Person Birth Date:
The date on which a person was born or is officially deemed to have been born. This should be automatically linked via your local PAS system when you create a record for the first time.

Note:
- this is now a mandatory data item from v4.0

Organisation Identifier (Code of Provider):
The 'Organisation Identifier' of the organisation acting as a health care provider (an6 not applicable to COSD). This is the 3 or 5-digit code of the organisation submitting the

demographic details. This will therefore normally be either the organisation where the referral is received or the treating organisation.

Notes:
- there is a new code structure (ANANA) for new organisation identifiers allocated by ODS from 01 September 2020 onwards - codes issued prior to this date will not be converted
- more details can be found on the NHS Digital website using the following link here

## CORE – Demographic Details

### Demographics

Demographic details are required for every record in order to ensure that the correct patient can be identified, and information can be correctly linked. The demographics section should be completed by every Provider the first time a record is submitted.

There will only be one demographics section completed for each record. Demographic linkage items will be required each time the record is submitted. Almost all patients should have an NHS Number, and this should always be included where available. For those who do not have an NHS Number, the hospital number (Local Patient Identifier) must be provided.

It is anticipated that some of the demographic data items listed below will be collected by every provider with which the patient has contact. Where this information is exchanged, the appropriate data item name should be used.

May be up to one occurrence per record (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| CR0050 | Person Family Name | max an35 | R |
| CR0060 | Person Given Name | max an35 | R |
| CR0070 | Patient Usual Address (at Diagnosis) | an175 (5 lines each an35) | R |
| CR0080 | Postcode of Usual Address (at Diagnosis) | max an8 | R |
| CR3170 | Person Stated Gender Code | an1 | R |

Person Family Name:
That part of a person's name which is used to describe family, clan, tribal group, or marital association.


Person Given Name:
The forename(s) or given name(s) of a person.

Patient Usual Address (at Diagnosis):
The patient usual address of the patient at the time of patient diagnosis.

Postcode of Usual Address (at Diagnosis):
The postcode of usual address of the patient at the time of patient diagnosis.

Person Stated Gender Code:
Person's gender as self-declared (or inferred by observation for those unable to declare their 'Person Stated Gender').

| National code | National code definition |
|---|---|
| 1 | Male |
| 2 | Female |
| 9 | Indeterminate (Unable to be classified as either male or female) |
| X | Not known (Person Stated Gender Code not recorded) |

# CORE – Pathology

As of January 2016, all pathology should be submitted to the NDRS in structured xml. These reports will include all the data as prescribed below and would be submitted to the NDRS directly from the pathology Laboratory Information Management Systems (LIMS). Once the pathologist has completed and signed off each report, they can be submitted either individually or as a monthly batch of data. There is a separate pathology schema for submissions which come directly from the pathology LIMS.

There is no expectation therefore for providers to double enter these data by non-clinical MDT coordinators trying to read a pathology report and transcribe the relevant information correctly into their local cancer information system. As a result, all pathology data items have been removed from the main COSD data set and can only be reported via the pathology departments and this data set.

Pathological diagnosis and grade (where applicable) are recorded on biopsies and may be amended after surgical resection (if appropriate), when pathological staging should also be available. Full text pathology reports should be submitted to include these data items if structured coded extracts are not available. In addition, there may be more than one pathology section completed for each record.

To carry the pathology details. The core data set includes general pathological items which are applicable to all tumour sites unless otherwise stated, and site specific pathology items (relating to stage components). These core and site specific items are a subset of the RCPath cancer data sets which have been approved as professional standards by the college.

In v4, the data items across the data set were aligned exactly with the 'RC Path – Core' pathology data items. This has created additional changes to both data item names, descriptions and/or the attribute lists, where these were different in COSD. It is expected that these changes will help improve the data quality and ascertainment, whilst reducing the burden of double reporting.

Where structured reporting systems are not available for pathology, it is expected that many of the relevant data items will be included in the free text pathology report.

Important notes:
- all pathology data items from v4 are prefixed with a lowercase 'p', for example 'pCR0780'
- these reports should be sent to the NDRS through pre-agreed methods of submission

- the regional Data Liaison Managers can support Trusts with this, and any testing required for new reporting of data
- this is especially important when a new system is implemented, or an upgrade rolled out by a supplier or Trust IT team

A patient may have any number of pathology reports, and there may be more than one pathology report per specimen.

May be multiple occurrences per record (0..*)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pCR0780 | Investigation Result Date | an10 ccyy-mm-dd | M |
| pCR0950 | Service Report Identifier | min an1 max an36 | M |
| pCR6220 | Pathology Observation Report Identifier | min an1 max an36 | R |
| pCR0960 | Service Report Status | an1 | R |

Start Of Section - Consultant (Pathology Test Requested By)                                    Section 0..1

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pCR7100 | Professional Registration Issuer Code - Consultant (Pathology Test Requested By) | an2 | M |
| pCR7120 | Professional Registration Entry Identifier - Consultant (Pathology Test Requested By) | min an1 max an32 | M |

End of Section - Consultant (Pathology Test Requested By)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pCR0980 | Organisation Site Identifier (Pathology Test Requested By) | min an5 max an9 | R |
| pCR1010 | Sample Collection Date | an10 ccyy-mm-dd | R |
| pCR0770 | Sample Receipt Date | an10 ccyy-mm-dd | R |
| pCR0800 | Organisation Identifier (of Reporting Pathologist) | min an3 max an5 | R |

Start of Section - Consultant (Pathologist)                                    Section 0..1

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pCR7130 | Professional Registration Issuer Code - Consultant (Pathologist) | an2 | M |
| pCR7140 | Professional Registration Entry Identifier - Consultant (Pathologist) | min an1 max an32 | M |

End of Section - Consultant (Pathologist)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pCR0970 | Specimen Nature | an1 | R |

Start of Section - Topography/Morphology SNOMED                                Section 0..1

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pCR6990 | SNOMED Version (Pathology) | an2 | M |

Topography/Morphology Choice                                                   Choice 1..2

Choice 1

Start of repeating item - Topography (SNOMED) Pathology

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pCR6410 | Topography (SNOMED) Pathology | min an6 max an18 | M* |

End of repeating item - Topography (SNOMED) Pathology

End of Choice - Choice 1

Choice 2

Start Of Repeating Item - Morphology (SNOMED) Pathology

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pCR6420 | Morphology (SNOMED) Pathology | min n6 max n18 | M* |

End of repeating item - Morphology (SNOMED) Pathology

End of Choice 2

End of Topography/Morphology Choice

End of Section - Topography/Morphology SNOMED

Start of repeating item - Primary Diagnosis (ICD Pathological)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pCR0810 | Diagnosis (ICD Pathological) | min an4 max an6 | R* |

End of repeating item - Primary Diagnosis (ICD Pathological)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pCR0820 | Tumour Laterality (Pathological) | an1 | R |
| pCR0760 | Pathology Investigation Type | an2 | R |
| pCR1020 | Pathology Report Text | max an270000 | R |
| pCR0830 | Lesion Size (Pathological) | max n3.max n2 | R |
| pCR0860 | Grade of Differentiation (Pathological) | an2 | R |
| pCR0870 | Cancer Vascular or Lymphatic Invasion | an2 | R |
| pCR0880 | Excision Margin | an2 | R |
| pCR0840 | Synchronous Tumour Indicator | an1 | R |
| pCR0890 | Number of Nodes Examined | max n3 | R |
| pCR0900 | Number of Nodes Positive | max n3 | R |
| pCR6980 | TNM Coding Edition | an1 | R |
| pCR6820 | TNM Version Number (Pathological) | max an2 | R |
| pCR0910 | T Category (Pathological) | max an15 | R |
| pCR0920 | N Category (Pathological) | max an15 | R |
| pCR0930 | M Category (Pathological) | max an15 | R |
| pCR0940 | TNM Stage Grouping (Pathological) | max an15 | R |
| pCR1000 | Neoadjuvant Therapy Indicator | an1 | R |
| pCR7000 | Ki-67 INDICATOR | an1 | R |

| pCR7010 | Ki-67 RESULT | max n3 | R |
|---------|--------------|--------|---|
| pCR7020 | MLH1 Nuclear Expression Intact | an1 | R |
| pCR7030 | PMS2 Nuclear Expression Intact | an1 | R |
| pCR7040 | MSH2 Nuclear Expression Intact | an1 | R |
| pCR7050 | MSH6 Nuclear Expression Intact | an1 | R |
| pCR7060 | Microsatellite Instability (MSI) Testing | an1 | R |

Note the following data items have been retired from v4.0:
- Care Professional Code (Pathology Test Requested By)
- Consultant Code (Pathologist)

Investigation Result Date:
Record the date on which an investigation was concluded, for example: the date the result was authorised.

Note:
- this is now a mandatory data item from v4.0

Service Report Identifier:
A unique identifier of a service report.

Notes:
- this is now a mandatory data item from v4.0
- it is possible that some legacy data may not have all the required mandatory fields for v9
- the recommendation is for Trusts to update their data to meet the new requirements and improve/enrich their data submissions, or not upload the legacy data items in the new record (if that data is not available)

Pathology Observation Report Identifier:
This is the local identifier of an observation report.

Notes:
- this differs from the 'Service Report Identifier' as it identifies the specific RC Path Form used
- multiple of these could be contained within a Service Report (where there are multiple tumours are identified/taken)

Service Report Status:
The status of the service report.

| National code | National code definition |
|---|---|
| 1 | Final (complete) |
| 2 | Preliminary (Interim) |
| 3 | Test not available |
| 4 | Unspecified |
| 5 | Supplementary/second opinion |
| 6 | Deleted |

Important notes:
- the next 2 data items are now a multiple selection group and are mandatory within the group
- there may be one occurrence per 'CORE – Pathology Details' section

Professional Registration Issuer 'Code – Consultant (Pathology Test Requested By)':
This is a new data item in v4 replacing the 'Care Professional Code (Pathology Test Requested By)' and is a code which identifies the professional registration body for the consultant or health care professional who requested the pathology test.

| National code | National code definition |
|---|---|
| 02 | General Dental Council |
| 03 | General Medical Council |
| 04 | General Optical Council |
| 08 | Health and Care Professions Council |
| 09 | Nursing and Midwifery Council |

Professional Registration Entry Identifier – Consultant (Pathology Test Requested By):
This is a new data item in v4 replacing the 'Care Professional Code (Pathology Test Requested By)' and is the registration identifier allocated by an organisation for the consultant or health care professional who requested the pathology test.

Organisation Site Identifier (Pathology Test Requested By):
The 'Organisation Identifier' of the organisation site at which the care professional, who requested the diagnostic test request for suspected cancer, is based.

Sample Collection Date:
The date that a sample collection takes place or the start of a period for sample collection. This is the same as the date the Sample is taken.

Sample Receipt Date:
Date of receipt of a sample by a laboratory.

Organisation Identifier (of Reporting Pathologist):
The 'Organisation Identifier' of the organisation at which the authorising pathologist is based.

Important note:
- the next 2 data items are now a multiple selection group and are mandatory within the group. There may be one occurrence per CORE – Pathology Details section

Professional Registration Issuer Code – Consultant (Pathologist):
This is a new data item in v4 replacing the 'Consultant Code (Pathologist)' and is a code which identifies the professional registration body for the consultant or health care professional who authorises the pathology report.

| National code | National code definition |
|---|---|
| 02 | General Dental Council |
| 03 | General Medical Council |
| 04 | General Optical Council |
| 08 | Health and Care Professions Council |
| 09 | Nursing and Midwifery Council |

Professional Registration Entry Identifier – Consultant (Pathologist):
This is a new data item in v4 replacing the 'Consultant Code (Pathologist)' and is the registration identifier allocated by an organisation for the consultant or health care professional who authorises the pathology report.

Specimen Nature:
The nature of the specimen taken during a clinical investigation.

| National code | National code definition |
|---|---|
| 1 | Primary tumour |
| 2 | Further excision of primary tumour |

| National code | National code definition |
|---|---|
| 4 | Regional Lymph Nodes |
| 5 | Metastatic site other than regional lymph nodes |
| 9 | Not known |

Note:
- where none of the above options are applicable, 'Not known' maybe selected

SNOMED version:
The version of SNOMED used to encode 'Morphology (SNOMED) Pathology' and 'Topography (SNOMED) Pathology'.

Note:
- versions of SNOMED prior to SNOMED CT ceased to be licenced by The International Health Terminology Standards Development Organisation (IHTSDO) after April 2017 other than for historical content

| National code | National code definition |
|---|---|
| 01 | SNOMED II |
| 02 | SNOMED 3 |
| 03 | SNOMED 3.5 |
| 04 | SNOMED RT |
| 05 | SNOMED CT |
| 99 | Not Known |

Important note:
- the next 2 data items form a 2-choice menu and at least one of the following choices must be provided per submission (1..2)

**Choice 1**

Topography (SNOMED) Pathology:
This is the topographical site of the tumour as categorised by SNOMED International / SNOMED CT, multiple codes may be submitted.

Note:
- this is now a mandatory data item from v4.0 within this choice

**Choice 2**

morphology (SNOMED) pathology:

This is the morphology of the tumour as categorised by SNOMED International / SNOMED CT, multiple codes may be submitted.

Note:
- this is now a mandatory data item from v4.0 within this choice

Diagnosis (ICD Pathological):

The ICD diagnosis is based on the evidence from a pathological examination, multiple codes may be submitted as it is a repeating data item.

Note:
- where the ICD10 code only has 3 characters, for example C01, please add "X" as a 'packing digit' to meet the validation rules (such as C01.X, C07.X, C73.X)
- in addition, the reporting format excludes the decimal CXX.X or DXX.X, all xml reports must be recorded as CXXX or DXXX

Tumour Laterality (Pathological):

'Tumour laterality' identifies the side of the body for a tumour relating to paired organs within a patient based on the evidence from a pathological examination.

| National code | National code definition |
|---|---|
| L | Left |
| R | Right |
| M | Midline |
| B | Bilateral |
| 8 | Not applicable |
| 9 | Not known |

Pathology Investigation Type:

The type of pathology investigation procedure carried out.

Note:
- please see the 'Skin' site specific data set for further information on collecting this data item, including the site specific values to be used

| National code | National code definition |
|---|---|
| CY | Cytology |
| BU | Biopsy NOS |
| EX | Excision |
| PE | Partial Excision |
| RE | Radical Excision |
| FE | Further Excision |
| CU | Curettage |
| SB | Shave Biopsy |
| PB | Punch Biopsy |
| IB | Incisional Biopsy |
| 99 | Uncertain/other |

Pathology Report Text:
The full text from the pathology report which may be required by Registries to calculate diagnosis and staging details.

Lesion Size (Pathological):
The size in millimetres of the diameter of a lesion, largest if more than one, if the histology of a sample proves to be invasive.

Notes:
- for COSD reporting purposes, this data item can be submitted to 2 decimal places
- this data item is not applicable for Haematology diagnosis
- please see Skin site specific data set for further information on collecting this data item, including the site specific values to be used

Grade Of Differentiation (at Diagnosis):
This is the definitive grade of the Tumour at the time of patient diagnosis.

| National code | National code definition |
|---|---|
| GX | Grade of differentiation is not appropriate or cannot be assessed |
| G1 | Well differentiated |
| G2 | Moderately differentiated |
| G3 | Poorly differentiated |

| National code | National code definition |
|---|---|
| G4 | Undifferentiated / anaplastic |

Notes:
- the default labels for these fields ("well differentiated", "moderately differentiated" and "poorly differentiated") are not applicable to NET
- these are nationally assigned 'general' descriptions used within COSD, the correct grade will be applied by the NCRAS upon processing the data

The following mapping table can be used to map other (site-specific) invasive grades, into the main [Grade of Differentiation (At Diagnosis)] field:

| Grade | GX | G1 | G2 | G3 | G4 |
|---|---|---|---|---|---|
| Invasive Grade Breast | n/a | Grade 1 | Grade 2 | Grade 3 | n/a |
| Colorectal | n/a | Well/Moderately differentiated | n/a | Poorly differentiated | n/a |
| CNS | n/a | I | II | III | IV |
| Fallopian Tube, Ovary, | n/a | Low | Intermediate | High | n/a |
| Neuroendocrine (NET) Tumours | Grade of differentiation is not appropriate or cannot be assessed | Grade 1 NET | Grade 2 NET | Grade 3 NET or Grade 3 NEC | Not used |
| Salivary Tumour Grade | n/a | Low | n/a | High | n/a |
| Sarcoma Histological | n/a | Low | Intermediate | High | n/a |

Cancer Vascular or Lymphatic Invasion:
An indication of the presence or absence of unequivocal tumour in lymphatic and/or vascular spaces.

| National code | National code definition |
|---|---|
| NU | No – vascular/lymphatic invasion not present |

| National code | National code definition |
|---|---|
| YU | Yes – vascular/lymphatic invasion present |
| YV | Vascular invasion only present |
| YL | Lymphatic invasion only present |
| YB | Both lymphatic and vascular invasion present |
| UU | Uncertain whether vascular/lymphatic invasion is present or not |
| XX | Cannot be assessed |
| 99 | Not known |

Note:
- this data item is not applicable for Haematology diagnosis

Excision Margin:
An indication of whether the excision margin was clear of the tumour and if so, by how much. Where there is more than one measurement, record the closest or closest relevant margin. Where actual measurements are not taken use options 01, 05 or 06.

| National code | National code definition |
|---|---|
| 01 | Excision margins are clear (distance from margin not stated) |
| 02 | Excision margins are clear (tumour >5mm from the margin) |
| 03 | Excision margins are clear (tumour >1mm but less than or equal to 5mm from the margin |
| 04 | Tumour is less than or equal to 1mm of excision margin, but does not reach margin |
| 05 | Tumour reaches tumour margin |
| 06 | Uncertain |
| 07 | Margin not involved (equal to or greater than 1mm) |
| 08 | Margin not involved (less than 1mm) |
| 09 | Margin not involved (1 to 5 mm) |
| 98 | Not applicable |
| 99 | Not Known |

Notes:
- codes 07, 08 and 09 are only applicable for skin cancers, they have been included to align with the RCPath data sets for skin diagnoses
- this data item is not applicable for Haematology diagnosis

Synchronous Tumour Indicator:
An indicator of the presence of multiple tumours at a tumour site.

| National code | National code definition |
|---|---|
| N | No, no synchronous tumours present |
| Y | Yes, synchronous tumours present |
| 9 | Not Known |

Note:
- this data item is not applicable for Haematology diagnosis

number of nodes examined:
The number of local and regional nodes examined.

Note:
- this data item is not applicable for CNS, Haematology or Lung diagnosis

Number Of Nodes Positive:
The number of local and regional nodes reported as being positive for the presence of tumour metastases.

