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Person with cancer—region of first recurrence as locoregional cancer, topography code (ICD-O-3) ANN.N

Identifying and definitional attributes

Metadata item type: Data Element

Short name: Region of first recurrence as locoregional cancer

METEOR identifier: 393848

Registration status: Health, Standard 07/12/2011

Definition: The region of first recurrence as locoregional cancer in a person with cancer, after

a disease-free period, as represented by a code.

Data Element Concept: Person with cancer—region of first recurrence as locoregional cancer

Value Domain: Topography code (ICD-O-3) ANN.N

Value domain attributes

Representational attributes

Classification scheme: International Classification of Diseases for Oncology 3rd edition

Representation class: Code

Data type: String

Format: ANN.N

Maximum character length: 5

Collection and usage attributes

Guide for use: Record all four alphanumeric characters of the topography code. The number after

the decimal point represents the subsite or subcategory.

Data element attributes

Collection and usage attributes

Guide for use: This information is collected for the site or region of the first recurrence as

locoregional cancer.

The term recurrence refers to the return, reappearance or metastasis of cancer of

the same histology after a disease-free period.

Locoregional recurrence refers to the appearance of cancer cells at the same site as the original (primary) tumour or the regional lymph nodes. A list of those lymph nodes defined as regional lymph nodes for each cancer site can be found in the TNM Classification of Malignant Tumours International Union Against Cancer (UICC) and the American Joint Committee on Cancer (AJCC) Cancer Staging

Manual; the latest editions are recommended.

Site or region refers to the anatomical position that the cancer has reappeared, record all relevant locoregional sites.

The region of recurrence of distant metastasis is collected as a separate item.

The record should not be updated with subsequent recurrences.

Collection methods: The information should be obtained from the patient's medical record.

Comments: This is collected to identify in which anatomical structures recurrence occurs, and is

useful for evaluating patterns of care and patient outcomes.

Source and reference attributes

Submitting organisation: Cancer Australia

Origin: Commission on Cancer, American College of Surgeons

Reference documents: American College of Surgeons 1998. Standards of the Commission on Cancer:

Registry Operations and Data Standards (ROADS), Volume II. Commission on

Cancer

Relational attributes

Related metadata references:

Has been superseded by Person with cancer—region of first recurrence as

locoregional cancer, topography code (ICD-O-3.1) ANN.N

Health, Qualified 03/08/2023

See also Patient—diagnosis date of first recurrence as distant metastasis,

DDMMYYYY

Health, Standard 07/12/2011

See also Patient—diagnosis date of first recurrence as locoregional cancer,

DDMMYYYY

Health, Standard 07/12/2011

See also Person with cancer—most valid basis of diagnosis of the first recurrence,

code N

Health, Standard 07/12/2011

See also Person with cancer—region of first recurrence as distant metastasis,

topography code (ICD-O-3) ANN.N Health. Standard 07/12/2011

See also Person with cancer—region of first recurrence as distant metastasis,

topography code (ICD-O-3.1) ANN.N Health, Qualified 03/08/2023

See also Person with cancer—region of first recurrence as distant metastasis,

topography code (ICD-O-3.2) ANN.N Health, Qualified 03/08/2023

Implementation in Data Set Cancer (clinical) DSS

Specifications:

Health, Superseded 08/05/2014

Conditional obligation: Conditional on the patient being diagnosed with

recurrence of locoregional cancer.

Cancer (clinical) DSS

Health, Superseded 14/05/2015

Conditional obligation: Conditional on the patient being diagnosed with

recurrence of locoregional cancer.

Cancer (clinical) NBPDS

Health, Standard 14/05/2015

Conditional obligation:

Conditional on the patient being diagnosed with recurrence of locoregional cancer.