

Registry Casefinding and Disease Index Preparation: Are You Capturing All Your Cancer Cases?

Why is Casefinding Important to Both the LTR and Your Facility?

- Assures that every cancer case has been reported
- Way to monitor multiple primaries as well as diagnostic/treatment patterns/resources
- Documents completeness of your registry (*According to STORE 2018, pg. 142, **complete Casefinding MUST include BOTH clinically AND pathologically confirmed cases***)
 - *Please keep in mind several sites are most often dx'd clinically (and may or may not ever be histologically confirmed):*
 - *Benign & malignant brain/CNS tumors*
 - *Kidney, pancreas, liver & lung cancers*

Did You Know that Complete Casefinding Sources Include ALL of the Following?

- IP/OP Admission/Discharge Documents
- Pathology/Cytology Pathology Reports
- Surgery Logs/Schedules
- Radiology
- Nuclear Medicine
- Radiation Therapy Logs
- Chemotherapy Outpatient Logs
- Emergency Room Records
- Autopsy Reports
- Pain Clinic Logs

The casefinding sources above are used to generate a “**Disease Index**” based on the ICD-10-CM SEER Casefinding List and fiscal year. SEER Casefinding lists by fiscal year (current and previous) may be found at: <https://seer.cancer.gov/tools/casefinding/>. New SEER Casefinding lists are **routinely released every October** for the following fiscal year in BOTH PDF & Excel formats.

In order to ensure **complete** casefinding at your facility, please share this document with your IT department to make sure they are utilizing the **most current** SEER Casefinding list and including **ALL available** casefinding sources so the disease indexes they prepare for your facility are as complete as possible.

Please keep in mind that SEER Casefinding lists are to be used to screen prospective cases and identify cancer cases for inclusion in the registry. **A casefinding list is NOT the same as a reportable list. Casefinding lists are intended for searching a variety of cases so as NOT to miss any reportable cases.**

Effective January 1, 2021, there will be MANY changes in reportability. Always refer to the most current 2021+ versions of STORE AND the SEER Program Coding Staging Manuals, the LTR website as well as ALL ICD-O-3.2 related material located at: <https://www.naaccr.org/icdo3/> when determining reportability moving forward. If it is still unclear if a particular histology is reportable OR not, please submit a question to [Ask a SEER Registrar](#)

Working together, we can all ensure that every cancer case, whether clinically or pathologically diagnosed, is captured and properly reported because **every case counts!**