Notes:
- this data item is not applicable for CNS, Haematology or Lung diagnosis
- the COSD Core TNM Staging data items below are not applicable for CNS, Gynaecology, Haematology, Skin and most CTYA diagnoses
- see site specific data sets for further information on collecting applicable stage data, including the site specific values to be used for TNM where relevant

TNM Coding Edition:
The TNM Coding edition in use.

| National code | National code definition |
|---|---|
| 1 | UICC (Union for International Cancer Control) |
| 2 | AJCC (American Joint Committee on Cancer) |
| 3 | ENETS (European Neuroendocrine Tumour Society) |

Note:
- for v4 the addition of European Neuroendocrine Tumour Society (ENTS) has been added to this list of TNM coding editions reportable through COSD, to improve data quality

TNM Version Number (Pathological):
The AJCC, UICC or ENETS version number used for Tumour, Node and Metastasis (TNM) staging for cancer diagnosis.

T Category (Pathological):
'T Category (Pathological)' is the code which classifies the size and extent of the primary tumour based on the evidence from a pathological examination.

N Category (Pathological):
'N Category (Pathological)' is the code which classifies the absence or presence and extent of regional lymph node metastases based on the evidence from a pathological examination.

M Category (Pathological):
'M Category (Pathological)' is the code which classifies the absence or presence of distant metastases based on the evidence from a pathological examination.

TNM Stage Grouping (Pathological):
'TNM Stage Grouping (Pathological)' is the code which classifies the combination of tumour, node and metastases into stage groupings based on the evidence from a pathological examination.

Neoadjuvant Therapy Indicator:
Indicator of whether the pathological stage was recorded after the patient had received neoadjuvant therapy (i.e. chemotherapy or radiotherapy prior to surgery).

Note:
- if this is 'Yes' the pathology stage fields should NOT be prefixed with the letter 'y'

| National code | National code definition |
| --- | --- |
| Y | Yes |
| N | No |
| 9 | Not known |

Ki-67 Indicator:
This is a new data item in v4. Indicate if a Ki-67 staining was done on the sample.

| National code | National code definition |
|---|---|
| 1 | Done and available |
| 2 | Done but not available |
| 3 | Not done |
| 9 | Not Known |

Ki-67 Result:

This is a new data item in v4. Record the percentage of tumour cells that are positive for Ki-67, on a scale of 0 to 100.

MLH1 Nuclear Expression Intact:

This is a new data item in v4. Is MLH1 immunohistochemistry nuclear expression intact?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| E | Equivocal |
| F | Test failed |
| X | Not performed |

PMS2 Nuclear Expression Intact:

This is a new data item in v4. Is PMS2 immunohistochemistry nuclear expression intact?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| E | Equivocal |
| F | Test failed |
| X | Not performed |

MSH2 Nuclear Expression Intact:

This is a new data item in v4. Is MSH2 immunohistochemistry nuclear expression intact?

| National code | National code definition |
|---|---|
| Y | Yes |

| National code | National code definition |
|---|---|
| N | No |
| E | Equivocal |
| F | Test failed |
| X | Not performed |

MSH6 Nuclear Expression Intact:
This is a new data item in v4. Is MSH6 immunohistochemistry nuclear expression intact?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| E | Equivocal |
| F | Test failed |
| X | Not performed |

Microsatellite Instability (MSI) Testing:
This is a new data item in v4. Result of microsatellite instability (MSI) testing.

| National code | National code definition |
|---|---|
| H | MSI-high |
| L | MSI-low |
| S | MSI-stable |
| F | Test failed |
| X | Not performed |

# BREAST – Pathology

This is the site specific section for additional breast cancer specific data items to be recorded. These will be aligned within the schema to form a single report.

May be up to one occurrence per pathology report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pBR4140 | Multifocal Tumour Indicator (Breast) | an1 | R |
| pBR4160 | DCIS Grade | an1 | R |
| pBR4180 | DCIS /Pleomorphic or DCIS Like LCIS Size | max n3.max n2 | R |
| pBR4190 | Whole Tumour (Invasive + DCIS) Size | max n3.max n2 | R |
| pBR4200 | Metastasis Extent Code | an1 | R |
| pBR4210 | Distance to Margin | max n2.max n1 | R |
| pBR4230 | ER Allred Score | an1 | O |
| pBR4220 | ER Status | an1 | R |
| pBR4300 | PR Allred Score | an1 | O |
| pBR4290 | PR Status | an1 | O |
| pBR4280 | HER2 Status | an1 | R |
| pBR4310 | HER2 ISH Status | an1 | R |
| pBR4240 | Cytology (Breast) | an2 | R |
| pBR4250 | Cytology (Node) | an2 | R |
| pBR4260 | Core Biopsy (Breast) | min an2 - max an3 | R |
| pBR4270 | Core Biopsy (Node) | an3 | R |

Multifocal Tumour Indicator (Breast):
Is there more than one discrete tumour identified in the same breast?

| National code | National code definition |
|---|---|
| Y | YES (Multiple invasive foci) |
| N | NO (Localised) |
| 9 | Not Known (Cannot be assessed) |

Note:
- all the national code definitions have been updated to meet the 'RCPath Core' data set

DCIS grade:
If ductal carcinoma in situ is present, record the DCIS grade. This is the cytonuclear grade.

| National code | National code definition |
|---|---|
| H | High |
| I | Intermediate |
| L | Low |
| X | Not assessable (Cannot be assessed) |

Note:
- the national code definition for 'X' has been updated meet the 'RC Path Core' data set

DCIS/pleomorphic or DCIS like LCIS Size:
Record the size of the non-invasive tumour in mm. This is only required if there is no invasive component.

Notes:
- for COSD reporting purposes, this data item can be submitted to 2 decimal places
- the data item name has been updated in v4 to match the 'RCPath Core' data set

Whole Tumour (Invasive + DCIS) Size:
Record the whole size of the tumour (invasive + surrounding DCIS, if DCIS extends >1mm beyond invasive) (mm) (For tumours without a DCIS component this will be the same as 'Invasive Lesion Size').

Notes:
- for COSD reporting purposes, this data item can be submitted to 2 decimal places
- the data item name has been updated in v4 to match the 'RCPath Core' data set

Metastasis Extent Code:

For single node positivity, specify micrometastatic status as follows: Greater than 2mm = Metastases, 2mm to greater than 0.2mm = Micrometastasis, less than or equal to 0.2mm = Isolated tumour cells.

| National code | National code definition |
|---|---|
| 2 | Micrometastasis |
| 3 | Isolated tumour cells (ITCs) |
| 4 | Macrometastasis |
| 9 | Not known |

Notes:
- '1 - Metastasis' has been removed from the data set from v4
- '3 - Isolated tumour cells (ITCs)' national code definition has been updated meet the 'RCPath Core' data set
- '4 - Macrometastasis' is a new attribute in v4

Distance to Margin:

Distance to closest relevant margin (mm). Distance to nearest radial margin whether invasive or non-invasive. (For COSD measurement to the nearest mm is sufficient but may be recorded to nearest tenth of mm).

ER Allred Score:

ER Allred score (range 0, 2 -8). This is now an optional data item from v4 as it is not in the 'RC Path Core' data set.

ER Status:

Oestrogen Receptor (ER) status. (A positive score means that oestrogen is causing the tumour to grow, and a negative score means that the tumour is not driven by oestrogen).

| National code | National code definition |
|---|---|
| P | Positive (> or = 1%) |
| N | Negative (<1%) |

| National code | National code definition |
|---|---|
| X | Not performed |

Note:
- 'P' and 'N' national code definitions have been updated meet the 'RCPath Core' data set

PR Allred Score:
Record the PR ALLRED score if known. (Range 0, 2-8). This is now an optional data item from v4 as it is not in the 'RC Path Core' data set.

PR Status:
Progesterone Receptor Status. Record the PR status if known. This is now an optional data item from v4 as it is not in the 'RC Path Core' data set.

| National code | National code definition |
|---|---|
| P | Positive |
| N | Negative |
| X | Not performed |

HER2 Status:
HER2 Immunohistochemical status (Human Epidermal Growth Factor Receptor 2). Where the initial result of this test is 'Borderline', a further report will follow with result of the ISH test.

| National code | National code definition |
|---|---|
| N1 | Negative (0) |
| N2 | Negative (1+) |
| B | Borderline (2+) |
| P | Positive (3+) |
| X | Not performed |

Notes:
- 'N - Negative' has been removed from the data set from v4
- 'N1' and 'N2' are new attributes for v4
- 'B' and 'P' national code definitions have been updated meet the 'RCPath Core' data set

HER2 ISH Status:

Record the result of the ISH (in situ hybridization) test. This is only required if the initial HER2 status is 'Borderline'.

| National code | National code definition |
|---|---|
| P | Positive (Amplified) |
| N | Negative (Non-amplified) |
| B | Borderline |
| X | Not performed |

Notes:
- 'P' and 'N' national code definitions have been updated meet the 'RCPath Core' data set
- 'B' and 'X' are new attributes for v4

Cytology (Breast):

Cytology opinion (Breast).

| National code | National code definition |
|---|---|
| C1 | Inadequate/unsatisfactory specimen |
| C2 | Benign |
| C3 | Uncertain |
| C4 | Suspicious of malignancy |
| C5 | Malignant |

Cytology (Node):

Cytology opinion on axillary lymph node.

| National code | National code definition |
|---|---|
| C1 | Inadequate/unsatisfactory specimen |
| C2 | Benign |
| C3 | Uncertain |
| C4 | Suspicious of malignancy |
| C5 | Malignant |

Core Biopsy (Breast):
Needle core biopsy opinion.

| National code | National code definition |
|---|---|
| B1 | Unsatisfactory/normal tissue only |
| B2 | Benign |
| B3a | Uncertain malignant potential without epithelial atypia |
| B3b | Uncertain malignant potential with epithelial atypia |
| B4 | Suspicious |
| B5a | Malignant (In situ) |
| B5b | Malignant (Invasive) |
| B5c | Malignant (Not assessable) |

Notes:
- 'B1' national code definition has been updated meet the 'RCPath Core' data set
- 'B3' has been removed from the data set from v4
- 'B3a' and 'B3b' are new attributes for v4

Core Biopsy (Node):
Needle biopsy opinion on axillary lymph node.

| National code | National code definition |
|---|---|
| LB1 | Inadequate/unsatisfactory |
| LB2 | Normal/Benign |
| LB3 | Uncertain |
| LB4 | Suspicious |
| LB5 | Malignant |

Notes:
- 'B1', 'B2', 'B3', 'B4' and 'B5' have been removed from the data set from v4
- 'LB1', 'LB2', 'LB3', 'LB4' and 'LB5' are new attributes for v4

# CENTRAL NERVOUS SYSTEM – Pathology

This is the site specific section for additional central nervous system cancer specific data items to be recorded. These will be aligned within the schema to form a single report.

May be up to one occurrence per Pathology Report (0..1)

Start of repeating item - Molecular Diagnostics Code

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pBA3070 | Molecular Diagnostics Code | an2 | R* |

End of repeating item - Molecular Diagnostics Code

Start of repeating item - Immunohistochemistry Hormone Expression Type

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pBA3150 | Immunohistochemistry Hormone Expression Type | an1 | R* |

End of repeating item - Immunohistochemistry Hormone Expression Type

Molecular Diagnostics Code:
Chromosomal or genetic markers associated with the brain tumour. This may involve selection of more than one value for each tumour, as it is a repeating data item.

This table was extensively discussed by the Brain CNS expert group and has been based on the 2016 WHO categories for Molecular Diagnostic Markers.

| National code | National code definition |
|---|---|
| 06 | Evidence of ALK rearrangement |
| 07 | Evidence of native ALK |
| 08 | Evidence of ATRX mutation |
| 09 | Evidence of wt ATRX |
| 10 | Evidence of BRAF V600E mutation |
| 11 | Evidence of wt BRAF |
| 12 | Evidence of KIAA1549-BRAF fusion |
| 13 | Evidence of BRAF/RAF1 mutations, or fusions involving genes other than KIAA1549 |

| National code | National code definition |
|---|---|
| 14 | Evidence of C11orf95-RELA fusion |
| 15 | Evidence of native C11orf95 and RELA |
| 16 | Evidence of amplification or fusion of C19MC locus (chr.19q13.42) |
| 17 | Evidence of unaltered C19MC locus (chr.19q13.42) |
| 18 | Evidence of CDK4/6 amplification |
| 19 | Evidence of CDK4/6 normal copy number |
| 20 | Evidence of CDKN2A locus homozygous deletion |
| 21 | Evidence of CDKN2A locus normal copy number |
| 22 | Evidence of CCND1/2/3 amplification |
| 23 | Evidence of CCND1/2/3 normal copy number |
| 24 | Evidence of CTNNB1 mutation |
| 25 | Evidence of wt CTNNB1 |
| 26 | Evidence of amplification of EGFR |
| 27 | Evidence of mutation / rearrangement of EGFR |
| 28 | Evidence of unaltered EGFR |
| 29 | Evidence of EWSR1-FLI1 fusion |
| 30 | Evidence of native EWSR1 and FLI1 |
| 31 | Evidence of FGFR1 mutation / rearrangement / fusion |
| 32 | Evidence of unaltered FGFR1 |
| 33 | Evidence of H3F3A/H3F3B (H3.3) K27M mutation |
| 34 | Evidence of H3F3A/H3F3B (H3.3) wt K27 |
| 35 | Evidence of H3F3A/H3F3B (H3.3) G34R/V mutation |
| 36 | Evidence of H3F3A/H3F3B (H3.3) wt G34 |
| 37 | Evidence of HIST1H3B K27M mutation |
| 38 | Evidence of HIST1H3B wt K27 |
| 39 | Evidence of HIST1H3C K27M mutation |
| 40 | Evidence of HIST1H3C wt K27 |
| 41 | Evidence of ID2 amplification |
| 42 | Evidence of ID2 normal copy number |
| 43 | IDH1 (codon 132) or IDH2 (codon 172) mutation identified |
| 44 | IDH1 (codon 132) and IDH2 (codon 172) wt confirmed |
| 45 | Evidence of KLF4 K409Q and TRAF7 mutations |
| 46 | Evidence of wt KLF4 and TRAF7 |

| National code | National code definition |
|---|---|
| 47 | Evidence of MAP2K1 mutation |
| 48 | Evidence of wt MAP2K1 |
| 49 | Evidence of MET amplification |
| 50 | Evidence of MET normal copy number |
| 51 | Evidence of significant MGMT promoter methylation |
| 52 | Evidence of unmethylated MGMT promoter |
| 53 | Evidence of MYC/MYCN amplification |
| 54 | Evidence of MYC/MYCN normal copy number |
| 55 | Evidence of NF1 biallelic loss / mutation |
| 56 | Evidence of unaltered NF1 |
| 57 | Evidence of NF2 biallelic loss / mutation |
| 58 | Evidence of unaltered NF2 |
| 59 | Evidence of NKTR fusions |
| 60 | Evidence of native NKTR |
| 61 | Evidence of PTEN biallelic loss / mutation |
| 62 | Evidence of unaltered PTEN |
| 63 | Evidence of SDHB or SDHD mutation |
| 64 | Evidence of wt SDHB and SDHD |
| 65 | Evidence of SHH pathway activation |
| 66 | Evidence of normal SHH pathway |
| 67 | Evidence of inactivation of SMARCB1 (INI1) |
| 68 | Evidence of wt SMARCB1 (INI1) |
| 69 | Evidence of inactivation of SMARCA4 |
| 70 | Evidence of wt SMARCA4 |
| 71 | Evidence of TERT promotor mutation |
| 72 | Evidence of wt TERT promotor |
| 73 | Evidence of TP53 mutation |
| 74 | Evidence of wt TP53 |
| 75 | Evidence of TSC1 or TSC2 mutation |
| 76 | Evidence of wt TSC1 and TSC2 |
| 77 | Evidence of VHL mutation |
| 78 | Evidence of wt VHL gene |
| 79 | Evidence of WNT pathway activation |

| National code | National code definition |
|---|---|
| 80 | Evidence of normal WNT pathway |
| 81 | Evidence of WWTR1-CAMTA1 fusion |
| 82 | Evidence of native WWTR1 and CAMTA1 |
| 83 | Evidence of codeletion of chr.1p and chr.19q |
| 84 | Evidence of total chr.1p loss but normal copy number of chr.19q |
| 85 | Evidence of normal copy number of both chr.1p and chr.19q |
| 86 | Evidence of monosomy chr.6 |
| 87 | Evidence of chr.6 normal copy number |
| 88 | Evidence of polysomy chr.7 |
| 89 | Evidence of chr.7 normal copy number |
| 90 | Evidence of loss of chr.10 or chr.10q |
| 91 | Evidence of chr.10 normal copy number |
| 92 | Evidence of loss of chr.22 or chr.22q |
| 93 | Evidence of chr.22 or chr.22q normal copy number |
| 98 | Other |
| 99 | Not Known (Not Recorded) |

The old codes (below) can be mapped as follows to enable a seamless transition to v4, where old reports are re-submitted as part of a clinical review.

| Old Codes and Descriptions | | New Codes and Descriptions | |
|---|---|---|---|
| 01 | Evidence of IDH1 or IDH2 mutation | 43 | IDH1 (codon 132) or IDH2 (codon 172) mutation identified |
| 02 | Evidence of methylation of the MGMT gene CpG island | 51 | Evidence of significant MGMT promoter methylation |
| 03 | Evidence of total loss of 1p and 19q | 83 | Evidence of codeletion of chr.1p and chr.19q |
| 04 | Evidence of KIAA 1549-BRAF fusion gene | 12 | Evidence of KIAA1549-BRAF fusion |
| 05 | Other | 98 | Other |

Immunohistochemistry Hormone Expression Type:
Hormone expression by immunohistochemistry. for pituitary adenomas only. This may involve selection of more than one value, as it is a repeating data item.

| National code | National code definition |
|---|---|
| 0 | Non functioning |
| 1 | ACTH |
| 2 | LH |
| 3 | FSH |
| 4 | Alpha-subunit |
| 5 | TSH |
| 6 | Prolactin |
| 7 | Growth Hormone |

| National code | National code definition |
|---|---|

# COLORECTAL – Pathology

This is the site specific section for additional colorectal cancer specific data items to be recorded. These will be aligned within the schema to form a single report.

May be up to one occurrence per pathology report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pCO5190 | Positive Proximal or Distal Resection Margin | an1 | R |
| pCO5210 | Distance to Circumferential Margin | max n2.max n2 | R |
| pCO5260 | Plane of Surgical Excision | an1 | R |
| pCO5270 | Distance From Dentate Line | max n3.max n2 | R |
| pCO5280 | Distance Beyond Muscularis Propria | max n3.max n2 | R |
| pCO5290 | Response to Preoperative Therapy | an2 | R |
| pCO5300 | Status of Circumferential Excision Margin | an1 | R |

Note the following data item has been retired from v4.0:
- Grade of Differentiation (Colorectal Pathological)

Positive Proximal or Distal Resection Margin:
Record whether the proximal or distal resection margins were involved. If the minimal distance from the cut margin is less than or equal to 1 mm the margin is considered 'involved'.

| National code | National code definition |
|---|---|
| 0 | Margin not involved |
| 1 | Margin involved |
| 8 | Not submitted by pathologist |
| 9 | Not known |

Note:
- '8 - Not submitted by pathologist' is a new attribute for v4

Distance to Circumferential Margin:
Record the distance from the outer margin of the tumour to the closest non-peritonealised circumferential resection margin in mm. rectal cancers only.

