

BLADDER

The abstract is the basis of all registry functions. It is a tool used to help accurately determine stage and to aid cancer research; therefore, the abstract must be complete, containing all the information needed to provide a concise analysis of the patient's disease from diagnosis to treatment.

To assist registrars in preparing abstracts, NCRA's Education Committee has created a series of informational abstracts. These site-specific abstracts provide an outline to follow when determining what text to include. The outline has a specific sequence designed to maximize efficiency and includes eight sections: Physical Exam/History; X-Rays/Scopes/Scans; Labs; Diagnostic Procedures; Pathology; Primary Site; Histology; and Treatment. A list of relevant resources is located at the end of each informational abstract. The sources of information noted in the various sections below are not all inclusive, but they are the most common. You may need to do additional research to complete the abstract.

When using the informational abstract, follow the outline and strive to complete all the sections. Be concise by using phrases, not sentences. Make sure to use text relevant to the disease process and the specific cancer site and to use NAACCR Standard Abbreviations. When the abstract is completed, review thoroughly to ensure accuracy.

PHYSICAL EXAM/HISTORY

Include:

- **Demographics:** Age, sex, marital status, race, ethnicity of the patient.
- **Chief Complaint (CC):** Write a brief statement about why the patient sought medical care.
- **Physical Examination (PE):** Date of the exam and documentation of information pertinent to the bladder cancer.
 - History:
 - Personal history of any cancer
 - Family history of any cancer
 - Tobacco: type, frequency, amount
 - Alcohol: frequency, amount
 - Workplace exposures and/or relevant environmental factors
 - List significant, relevant co-morbidities, particularly those that impact treatment decisions.

- **Genetics:** List appropriate conditions as found in the patient's record or other information. If not applicable, state that.
- **Past Treatment:** If applicable, include previous chemotherapy or radiation therapy.

Where to Find the Information: H&P, consultations, ER physician notes, nursing notes, physician progress notes, discharge summary, admission notes, face sheets.

Note on Negative Findings: Include any relevant negative findings, such as urinalysis negative.

Example: *55-year-old black male who was having blood in the urine and painful urination. No family or past history of any cancer. He does not smoke or drink alcohol. He has had frequent urinary tract infections. He is an over-the-road truck driver and sits for very long durations without breaks. He has not been exposed to any chemicals or other irritants or cancer-causing agents.*

X-RAYS/SCOPES/SCANS

Include:

- **Imaging Tests:** Date, name and brief summary of results of the test.
- **Cystoscopy:** Date, name of the procedure and brief summary of any significant findings.

Example: 1/2/25 IVP, Retrograde Pyelogram, CT scan, CT urography, MRI, MR urography, renal ultrasound, chest x-ray and/or bone scan to check for spread of disease, if suspected.

LABS

Include:

- **Urine Cytology:** Date, name, values and interpretations.
- **Urine Culture:** Date, name, values and interpretations
- **Urinalysis:** Date, name, values and interpretations
- **Urine Tumor Marker Tests:** Date, name, values and interpretations

DIAGNOSTIC PROCEDURES

Include:

Cystoscopy is a procedure used to look at the bladder and urethra, performed with a cystoscope. The cystoscopy can be used to take biopsy samples.

document the date, name of procedure, and brief description of significant findings.

Example: Incisional biopsy and cystoscopy done on 1/2/25. Lesion found in the dome of the bladder.

PATHOLOGY

Include:

Summarize findings of all pathological studies and/or reports, include dates and list chronologically. Primary site

- Cancer cell type
- Grade of the tumor
- Size of tumor (not specimen size)
- Extension/spread
- Lymph node involvement
- Note any involvement of surgical margins.
- Note the number of tumor(s)

Example: 5/1/25 TURB, Transitional cell carcinoma of the dome of the bladder, grade 3, 1 cm in size, does not appear to extend to other parts of the bladder or nearby structures; there are no lymph nodes involved; the margins are clear with no further extension; only one tumor is apparent.

PRIMARY SITE

Include:

- The primary site where the cancer started.

Example: Dome of the bladder

Where to Find the Information: Surgical report and diagnostic reports (imaging, pathology, operative, cystoscopy and biopsy).

HISTOLOGY

Include:

- Histology
- Differentiation
- Grade

Example: 5/1/25 Transitional cell carcinoma Grade 3.

Where to Find the Information: Pathology reports, cytology reports, scans, H&P, Consultation reports

TREATMENT

Include:

- **Surgery:** Include type of surgery, date, facility, surgeon, and any relevant statement to describe important details. Definitive surgeries that remove the cancer are:
 - TURBT
 - Radical cystectomy
 - Partial cystectomy
 - Urinary diversion
- **Radiation:**
 - External radiation
 - Internal radiation (radioactive substances in needles, seeds, wires, or catheters placed directly into or near the cancer).
- **Dates:** facility, radiation oncologist, dates of treatment, treatment volume, lymph nodes treated, treatment modality, dose per fraction, number of fractions, total dosage, number of phases, overall total dose and reason treatment was discontinued early.
- **Chemotherapy:**
 - Regional: may be intravesical (put into the bladder through a tube inserted into the urethra)
 - Systemic: drugs taken by mouth or injected into a vein or muscle.
 - Dates: Beginning and ending of chemotherapy, cycles, names of drugs, and route of administration. If available, include response to treatment.
 - Drugs: Note if any changes in drugs. State new drug names and why the drug was changed and when the new drug was started.

- **Biologic Therapy:**

- Used to boost a patient's immune system. It is also called biotherapy or immunotherapy. Bladder cancer can be treated with Bacillus Calmette-Guerin (BCG). It is given in a solution that is placed directly into the bladder using a catheter.
- Include dates, names, and routes of administration of drugs given. If noted, indicate response.

- **Clinical Trials:**

- Include the name and number of clinical trials in which patient is enrolled and any other available details, such as date of enrollment.

Notes on clinical trials:

- May include patients who have not as yet been treated.
- Some trials test treatments for patients who have not gotten better.
- Some trials test new ways to stop cancer from recurring or reduce the side effects of cancer treatment.

- **Other:** Any other treatment that does not fit in one of the above categories.

Example:

TUR of bladder = 1/3/25

BCG given = 2/10/25

Radioactive seeds instilled = 2/27/25

RESOURCES

Abbreviations – Use NAACCR Standard Abbreviations

[NAACCR Data Standards & Data Dictionary Database \(Formerly Volume II\)](#)

Evidence-Based Treatment by Stage Guidelines

https://www.nccn.org/guidelines/category_1

The NCCN Guidelines are most frequently used for treatment and for information on diagnostic workup.

Labs/Tests -- NCI: Understanding Lab Tests/Test Values

<http://www.cancer.gov/cancertopics/factsheet/detection/laboratory-tests>

2024 SOLID TUMOR RULES

<https://seer.cancer.gov/tools/solidtumor/>

NCI Physician's Data Query (PDQ)

<http://www.cancer.gov/cancertopics/pdq>

SEER Appendix C-Site Specific Coding Modules

[Appendix C: Site Specific Coding Modules - 2024 SEER Program Coding and Staging Manual](#)

SEER RX Antineoplastic Drugs Database

<https://seer.cancer.gov/tools/seerrx/>

Site-Specific Surgery Codes: STORE Appendix A

[store-manual-2024.pdf](#)

Treatment for Bladder

www.cancer.gov/cancertopics/pdq/treatment/bladder/HealthProfessional/