

Cancer Recording Guidance

- The site and histology of any tumour where known should be given as specifically as possible
- If the primary site is not known then state *unknown primary*
- If the histology is unknown then this does not need to be stated explicitly or an explanation given. For example if the patient was too unfit or refused investigation then this does not need to be stated.
- If it is not possible to be more specific than “tumour” or “mass”, for example, then use a qualifier such as *Probable* or *Suspected* to indicate that no further information is known.
- Prognostic and staging information should not be included (for example: TNM or Gleason score)
- If there are metastases at presentation then this should be recorded as “*with metastases*”
- If metastases present later then this could be recorded as a separate line above the primary but it is not necessary to repeat the primary histology with the metastases.
- If metastases are only in one or two sites then these may be given especially if they specifically contributed to the death. Lists of sites are not needed
- The interval for metastases should be from the date when they first presented
- It is not usually appropriate to include different metastases on separate lines above the primary tumour
- Multiple primaries should either be recorded together on one line as joint causes or given in section II with only one primary cancer appearing in the sequence in section I
- If a cancer has been treated or is co-existing then it should not be included *unless it has contributed to the death*