Plane of Surgical Excision:
For rectal cancers only. This is the quality of the surgical excision as seen by the pathologist. This grades the resection on its worst plane.

| National code | National code definition |
|---|---|
| 1 | Mesorectal fascia |
| 2 | Intramesorectal |
| 3 | Muscularis propria |

Distance From Dentate Line:
For abdominoperineal excision specimens only. Record the distance of the tumour from the dentate line in mm measured on the gross specimen.

Distance Beyond Muscularis Propria:
Maximum distance of spread beyond muscularis propria in mm. If there is doubt about the sites of the muscularis propria estimate the distance as accurately as possible.

Response to Preoperative Therapy:
If preoperative therapy was given what was the response.

| National code | National code definition |
|---|---|
| 08 | No viable cancer cells (TRS 0) |
| 09 | Single cells or rare small groups of cancer cells (TRS 1) |
| 10 | Residual cancer with evident tumour regression (TRS 2) |
| 11 | No evident tumour regression (TRS 3) |
| 97 | Not Applicable |

Notes:
- '4', '5', '6', '7' have been removed from the data set from v4
- '08', '09', '10', '11' and '97' are new attributes for v4

Status of Circumferential Excision Margin:
Record if the edge of the tumour is 1 mm or less from the circumferential resection margin (i.e. margin involved) circumferential margin refers to the completeness of the surgeon's resection margin in the opinion of the histopathologist. In parts of the colon where it is

completely surrounded by peritoneum, recording of the Circumferential Resection Margin (CRM) is not appropriate.

| National code | National code definition |
|---|---|
| 0 | Margin not involved |
| 1 | Margin involved |
| 9 | Not known |

# CHILDREN TEENAGERS AND YOUNG ADULTS – Renal Pathology (Paediatric Kidney)

This is the site specific section for additional children teenagers and young adult cancer specific data items to be recorded. These will be aligned within the schema to form a single report.

May be up to one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pCT6610 | Tumour Rupture | an1 | R |
| pCT6620 | Anaplastic Nephroblastoma | an1 | R |
| pCT6630 | Perirenal Fat Invasion | an1 | R |
| pCT6640 | Renal Sinus Invasion | an1 | R |
| pCT6650 | Renal Vein Tumour | an1 | R |
| pCT6680 | Viable Tumour at Resection Margin | an1 | R |
| pCT6670 | Tumour Local Stage (Pathological) | an1 | R |

Note the following data item has been retired from v4.0:

- Viable Tumour

Tumour Rupture:
Integrity of tumour margins based on pathologist's assessment.

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| X | Not stated |

Anaplastic Nephroblastoma:

Is there evidence of anaplasia, focal or diffused, based on established pathological classification.

| National code | National code definition |
|---|---|
| F | Focal |
| D | Diffused |
| U | Uncertain |

Note:
- 'F' and 'D' national code definition have been updated meet the 'RCPath Core' data set

Perirenal Fat Invasion:

Are there areas of perirenal fat suspected for tumour infiltration?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| U | Uncertain |

Renal Sinus Invasion:

Is there evidence of invasion of renal sinus by tumour?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| U | Uncertain |

Renal Vein Tumour:

Is there evidence of tumour thrombus in the renal vein?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |

| National code | National code definition |
|---|---|
| U | Uncertain |

Viable Tumour At Resection Margin:

This is a new data item for v4 and replaces CT6660. Is there evidence of viable tumour in the renal sinus?

| National code | National code definition |
|---|---|
| V | Viable |
| N | Non-viable |
| X | Not applicable |

Tumour Local Stage (Pathological):

Local stage of the tumour as assessed by pathologist. Classification system used is International Society of Paediatric Oncology (SIOP).

| National code | National code definition |
|---|---|
| 1 | Stage I |
| 2 | Stage II |
| 3 | Stage III |

# GYNAECOLOGICAL – Pathology

This is the site specific section for additional gynaecological cancer specific data items to be recorded. These will be aligned within the schema to form a single report.

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pGY7050 | Fallopian Tube Involvement | an1 | R |
| pGY7120 | Ovarian Involvement | an1 | R |
| pGY7130 | Serosal Involvement | an1 | R |
| pGY7100 | Omental Involvement | an1 | R |

Fallopian Tube Involvement:
For endometrial and epithelial/ovarian cancers, is there microscopic involvement of fallopian tubes?

| National code | National code definition |
|---|---|
| 1 | Not involved |
| 2 | Right involved |
| 3 | Left involved |
| 4 | Both involved |
| X | Not assessable |

Ovarian Involvement:
For endometrial and fallopian cancers, is there microscopic involvement of ovaries?

| National code | National code definition |
|---|---|
| 1 | Not involved |
| 2 | Right involved |
| 3 | Left involved |
| 4 | Both involved |
| X | Not assessable |

Serosal Involvement:

For endometrial, epithelial/ovarian and fallopian cancers, is there microscopic involvement of uterine serosa?

| National code | National code definition |
|---|---|
| X | Not Assessable |
| I | Invasive carcinoma |
| B | Borderline changes (non-invasive implants) |
| N | Not involved |

Notes:
- 'Y' and 'N' have been removed from the data set from v4
- 'I', 'B' and 'N' are new attributes for v4

Omental Involvement:

For endometrium, ovary, fallopian tube and primary peritoneum cancers, is there involvement of the omentum?

| National code | National code definition |
|---|---|
| 1 | Involved – deposit size not specified |
| 2 | Involved – deposit(s) 20mm or less |
| 3 | Involved – deposit(s) greater than 20mm |
| 4 | Not involved |
| X | Not assessable/not sent |

## GYNAECOLOGICIAL - Pathology - Fallopian Tube, Ovarian Epithelial and Primary Peritoneal

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pGY7140 | Capsule Status | an1 | R |
| pGY7190 | Ovarian Surface Involvement | an1 | R |

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pGY7170 | Peritoneal Cytology | an1 | R |
| pGY7180 | Peritoneal Involvement | an1 | R |

Note the following data item has been moved to the cervical table in v4.0:

- Invasive Thickness

Capsule Status:
Capsule status of ovaries (record the most severe).

| National code | National code definition |
|---|---|
| 1 | Intact |
| 2 | Disrupted |
| 3 | Involved |
| X | Not assessable |

Ovarian Surface Involvement:
Is there involvement of the surface of either ovary?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| X | Not assessable |

Peritoneal Cytology:
Result of peritoneal cytology.

| National code | National code definition |
|---|---|
| 1 | Involved |
| 2 | Not involved |
| 3 | Equivocal |
| X | Not sent |

Peritoneal Involvement:

Is there peritoneal involvement?

| National code | National code definition |
|---|---|
| N | No (Not Involved) |
| X | Not assessable / Not sent |
| I | Invasive carcinoma/ invasive implants |
| B | Non-invasive borderline implants |

Notes:
- 'Y' has been removed from the data set from v4
- 'N', 'I' and 'B' national code definition have been updated meet the 'RCPath Core' data set

# GYNAECOLOGICIAL - Pathology – Endometrial

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pGY7240 | Involvement of Cervical Stroma | an1 | R |
| pGY7260 | Myometrial Invasion | an1 | R |
| pGY7270 | Parametrium Involvement | an1 | R |
| pGY7280 | Peritoneal Washings | an1 | R |
| pGY7500 | Peritoneal Involvement (Endometrial) | an1 | R |
| pGY7510 | Site Of Peritoneal Involvement | an1 | R |

Involvement of Cervical Stroma:

Is there microscopic involvement of cervical stroma?

| National code | National code definition |
|---|---|
| Y | Yes (Involved) |
| N | No (Not involved) |

| National code | National code definition |
|---|---|
| X | Not Assessable |

Note:
- 'Y' and 'N' national code definition have been updated meet the 'RCPath Core' data set

Myometrial Invasion:
Is there microscopic evidence of myometrial invasion?

| National code | National code definition |
|---|---|
| 3 | Greater than or equal to 50% |
| 4 | None or less than 50% |

Notes:
- '1' and '2' have been removed from the data set from v4
- '3' and '4' are new attributes from v4

Parametrium Involvement:
Is there microscopic involvement of parametrium?

| National code | National code definition |
|---|---|
| Y | Yes (Involved) |
| N | No (Not involved) |
| X | Not Assessable |

Note:
- 'Y' and 'N' national code definition have been updated meet the 'RCPath Core' data set

Peritoneal Washings:
Were peritoneal washings submitted and if so were malignant cells seen? These attributes have been changed after discussions with HSCIC (Data Dictionary Team).

| National code | National code definition |
|---|---|
| P | Positive |

| National code | National code definition |
|---|---|
| N | Negative |
| X | Not sent/Not assessable |

Peritoneal Involvement (Endometrial):

This is a new data item in v4. Is there involvement of peritoneum?

| National code | National code definition |
|---|---|
| Y | Involved |
| N | Not involved |
| X | Not assessable |

Site Of Peritoneal Involvement:

This is a new data item in v4. If there is peritoneal involvement, which site(s) is involved?

| National code | National code definition |
|---|---|
| P | Pelvic |
| A | Abdominal |
| X | Not assessable |

# GYNAECOLOGICIAL - Pathology – Cervical

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pGY7290 | CGIN Grade | an1 | R |
| pGY7300 | CIN Grade | an1 | R |
| pGY7350 | Smile | an1 | R |
| pGY7310 | Excision Margin (Pre Invasive) | an1 | R |
| pGY7340 | Paracervical or Parametrial Involvement | an1 | R |
| pGY7360 | Thickness Uninvolved Stroma | max n2.max n2 | R |

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pGY7370 | Vaginal Involvement | an1 | R |
| pGY7450 | Invasive Thickness | max n2.max n2 | R |

CGIN Grade:
Specify presence and grade of CGIN (cervical glandular intraepithelial neoplasia).

| National code | National code definition |
|---|---|
| 1 | Low |
| 2 | High |
| 3 | Not present |
| X | Not assessable |

CIN Grade:
Specify presence and grade of CIN (cervical intra-epithelial neoplasia).

| National code | National code definition |
|---|---|
| 1 | Grade 1 |
| 2 | Grade 2 |
| 3 | Grade 3 |
| 4 | Not Present |
| X | Not Assessable |

SMILE:
Specify presence of SMILE (Stratified Mucin-Producing Intra-Epithelial Lesion).

| National code | National code definition |
|---|---|
| 1 | Present |
| 2 | Absent |
| X | Not assessable |

Excision Margin (Pre Invasive):

Is there evidence of resection margin involvement by in situ/pre invasive disease (CIN, CGIN, and SMILE).

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| X | Not assessable |

Paracervical or Parametrial Involvement:

Is there evidence of paracervical and/or parametrial involvement?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| X | Not assessable |

Thickness Uninvolved Stroma:

Minimum thickness of uninvolved cervical stroma in millimetres (mm) (minimum tumour-free rim).

Vaginal Involvement:

Is there evidence of microscopic vaginal involvement?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| X | Not assessable |

Invasive Thickness:

This data item has moved in v4 to its correct section. Record the thickness or depth of the invasive lesion in mm.

## GYNAECOLOGICIAL - Pathology - Nodes

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pGY7060 | Nodes Examined Number (Para-Aortic) | max n2 | R |
| pGY7080 | Nodes Positive Number (Para-Aortic) | max n2 | R |
| pGY7070 | Nodes Examined Number (Pelvic) | max n2 | R |
| pGY7090 | Nodes Positive Number (Pelvic) | max n2 | R |
| pGY7410 | Nodes Examined Number (Inguino-Femoral) | max n2 | R |
| pGY7420 | Nodes Positive Number (Inguino-Femoral) | max n2 | R |
| pGY7230 | Extranodal Spread | an1 | R |

Note the following data item has been retired from v4.0:

- Nodal Status Cervical Cancer

Nodes Examined Number (Para-Aortic):
The number of para-aortic nodes examined. (Not applicable for vulval cancers) Use 0 if nodes not sent.

Nodes Positive Number (Para-Aortic):
The number of para-aortic nodes reported as being positive for the presence of tumour metastases. (Not applicable for vulval cancers).

Nodes Examined Number (Pelvic):
The number of pelvic nodes examined (Not applicable for vulval cancers). Use 0 if nodes not sent.

Nodes Positive Number (Pelvic):
The number of pelvic nodes reported as being positive for the presence of tumour metastases. (Not applicable for vulval cancers).

Nodes Examined Number (Inguino-Femoral):
The number of inguino-femoral nodes examined. (Only applicable to vulval cancers). Use 0 if nodes not sent.

Nodes Positive Number (Inguino-Femoral):
The number of inguino-femoral nodes reported as being positive for the presence of tumour metastases. (Only applicable to vulval cancers).

Extranodal Spread:
Is there evidence of extranodal spread/extension?

| National code | National code definition |
|---------------|--------------------------|
| Y | Yes |
| N | No |
| X | Not assessable |

# HAEMATOLOGY – Pathology

Currently, Haematology has no additional site-specific histopathological data items to collect. Please use the Core-Pathology data items and the free text field for all haematology diagnoses.

## Haematology Oncology Data Set (HODS)

The main difference in this data to normal histopathology is that it should be an amalgamation of multiple tests, which are looked at by a specialist and a final diagnosis reached. The report text and diagnosis codes are based upon tests from multiple specimens and should ideally contain an integrated summary as well as an overall conclusion and code.

In addition, HODS have their own specific haematology diagnostic systems used to collect these data. It is important however, that an extract from these HODS systems is created monthly for all registerable cancer diagnoses.

It is vital that pathology (laboratory) managers work with their regional NDRS Liaison Managers and NDRS regional centres to test files before submission, to ensure that all file formats pass validation.

# HEAD and NECK – Pathology

This is the site specific section for additional head and neck cancer specific data items to be recorded. These will be aligned within the schema to form a single report.

## HEAD & NECK – Pathology – Various

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pHN9300 | Maximum Depth of Invasion | max n3 | R |
| pHN9310 | Bone Invasion | an1 | R |
| pHN9320 | Cartilage Invasion | an1 | R |
| pHN9330 | Neck Dissection Laterality | an1 | R |

Maximum Depth of Invasion:
The maximum depth of invasion in mm. Record as 00 to indicate 'not applicable', (This is not applicable for nasopharynx, hypopharynx, nasal cavity or sinuses).

Bone Invasion [Bone Invasion Indication Code]:
Is there evidence of invasion into bone? This is not applicable to many sites as bone not resected.

| National code | National code definition |
|---|---|
| 1 | Present |
| 2 | Absent |
| 3 | Not assessed |
| 4 | Not applicable |

Cartilage Invasion:
Is there evidence of invasion into cartilage? This is not applicable to many sites as cartilage is not resected.

| National code | National code definition |
|---|---|
| 1 | Present |
| 2 | Absent |
| 3 | Not assessed |
| 4 | Not applicable |

Neck Dissection Laterality:
Identify laterality of neck dissection if performed.

| National code | National code definition |
|---|---|
| 1 | Left |
| 2 | Right |
| 3 | Bilateral |
| 4 | Not performed |
| 8 | Not applicable |

# HEAD & NECK – Pathology – Salivary

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pHN9390 | Macroscopic Extraglandular Extension | an1 | M |

Macroscopic Extraglandular Extension:
Macroscopic extension of tumour outside the capsule of the salivary gland.

| National code | National code definition |
|---|---|
| 1 | Present (Yes) |
| 2 | Absent (No) |

Note:
- '1' and '2' national code definition has been updated meet the 'RCPath Core' data set

# HEAD & NECK – Pathology – General and Salivary

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pHN9400 | Positive Nodes Laterality | an1 | R |
| pHN9410 | Largest Metastasis Left Neck | max n3 | R |
| pHN9420 | Largest Metastasis Right Neck | max n3 | R |
| pHN9430 | Extracapsular Spread | an1 | R |

Positive Nodes Laterality:
If nodes positive specify laterality.

| National code | National code definition |
|---|---|
| 1 | Left |
| 2 | Right |
| 3 | Bilateral |
| 8 | Not applicable |

Largest Metastasis Left Neck:
If Neck dissected on Left side, the size in mm of the largest metastasis.

Largest Metastasis Right Neck:
If Neck dissected on Right side, the size in mm of the largest metastasis.

Extracapsular Spread:
Invasion of metastatic tumour outside the capsule of a lymph node.

| National code | National code definition |
|---|---|
| 1 | Present |
| 2 | Absent |
| 3 | Not assessable |

# HEAD & NECK – Pathology – Human Papillomavirus (HPV)

This is a new section in v4 to accurately record HPV testing for head and neck cancers.

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pHN9500 | p16 Testing Indicator | an1 | R |
| pHN9510 | HPV-ISH Testing | an1 | R |

p16 Testing Indicator:
This is a new data item in v4. Indicate the result of p16 immunohistochemistry.

| National code | National code definition |
|---|---|
| P | Positive |
| N | Negative |
| X | Not Performed/Not Known |

HPV-ISH Testing:
This is a new data item in v4. Indicate the result of HPV-ISH testing (Human Papillomavirus – In Situ Hybridisation).

| National code | National code definition |
|---|---|
| P | Positive |
| N | Negative |
| X | Not Performed/Not Known |

# LIVER and CHOLANGIOCARCINOMA

Currently, there are no additional site-specific histopathological data items to collect for Liver or Cholangiocarcinoma diagnoses. Please use the 'Core-Pathology' data items and the free text field for all cases reported.

# LUNG – Pathology

This is the site specific section for additional lung cancer specific data items to be recorded. These will be aligned within the schema to form a single report.

