

Module: family-history

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1	CENTER_NO	number (2,0)	Required:true
Center Identification Number			

Allowable Values

11	Sinai Health Systems (formerly Cancer Care Ontario)
12	Cedars-Sinai & Cleveland Clinic (formerly USC Consortium)
13	University of Melbourne
14	University of Hawaii Cancer Center
15	Mayo Clinic
16	Fred Hutch, Seattle
17	UCSF: University of California at San Francisco (formerly CPIC, originally Northern California (NCCC))

2	FAMILY_ID (PK*)	string (9)	Required:true
Family identification number uniquely identifying a family. Consists of concatenated CENTER_NO (2 digits; digits 1-2) + local family number (7 digits; digits 3-9). The last portion of the number (7 digit part) should be right justified, zero filled. Ex: Family Id 12345 from Philadelphia Breast Center should be: 010012345 or 10012345 Ex: Family Id 12345 from Australia Colon Center should be: 130012345. *This field is a Primary Key for the table.			

3	CTR_SUB	string (2)	Required:false
Center subsite location (determined by institution).			

Allowable Values

01	Dartmouth
02	USC
03	Uni of Colorado
04	Uni of Arizona
05	Cleveland Clinic
06	UNC
07	Uni of Minnesota
13	Cases 18-44
14	Cases 45-49
15	Cases 18-44 2003+
16	Cases 45-49 2003+
17	Cases 18-44 preNIH Ph II

18	Cases 45-49 preNIH Ph II
23	Controls 18-44
24	Controls 45-49
31	Clinic Ph I
32	Clinic Ph II
33	Clinic Ph III
32	Clinic Cases with Frozen Tissue
34	Community Recruitment PhIV
55	Ph I Clinic-Based (Mayo Clinic)
56	Ph I Clinic-Based (Nth Central Ca Tx Center)
57	Ph I Pop-Based (Minnesota Ca Surveillance System)
58	Ph I Other Clinic-Based
65	Ph II Clinic-Based (Mayo Clinic)
67	Ph II Pop-Based (Minnesota Ca Surveillance System)
68	Ph II Other Clinic-Based
75	Ph III Clinic-Based (Mayo Clinic)
78	Ph III Other Clinic-Based

Error Description
If CENTER_NO = 12 then CTR_SUB must be in (01,02,03,04,05,06,07)
If CENTER_NO = 13 then CTR_SUB must be in(13,14,15,16,17,18,23,24,31,32,33)
If CENTER_NO = 15 then CTR_SUB must be in (32,55,56,57,58,65,67,68,75,78)

4	FSRC	number (1,0)	Required:true
Source of family/proband.			

Allowable Values
1 Population-based (cancer registry)
2 Clinic (non-population based)

5	FRSTDATE	string (8)	Required:true
Date proband first identified. E.g. date of diagnosis of incident case in cancer registry or date of first visit to clinic or date first identified to study.			

6	FRSTEST	number (1,0)	Required:false
Accuracy of date identified/recruited.			

Allowable Values
1 Exact
2 Within 1 year
3 Within 1+ to 5 years

- 4** Within 5+ to 10 years
- 5** 10 or more years
- 9** Unknown

7	BASELINE_CUTOFF	string (8)	Required:false
Date when the complete initial family history interview/information was received.			

Date Value Check	
<p>The date must follow to the following format:</p> <p>Format YYYYMMDD. Must consist of valid date. Components of date should be right justified and zero filled. MM = 01 - 12, 88, 99 DD = 01 - 31, 88, 99 YYYY = Minimum year - system date year, 8888, 9999 Use 88, 8888 for not currently known, in progress to obtain information. Use 99, 9999 for not known. If century is known, but year is unknown then give an estimate of year or code YYYY = 9999. If MM = 99 then DD must = 99. If century is known, but year is unknown then give an estimate of year or code YYYY = 9999. If YYYY = 9999 then MM and DD must = 99.</p> <p>The following special parameters are used:</p>	
Format YYYYMMDD	
YYYY	1997 (Minimum year) - system date year, 8888, 9999
MM	01 - 12, 88, 99
DD	01 - 31, 88, 99

8	ASHKENAZI	number (1,0)	Required:true
Flag to indicate whether proband is of Ashkenazi Jewish descent			

- | | |
|------------------|---------|
| Allowable Values | |
| 1 | Yes |
| 2 | No |
| 9 | Unknown |

