

## WASHINGTON STATE CANCER REGISTRY

### Reportable List

Effective January 1, 2014

Reportable Cases	Exceptions (not reportable)
Malignant or cancerous neoplasms with a behavior code of 2 or 3, as noted by the International Classification of Diseases for Oncology (ICD-O-3).*	Cancer of the skin (C44._) with histologies 8000-8005, 8010-8046, 8050-8084, and 8090-8110 (Includes basal and squamous cell carcinoma).
Neoplasms noted as carcinoma in-situ or non-invasive carcinomas	Carcinoma in-situ of the uterine cervix (C53._) Cervical intraepithelial neoplasia (CIN III)
The following intraepithelial neoplasms are reportable as in-situ (behavior code 2): <ul style="list-style-type: none"> <li>• Vulvar intraepithelial neoplasm III (VIN III)</li> <li>• Vaginal intraepithelial neoplasm III (VAIN III)</li> <li>• Anal intraepithelial neoplasm III (AIN III)</li> </ul>	Prostatic intraepithelial neoplasia (PIN III) after 1/1/2001  Borderline malignancies (behavior code 1) of the ovary (8442, 8451, 8462, 8473) after 1/1/2001
Non-malignant (behavior code 0 and 1) primary intracranial and central nervous system tumors, including the meninges and intracranial endocrine structures *	
All hematopoietic and lymphoid neoplasms including certain pre-malignant hematopoietic conditions **	

\*Juvenile astrocytoma should be reported as 9421/3.

\*\*Refer to Case Reportability Instructions in the SEER Hematopoietic and Lymphoid Database as published by *WHO Classification of Tumours of Haematopoietic and Lymphoid Tissues*, 4th Ed.

Use the table below to determine if a case is reportable when ambiguous terminology is used in the diagnosis (i.e. pathological or clinical).

Reportable Ambiguous Terms**	Non-reportable Ambiguous Terms
Apparent(Iy)	Cannot be ruled out
Appears*	Equivocal
Comparable with*	Possible
Compatible with*	Potentially malignant
Consistent with	Questionable
Favor(s)	Rule out
Malignant appearing*	Suggests
Most Likely	Worrisome
Presumed	
Probable	
Suspect(ed)	
Suspicious (for)	
Typical (of)	

\*Effective with cases diagnosed 1/1/1998 and later.

\*\* If the cytology is reported using any of these ambiguous terms and neither a positive biopsy nor a physician's clinical impression supports the cytology findings, do not consider as diagnostic of cancer.

**Note:** Do not substitute synonyms such as "supposed" for "presumed" or "equal" for "comparable." Do not substitute "likely" for "most likely." Use only the exact words on the list.

Please refer to the recommended casefinding list using ICD-9 or ICD-10 codes and preferred ICD-O-3 terms.

For people with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY call 711).