May be up to one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pLU10110 | Extent of Atelectasis | an1 | R |
| pLU10120 | Extent of Pleural Invasion | an1 | R |
| pLU10130 | Pericardial Invasion | an1 | R |
| pLU10140 | Diaphragm Invasion | an1 | R |
| pLU10150 | Invasion Into Great Vessel | an1 | R |
| pLU10160 | Invasion Into Heart | an1 | R |
| pLU10170 | Malignant Pleural Effusion | an1 | R |
| pLU10190 | Invasion Into Mediastinum | an1 | R |
| pLU10180 | Satellite Tumour Nodules Location | an1 | R |

Note the following data item has been retired from v4.0:

- Proximity to Carina

Extent of Atelectasis:
Extent of atelectasis/obstructive pneumonitis.

| National code | National code definition |
|---|---|
| 4 | Extends to the hilar region, either involving part of the lung or the whole lung |
| 5 | None/less than the other category |

Notes:
- '1', '2' and '3' have been removed from the data set from v4
- ''4' and '5' are new attributes in v4

Extent of Pleural Invasion:
What is the extent of pleural invasion?

| National code | National code definition |
|---|---|
| 1 | No pleural invasion |
| 2 | Visceral pleura only |
| 3 | Parietal pleura/chest wall |

Note:
- '4 - Mediastinal pleura' has been removed from the data set from v4

Pericardial Invasion:
Does the tumour invade the pericardium?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| 9 | Not known (Cannot be assessed) |

Note:
- '9 – Not known (Cannot be assessed)' national code definition has been updated meet the 'RCPath Core' data set

Diaphragm Invasion:
Does the tumour invade the diaphragm?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| 9 | Not known (Cannot be assessed) |

Note:
- '9 – Not known (Cannot be assessed)' national code definition has been updated meet the 'RCPath Core' data set

Invasion Into Great Vessel:

Does the tumour invade the great vessels (aorta, central pulmonary artery or vein)?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| 9 | Not known (Cannot be assessed) |

Note:
- '9 – Not known (Cannot be assessed)' national code definition has been updated meet the 'RCPath Core' data set

Invasion Into Heart:

Does the tumour invade the Atrium or Heart?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| 9 | Not known (Cannot be assessed) |

Note:
- '9 – Not known (Cannot be assessed)' national code definition has been updated meet the 'RCPath Core' data set

Malignant Pleural Effusion:

Is there evidence of malignant pleural effusion?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| 9 | Not known (Cannot be assessed) |

Note:
- '9 – Not known (Cannot be assessed)' national code definition has been updated meet the 'RCPath Core' data set

Invasion Into Mediastinum:

This is a new data item in v4. Is there evidence of malignant pleural effusion?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| 9 | Not known (Cannot be assessed) |

Satellite Tumour Nodules Location:

Record the most distant location of separate tumour nodules.

| National code | National code definition |
|---|---|
| 1 | Separate tumour nodules in same lobe |
| 2 | Separate tumour nodules in a different ipsilateral lobe |
| 3 | Separate tumour nodules in a contralateral lobe |
| 4 | No separate tumour nodules |
| 9 | Not known |

# SARCOMA – Pathology

This is the site specific section for additional sarcoma cancer specific data items to be recorded. These will be aligned within the schema to form a single report.

## SARCOMA - Pathology - Bone and Soft Tissue

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pSA11170 | Genetic Confirmation Indicator | an1 | R |

Note the following data item has been retired from v4.0:

- Sarcoma Surgical Margin Adequacy

Genetic Confirmation Indicator:
Are there any cytogenetic or molecular genetic data confirming the histological diagnosis?

| National code | National code definition |
|---|---|
| Y | Yes, confirmed |
| N | No, not confirmed |
| X | Test not done |

## SARCOMA – Pathology – Bone

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pSA11130 | Extent of Local Spread (Bone) | an1 | R |
| pSA11140 | Tumour Necrosis | max n3 | R |

Extent Of Local Spread (Bone) [Tumour Breach Identifier]:
For medullary tumours only. Does the tumour breach the cortex? The extent of local spread will determine whether the tumour is intracompartmental or extracompartmental.

| National code | National code definition |
|---|---|
| I | Intracompartmental |
| E | Extracompartmental |

Tumour Necrosis:
Approximate percentage of tumour necrosis in response to pre-operative therapy. Range 0 to 100

# SARCOMA – Pathology – Soft Tissue

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pSA11100 | Tumour Depth | an1 | R |
| pSA11220 | Mitotic Rate (Sarcoma) | max n3 | R |

Tumour Depth:
Record the deepest tissue compartment where the tumour is located.

| National code | National code definition |
|---|---|
| 1 | Intradermal/cutaneous |
| 2 | Subcutaneous |
| 3 | Fascial/subfascial |
| 9 | Not known |

Mitotic Rate (Sarcoma):
Mitotic rate per 5mm squared. Also known as mitotic index and mitotic count. Component used to stage GISTs. Only applicable to GISTS.

# SKIN – Pathology

This is the site specific section for additional skin cancer specific data items to be recorded. These will be aligned within the schema to form a single report. Data items within the following groups have been re-ordered to improve data collection and prevent errors, in some cases the same data item may be collected within more than one section.

## SKIN – Pathology – Basal Cell Carcinoma (BCC)

This is a new section for v4 and allows for only Basal Cell Carcinoma (BCC) data to be recorded.

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pSK12120 | Skin Cancer Lesion Indicator | max an3 | R |
| pSK12530 | Perineural Invasion | an1 | R |
| pSK12537 | Lesion Diameter Greater Than 20mm Indicator | an1 | R |

Note the following data items has been retired from v4.0:

- Deep Invasion Indicator for PT3
- Deep Invasion Indicator for PT4

Skin Cancer Lesion Indicator:
This is the specimen number or letter used to identify the specimen within a report. Where more than one primary skin cancer is reported on the same pathology report, record the lesion number or letter as specified on the pathology report.

Perineural Invasion:
Is there perineural invasion (invasion into perineurium of nerve bundles – PNI).

| National code | National code definition |
|---|---|
| Y | Yes (Present) |
| N | No (Not identified) |
| X | Cannot be assessed |

| National code | National code definition |
|---|---|
| 9 | Not known |

Lesion Diameter Greater Than 20mm Indicator:
Is the diameter of the lesion greater than 20mm?

| National code | National code definition |
|---|---|
| Y | Yes (Greater than 20mm) |
| N | No (Less than or equal to 20mm) |
| U | Uncertain |
| X | Cannot be assessed |
| 9 | Not known |

# SKIN – Pathology – Squamous Cell Carcinoma (SCC)

This is a new section for v4 and allows for only Squamous Cell Carcinoma (SCC) data to be recorded.

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pSK12120 | Skin Cancer Lesion Indicator | max an3 | R |
| pSK12530 | Perineural Invasion | an1 | R |
| pSK12537 | Lesion Diameter Greater Than 20mm Indicator | an1 | R |
| pSK12545 | Clarks Level IV Indicator | an1 | R |
| pSK12565 | Lesion Vertical Thickness Greater Than 2mm Indicator | an1 | R |

Skin Cancer Lesion Indicator:
This is the specimen number or letter used to identify the specimen within a report. Where more than one primary skin cancer is reported on the same pathology report, record the lesion number or letter as specified on the pathology report.

Perineural Invasion:
Is there perineural invasion (invasion into perineurium of nerve bundles – PNI)?

| National code | National code definition |
|---|---|
| Y | Yes (Present) |
| N | No (Not identified) |
| X | Cannot be assessed |
| 9 | Not known |

Lesion Diameter Greater Than 20mm Indicator:
Is the diameter of the lesion greater than 20mm?

| National code | National code definition |
|---|---|
| Y | Yes (Greater than 20mm) |
| N | No (Less than or equal to 20mm) |
| U | Uncertain |
| X | Cannot be assessed |
| 9 | Not known |

Clarks Level IV Indicator:
Greater than or equal to Clarks level IV.

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| U | Uncertain |
| X | Cannot be assessed |

Notes:
- 'Clark level IV Indicator' is only required to differentiate between T1a and T1b melanomas when mitotic rate cannot be measured AND in the absence of ulceration
- in these cases, 'Clarks level IV' or above categorises the melanoma as stage T1b

Lesion Vertical Thickness Greater Than 2mm Indicator:
Is the vertical thickness of the lesion greater than 2mm?

| National code | National code definition |
|---|---|
| Y | Yes (Greater than 2mm) |
| N | No (Less than or equal to 2mm) |
| U | Uncertain |
| X | Cannot be assessed |
| 9 | Not known |

# SKIN – Pathology – Malignant Melanoma (MM)

This section allows for only Malignant Melanoma (MM) data to be recorded.

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pSK12120 | Skin Cancer Lesion Indicator | max an3 | R |
| pSK12580 | Ulceration Indicator | an1 | R |
| pSK12590 | Mitotic Rate (Skin) | max n3 | R |
| pSK12600 | Microsatellite or in-Transit Metastasis Indicator | an1 | R |
| pSK12620 | Tumour Regression Indicator | an1 | R |
| pSK12630 | Breslow Thickness | max n2.max n2 | R |
| pSK12430 | Tumour Infiltrating Lymphocytes (TILS) | an1 | R |
| pSK12460 | Sentinel Nodes Examined Number | max n2 | R |
| pSK12470 | Sentinel Nodes Positive Number | max n2 | R |
| pSK12480 | Post SNB Completion Lymphadenectomy – Nodes Sampled Number | max n2 | R |

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pSK12490 | Post SNB Completion Lymphadenectomy – Nodes Positive Number | max n2 | R |

Skin Cancer Lesion Indicator:

This is the specimen number or letter used to identify the specimen within a report. Where more than one primary skin cancer is reported on the same pathology report, record the lesion number or letter as specified on the pathology report.

Ulceration Indicator:

Loss of full thickness of epidermis associated with reactive changes (ulceration).

| National code | National code definition |
|---|---|
| Y | Yes (Present) |
| N | No (Not identified) |
| U | Uncertain |
| X | Cannot be assessed |
| 9 | Not known |

Mitotic Rate (Skin):

Mitotic rate per square millimetres (mm).

Note:
- May also be known as Mitotic Index or Count

Microsatellite Or In-Transit Metastasis Indicator:

Is there evidence of Microsatellite or in transit metastases?

| National code | National code definition |
|---|---|
| Y | Yes (Present) |
| N | No (Not identified) |
| U | Uncertain |
| X | Cannot be assessed |
| 9 | Not known |

Tumour Regression Indicator:
Area of loss of tumour associated with reactive changes.

| National code | National code definition |
|---|---|
| Y | Yes (Present) |
| N | No (Not identified) |
| U | Uncertain |
| X | Cannot be assessed |
| 9 | Not known |

Breslow Thickness:
Breslow thickness in mm, can be recorded to nearest 0.01mm where clinically appropriate.

Note:
- 'Breslow Thickness' should be measured to a minimum of one decimal place but at times to a greater degree of precision as to allow accurate

Tumour Infiltrating Lymphocytes (TILS):
Type of TILS. Tumour infiltrating lymphocytes (TILS) are white blood cells that have left the bloodstream and migrated into a tumour.

| National code | National code definition |
|---|---|
| N | Non-brisk |
| B | Brisk |
| A | Absent |

Sentinel Nodes Examined Number:
Number of sentinel nodes sampled.

Sentinel Nodes Positive Number:
Number of sentinel nodes positive.

Post SNB Completion Lymphadenectomy – Nodes Sampled Number:
Post SNB completion lymphadenectomy, number of nodes sampled. This procedure is not carried out in all cases.

Post SNB Completion Lymphadenectomy – Nodes Positive Number:
Post SNB completion lymphadenectomy, number of nodes positive. This procedure is not carried out in all cases.

# UPPER GI – Pathology

This is the site specific section for additional Upper GI cancer specific data items to be recorded. These will be aligned within the schema to form a single report.

May be up to one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pUG14500 | Total Number of Colorectal Metastases in Liver Code | Max n2 | R |
| pUG14480 | Excision Margin (Proximal, Distal) | an1 | R |
| pUG14490 | Excision Margin (Circumferential) | an1 | R |

Note the following data item has been retired from v4.0:

- Number of Colorectal Metastases in Liver Code

Total Number of Colorectal Metastases in Liver Code:
Record the total number of colorectal metastases identified in the resected liver.

Excision Margin (Proximal, Distal):
Identify whether either proximal or distal margin is involved. Involved equals 1mm or less, not involved equals greater than 1mm.

| National code | National code definition |
|---|---|
| 0 | Margin not involved |
| 1 | Margin involved |
| 9 | Not known |

Excision Margin (Circumferential):
Identify whether circumferential margin is involved. Involved equals 1mm or less, not involved equals greater than 1mm.

| National code | National code definition |
|---|---|
| 0 | Margin not involved |

| National code | National code definition |
|---|---|
| 1 | Margin involved |
| 9 | Not known |

# UROLOGICAL – Pathology

This is the site specific section for additional urological cancer specific data items to be recorded. These will be aligned within the schema to form a single report.

## UROLOGY – Pathology – Bladder

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---------------|----------------|--------|-------------------------------|
| pUR15120 | Detrusor Muscle Presence Indicator | an1 | R |
| pUR15290 | Tumour Grade (Urology) | an1 | R |

Detrusor Muscle Presence Indicator:
Bladder only. Presence or absence of detrusor muscle in the specimen.

| National code | National code definition |
|---------------|--------------------------|
| 1 | Present (Yes) |
| 2 | Absent (No) |
| 9 | Not known |
| I | Indeterminate |
| X | Not applicable |

Notes:
- '1' and '2' national code definition has been updated meet the 'RCPath Core' data set
- 'I' and 'X' are new attributes in v4

Tumour Grade (Urology):
Bladder only. Specify whether Low, High Grade or PUNLMP (Papillary Urothelial Neoplasm of Low Malignant Potential).

| National code | National code definition |
|---------------|--------------------------|
| L | Low |

| National code | National code definition |
|---|---|
| H | High |
| P | PUNLMP |
| X | Not applicable |

# UROLOGY – Pathology – Kidney

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pUR15130 | Tumour Necrosis Indicator | an1 | R |
| pUR15140 | Perinephric Fat Invasion | an1 | R |
| pUR15150 | Adrenal Invasion | an1 | R |
| pUR15160 | Renal Vein Tumour | an1 | R |
| pUR15170 | Gerota's Fascia Invasion | an1 | R |

Tumour Necrosis Indicator:
Is there evidence of coagulative tumour necrosis?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| 1 | Macroscopic (confluent) |
| 2 | Microscopic (coagulative) |
| 3 | Not identified |
| 8 | Cannot be assessed (for example, post embolisation) |

Note:
- '1', '2', '3' and '8' are new attributes in v4

Perinephric Fat Invasion:
Is there evidence of perinephric fat invasion?

| National code | National code definition |
|---|---|
| Y | Yes (Present) |
| N | No (Not Identified) |
| 9 | Cannot be assessed/Not applicable |

Notes:
- 'Y' and 'N' national code definition has been updated meet the 'RCPath Core' data set
- '9' is a new attribute in v4

Adrenal Invasion:
Is there evidence of direct adrenal invasion?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| 1 | Present, direct extension |
| 2 | Present, metastasis |
| 3 | Not identified |
| 8 | Cannot be assessed/Not applicable |

Note:
- '1', '2', '3' and '8' are new attributes in v4

Renal Vein Tumour:
Is there evidence of tumour thrombus in the renal vein?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |
| U | Uncertain |
| 1 | Microscopic involvement only |
| 2 | Gross involvement confirmed microscopically |
| 3 | Not identified |
| 8 | Cannot be assessed/Not applicable |

Note:
- '1', '2', '3' and '8' are new attributes in v4

Gerota's Fascia Invasion:
Is there evidence of invasion into Gerota's fascia?

| National code | National code definition |
|---|---|
| Y | Yes (Present) |
| N | No (Not Identified) |
| 9 | Cannot be assessed/Not applicable |

Notes:
- 'Y' and 'N' national code definition has been updated meet the 'RCPath Core' data set
- '9' is a new attribute in v4

# UROLOGY – Pathology – Penis

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pUR15180 | Corpus Spongiosum Invasion | an1 | R |
| pUR15190 | Corpus Cavernosum Invasion | an1 | R |
| pUR15200 | Urethra or Prostate Invasion | an1 | R |

Corpus Spongiosum Invasion:
Is there evidence of invasion into corpus spongiosum?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |

Corpus Cavernosum Invasion:
Is there evidence of invasion into corpus cavernosum?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |

Urethra Or Prostate Invasion:
Is there evidence of invasion into the urethra or prostate?

| National code | National code definition |
|---|---|
| Y | Yes |
| N | No |

## UROLOGY – Pathology – Prostate

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---|---|---|---|
| pUR15210 | Gleason Grade (Primary) | an1 | R |
| pUR15220 | Gleason Grade (Secondary) | an1 | R |
| pUR15230 | Gleason Grade (Tertiary) | an1 | R |
| pUR15240 | Perineural Invasion | an1 | R |
| pUR15270 | TURP Tumour Percentage | max n3 | R |

Note the following data item has been retired from v4.0:

- Organ Confined
- Seminal Vesicles Invasion

The following applies to the next 3 data items.

- format an1 used to align with 'Data Dictionary' rules.
- the Gleason Grading System is used to help evaluate the prognosis of men with prostate cancer.

- a pathologist assigns a Gleason grade to the most common tumour pattern in a biopsy specimen (Primary Grade) then the second most common (Secondary Grade).
- the grades are added together to give the Gleason Score. Sometimes pathologists will also give a grade to a third component of the specimen (Tertiary Grade) although this recorded separately and is not added to the score.

Gleason Grade (Primary):
What is the most extensive Gleason grade?

| National code | National code definition |
|---|---|
| 2 to 5 | Range 2 to 5 (IN CATEGORIES) |

Note:
- both the national code range and national code definition has been updated meet the 'RCPath Core' data set

Gleason Grade (Secondary):
If additional grades are present, what is the highest grade (biopsy) or the second most extensive grade (TURP and radicals)? If no additional grades are present, primary and secondary grades are the same.

| National code | National code definition |
|---|---|
| 2 to 5 | Range 2 to 5 (IN CATEGORIES) |

Note:
- both the national code range and national code definition has been updated meet the 'RCPath Core' data set

Gleason Grade (Tertiary):
Is there a different third grade in addition the primary and secondary grades and what is its value? Note that this is only applicable to about 5% of prostate cases. It is important to note that the Tertiary Grade is not the added value of the Primary and Secondary Gleason.

| National code | National code definition |
|---|---|
| 3 to 5<br>8 to Not<br>applicable | Range 3 to 5 and Not applicable (IN CATEGORIES) |

Note:

- both the national code range and national code definition has been updated meet the 'RCPath Core' data set

Perineural Invasion:

Is there perineural invasion (invasion into perineurium of nerve bundles- PNI).

| National code | National code definition |
|---------------|--------------------------|
| Y | Yes (Present) |
| N | No (Not identified) |
| X | Cannot be assessed |
| 9 | Not Known |

Note:

- 'Y' and 'N' national code definition has been updated meet the 'RCPath Core' data set

TURP Tumour Percentage:

For TURP only, what percentage of tumour if clinically unsuspected tumour. Range 0 to 100.

# UROLOGY – Pathology – Testicular

May be one occurrence per Pathology Report (0..1)

| Data item No. | Data Item Name | Format | Schema specification (M/R/O/X) |
|---------------|----------------|--------|--------------------------------|
| pUR15310 | Rete Testes Invasion | an1 | R |

Rete Testes Invasion:

For Seminoma only, does the tumour invade the rete testis?

| National code | National code definition |
|---------------|--------------------------|
| Y | Yes (Present) |
| N | No (Not identified) |
| X | Not applicable (Cannot be assessed) |

Note:

- 'Y', 'N' and 'X' national code definition has been updated meet the 'RCPath Core' data set

# What's changed since user guide 3.0.3

This updated version of the User Guide includes new data-items, re-alignment of data structure, amendments and contains corrections – for example, where there were errors in previous versions and updates where clinical coding or staging values changed from COSD Pathology data set v3.0 and should be used to help data collection.