Module: family-history

Module Contents

family-membership

1. [CENTER_NO](#)
2. [FAMILY_ID \(PK*\)](#)
3. [PERSON_ID \(PK*\)](#)
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1	CENTER_NO	number (2,0)	Required:true
	Center Identification Number		

Allowable Values

- | | |
|-----------|--|
| 11 | Sinai Health Systems (formerly Cancer Care Ontario) |
| 12 | Cedars-Sinai & Cleveland Clinic (formerly USC Consortium) |
| 13 | University of Melbourne |
| 14 | University of Hawaii Cancer Center |
| 15 | Mayo Clinic |
| 16 | Fred Hutch, Seattle |
| 17 | UCSF: University of California at San Francisco (formerly CPIC, originally Northern California (NCCC)) |

2	FAMILY_ID (PK*)	string (9)	Required:true
	Family identification number uniquely identifying a family. Consists of concatenated CENTER_NO (2 digits; digits 1-2) + local family number (7 digits; digits 3-9). The last portion of the number (7 digit part) should be right justified, zero filled. Ex: Family Id 12345 from Australia Colon Center should be: 130012345. *FAMILY_ID + PERSON_ID are the primary key for the table.		

3	PERSON_ID (PK*)	string (12)	Required:true
	Number that uniquely identifies an individual. Consists of concatenation of CENTER_NO (2 digit; digits 1-2) + (10 digit local unique individual id; digits 3-12). The 10 digit individual number component should be right justified, zero filled. Ex: Individual Id 98765 from Australia Colon Center should be: 130000098765. *FAMILY_ID + PERSON_ID are the primary key for the table.		

4	PROBAND_FLG	number (1,0)	Required:false
	Flag indicated that individual is the proband. Note: multiple records within a family may be flagged as a proband for families sampled with population-based criteria.		

Allowable Values

- | | |
|----------|----------------------------------|
| 1 | First identified or only proband |
| 2 | Second identified proband |
| 3 | Third identified proband |
| 4 | Forth identified proband |
| 5 | Fifth identified proband |

5	PROBAND_TYPE	number (1,0)	Required:false
	Type of proband.		
	Allowable Values		
	1 Affected proband (Affected with a CRC at enrollment)		
	2 Unaffected proband (Unaffected with CRC at enrollment)		
	3 Population-based control		
	4 Recruited as a population-based case, but it was later determined their qualifying tumor was not a malignant colorectal cancer		
6	SPOUSE_CONTROL_ID	string (12)	Required:false
	Person _id of corresponding individuals that are linked together as proband/individual and spouse control. For example, the proband/individual record would have the spouse_control_id set to the person_id of their spouse. A proband or a family member may have a spouse control but the spouse may not have the proband as a spouse control. Note: this field should only be used in the situation that spouses are recruited specifically for serving as a control.		
7	FUNDING_PHASE	number (1,0)	Required:false
	Funding phase (and source) for recruitment of proband.		
	Allowable Values		
	1 Phase I (NCI), initial funding (first 5 years of funding, includes Yr-5 interim funding)		
	2 Phase II (NCI), first renewal funding (second 5 years of funding)		
	3 Phase III (NCI), second renewal funding (third 5 years of funding)		
	4 Minority RO1 Funding (NCI)		
	5 Non-NIH Funding Source		
8	PROB_WGT	number (9,6)	Required:false
	Weight for population-based probands that does NOT take response/participation rates into account.		
9	P_FRACTION	number (4,3)	Required:false
	The sampling fraction, based on ascertainment criteria such as family history, ethnicity, age of diagnosis etc. The probability of being sampled. It does not take response/participation rates into account. Applicable to population-based probands.		
10	P_POP_TYPE	number (1,0)	Required:false
	Type of recruitment for population-based probands.		
	Allowable Values		
	1 Incident: The CRC is the subjects first CRC diagnosis, and it was made during the CFR recruitment period		
	2 Previous Incident: The qualifying tumor is an incident or 'first CRC', but the diagnosis date is prior to the CFR recruitment period. In other words, the proband had one CRC diagnosis up to enrollment in the CFR, prior to the 'CFR recruitment period'.		
	3 Second primary (previously referred to as 'prevalent'). The qualifying tumor is not the first CRC. In other words, the participant had one or more CRC diagnoses prior to a CRC diagnosis during the CFR recruitment period. The new (or subsequent) CRC is flagged as the 'qualifying tumor'.		
	9 Unknown		
11	LINEAGE	number (1,0)	Required:FALSE
	An indication of which line down the pedigree a relative descends from.		

