

	2026 Updates	June 2026
	Accurate. Concise. Standardized	Version 1.0

2026 Data Changes

Effective for cases diagnosed January 1, 2026, and forward unless otherwise noted.

For complete coding instructions and additional information on 2026 updates, refer to standard setter manuals and the NAACCR Webinar: *V26 Updates: Solid Tumor Rules, SSDIs, Cancer PathCHART and More!* (posted on FLccSC).

REPORTABILITY & ICD-O-3.2

ICD-O-3.2

- No reportability changes for 2026
- No ICD-O-3 morphology code changes
- [WHO IARC ICD-O-3.2 Excel Table](#)

Refer to:

- [2026 NAACCR ICD-O-3.2 Implementation Guidelines](#)
- [2026 NAACCR ICD-O-3.2 Updates \(Numeric\)](#)
- [2026 NAACCR ICD-O-3.2 Updates \(Alpha\)](#)

NAACCR DATA STANDARDS (VERSION 26)

Demographic Item

- Sex Assigned at Birth [#225]

Retired Data Items (Effective 1/1/2026)

- Sex
- Pediatric staging items
- Comorbid/Complication 1–10
- NPCR derived AJCC8 stage group items

STAGING SYSTEMS


AJCC

- Version 9 protocols effective for cases diagnosed Jan 1, 2026, and forward:
 - Salivary Glands
 - Oropharynx (HPV-associated)

SSDI MANUAL VERSION 3.3

New SSDIs

- STAS (Lung)
- Residual Cancer Burden (Breast)
- Residual Cancer Burden Class (Breast)
- MSI required for Corpus Carcinoma & Carcinosarcoma (2026+)

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Revised SSDIs

- Head & Neck SSDIs standardized:
 - Extranodal extension (clinical/pathologic)
 - Lymph node size groupings

Clinical extranodal extension may include imaging and/or physical exam.

Discontinued SSDIs

- Bone: Percent Necrosis Post-Neoadjuvant
- Breast: Oncotype DX Risk Levels (Invasive & DCIS)

Clarifications

- Prostate cores: targeted biopsy = 1 core regardless of sample count
- Bladder neoadjuvant therapy effect applies only post-surgery; BCG is not considered neoadjuvant therapy.

SURGERY CODING (updates)


- **Prostate A220 SEER Note:** Code A220 includes tumor destruction/minimally invasive procedures when cancer is an incidental finding (e.g., ablation [Aqua, cold, heat, or laser], HoLEP, TURP).
- **Skin B200 SEER Note:** Elliptical/fusiform excisions are eye-shaped skin excisions performed to include normal tissue and improve cosmetic scar outcome.

SOLID TUMOR RULES

- No new modules for 2026
- Tables converted from 3 columns to 2 columns; column references updated throughout.
- In-table notes converted to footnotes
- Updates limited to terminology alignment and equivalency clarification.
- Refer to 2026 Revision History

SEER PROGRAM CODING AND STAGING MANUAL (highlights)

- **Sex assigned at Birth**
 - Code 1 (Male): Sex stated as male, or sex unknown with site C600–C639.
 - Code 2 (Female): Sex stated as female, or sex unknown with site C510–C589.
 - Code 9 (Not Stated/Unknown): Sex not stated, sex not clearly defined due to DSD, or documented as other than male or female.
- **Lymphovascular Invasion (LVI): code 1 when present**
 - Exceptions: thyroid, medullary thyroid, adrenal
- **Systemic therapy coded by drug class using SEER*Rx**
- **Chemoembolization: code specific agent when applicable**
- **Cancer status definitions updated:**
 - 1 = No Evidence of Disease
 - 2 = Evidence of Disease
 - 9 = Unknown

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- **Appendix E: Reportable and non-reportable examples added and/or revised**
 - Do NOT Report cases solely based on PI-Rads 4 or 5 or LI-Rads 4, 5, or OPTN 5 category.

STORE MANUAL UPDATES (highlights)

- **Treatment**
 - First course treatment does not end when a managing physician changes one or more agents within a combination regimen, even if switching to a different drug class (e.g., alkylating agents, antimetabolites, natural products, or other miscellaneous agents).
 - Changes in agents may occur for reasons other than disease progression and do not automatically constitute subsequent therapy.

HEMATOPOIETIC & LYMPHOID MANUAL (highlights)

- No new modules or rules added or deleted; content structure has been reorganized.
- New standardized terminology for histology assignment (see Histology Coding Instructions #3).
- Major section revisions: manual navigation, multiple primaries calculator, transformations, primary site coding (intro only), and treatment.
- New section added for “Coding Mets at Dx” for hematopoietic neoplasms.
- Clarified histology coding based on immunophenotyping and genetic findings.
- Added new coding examples (including Ask a SEER Registrar cases).

IN ADDITION TO...

- **Changes related to cancer coding and staging include 2026 updates to:**
 - [Grade Manual Version 3.3](#)
 - [EOD \(Extent of Disease\)](#)
 - [Cancer PathCHART](#)
 - [Pediatric Data Collection System and Staging Manual](#)
 - Reporting required for all facilities

CURRENT CODING AND STAGING MANUALS FOR 2026

- [Manual Reference Guide](#)