COSD v4.0, has further aligned all data items with those in the RCPath 'Core' data sets. This has meant some data item name, description and/or list of attribute changes.

In addition, all pathological data item numbers have been prefixed with a 'p' and all others are interoperable with the main COSD v9 data set. This allows for updates and corrections to be made without having 2 data items in different data sets with the same data item number.

Throughout the data set there are now 'choices' which will make collecting and reporting data easier to understand and will be supported by the new schemas.

There are some key new sections within the CORE section, as below.
Linkage:
- either a 'NHS Number' or a 'Local Patient Identifier' must be provided with every record submitted
- date of birth is now mandatory

Core pathology:
- all records will have to has both an 'Investigation Result Date' and a 'Service Report Identifier' as mandatory fields from v9
- there are new ways for recording consultant data
- a choice has been created for topography and morphology
- Ki-67 has been added to the data set
- new data items have been added to record mismatch repair

Site specific sections:
- many data items have been updated to meet the RCPath data set variables – this will improve ascertainment and reduce the burden of data collection (through duplication)

It is possible that some legacy data may not have all the required mandatory fields for v9. The recommendation is for Trusts to update their data to meet the new requirements and improve/enrich their data submissions, or not upload the legacy data items in the new record (if that data is not available).

# Appendix A: SNOMED codes for primary diagnoses

The following guide shows all the registerable diseases by SNOMED code. Further guidance is available from your local NDRS office.

All conditions represented by all versions of SNOMED morphology codes (prior to CT) beginning M8 and M9 are registerable if the last digit of the code is in the range 1 to 9.

## Benign Cancers

Codes ending in a zero (0=benign) are not registerable unless the corresponding SNOMED topography code is shown in table A1:

Table A1

| Tumour Site | SNOMED2 Topography code (First 3/4 digits) | SNOMED International Topography code (First 3/4 |
|---|---|---|
| Pituitary Gland | T91 | TB1 |
| Pineal Body | T92 | TB2 |
| Brain and Central Nervous System | TX excluding TX05-TX07 | TA0-TA8 excluding TA05-TA07 |

## Non M8/M9 Morphologies

The following codes not beginning with M8 or M9 are registerable and should also be sent:

**Table A2**

| SNOMED Morphology code | Tumour Site | SNOMED2 Topography code | SNOMED International |
|---|---|---|---|
| M49000 | Bone Marrow | T06 | TC1 |
| M74008 | All Sites excluding skin | | |
| M74009 | All Sites excluding skin | | |
| M72860 | All Sites including skin | | |

The WHO classification of tumours now considers keratoacanthoma a sub-type of squamous cell carcinoma, so the morphology code for keratoacanthoma (M72680) has been added to the list of morphologies to be included in the submission.

## SNOMED CT

Versions of SNOMED prior to SNOMED CT ceased to be licenced by The International Health Terminology Standards Development Organisation (IHTSDO) after April 2017, other than for historical content.

All Trusts are therefore advised to report all SNOMED Topography and Histology from April 2017 in CT only.

Unfortunately, there is no simple rule (like M8* etc) to identify registerable diseases using SNOMED CT codes. The codes used must therefore be compared to explicit lists of registerable codes.

The explicit lists are available as subset for SNOMED CT via TRUD (registration is required):
https://isd.digital.nhs.uk/trud3/user/authenticated/group/0/pack/40/subpack/279/releases

The lists of registerable code are updated when SNOMED CT is updated (usually every 6 months).

The subset contains 6 clusters:

1. CLUSTER 1A Malignant diagnosis
2. CLUSTER 1B In situ diagnosis
3. CLUSTER 1C Uncertain diagnosis
4. CLUSTER 1D CNS neoplasms diagnosis
5. CLUSTER 2 Benign neoplasms diagnosis
6. CLUSTER 3 Anatomic structures of the Central Nervous system diagnosis

Trusts should submit cases to NDRS if the pathology report has been coded with a SNOMED CT conceptid from CLUSTER 1A, 1B, 1C or 1D. CLUSTER 1A, 1B and 1C code all malignant, in situ and uncertain behaviour tumours. Cluster 1D captures all CNS neoplasms where there is enough information in a single code to know it should be registered – for example, benign neoplasm of cerebrum (disorder).

Trusts should also submit a case to NDRS if the pathology report has been coded with SNOMED CT conceptids from both CLUSTER 2 and CLUSTER 3. CLUSTER 2 is benign neoplasms and CLUSTER 3 is CNS structures – NDRS only requires benign tumours to be sent if they are associated with the CNS.

## When should the data be submitted?

The extraction criteria are based solely on the date authorised field.

The deadline for submitting a pathology report/record is 25 working days after the end of each month and should only be submitted once the pathologist has finished assessing each sample and authorises the report.

It is acceptable for pathology records to be submitted quicker than 25 working days, and in some cases are submitted in real-time as the pathologist authorises each report using the direct submission method through the NDRS API portal.

The reporting dates can be found on the COSD website.

# Appendix B: cancer waiting times ICD10 codes and tumour groups for primary diagnoses

(Applicable from April 2012) These are registerable conditions for the purposes of Cancer Waiting Times and used within Cancer Registration, such as NDRS mandatory fields.

Notes:
- the following table lists all the registerable diseases by ICD10 code, together with the expected data set to be completed and the potential stage
- this table provides general guidelines only as not all permutations can be covered and there will always be exceptions, local clinical input is essential to identify and complete the appropriate stage
- further guidance is available from your local cancer registration service office