Maternal or Paternal or Both to be used in conjunction with the RELATION_CODE to denote lineage.

Allowable Values

1	PATERNAL
2	MATERNAL
3	BOTH
8	NON BLOOD
9	UNKNOWN

RELATION_CODE

string (3)

Required:true

12

An internal code to describe the individuals relationship to the primary proband (proband_flag ; 1 First identified or only proband) in a family. Will serve as a foreign key to a new relationship meta-table that contains the code, degree of relationship, English description of the relationship and potentially other attributes.

Code1	Degree	Description	Common Name
OS0	0	Self	Proband
OS1	1	Child	Daughter/son
OS2	2	Grandchild	Granddaughter/son
OS3	3	Great grandchild	Great granddaughter/son
OT0	0	Twin sibling (identical)	Sister/brother
OF0	1	Full sibling	Sister/brother
OH0	2	Half sibling	Sister/brother
OU0	2	Unkn sibling (one parent is unknown)	Sister/brother
OT1	1	Twin siblings child	Niece/nephew
OT2	2	Twin siblings grandchild	Grandniece/nephew
OT3	3	Twin siblings great grandchild	Great grandniece/nephew
OF1	2	Full siblings child	Niece/nephew
OF2	3	Full siblings grandchild	Grandniece/nephew
OF3	4	Full siblings great grandchild	Great grandniece/nephew
OH1	3	Half siblings child	Niece/nephew
OH2	4	Half siblings grandchild	Grandniece/nephew
OH3	5	Half siblings great grandchild	Great grandniece/nephew
OU1	3	Unkn siblings child	Niece/nephew
OU2	4	Unkn siblings grandchild	Grandniece/nephew
OU3	5	Unkn siblings great grandchild	Great grandniece/nephew
1S0	1	Parent	Mother/father
2S0	2	Grandparent	Grandmother/father
3S0	3	Great grandparent	Great grandmother/father
4S0	4	Great-great grandparent	Great-great grandmother/father
1T0	1	Parents twin sibling	Aunt/uncle

1F0	2	Parents full sibling	Aunt/uncle
1H0	3	Parents half sibling	Aunt/uncle
1U0	3	Parents unkn sibling	Aunt/uncle
1T1	2	Parents twin siblings child	1st cousin
1T2	3	Parents twin siblings grandchild	1st cousin 1x rem
1T3	4	Parents twin siblings great grandchild	1st cousin 2x rem
1T4	5	Parents twin siblings great-great grandchild	1st cousin 3x rem
1F1	3	Parents full siblings child	1st cousin
1F2	4	Parents full siblings grandchild	1st cousin 1x rem
1F3	5	Parents full siblings great grandchild	1st cousin 2x rem
1F4	6	Parents full siblings great-great grandchild	1st cousin 3x rem
1H1	4	Parents half siblings child	1st cousin
1H2	5	Parents half siblings grandchild	1st cousin 1x rem
1H3	6	Parents half siblings great grandchild	1st cousin 2x rem
1H4	7	Parents half siblings great-great grandchild	1st cousin 3x rem
1U1	4	Parents unkn siblings child	1st cousin
1U2	5	Parents unkn siblings grandchild	1st cousin 1x rem
1U3	6	Parents unkn siblings great grandchild	1st cousin 2x rem
1U4	7	Parents unkn siblings great-great grandchild	1st cousin 3x rem
2T0	2	Grandparents twin sibling	Grandaunt/uncle
2F0	3	Grandparents full sibling	Grandaunt/uncle
2H0	4	Grandparents half sibling	Grandaunt/uncle
2U0	4	Grandparents unkn sibling	Grandaunt/uncle
2T1	3	Grandparents twin siblings child	1st cousin 1x rem
2T2	4	Grandparents twin siblings grandchild	2nd cousin
2T3	5	Grandparents twin siblings great grandchild	2nd cousin 1x rem
2T4	6	Grandparents twin siblings great-great grandchild	2nd cousin 2x rem
2T5	7	Grandparents twin siblings great-great-great grandchild	2nd cousin 3x rem
2F1	4	Grandparents full siblings child	1st cousin 1x rem
2F2	5	Grandparents full siblings grandchild	2nd cousin
2F3	6	Grandparents full siblings great grandchild	2nd cousin 1x rem
2F4	7	Grandparents full siblings great-great grandchild	2nd cousin 2x rem
2F5	8	Grandparents full siblings great-great-great grandchild	2nd cousin 3x rem
2H1	5	Grandparents half siblings child	1st cousin 1x rem
2H2	6	Grandparents half siblings grandchild	2nd cousin
2H3	7	Grandparents half siblings great grandchild	2nd cousin 1x rem
2H4	8	Grandparents half siblings great-great grandchild	2nd cousin 2x rem

2H5	9	Grandparents half siblings great-great-great grandchild	2nd cousin 3x rem
2U1	5	Grandparents unkn siblings child	1st cousin 1x rem
2U2	6	Grandparents unkn siblings grandchild	2nd cousin
2U3	7	Grandparents unkn siblings great grandchild	2nd cousin 1x rem
2U4	8	Grandparents unkn siblings great-great grandchild	2nd cousin 2x rem
2U5	9	Grandparents unkn siblings great-great-great grandchild	2nd cousin 3x rem
3T0	3	Great grandparents twin sibling	Great grandaunt/uncle
3F0	4	Great grandparents full sibling	Great grandaunt/uncle
3H0	5	Great grandparents half sibling	Great grandaunt/uncle
3U0	5	Great grandparents unkn sibling	Great grandaunt/uncle
3T1	4	Great grandparents twin siblings child	2nd cousin 2x rem
3T2	5	Great grandparents twin siblings grandchild	2nd cousin 1x rem
3T3	6	Great grandparents twin siblings great grandchild	3rd cousin
3T4	7	Great grandparents twin siblings great-great grandchild	3rd cousin 1x rem
3T5	8	Great grandparents twin siblings great-great-great grandchild	3rd cousin 2x rem
3T6	9	Great grandparents twin siblings great-great-great-great grandchild	3rd cousin 3x rem
3F1	5	Great grandparents full siblings child	2nd cousin 2x rem
3F2	6	Great grandparents full siblings grandchild	2nd cousin 1x rem
3F3	7	Great grandparents full siblings great grandchild	3rd cousin
3F4	8	Great grandparents full siblings great-great grandchild	3rd cousin 1x rem
3F5	9	Great grandparents full siblings great-great-great grandchild	3rd cousin 2x rem
3F6	10	Great grandparents full siblings great-great-great-great grandchild	3rd cousin 3x rem
3H1	6	Great grandparents half siblings child	2nd cousin 2x rem
3H2	7	Great grandparents half siblings grandchild	2nd cousin 1x rem
3H3	8	Great grandparents half siblings great grandchild	3rd cousin
3H4	9	Great grandparents half siblings great-great grandchild	3rd cousin 1x rem
3H5	10	Great grandparents half siblings great-great-great grandchild	3rd cousin 2x rem
3H6	11	Great grandparents half siblings great-great-great-great grandchild	3rd cousin 3x rem
3U1	6	Great grandparents unkn siblings child	2nd cousin 2x rem
3U2	7	Great grandparents unkn siblings grandchild	2nd cousin 1xrem
3U3	8	Great grandparents unkn siblings great grandchild	3rd cousin
3U4	9	Great grandparents unkn siblings great-great grandchild	3rd cousin 1x rem
3U5	10	Great grandparents unkn siblings great-great-great grandchild	3rd cousin 2x rem
3U6	11	Great grandparents unkn siblings great-great-great-great grandchild	3rd cousin 3x rem
BLO	-3	Blood relation - other	Blood relation - other
NBS	-1	Non-blood relation - proband spouse	Non-blood relation - proband spouse
NBO	-1	Non-blood relation - other	Non-blood relation - other