Key:
() = if applicable
* = different data set from CWT group specified

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C00.0 | External upper lip | Head and Neck | | ● | | |
| C00.1 | External lower lip | Head and Neck | | ● | | |
| C00.2 | External lip, unspecified | Head and Neck | | ● | | |
| C00.3 | Upper lip, inner aspect | Head and Neck | ● | | | |
| C00.4 | Lower lip, inner aspect | Head and Neck | ● | | | |
| C00.5 | Lip, unspecified, inner aspect | Head and Neck | ● | | | |
| C00.6 | Commissure of lip | Head and Neck | ● | | | |
| C00.8 | Overlapping lesion of lip | Head and Neck | ● | | | |
| C00.9 | Lip, unspecified | Head and Neck | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C01 | Malignant neoplasm of base of tongue | Head and Neck | ● | | | |
| C02.0 | Dorsal surface of tongue | Head and Neck | ● | | | |
| C02.1 | Border of tongue | Head and Neck | ● | | | |
| C02.2 | Ventral surface of tongue | Head and Neck | ● | | | |
| C02.3 | Anterior two-thirds of tongue, part unspecified | Head and Neck | ● | | | |
| C02.4 | Lingual tonsil | Head and Neck | ● | | | |
| C02.8 | Overlapping lesion of tongue | Head and Neck | ● | | | |
| C02.9 | Tongue, unspecified | Head and Neck | ● | | | |
| C03.0 | Upper gum | Head and Neck | ● | | | |
| C03.1 | Lower gum | Head and Neck | ● | | | |
| C03.9 | Gum, unspecified | Head and Neck | ● | | | |
| C04.0 | Anterior floor of mouth | Head and Neck | ● | | | |
| C04.1 | Lateral floor of mouth | Head and Neck | ● | | | |
| C04.8 | Overlapping lesion of floor of mouth | Head and Neck | ● | | | |
| C04.9 | Floor of mouth, unspecified | Head and Neck | ● | | | |
| C05.0 | Hard palate | Head and Neck | ● | | | |
| C05.1 | Soft palate | Head and Neck | ● | | | |
| C05.2 | Uvula | Head and Neck | ● | | | |
| C05.8 | Overlapping lesion of palate | Head and Neck | ● | | | |
| C05.9 | Palate, unspecified | Head and Neck | ● | | | |
| C06.0 | Cheek mucosa | Head and Neck | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C06.1 | Vestibule of mouth | Head and Neck | ● | | | |
| C06.2 | Retromolar area | Head and Neck | ● | | | |
| C06.8 | Overlapping lesion of other and unspecified parts of mouth | Head and Neck | ● | | | |
| C06.9 | Mouth, unspecified | Head and Neck | ● | | | |
| C07 | Malignant neoplasm of parotid gland | Head and Neck | ● | | | |
| C08.0 | Submandibular gland | Head and Neck | ● | | | |
| C08.1 | Sublingual gland | Head and Neck | ● | | | |
| C08.8 | Overlapping lesion of major salivary glands | Head and Neck | ● | | | |
| C08.9 | Major salivary gland, unspecified | Head and Neck | ● | | | |
| C09.0 | Tonsillar fossa | Head and Neck | ● | | | |
| C09.1 | Tonsillar pillar (anterior) (posterior) | Head and Neck | ● | | | |
| C09.8 | Overlapping lesion of tonsil | Head and Neck | ● | | | |
| C09.9 | Tonsil, unspecified | Head and Neck | ● | | | |
| C10.0 | Vallecula | Head and Neck | ● | | | |
| C10.1 | Anterior surface of epiglottis | Head and Neck | ● | | | |
| C10.2 | Lateral wall of oropharynx | Head and Neck | ● | | | |
| C10.3 | Posterior wall of oropharynx | Head and Neck | ● | | | |
| C10.4 | Branchial cleft | Head and Neck | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C10.8 | Overlapping lesion of oropharynx | Head and Neck | ● | | | |
| C10.9 | Oropharynx, unspecified | Head and Neck | ● | | | |
| C11.0 | Superior wall of nasopharynx | Head and Neck | ● | | | |
| C11.1 | Posterior wall of nasopharynx | Head and Neck | ● | | | |
| C11.2 | Lateral wall of nasopharynx | Head and Neck | ● | | | |
| C11.3 | Anterior wall of nasopharynx | Head and Neck | ● | | | |
| C11.8 | Overlapping lesion of nasopharynx | Head and Neck | ● | | | |
| C11.9 | Nasopharynx, unspecified | Head and Neck | ● | | | |
| C12 | Malignant neoplasm of piriform sinus | Head and Neck | ● | | | |
| C13.0 | Postcricoid region | Head and Neck | ● | | | |
| C13.1 | Aryepiglottic fold, hypopharyngeal aspect | Head and Neck | ● | | | |
| C13.2 | Posterior wall of hypopharynx | Head and Neck | ● | | | |
| C13.8 | Overlapping lesion of hypopharynx | Head and Neck | ● | | | |
| C13.9 | Hypopharynx, unspecified | Head and Neck | ● | | | |
| C14.0 | Pharynx, unspecified | Head and Neck | ● | | | |
| C14.2 | Waldeyer ring | Head and Neck | ● | | | |
| C14.8 | Overlapping lesion of lip, oral cavity and pharynx | Head and Neck | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C15.0 | Cervical part of oesophagus | Upper Gastrointestinal | * | | | Usually treated by Head and Neck |
| C15.1 | Thoracic part of oesophagus | Upper Gastrointestinal | ● | | | |
| C15.2 | Abdominal part of oesophagus | Upper Gastrointestinal | ● | | | |
| C15.3 | Upper third of oesophagus | Upper Gastrointestinal | ● | | | |
| C15.4 | Middle third of oesophagus | Upper Gastrointestinal | ● | | | |
| C15.5 | Lower third of oesophagus | Upper Gastrointestinal | ● | | | |
| C15.8 | Overlapping lesion of oesophagus | Upper Gastrointestinal | ● | | | |
| C15.9 | Oesophagus, unspecified | Upper Gastrointestinal | ● | | | |
| C16.0 | Cardia | Upper Gastrointestinal | ● | | | |
| C16.1 | Fundus of stomach | Upper Gastrointestinal | ● | | | |
| C16.2 | Body of stomach | Upper Gastrointestinal | ● | | | |
| C16.3 | Pyloric antrum | Upper Gastrointestinal | ● | | | |
| C16.4 | Pylorus | Upper Gastrointestinal | ● | | | |
| C16.5 | Lesser curvature of stomach, unspecified | Upper Gastrointestinal | ● | | | |
| C16.6 | Greater curvature of stomach, unspecified | Upper Gastrointestinal | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C16.8 | Overlapping lesion of stomach | Upper Gastrointestinal | ● | | | |
| C16.9 | Stomach, unspecified | Upper Gastrointestinal | ● | | | |
| C17.0 | Duodenum | Colorectal | | ● | | Usually treated by Upper GI MDT |
| C17.1 | Jejunum | Colorectal | | ● | | Usually treated by Upper GI MDT |
| C17.2 | Ileum | Colorectal | | ● | | Usually treated by Upper GI MDT |
| C17.3 | Meckel diverticulum | Colorectal | | ● | | Usually treated by Upper GI MDT |
| C17.8 | Overlapping lesion of small intestine | Colorectal | | ● | | Usually treated by Upper GI MDT |
| C17.9 | Small intestine, unspecified | Colorectal | | ● | | Usually treated by Upper GI MDT |
| C18.0 | Caecum | Colorectal | ● | | | |
| C18.1 | Appendix | Colorectal | | ● | | |
| C18.2 | Ascending colon | Colorectal | ● | | | |
| C18.3 | Hepatic flexure | Colorectal | ● | | | |
| C18.4 | Transverse colon | Colorectal | ● | | | |
| C18.5 | Splenic flexure | Colorectal | ● | | | |
| C18.6 | Descending colon | Colorectal | ● | | | |
| C18.7 | Sigmoid colon | Colorectal | ● | | | |
| C18.8 | Overlapping lesion of colon | Colorectal | ● | | | |
| C18.9 | Colon, unspecified | Colorectal | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C19 | Malignant neoplasm of rectosigmoid junction | Colorectal | ● | | | |
| C20 | Malignant neoplasm of rectum | Colorectal | ● | | | |
| C21.0 | Anus, unspecified | Colorectal | | ● | | |
| C21.1 | Anal canal | Colorectal | | ● | | |
| C21.2 | Cloacogenic zone | Colorectal | | ● | | |
| C21.8 | Overlapping lesion of rectum, anus and anal canal | Colorectal | | ● | | |
| C22.0 | Liver cell carcinoma | Upper Gastrointestinal | ● | | | Liver cell carcinoma is also known as HCC. |
| C22.1 | Intrahepatic bile duct carcinoma | Upper Gastrointestinal | ● | | | |
| C22.2 | Hepatoblastoma | Upper Gastrointestinal | ● | | | |
| C22.3 | Angiosarcoma of liver | Upper Gastrointestinal | ● | | | |
| C22.4 | Other sarcomas of liver | Upper Gastrointestinal | ● | | | |
| C22.7 | Other specified carcinomas of liver | Upper Gastrointestinal | ● | | | |
| C22.9 | Liver, unspecified | Upper Gastrointestinal | ● | | | |
| C23 | Malignant neoplasm of gallbladder | Upper Gastrointestinal | ● | | | |
| C24.0 | Extrahepatic bile duct | Upper Gastrointestinal | ● | | | |
| C24.1 | Ampulla of Vater | Upper Gastrointestinal | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C24.8 | Overlapping lesion of biliary tract | Upper Gastrointestinal | ● | | | |
| C24.9 | Biliary tract, unspecified | Upper Gastrointestinal | ● | | | |
| C25.0 | Head of pancreas | Upper Gastrointestinal | ● | | | |
| C25.1 | Body of pancreas | Upper Gastrointestinal | ● | | | |
| C25.2 | Tail of pancreas | Upper Gastrointestinal | ● | | | |
| C25.3 | Pancreatic duct | Upper Gastrointestinal | ● | | | |
| C25.4 | Endocrine pancreas | Upper Gastrointestinal | ● | | | |
| C25.7 | Other parts of pancreas | Upper Gastrointestinal | ● | | | |
| C25.8 | Overlapping lesion of pancreas | Upper Gastrointestinal | ● | | | |
| C25.9 | Pancreas, unspecified | Upper Gastrointestinal | ● | | | |
| C26.0 | Intestinal tract, part unspecified | Colorectal | ● | | | |
| C26.1 | Spleen | Colorectal | | ● | | |
| C26.8 | Overlapping lesion of digestive system | Colorectal | | ● | | |
| C26.9 | Ill-defined sites within the digestive system | Colorectal | | ● | | |
| C30.0 | Nasal cavity | Head and Neck | ● | | | |
| C30.1 | Middle ear | Head and Neck | ● | | | |
| C31.0 | Maxillary sinus | Head and Neck | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C31.1 | Ethmoidal sinus | Head and Neck | ● | | | |
| C31.2 | Frontal sinus | Head and Neck | ● | | | |
| C31.3 | Sphenoidal sinus | Head and Neck | ● | | | |
| C31.8 | Overlapping lesion of accessory sinuses | Head and Neck | ● | | | |
| C31.9 | Accessory sinus, unspecified | Head and Neck | ● | | | |
| C32.0 | Glottis | Head and Neck | ● | | | |
| C32.1 | Supraglottis | Head and Neck | ● | | | |
| C32.2 | Subglottis | Head and Neck | ● | | | |
| C32.3 | Laryngeal cartilage | Head and Neck | ● | | | |
| C32.8 | Overlapping lesion of larynx | Head and Neck | ● | | | |
| C32.9 | Larynx, unspecified | Head and Neck | ● | | | |
| C33 | Malignant neoplasm of trachea | Lung | ● | | | |
| C34.0 | Main bronchus | Lung | ● | | | |
| C34.1 | Upper lobe, bronchus or lung | Lung | ● | | | |
| C34.2 | Middle lobe, bronchus or lung | Lung | ● | | | |
| C34.3 | Lower lobe, bronchus or lung | Lung | ● | | | |
| C34.8 | Overlapping lesion of bronchus and lung | Lung | ● | | | |
| C34.9 | Bronchus or lung, unspecified | Lung | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C37 | Malignant neoplasm of thymus | Lung | ● | | | |
| C38.0 | Heart | Lung | | ● | | |
| C38.1 | Anterior mediastinum | Lung | | ● | | |
| C38.2 | Posterior mediastinum | Lung | | ● | | |
| C38.3 | Mediastinum, part unspecified | Lung | | ● | | |
| C38.4 | Pleura | Lung | | ● | | |
| C38.8 | Overlapping lesion of heart, mediastinum and pleura | Lung | | ● | | |
| C39.0 | Upper respiratory tract, part unspecified | Lung | | ● | | |
| C39.8 | Overlapping lesion of respiratory and intrathoracic organs | Lung | | ● | | |
| C39.9 | Ill-defined sites within the respiratory system | Lung | | ● | | |
| C40.0 | Scapula and long bones of upper limb | Sarcoma | ● | | | |
| C40.1 | Short bones of upper limb | Sarcoma | ● | | | |
| C40.2 | Long bones of lower limb | Sarcoma | ● | | | |
| C40.3 | Short bones of lower limb | Sarcoma | ● | | | |
| C40.8 | Overlapping lesion of bone and articular cartilage of limbs | Sarcoma | ● | | | |
| C40.9 | Bone and articular cartilage of limb, unspecified | Sarcoma | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C41.0 | Bones of skull and face | Sarcoma | ● | | | |
| C41.1 | Mandible | Sarcoma | ● | | | |
| C41.2 | Vertebral column | Sarcoma | ● | | | |
| C41.3 | Ribs, sternum and clavicle | Sarcoma | ● | | | |
| C41.4 | Pelvic bones, sacrum and coccyx | Sarcoma | ● | | | |
| C41.8 | Overlapping lesion of bone and articular cartilage | Sarcoma | ● | | | |
| C41.9 | Bone and articular cartilage, unspecified | Sarcoma | ● | | | |
| C43.0 | Malignant melanoma of lip | Skin | ● | | | |
| C43.1 | Malignant melanoma of eyelid, including canthus | Skin | ● | | | |
| C43.2 | Malignant melanoma of ear and external auricular canal | Skin | ● | | | |
| C43.3 | Malignant melanoma of other and unspecified parts of face | Skin | ● | | | |
| C43.4 | Malignant melanoma of scalp and neck | Skin | ● | | | |
| C43.5 | Malignant melanoma of trunk | Skin | ● | | | |
| C43.6 | Malignant melanoma of upper limb, including shoulder | Skin | ● | | | |
| C43.7 | Malignant melanoma of lower limb, including hip | Skin | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C43.8 | Overlapping malignant melanoma of skin | Skin | ● | | | |
| C43.9 | Malignant melanoma of skin, unspecified | Skin | ● | | | |
| C44.0 | Skin of lip | Skin | (●) | (●) | (●) | See the Skin chapter of the COSD User Guide (Overview Section) for further information on the collection of this Skin disease. |
| C44.1 | Skin of eyelid, including canthus | Skin | (●) | (●) | (●) | See the Skin chapter of the COSD User Guide (Overview Section) for further information on the collection of this Skin disease. |
| C44.2 | Skin of ear and external auricular canal | Skin | (●) | (●) | (●) | See the Skin chapter of the COSD User Guide (Overview Section) for further information on the collection of this Skin disease. |
| C44.3 | Skin of other and unspecified parts of face | Skin | (●) | (●) | (●) | See the Skin chapter of the COSD User Guide (Overview Section) for further information on the |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| | | | | | | collection of this Skin disease. |
| C44.4 | Skin of scalp and neck | Skin | (●) | (●) | (●) | See the Skin chapter of the COSD User Guide (Overview Section) for further information on the collection of this Skin disease. |
| C44.5 | Skin of trunk | Skin | (●) | (●) | (●) | See the Skin chapter of the COSD User Guide (Overview Section) for further information on the collection of this Skin disease. |
| C44.6 | Skin of upper limb, including shoulder | Skin | (●) | (●) | (●) | See the Skin chapter of the COSD User Guide (Overview Section) for further information on the collection of this Skin disease. |
| C44.7 | Skin of lower limb, including hip | Skin | (●) | (●) | (●) | See the Skin chapter of the COSD User Guide (Overview Section) for further information on the collection of this Skin disease. |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C44.8 | Overlapping lesion of skin | Skin | (●) | (●) | (●) | See the Skin chapter of the COSD User Guide (Overview Section) for further information on the collection of this Skin disease. |
| C44.9 | Malignant neoplasm of skin, unspecified | Skin | (●) | (●) | (●) | See the Skin chapter of the COSD User Guide (Overview Section) for further information on the collection of this Skin disease. |
| C45.0 | Mesothelioma of pleura | Lung | | ● | | |
| C45.1 | Mesothelioma of peritoneum | Lung | | ● | | |
| C45.2 | Mesothelioma of pericardium | Lung | | ● | | |
| C45.7 | Mesothelioma of other sites | Lung | | ● | | |
| C45.9 | Mesothelioma, unspecified | Lung | | ● | | |
| C46.0 | Kaposi sarcoma of skin | Sarcoma | | ● | | |
| C46.1 | Kaposi sarcoma of soft tissue | Sarcoma | | ● | | |
| C46.2 | Kaposi sarcoma of palate | Sarcoma | | ● | | |
| C46.3 | Kaposi sarcoma of lymph nodes | Sarcoma | | ● | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C46.7 | Kaposi sarcoma of other sites | Sarcoma | | ● | | |
| C46.8 | Kaposi sarcoma of multiple organs | Sarcoma | | ● | | |
| C46.9 | Kaposi sarcoma, unspecified | Sarcoma | | ● | | |
| C47.0 | Peripheral nerves of head, face and neck | Brain/Central Nervous System | | ● | | Usually treated by Sarcoma MDT. |
| C47.1 | Peripheral nerves of upper limb, including shoulder | Brain/Central Nervous System | | ● | | Usually treated by Sarcoma MDT. |
| C47.2 | Peripheral nerves of lower limb, including hip | Brain/Central Nervous System | | ● | | Usually treated by Sarcoma MDT. |
| C47.3 | Peripheral nerves of thorax | Brain/Central Nervous System | | ● | | Usually treated by Sarcoma MDT. |
| C47.4 | Peripheral nerves of abdomen | Brain/Central Nervous System | | ● | | Usually treated by Sarcoma MDT. |
| C47.5 | Peripheral nerves of pelvis | Brain/Central Nervous System | | ● | | Usually treated by Sarcoma MDT. |
| C47.6 | Peripheral nerves of trunk, unspecified | Brain/Central Nervous System | | ● | | Usually treated by Sarcoma MDT. |
| C47.8 | Overlapping lesion of peripheral nerves and autonomic nervous system | Brain/Central Nervous System | | ● | | Usually treated by Sarcoma MDT. |
| C47.9 | Peripheral nerves and autonomic nervous system, unspecified | Brain/Central Nervous System | | ● | | Usually treated by Sarcoma MDT. |
| C48.0 | Retroperitoneum | Sarcoma | ● | | | Usually treated by Sarcoma MDT. |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C48.1 | Specified parts of peritoneum | Sarcoma | ● * | | | * Sarcoma and Gynaecological Data sets to be collected where applicable. |
| C48.2 | Peritoneum, unspecified | Sarcoma | ● * | | | * Sarcoma and Gynaecological Data sets to be collected where applicable. |
| C48.8 | Overlapping lesion of retroperitoneum and peritoneum | Sarcoma | ● | | | |
| C49.0 | Connective and soft tissue of head, face and neck | Sarcoma | ● | | | |
| C49.1 | Connective and soft tissue of upper limb, including shoulder | Sarcoma | ● | | | |
| C49.2 | Connective and soft tissue of lower limb, including hip | Sarcoma | ● | | | |
| C49.3 | Connective and soft tissue of thorax | Sarcoma | ● | | | |
| C49.4 | Connective and soft tissue of abdomen | Sarcoma | ● | | | |
| C49.5 | Connective and soft tissue of pelvis | Sarcoma | ● | | | |
| C49.6 | Connective and soft tissue of trunk, unspecified | Sarcoma | ● | | | |
| C49.8 | Overlapping lesion of connective and soft tissue | Sarcoma | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C49.9 | Connective and soft tissue, unspecified | Sarcoma | ● | | | |
| C50.0 | Nipple and areola | Breast | ● | | | |
| C50.1 | Central portion of breast | Breast | ● | | | |
| C50.2 | Upper-inner quadrant of breast | Breast | ● | | | |
| C50.3 | Lower-inner quadrant of breast | Breast | ● | | | |
| C50.4 | Upper-outer quadrant of breast | Breast | ● | | | |
| C50.5 | Lower-outer quadrant of breast | Breast | ● | | | |
| C50.6 | Axillary tail of breast | Breast | ● | | | |
| C50.8 | Overlapping lesion of breast | Breast | ● | | | |
| C50.9 | Breast, unspecified | Breast | ● | | | |
| C51.0 | Labium majus | Gynaecological | ● * | | | * Gynaecological and Skin Data sets to be collected where applicable. |
| C51.1 | Labium minus | Gynaecological | ● * | | | * Gynaecological and Skin Data sets to be collected where applicable. |
| C51.2 | Clitoris | Gynaecological | ● * | | | * Gynaecological and Skin Data sets to be collected where applicable. |
| C51.8 | Overlapping lesion of vulva | Gynaecological | ● * | | | * Gynaecological and Skin Data sets |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| | | | | | | to be collected where applicable. |
| C51.9 | Vulva, unspecified | Gynaecological | ● * | | | * Gynaecological and Skin Data sets to be collected where applicable. |
| C52 | Malignant neoplasm of vagina | Gynaecological | ● | | | |
| C53.0 | Endocervix | Gynaecological | ● | | | |
| C53.1 | Exocervix | Gynaecological | ● | | | |
| C53.8 | Overlapping lesion of cervix uteri | Gynaecological | ● | | | |
| C53.9 | Cervix uteri, unspecified | Gynaecological | ● | | | |
| C54.0 | Isthmus uteri | Gynaecological | ● | | | |
| C54.1 | Endometrium | Gynaecological | ● | | | |
| C54.2 | Myometrium | Gynaecological | ● | | | |
| C54.3 | Fundus uteri | Gynaecological | ● | | | |
| C54.8 | Overlapping lesion of corpus uteri | Gynaecological | ● | | | |
| C54.9 | Corpus uteri, unspecified | Gynaecological | ● | | | |
| C55 | Malignant neoplasm of uterus, part unspecified | Gynaecological | ● | | | |
| C56 | Malignant neoplasm of ovary | Gynaecological | ● | | | |
| C57.0 | Fallopian tube | Gynaecological | ● | | | |
| C57.1 | Broad ligament | Gynaecological | ● | | | |
| C57.2 | Round ligament | Gynaecological | ● | | | |
| C57.3 | Parametrium | Gynaecological | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C57.4 | Uterine adnexa, unspecified | Gynaecological | ● | | | |
| C57.7 | Other specified female genital organs | Gynaecological | ● | | | |
| C57.8 | Overlapping lesion of female genital organs | Gynaecological | ● | | | |
| C57.9 | Female genital organ, unspecified | Gynaecological | ● | | | |
| C58 | Malignant neoplasm of placenta | Gynaecological | ● | | | |
| C60.0 | Prepuce | Urological | ● * | | | * Urological and Skin Data sets to be collected where applicable. |
| C60.1 | Glans penis | Urological | ● * | | | * Urological and Skin Data sets to be collected where applicable. |
| C60.2 | Body of penis | Urological | ● * | | | * Urological and Skin Data sets to be collected where applicable. |
| C60.8 | Overlapping lesion of penis | Urological | ● * | | | * Urological and Skin Data sets to be collected where applicable. |
| C60.9 | Penis, unspecified | Urological | ● * | | | * Urological and Skin Data sets to be collected where applicable. |
| C61 | Malignant neoplasm of prostate | Urological | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C62.0 | Undescended testis | Urological | ● | | | |
| C62.1 | Descended testis | Urological | ● | | | |
| C62.9 | Testis, unspecified | Urological | ● | | | |
| C63.0 | Epididymis | Urological | ● | | | |
| C63.1 | Spermatic cord | Urological | ● | | | |
| C63.2 | Scrotum | Urological | | ● | | |
| C63.7 | Other specified male genital organs | Urological | ● | | | |
| C63.8 | Overlapping lesion of male genital organs | Urological | ● | | | |
| C63.9 | Male genital organ, unspecified | Urological | ● | | | |
| C64 | Malignant neoplasm of kidney, except renal pelvis | Urological | ● | | | |
| C65 | Malignant neoplasm of renal pelvis | Urological | ● | | | |
| C66 | Malignant neoplasm of ureter | Urological | ● | | | |
| C67.0 | Trigone of bladder | Urological | ● | | | |
| C67.1 | Dome of bladder | Urological | ● | | | |
| C67.2 | Lateral wall of bladder | Urological | ● | | | |
| C67.3 | Anterior wall of bladder | Urological | ● | | | |
| C67.4 | Posterior wall of bladder | Urological | ● | | | |
| C67.5 | Bladder neck | Urological | ● | | | |
| C67.6 | Ureteric orifice | Urological | ● | | | |
| C67.7 | Urachus | Urological | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C67.8 | Overlapping lesion of bladder | Urological | ● | | | |
| C67.9 | Bladder, unspecified | Urological | ● | | | |
| C68.0 | Urethra | Urological | ● | | | |
| C68.1 | Paraurethral glands | Urological | ● | | | |
| C68.8 | Overlapping lesion of urinary organs | Urological | ● | | | |
| C68.9 | Urinary organ, unspecified | Urological | ● | | | |
| C69.0 | Conjunctiva | Brain/Central Nervous System | | ● | | Not normally treated by CNS MDT. |
| C69.1 | Cornea | Brain/Central Nervous System | | ● | | Not normally treated by CNS MDT. |
| C69.2 | Retina | Brain/Central Nervous System | | ● | | Not normally treated by CNS MDT. |
| C69.3 | Choroid | Brain/Central Nervous System | | ● | | Not normally treated by CNS MDT. |
| C69.4 | Ciliary body | Brain/Central Nervous System | | ● | | Not normally treated by CNS MDT. |
| C69.5 | Lachrymal gland and duct | Brain/Central Nervous System | | ● | | Not normally treated by CNS MDT. |
| C69.6 | Orbit | Brain/Central Nervous System | | ● | | Not normally treated by CNS MDT. Maybe |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| | | | | | | treated by Sarcoma MDT. |
| *C69.8* | Overlapping lesion of eye and adnexa | Brain/Central Nervous System | | ● | | Not normally treated by CNS MDT. |
| *C69.9* | Eye, unspecified | Brain/Central Nervous System | | ● | | Not normally treated by CNS MDT. |
| C70.0 | Cerebral meninges | Brain/Central Nervous System | ● | | | |
| C70.1 | Spinal meninges | Brain/Central Nervous System | ● | | | |
| C70.9 | Meninges, unspecified | Brain/Central Nervous System | ● | | | |
| C71.0 | Cerebrum, except lobes and ventricles | Brain/Central Nervous System | ● | | | |
| C71.1 | Frontal lobe | Brain/Central Nervous System | ● | | | |
| C71.2 | Temporal lobe | Brain/Central Nervous System | ● | | | |
| C71.3 | Parietal lobe | Brain/Central Nervous System | ● | | | |
| C71.4 | Occipital lobe | Brain/Central Nervous System | ● | | | |
| C71.5 | Cerebral ventricle | Brain/Central Nervous System | ● | | | |
| C71.6 | Cerebellum | Brain/Central Nervous System | (●) (*) | | | CTYA data set collected for Medulloblastoma patients under 25. |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C71.7 | Brain stem | Brain/Central Nervous System | ● | | | |
| C71.8 | Overlapping lesion of brain | Brain/Central Nervous System | ● | | | |
| C71.9 | Brain, unspecified | Brain/Central Nervous System | ● | | | |
| C72.0 | Spinal cord | Brain/Central Nervous System | ● | | | |
| C72.1 | Cauda equina | Brain/Central Nervous System | ● | | | |
| C72.2 | Olfactory nerve | Brain/Central Nervous System | ● | | | |
| C72.3 | Optic nerve | Brain/Central Nervous System | ● | | | |
| C72.4 | Acoustic nerve | Brain/Central Nervous System | ● | | | |
| C72.5 | Other and unspecified cranial nerves | Brain/Central Nervous System | ● | | | |
| C72.8 | Overlapping lesion of brain and other parts of central nervous system | Brain/Central Nervous System | ● | | | |
| C72.9 | Central nervous system, unspecified | Brain/Central Nervous System | ● | | | |
| C73 | Malignant neoplasm of thyroid gland | Head and Neck | | ● | | |
| C74.0 | Cortex of adrenal gland | Other | | ● | | |
| C74.1 | Medulla of adrenal gland | Other | | ● | | |
| C74.9 | Adrenal gland, unspecified | Other | | ● | | |
| C75.0 | Parathyroid gland | Other | | ● | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C75.1 | Pituitary gland | Other | * | | | Usually treated by CNS MDT. |
| C75.2 | Craniopharyngeal duct | Other | * | | | Usually treated by CNS MDT. |
| C75.3 | Pineal gland | Other | * | | | Usually treated by CNS MDT. |
| C75.4 | Carotid body | Other | | ● | | |
| C75.5 | Aortic body and other paraganglia | Other | | ● | | |
| C75.8 | Pluriglandular involvement, unspecified | Other | | ● | | |
| C75.9 | Endocrine gland, unspecified | Other | | ● | | |
| C76.0 | Head, face and neck | Other | | ● | | Other and ill defined - use only if unable to code to specific primary site |
| C76.1 | Thorax | Other | | ● | | Other and ill defined - use only if unable to code to specific primary site |
| C76.2 | Abdomen | Other | | ● | | Other and ill defined - use only if unable to code to specific primary site |
| C76.3 | Pelvis | Other | | ● | | Other and ill defined - use only if unable to code to |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| | | | | | | specific primary site |
| C76.4 | Upper limb | Other | | ● | | Other and ill defined - use only if unable to code to specific primary site |
| C76.5 | Lower limb | Other | | ● | | Other and ill defined - use only if unable to code to specific primary site |
| C76.7 | Other ill-defined sites | Other | | ● | | Other and ill defined - use only if unable to code to specific primary site |
| C76.8 | Overlapping lesion of other and ill-defined sites | Other | | ● | | Other and ill defined - use only if unable to code to specific primary site |
| C77.0 | Lymph nodes of head, face and neck | Head and Neck | ● | | | Secondary - only use if unable to code to specific primary site |
| C77.1 | Intrathoracic lymph nodes | Other | | ● | | Secondary - only use if unable to code to specific primary site |
| C77.2 | Intra-abdominal lymph nodes | Other | | ● | | Secondary - only use if unable to code to specific primary site |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C77.3 | Axillary and upper limb lymph nodes | Other | | ● | | Secondary - only use if unable to code to specific primary site |
| C77.4 | Inguinal and lower limb lymph nodes | Other | | ● | | Secondary - only use if unable to code to specific primary site |
| C77.5 | Intrapelvic lymph nodes | Other | | ● | | Secondary - only use if unable to code to specific primary site |
| C77.8 | Lymph nodes of multiple regions | Other | | ● | | Secondary - only use if unable to code to specific primary site |
| C77.9 | Lymph node, unspecified | Other | | ● | | Secondary - only use if unable to code to specific primary site |
| C78.0 | Secondary malignant neoplasm of lung | Lung | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C78.1 | Secondary malignant neoplasm of mediastinum | Lung | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C78.2 | Secondary malignant neoplasm of pleura | Lung | | ● | | Normally treated by MDT of site of |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| | | | | | | primary tumour. Only use if unable to code to specific primary site. |
| C78.3 | Secondary malignant neoplasm of other and unspecified respiratory organs | Lung | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C78.4 | Secondary malignant neoplasm of small intestine | Colorectal | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C78.5 | Secondary malignant neoplasm of large intestine and rectum | Colorectal | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C78.6 | Secondary malignant neoplasm of retroperitoneum and peritoneum | Sarcoma | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C78.7 | Secondary malignant neoplasm of liver and intrahepatic bile duct | Upper Gastrointestinal | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C78.8 | Secondary malignant neoplasm of other and unspecified digestive organs | Colorectal | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C79.0 | Secondary malignant neoplasm of kidney and renal pelvis | Urological | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C79.1 | Secondary malignant neoplasm of bladder and other and unspecified urinary organs | Urological | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C79.2 | Secondary malignant neoplasm of skin | Skin | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C79.3 | Secondary malignant neoplasm of brain and cerebral meninges | Brain/Central Nervous System | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C79.4 | Secondary malignant neoplasm of other and unspecified parts of nervous system | Brain/Central Nervous System | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| | | | | | | to code to specific primary site. |
| C79.5 | Secondary malignant neoplasm of bone and bone marrow | Sarcoma | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C79.6 | Secondary malignant neoplasm of ovary | Gynaecological | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C79.7 | Secondary malignant neoplasm of adrenal gland | Other | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C79.8 | Secondary malignant neoplasm of other specified sites | Other | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |
| C79.9 | Secondary malignant neoplasm, unspecified site | Other | | ● | | Normally treated by MDT of site of primary tumour. Only use if unable to code to specific primary site. |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C80.0 | Malignant neoplasm, primary site unknown, so stated | Other | | | | |
| C80.9 | Malignant neoplasm, unspecified | Other | | | | |
| C81.0 | Nodular lymphocyte predominant Hodgkin lymphoma | Haematological | See the Haematological chapter of COSD User Guide for information regarding what is required to be submitted for these Haematological diseases. | | | |
| C81.1 | Nodular sclerosis (classical) Hodgkin lymphoma | Haematological | | | | |
| C81.2 | Mixed cellularity (classical) Hodgkin lymphoma | Haematological | | | | |
| C81.3 | Lymphocytic depleted (classical) Hodgkin lymphoma | Haematological | | | | |
| C81.4 | Lymphocyte-rich (classical) Hodgkin lymphoma | Haematological | | | | |
| C81.7 | Other (classical) Hodgkin lymphoma | Haematological | | | | |
| C81.9 | Hodgkin lymphoma, unspecified | Haematological | | | | |
| C82.0 | Follicular lymphoma grade I | Haematological | | | | |
| C82.1 | Follicular lymphoma grade II | Haematological | | | | |
| C82.2 | Follicular lymphoma grade III, unspecified | Haematological | | | | |
| C82.3 | Follicular lymphoma grade IIIa | Haematological | | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C82.4 | Follicular lymphoma grade IIIb | Haematological | | | | |
| C82.5 | Diffuse follicle centre lymphoma | Haematological | | | | |
| C82.6 | Cutaneous follicle centre lymphoma | Haematological | | | | |
| C82.7 | Other types of follicular lymphoma | Haematological | | | | |
| C82.9 | Follicular lymphoma, unspecified | Haematological | | | | |
| C83.0 | Small cell B-cell lymphoma | Haematological | | | | |
| C83.1 | Mantle cell lymphoma | Haematological | | | | |
| C83.3 | Diffuse large B-cell lymphoma | Haematological | | | | |
| C83.5 | Lymphoblastic (diffuse) lymphoma | Haematological | | | | |
| C83.7 | Burkitt lymphoma | Haematological | | | | |
| C83.8 | Other non-follicular lymphoma | Haematological | | | | |
| C83.9 | Non-follicular (diffuse) lymphoma, unspecified | Haematological | | | | |
| C84.0 | Mycosis fungoides | Haematological | | | | |
| C84.1 | Sézary disease | Haematological | | | | |
| C84.4 | Peripheral T-cell lymphoma, not elsewhere classified | Haematological | | | | |
| C84.5 | Other mature T/NK-cell lymphomas | Haematological | | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C84.6 | Anaplastic large cell lymphoma, ALK-positive | Haematological | | | | |
| C84.7 | Anaplastic large cell lymphoma, ALK-negative | Haematological | | | | |
| C84.8 | Cutaneous T-cell lymphoma, unspecified | Haematological | | | | |
| C84.9 | Mature T/NK-cell lymphoma, unspecified | Haematological | | | | |
| C85.1 | B-cell lymphoma, unspecified | Haematological | | | | |
| C85.2 | Mediastinal (thymic) large B-cell lymphoma | Haematological | | | | |
| C85.7 | Other specified types of non-Hodgkin lymphoma | Haematological | | | | |
| C85.9 | Non-Hodgkin lymphoma, unspecified | Haematological | | | | |
| C86.0 | Extranodal NK/T-cell lymphoma, nasal type | Haematological | | | | |
| C86.1 | Hepatosplenic T-cell lymphoma | Haematological | | | | |
| C86.2 | Enteropathy-type (intestinal) T-cell lymphoma | Haematological | | | | |
| C86.3 | Subcutaneous panniculitis-like T-cell lymphoma | Haematological | | | | |
| C86.4 | Blastic NK-cell lymphoma | Haematological | | | | |
| C86.5 | Angioimmunoblastic T-cell lymphoma | Haematological | | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C86.6 | Primary cutaneous CD30-positive T-cell proliferations | Haematological | | | | |
| C88.0 | Waldenström macroglobulinaemia | Haematological | | | | |
| C88.2 | Other heavy chain disease | Haematological | | | | |
| C88.3 | Immunoproliferative small intestinal disease | Haematological | | | | |
| C88.4 | Extranodal marginal zone B-cell lymphoma of mucosa-associated lymphoid tissue (MALT-lymphoma) | Haematological | | | | |
| C88.7 | Other malignant immunoproliferative diseases | Haematological | | | | |
| C88.9 | Malignant immunoproliferative disease, unspecified | Haematological | | | | |
| C90.0 | Multiple myeloma | Haematological | | | | |
| C90.1 | Plasma cell leukaemia | Haematological | | | | |
| C90.2 | Extramedullary plasmacytoma | Haematological | | | | |
| C90.3 | Solitary plasmacytoma | Haematological | | | | |
| C91.0 | Acute lymphoblastic leukaemia [ALL] | Haematological | | | | |
| C91.1 | Chronic lymphocytic leukaemia of B-cell type | Haematological | | | | |
| C91.3 | Prolymphocytic leukaemia of B-cell type | Haematological | | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C91.4 | Hairy-cell leukaemia | Haematological | | | | |
| C91.5 | Adult T-cell lymphoma/leukaemia (HTLV-1-associated) | Haematological | | | | |
| C91.6 | Prolymphocytic leukaemia of T-cell type | Haematological | | | | |
| C91.7 | Other lymphoid leukaemia | Haematological | | | | |
| C91.8 | Mature B-cell leukaemia Burkitt-type | Haematological | | | | |
| C91.9 | Lymphoid leukaemia, unspecified | Haematological | | | | |
| C92.0 | Acute myeloid leukaemia [AML] | Haematological | | | | |
| C92.1 | Chronic myeloid leukaemia [CML], BCR/ABL-positive | Haematological | | | | |
| C92.2 | Atypical chronic myeloid leukaemia, BCR/ABL-negative | Haematological | | | | |
| C92.3 | Myeloid sarcoma | Haematological | | | | |
| C92.4 | Acute promyelocytic leukaemia [PML] | Haematological | | | | |
| C92.5 | Acute myelomonocytic leukaemia | Haematological | | | | |
| C92.6 | Acute myeloid leukaemia with 11q23-abnormality | Haematological | | | | |
| C92.7 | Other myeloid leukaemia | Haematological | | | | |
| C92.8 | Acute myeloid leukaemia with multilineage dysplasia | Haematological | | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C92.9 | Myeloid leukaemia, unspecified | Haematological | | | | |
| C93.0 | Acute monoblastic/monocytic leukaemia | Haematological | | | | |
| C93.1 | Chronic myelomonocytic leukaemia | Haematological | | | | |
| C93.3 | Juvenile myelomonocytic leukaemia | Haematological | | | | |
| C93.7 | Other monocytic leukaemia | Haematological | | | | |
| C93.9 | Monocytic leukaemia, unspecified | Haematological | | | | |
| C94.0 | Acute erythroid leukaemia | Haematological | | | | |
| C94.2 | Acute megakaryoblastic leukaemia | Haematological | | | | |
| C94.3 | Mast cell leukaemia | Haematological | | | | |
| C94.4 | Acute panmyelosis with myelofibrosis | Haematological | | | | |
| C94.6 | Myelodysplastic and myeloproliferative disease, not elsewhere classified | Haematological | | | | |
| C94.7 | Other specified leukaemias | Haematological | | | | |
| C95.0 | Acute leukaemia of unspecified cell type | Haematological | | | | |
| C95.1 | Chronic leukaemia of unspecified cell type | Haematological | | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C95.7 | Other leukaemia of unspecified cell type | Haematological | | | | |
| C95.9 | Leukaemia, unspecified | Haematological | | | | |
| C96.0 | Multifocal and multisystemic (disseminated) Langerhans-cell histiocytosis [Letterer-Siwe disease] | Haematological | | | | |
| C96.2 | Malignant mast cell tumour | Haematological | | | | |
| C96.4 | Sarcoma of dendritic cells (accessory cells) | Haematological | | | | |
| C96.5 | Multifocal and unisystemic (disseminated) Langerhans-cell histiocytosis | Haematological | | | | |
| C96.6 | Unifocal Langerhans-cell histiocytosis | Haematological | | | | |
| C96.7 | Other specified malignant neoplasms of lymphoid, haematopoietic and related tissue | Haematological | | | | |
| C96.8 | Histiocytic sarcoma | Haematological | | | | |
| C96.9 | Malignant neoplasms of lymphoid, haematopoietic and related tissue, unspecified | Haematological | | | | |
| C97 | Malignant neoplasms of independent (primary) multiple sites | Other | | ● | | |
| D05.0 | Lobular carcinoma in situ | Breast | ● | | | |

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected data set to be collected | | | Comment |
| --- | --- | --- | --- | --- | --- | --- |
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| D05.1 | Intraductal carcinoma in situ | Breast | ● | | | |
| D05.7 | Other carcinoma in situ of breast | Breast | ● | | | |
| D05.9 | Carcinoma in situ of breast, unspecified | Breast | ● | | | |

# Appendix C: mandatory registerable conditions

**MANDATORY REGISTERABLE CONDITIONS**

Further details to be provided regarding applicable data fields for each disease. These are additional Cancer Registration i.e. NDRS mandatory registerable conditions.

Notes:
- the following table lists all the registerable diseases by ICD10 code, together with the expected data set to be completed and the potential stage
- this table provides general guidelines only as not all permutations can be covered and there will always be exceptions, local clinical input is essential to identify and complete the appropriate stage
- further guidance is available from your local cancer registration service office

| ICD-10 4th Edition All C Codes are Malignant Neoplasms | Description | Cancer Waiting Times Site specific group | Expected Data set to be collected | | | Comment |
|---|---|---|---|---|---|---|
| | | | Core and Site Specific Data set | Core Data set | Path Only | |
| C00.0 - C97 | Malignant neoplasms (See Appendix A for full list) | | | | | |
| D00.0 | Carcinoma in situ: Lip, oral cavity and pharynx | Head and Neck | | | ● | |
| D00.1 | Carcinoma in situ: Oesophagus | Upper Gastrointestinal | | | ● | |
| D00.2 | Carcinoma in situ: Stomach | Upper Gastrointestinal | | | ● | |
| D01.0 | Carcinoma in situ: Colon | Colorectal | | | ● | |
| D01.1 | Carcinoma in situ: Rectosigmoid junction | Colorectal | | | ● | |
| D01.2 | Carcinoma in situ: Rectum | Colorectal | | | ● | |

| D01.3 | Carcinoma in situ: Anus and anal canal | Colorectal | | | ● | |
| D01.4 | Carcinoma in situ: Other and unspecified parts of intestine | Colorectal | | | ● | |
| D01.5 | Carcinoma in situ: Liver, gallbladder and bile ducts | Upper Gastrointestinal | | | ● | |
| D01.7 | Carcinoma in situ: Other specified digestive organs | Colorectal | | | ● | |
| D01.9 | Carcinoma in situ: Digestive organ, unspecified | Colorectal | | | ● | |
| D02.0 | Carcinoma in situ: Larynx | Head and Neck | | | ● | |
| D02.1 | Carcinoma in situ: Trachea | Lung | | | ● | |
| D02.2 | Carcinoma in situ: Bronchus and lung | Lung | | | ● | |
| D02.3 | Carcinoma in situ: Other parts of respiratory system | Lung | | | ● | |
| D02.4 | Carcinoma in situ: Respiratory system, unspecified | Lung | | | ● | |
| D03.0 | Melanoma in situ of lip | Skin | | ● | | |
| D03.1 | Melanoma in situ of eyelid, including canthus | Skin | | ● | | |
| D03.2 | Melanoma in situ of ear and external auricular canal | Skin | | ● | | |
| D03.3 | Melanoma in situ of other and unspecified parts of face | Skin | | ● | | |
| D03.4 | Melanoma in situ of scalp and neck | Skin | | ● | | |

| D03.5 | Melanoma in situ of trunk | Skin | | ● | | |
| D03.6 | Melanoma in situ of upper limb, including shoulder | Skin | | ● | | |
| D03.7 | Melanoma in situ of lower limb, including hip | Skin | | ● | | |
| D03.8 | Melanoma in situ of other sites | Other | | | ● | |
| D03.9 | Melanoma in situ, unspecified | Skin | | ● | | |
| D05.0 | Lobular carcinoma in situ | Breast | ● | | | |
| D05.1 | Intraductal carcinoma in situ | Breast | ● | | | |
| D05.7 | Other carcinoma in situ of breast | Breast | ● | | | |
| D05.9 | Carcinoma in situ of breast, unspecified | Breast | ● | | | |
| D06.0 | Carcinoma in situ: Endocervix | Gynaecological | | | ● | |
| D06.1 | Carcinoma in situ: Exocervix | Gynaecological | | | ● | |
| D06.7 | Carcinoma in situ Other parts of cervix | Gynaecological | | | ● | |
| D06.9 | Carcinoma in situ: Cervix, unspecified | Gynaecological | | | ● | |
| D07.0 | Carcinoma in situ: Endometrium | Gynaecological | | | ● | |
| D07.1 | Carcinoma in situ: Vulva | Gynaecological | | | ● | |
| D07.2 | Carcinoma in situ: Vagina | Gynaecological | | | ● | |
| D07.3 | Carcinoma in situ: Other and unspecified female genital organs | Gynaecological | | | ● | |
| D07.4 | Carcinoma in situ: Penis | Urological | | | ● | |
| D07.5 | Carcinoma in situ: Prostate | Urological | | | ● | |

| D07.6 | Carcinoma in situ: Other and unspecified male genital organs | Urological | | | ● | |
| D09.0 | Carcinoma in situ: Bladder | Urological | ● | | | |
| D09.1 | Carcinoma in situ: Other and unspecified urinary organs | Urological | | | ● | |
| D09.2 | Carcinoma in situ: Eye | Other | | | ● | |
| D09.3 | Carcinoma in situ: Thyroid and other endocrine glands | Head and Neck | | | ● | |
| D09.7 | Carcinoma in situ of other specified sites | Other | | | ● | |
| D09.9 | Carcinoma in situ, unspecified | Other | | | ● | |
| D32.0 | Benign neoplasm: Cerebral meninges | Brain/Central Nervous System | ● | | | |
| D32.1 | Benign neoplasm: Spinal meninges | Brain/Central Nervous System | ● | | | |
| D32.9 | Benign neoplasm: Meninges, unspecified | Brain/Central Nervous System | ● | | | |
| D33.0 | Benign neoplasm: Brain, supratentorial | Brain/Central Nervous System | ● | | | |
| D33.1 | Benign neoplasm: Brain, infratentorial | Brain/Central Nervous System | ● | | | |
| D33.2 | Benign neoplasm: Brain, unspecified | Brain/Central Nervous System | ● | | | |
| D33.3 | Benign neoplasm: Cranial nerves | Brain/Central Nervous System | ● | | | |
| D33.4 | Benign neoplasm: Spinal cord | Brain/Central Nervous System | ● | | | |
| D33.7 | Benign neoplasm: Other specified parts of central nervous system | Brain/Central Nervous System | ● | | | |

| D33.9 | Benign neoplasm: Central nervous system, unspecified | Brain/Central Nervous System | ● | | | |
| D35.2 | Benign neoplasm: Pituitary gland | Brain/Central Nervous System | ● | | | |
| D35.3 | Benign neoplasm: Craniopharyngeal duct | Other | ● | | | Usually classified as CNS |
| D35.4 | Benign neoplasm: Pineal gland | Brain/Central Nervous System | ● | | | |
| D37.0 | Neoplasm of uncertain or unknown behaviour: Lip, oral cavity and pharynx | Head and Neck | | | ● | |
| D37.1 | Neoplasm of uncertain or unknown behaviour of: Stomach | Upper Gastrointestinal | | | ● | |
| D37.2 | Neoplasm of uncertain or unknown behaviour: Small intestine | Upper Gastrointestinal | | | ● | |
| D37.3 | Neoplasm of uncertain or unknown behaviour: Appendix | Colorectal | | | ● | |
| D37.4 | Neoplasm of uncertain or unknown behaviour: Colon | Colorectal | | | ● | |
| D37.5 | Neoplasm of uncertain or unknown behaviour: Rectum | Colorectal | | | ● | |
| D37.6 | Neoplasm of uncertain or unknown behaviour: Liver, gallbladder and bile ducts | Upper Gastrointestinal | | | ● | |
| D37.7 | Neoplasm of uncertain or unknown behaviour: Other digestive organs | Colorectal/Upper Gastrointestinal | | | ● | |
| D37.9 | Neoplasm of uncertain or unknown behaviour: Digestive organ, unspecified | Colorectal/Upper Gastrointestinal | | | ● | |

| D38.0 | Neoplasm of uncertain or unknown behaviour: Larynx | Head and Neck | | | ● | |
| D38.1 | Neoplasm of uncertain or unknown behaviour: Trachea, bronchus and lung | Lung | | | ● | |
| D38.2 | Neoplasm of uncertain or unknown behaviour: Pleura | Lung | | | ● | |
| D38.3 | Neoplasm of uncertain or unknown behaviour: Mediastinum | Lung | | | ● | |
| D38.4 | Neoplasm of uncertain or unknown behaviour: Thymus | Lung | | | ● | |
| D38.5 | Neoplasm of uncertain or unknown behaviour: Other respiratory organs | Lung | | | ● | |
| D38.6 | Neoplasm of uncertain or unknown behaviour: Respiratory organ, unspecified | Lung | | | ● | |
| D39.0 | Neoplasm of uncertain or unknown behaviour: Uterus | Gynaecological | | | ● | |
| D39.1 | Neoplasm of uncertain or unknown behaviour: Ovary | Gynaecological | | | ● | |
| D39.2 | Neoplasm of uncertain or unknown behaviour: Placenta | Gynaecological | | | ● | |
| D39.7 | Neoplasm of uncertain or unknown behaviour: Other female genital organs | Gynaecological | | | ● | |
| D39.9 | Neoplasm of uncertain or unknown behaviour: | Gynaecological | | | ● | |

| | Female genital organ, unspecified | | | | | |
|---|---|---|---|---|---|---|
| D40.0 | Neoplasm of uncertain or unknown behaviour: Prostate | Urological | | | ● | |
| D40.1 | Neoplasm of uncertain or unknown behaviour: Testis | Urological | | | ● | |
| D40.7 | Neoplasm of uncertain or unknown behaviour: Other male genital organs | Urological | | | ● | |
| D40.9 | Neoplasm of uncertain or unknown behaviour: Male genital organs, unspecified | Urological | | | ● | |
| D41.0 | Neoplasm of uncertain or unknown behaviour: Kidney | Urological | | | ● | |
| D41.1 | Neoplasm of uncertain or unknown behaviour: Renal pelvis | Urological | ● | | | |
| D41.2 | Neoplasm of uncertain or unknown behaviour: Ureter | Urological | ● | | | |
| D41.3 | Neoplasm of uncertain or unknown behaviour: Urethra | Urological | ● | | | |
| D41.4 | Neoplasm of uncertain or unknown behaviour: Bladder | Urological | ● | | | |
| D41.7 | Neoplasm of uncertain or unknown behaviour: Other urinary organs | Urological | | | ● | |
| D41.9 | Neoplasm of uncertain or unknown behaviour: Urinary organs, unspecified | Urological | | | ● | |

| D42.0 | Neoplasm of uncertain or unknown behaviour: Cerebral meninges | Brain/Central Nervous System | ● | | | |
| D42.1 | Neoplasm of uncertain or unknown behaviour: Spinal meninges | Brain/Central Nervous System | ● | | | |
| D42.9 | Neoplasm of uncertain or unknown behaviour: Meninges, unspecified | Brain/Central Nervous System | ● | | | |
| D43.0 | Neoplasm of uncertain or unknown behaviour: Brain, supratentorial | Brain/Central Nervous System | ● | | | |
| D43.1 | Neoplasm of uncertain or unknown behaviour: Brain, infratentorial | Brain/Central Nervous System | ● | | | |
| D43.2 | Neoplasm of uncertain or unknown behaviour: Brain, unspecified | Brain/Central Nervous System | ● | | | |
| D43.3 | Neoplasm of uncertain or unknown behaviour: Cranial nerves | Brain/Central Nervous System | ● | | | |
| D43.4 | Neoplasm of uncertain or unknown behaviour: Spinal cord | Brain/Central Nervous System | ● | | | |
| D43.7 | Neoplasm of uncertain or unknown behaviour: Other parts of central nervous system | Brain/Central Nervous System | ● | | | |
| D43.9 | Neoplasm of uncertain or unknown behaviour: Central nervous system, unspecified | Brain/Central Nervous System | ● | | | |
| D44.0 | Neoplasm of uncertain or unknown behaviour: Thyroid gland | Head and Neck | | | ● | |
| D44.1 | Neoplasm of uncertain or unknown behaviour: Adrenal gland | Other | | | ● | |

| | | | | | | |
|---|---|---|---|---|---|---|
| D44.2 | Neoplasm of uncertain or unknown behaviour: Parathyroid gland | Other | | | ● | |
| D44.3 | Neoplasm of uncertain or unknown behaviour: Pituitary gland | Brain/Central Nervous System | ● | | | |
| D44.4 | Neoplasm of uncertain or unknown behaviour: Craniopharyngeal duct | Brain/Central Nervous System | ● | | | |
| D44 .5 | Neoplasm of uncertain or unknown behaviour: Pineal gland | Brain/Central Nervous System | ● | | | |
| D44 .6 | Neoplasm of uncertain or unknown behaviour: Carotid body | Other | | | ● | |
| D44 .7 | Neoplasm of uncertain or unknown behaviour: Aortic body and other paraganglia | Other | | | ● | |
| D44 .8 | Neoplasm of uncertain or unknown behaviour: Pluriglandular involvement | Other | | | ● | |
| D44 .9 | Neoplasm of uncertain or unknown behaviour: Endocrine gland, unspecified | Other | | | ● | |
| D45 | Polycythaemia vera | Haematological | See the Haematological chapter of COSD User Guide for information regarding what is required to be submitted for these Haematological diseases. | | | |
| D46.0 | Refractory anaemia without ringed sideroblasts, so stated | Haematological | | | | |
| D46.1 | Refractory anaemia with ringed sideroblasts | Haematological | | | | |
| D46.2 | Refractory anaemia with excess of blasts (RAEB) | Haematological | | | | |
| D46.4 | Refractory anaemia, unspecified | Haematological | | | | |

| D46.5 | Refractory anaemia with multi-lineage dysplasia | Haematological | | | | |
|---|---|---|---|---|---|---|
| D46.6 | Myelodysplastic syndrome with isolated del(5q) chromosomal abnormality | Haematological | | | | |
| D46.7 | Other myelodysplastic syndromes | Haematological | | | | |
| D46.9 | Myelodysplastic syndrome, unspecified | Haematological | | | | |
| D47.0 | Histiocytic and mast cell tumours of uncertain and unknown behaviour | Haematological | | | | |
| D47.1 | Chronic myeloproliferative disease | Haematological | | | | |
| D47.3 | Essential (haemorrhagic) thrombocythaemia | Haematological | | | | |
| D47.4 | Osteomyelofibrosis | Haematological | | | | |
| D47.5 | Chronic eosinophilic leukaemia (hypereosinophilic syndrome) | Haematological | | | | |
| D47.7 | Other specified neoplasms of uncertain or unknown behaviour of lymphoid, haematopoietic and related tissue | Haematological | | | | |
| D47.9 | Neoplasm of uncertain or unknown behaviour of lymphoid, haematopoietic and related tissue, unspecified | Haematological | | | | |
| D48.0 | Neoplasm of uncertain or unknown behaviour: Bone and articular cartilage | Sarcoma | | | ● | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D48.1 | Neoplasm of uncertain or unknown behaviour: Connective and other soft tissue | Sarcoma | | | ● | Only applicable for GISTs |
| D48.2 | Neoplasm of uncertain or unknown behaviour: Peripheral nerves and autonomic nervous system | Other | | | ● | |
| D48.3 | Neoplasm of uncertain or unknown behaviour: Retroperitoneum | Other | | | ● | |
| D48.4 | Neoplasm of uncertain or unknown behaviour: Peritoneum | Other | | | ● | |
| D48.5 | Neoplasm of uncertain or unknown behaviour: Skin | Skin | | | ● | |
| D48.6 | Neoplasm of uncertain or unknown behaviour: Breast | Breast | | | ● | |
| D48.7 | Neoplasm of uncertain or unknown behaviour: Other specified sites | Other | | | ● | |
| D48.9 | Neoplasm of uncertain or unknown behaviour, unspecified | Other | | | ● | |
| E85.9 | Amyloidosis, unspecified | Haematology | See the Haematological chapter of COSD User Guide for information regarding what is required to be submitted for these Haematological diseases. | | | | |

Notes:

- although primary amyloidosis (E85.9) is listed as an E ICD code in the World Health Organisation (WHO) disease classification, amongst clinicians it is widely acknowledged and subsequently treated as a cancer, receiving chemotherapy in some cases
- whilst we await the WHO disease classification being updated to reflect this fact, it's inclusion as a registerable condition requiring collection via

the COSD has been agreed with the National Disease Registration
Service

# Appendix D: recommended staging to be collected by cancer registries

The National Staging Panel for Cancer Registration recommends that the staging systems recorded by the cancer registries follow the guidance issued by the Royal College of Pathologists and the Cancer Outcomes and Services Dataset.

It is also important to note that both UICC and AJCC coding systems have updated to v8.0, please refer directly to the TNM Staging Books, for the most recent and accurate stage groupings /combination.

Notes:

- FIGO 2021 for vulvar cancer takes effect from 1 January 2022
- FIGO 2018 for cervical cancer takes effect from 1 January 2020
- head and neck sites changed from TNM7 to TNM8 from 1 January 2019
- TNM 7 changed to TNM 8 (except head and neck) from 1 January 2018
- Lower GI changed from TNM5 to TNM8 from 1 January 2018

| TUMOUR TYPE | STAGING SYSTEM (from 1 January 2020) | STAGING SYSTEM (from 1 January 2022) |
|---|---|---|
| ADRENAL CORTEX TUMOURS | UICC TNM 8 | UICC TNM 8 |
| AMPULLA OF VATER – CARCINOMA | UICC TNM 8 | UICC TNM 8 |
| AMPULLA OF VATER – NEUROENDOCRINE TUMOURS | ENETS - EUROPEAN NEUROENDOCRINE TUMOUR SOCIETY TNM | ENETS - EUROPEAN NEUROENDOCRINE TUMOUR SOCIETY TNM |
| ANAL CANAL | UICC TNM 8 | UICC TNM 8 |
| APPENDIX – CARCINOMA | UICC TNM 8 | UICC TNM 8 |
| APPENDIX – NEUROENDOCRINE TUMOURS | EUROPEAN NEUROENDOCRINE TUMOUR SOCIETY TNM** | EUROPEAN NEUROENDOCRINE TUMOUR SOCIETY TNM** |
| BONE | UICC TNM 8 | UICC TNM 8 |
| BREAST | UICC TNM 8 | UICC TNM 8 |
| CERVIX | FIGO (2018) | FIGO (2018) |

| TUMOUR TYPE | STAGING SYSTEM (from 1 January 2020) | STAGING SYSTEM (from 1 January 2022) |
|---|---|---|
| CHRONIC LYMPHOCYTIC LEUKAEMIA | BINET | BINET |
| COLON AND RECTUM – CARCINOMA | UICC TNM 8 | UICC TNM 8 |
| COLON AND RECTUM – GIST | UICC TNM 8 | UICC TNM 8 |
| COLON AND RECTUM – NEUROENDOCRINE TUMOURS | ENETS - EUROPEAN NEUROENDOCRINE TUMOUR SOCIETY TNM | ENETS - EUROPEAN NEUROENDOCRINE TUMOUR SOCIETY TNM |
| CONJUNCTIVA – CARCINOMA | UICC TNM 8 | UICC TNM 8 |
| CONJUNCTIVA – MELANOMA | UICC TNM 8 | UICC TNM 8 |
| CUTANEOUS SQUAMOUS CELL CARCINOMA AND OTHER CUTANEOUS CARCINOMA | UICC TNM 8 | UICC TNM 8 |
| EXTRAHEPATIC BILE DUCT – PERIHILAR | UICC TNM 8 | UICC TNM 8 |
| EXTRAHEPATIC BILE DUCTS – DISTAL | UICC TNM 8 | UICC TNM 8 |
| FALLOPIAN TUBE | FIGO (2013) | FIGO (2013) |
| GALLBLADDER | UICC TNM8 | UICC TNM8 |
| GESTATIONAL TROPHOBLASTIC DISEASE | FIGO (2009) | FIGO (2009) |
| GLOTTIS | UICC TNM 8 | UICC TNM 8 |
| HEPATOBLASTOMA (CTYA) | PRETEXT STAGING SYSTEM STAGE | PRETEXT STAGING SYSTEM STAGE |
| HODGKIN LYMPHOMA | ANN ARBOR STAGE | ANN ARBOR STAGE |
| HYPOPHARYNX | UICC TNM 8 | UICC TNM 8 |
| KIDNEY | UICC TNM 8 | UICC TNM 8 |
| KIDNEY, WILMS | WILMS TUMOUR STAGE (NWTSG) | WILMS TUMOUR STAGE (NWTSG) |
| LACRIMAL GLAND – CARCINOMA | UICC TNM 8 | UICC TNM 8 |
| LIP | UICC TNM 8 | UICC TNM 8 |

| TUMOUR TYPE | STAGING SYSTEM (from 1 January 2020) | STAGING SYSTEM (from 1 January 2022) |
|---|---|---|
| LIVER – INTRAHEPATIC BILE DUCTS | UICC TNM 8 & BARCELONA STAGE | UICC TNM 8 & BARCELONA STAGE |
| LIVER – HEPATOCELLULAR | UICC TNM 8 & BARCELONA STAGE | UICC TNM 8 & BARCELONA STAGE |
| LUNG | UICC TNM 8 | UICC TNM 8 |
| MAJOR SALIVARY GLANDS | UICC TNM 8 | UICC TNM 8 |
| MAXILLARY SINUS | UICC TNM 8 | UICC TNM 8 |
| MEDULLOBLASTOMA | CHANG STAGING SYSTEM | CHANG STAGING SYSTEM |
| MYELOMA | REVISED INTERNATIONAL STAGING SYSTEM (R-ISS) | REVISED INTERNATIONAL STAGING SYSTEM (R-ISS) |
| NASAL CAVITY AND PARANASAL SINUSES | UICC TNM 8 | UICC TNM 8 |
| NASOPHARYNX | UICC TNM 8 | UICC TNM 8 |
| NEUROBLASTOMA | INTERNATIONAL NEUROBLASTOMA RISK GROUP (INRG) STAGING SYSTEM | INTERNATIONAL NEUROBLASTOMA RISK GROUP (INRG) STAGING SYSTEM |
| NON-HODGKIN LYMPHOMA (ADULT) | ANN ARBOR STAGE | ANN ARBOR STAGE |
| NON-HODGKIN LYMPHOMA (CHILDREN) | MURPHY ST. JUDE STAGING SYSTEM | MURPHY ST. JUDE STAGING SYSTEM |
| OESOPHAGUS INCLUDING OESOPHAGOGASTRIC JUNCTION – CARCINOMA | UICC TNM 8 | UICC TNM 8 |
| OESOPHAGUS INCLUDING OESOPHAGOGASTRIC JUNCTION – GIST | UICC 8 | UICC 8 |
| ORAL CAVITY | UICC TNM 8 | UICC TNM 8 |
| OROPHARYNX | UICC TNM 8 | UICC TNM 8 |
| OMENTUM AND MESENTERY – GIST | none recommended (if UICC TNM 8 is submitted this will be recorded by the NCRAS) | none recommended (if UICC TNM 8 is submitted this will be recorded by the NCRAS) |
| OVARY AND PERITONEUM | FIGO (2013) | FIGO (2013) |

| TUMOUR TYPE | STAGING SYSTEM (from 1 January 2020) | STAGING SYSTEM (from 1 January 2022) |
|---|---|---|
| PANCREAS | UICC TNM 8 | UICC TNM 8 |
| PANCREAS – NEUROENDOCRINE TUMOURS | ENETS - EUROPEAN NEUROENDOCRINE TUMOUR SOCIETY TNM | ENETS - EUROPEAN NEUROENDOCRINE TUMOUR SOCIETY TNM |
| PENIS | UICC TNM 8 | UICC TNM 8 |
| PLEURAL MESOTHELIOMA | UICC TNM 8 | UICC TNM 8 |
| PROSTATE | UICC TNM 8 | UICC TNM 8 |
| RENAL PELVIS AND URETER | UICC TNM 8 | UICC TNM 8 |
| RETINOBLASTOMA | UICC TNM 8 and INTERNATIONAL STAGING SYSTEM FOR RETINOBLASTOMA | UICC TNM 8 and INTERNATIONAL STAGING SYSTEM FOR RETINOBLASTOMA |
| RHABDOMYOSARCOMA and OTHER SOFT TISSUE SARCOMAS (CTYA) | UICC TNM 8 & IRS POST SURGICAL GROUP | UICC TNM 8 & IRS POST SURGICAL GROUP |
| HEPATOBLASTOMA (CTYA) | PRETEXT STAGING SYSTEM STAGE | PRETEXT STAGING SYSTEM STAGE |
| SARCOMA OF ORBIT | UICC TNM 8 | UICC TNM 8 |
| SKIN – MALIGNANT MELANOMA | UICC TNM 8 | UICC TNM 8 |
| SKIN – MERKEL CELL CARCINOMA** | UICC TNM 8 | UICC TNM 8 |
| SKIN OF EYELID – CARCINOMA | UICC TNM 8 | UICC TNM 8 |
| SMALL INTESTINE – GIST | none recommended (if UICC TNM 8 is submitted this will be recorded by the NCRAS) | none recommended (if UICC TNM 8 is submitted this will be recorded by the NCRAS) |
| SMALL INTESTINE – NEUROENDOCRINE TUMOURS | ENETS - EUROPEAN NEUROENDOCRINE TUMOUR SOCIETY TNM | ENETS - EUROPEAN NEUROENDOCRINE TUMOUR SOCIETY TNM |
| SMALL INTESTINE – CARCINOMA | UICC TNM 8 | UICC TNM 8 |
| SOFT TISSUE | UICC TNM 8 | UICC TNM 8 |
| STOMACH – CARCINOMA | UICC TNM 8 | UICC TNM 8 |

| TUMOUR TYPE | STAGING SYSTEM (from 1 January 2020) | STAGING SYSTEM (from 1 January 2022) |
|---|---|---|
| STOMACH – GIST | none recommended (if UICC TNM 8 is submitted this will be recorded by the NCRAS) | none recommended (if UICC TNM 8 is submitted this will be recorded by the NCRAS) |
| STOMACH – NEUROENDOCRINE TUMOURS | ENETS - EUROPEAN NEUROENDOCRINE TUMOUR SOCIETY TNM | ENETS - EUROPEAN NEUROENDOCRINE TUMOUR SOCIETY TNM |
| SUBGLOTTIS | UICC TNM 8 | UICC TNM 8 |
| SUPRAGLOTTIS | UICC TNM 8 | UICC TNM 8 |
| TESTIS | UICC TNM 8 | UICC TNM 8 |
| THYMUS | UICC TNM 8 | UICC TNM 8 |
| THYROID | UICC TNM 8 | UICC TNM 8 |
| UPPER AERODIGESTIVE TRACT – MALIGNANT MELANOMA | UICC TNM 8 | UICC TNM 8 |
| URETHRA | UICC TNM 8 | UICC TNM 8 |
| URINARY BLADDER | UICC TNM 8 | UICC TNM 8 |
| UTERUS – ENDOMETRIUM | FIGO (2009) | FIGO (2009) |
| UTERUS – UTERINE SARCOMA | FIGO (2009) | FIGO (2009) |
| UVEA – MALIGNANT MELANOMA | UICC TNM 8 | UICC TNM 8 |
| VAGINA | FIGO (2009) | FIGO (2009) |
| VULVAR | FIGO (2009) | FIGO (2021) |
| VULVA – MALIGNANT MELANOMA | UICC TNM 8 | UICC TNM 8 |

Additional notes:

- the use of preferred staging systems (which should be used), is under frequent review and may change in the future
    - this list was accurate at the time of publication
- ENETS – 'European Neuroendocrine Tumour Society' TNM, can now be recorded in the CORE – STAGING section, along with all other TNM stage (where applicable)