XXX -9

Relationship is completely unknown

Unknown

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individual

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1	CENTER_NO	number (2,0)	Required:true
Center Identification Number			
Allowable Values			
11 Sinai Health Systems (formerly Cancer Care Ontario)			
12 Cedars-Sinai & Cleveland Clinic (formerly USC Consortium)			
13 University of Melbourne			
14 University of Hawaii Cancer Center			
15 Mayo Clinic			
16 Fred Hutch, Seattle			
17 UCSF: University of California at San Francisco (formerly CPIC, originally Northern California (NCCC))			
2	PERSON_ID (*PK)	string (12)	Required:true
Number that uniquely identifies an individual. Consists of concatenation of CENTER_NO (2 digit; digits 1-2) + (10 digit local unique individual id; digits 3-12). The 10 digit individual number component should be right justified, zero filled. Ex: Individual Id 98765 from Australia Colon Center should be: 130000098765. *This field is the primary key for the table.			
3	PERSON_CID	string (30)	Required:false
The external person ID (or concatenated set of IDs) that is local to the submitting center.			
4	MOTHER_ID	string (12)	Required:false
Person identification number (PERSON_ID) of mother. Consists of concatenation of CENTER_NO (2 digit) + (10 digit local unique			

individual id). The 10 digit individual number component should be right justified, zero filled.

FATHER_ID

string (12)

Required:false

Identification number (PERSON_ID) of father.

TWIN_ID

string (12)

Required:false

Identification number (PERSON_ID) of the corresponding twin. Example: Persons 3 and 4 are twins. Person 3 = 02000008763 Person 4 = 02000008764 Example: Persons 3, 4, and 5 are triplets. Code as follows: Person 3 = 02000008763 Person 4 = 02000008764 Person 5 = 02000008765

TWIN_TYPE

number (1,0)

Required:false

Type of twin.

Allowable Values

1 Monozygous

2 Dizygous

9 Twin, type unknown

SEX

number (1,0)

Required:true

Sex of the individual.

Allowable Values

1 Male

2 Female

3 Other

9 Unknown

VS

number (1,0)

Required:true

Vital Status of individual.

Allowable Values

1 Alive

2 Dead

9 Unknown

LIVEDATE

string (8)

Required:true

The most recent date a subject is known to be living. This is the last date the subject is known to be alive. There are multiple sources of information that can be used to obtain this date. Acceptable sources are listed in LIVEDATESRC. Upon notification of the death of the subject, the LIVEDATE should remain unchanged and VS should be updated to 2-dead and DTHDATE and DTHDATESRC, AGE_DEATH and AGE_DEATH_EST populated.

Date Value Check

The date must follow to the following format:

Format YYYYMMDD. Must consist of valid date.

Components of date should be right justified and zero filled.

MM = 01 - 12, 88, 99

DD = 01 - 31, 88, 99

YYYY = **Minimum year** - system date year, 8888, 9999

Use 88, 8888 for not currently known, in progress to obtain information.
 Use 99, 9999 for not known.
 If century is known, but year is unknown then give an estimate of year or code YYYY = 9999.
 If MM = 99 then DD must = 99.
 If century is known, but year is unknown then give an estimate of year or code YYYY = 9999.
 If YYYY = 9999 then MM and DD must = 99.

The following special parameters are used:

Format YYYYMMDD	
YYYY	1700 (Minimum year) - system date year, 8888, 9999
MM	01 - 12, 88, 99
DD	01 - 31, 88, 99

11	LIVEDATESRC	number (2,0)	Required:true
Source of information for LIVEDATE			

Allowable Values

- | | |
|-----------|---|
| 1 | Self representation either by conducting a study activity in person, by telephone, or by mail. These could include completing a survey, signing a study document, providing a blood sample, etc |
| 2 | Relative (or Respondent) report that a subject is living |
| 3 | Linkage with national death indices, such as the NDI and NDI+, where the OMISSION of a subject presumes he/she is living (consensus advised). |
| 4 | Linkage with state death indices, such as through the health department where the OMISSION of a subject presumes he/she is living (consensus advised) |
| 5 | Linkage with another information source that reports an activity that indicates the subject is living, such as current use of social security benefits, credit report |
| 6 | Hospital record, medical file that reports contact with or a procedure performed on subject. |
| 7 | SEER, which reports the last date they know the subject is known to be alive. |
| 8 | State Cancer registry, which reports the last date they know the subject to be alive. |
| 9 | Other, for example specialized genealogy |
| 99 | Unknown |

12	DTHDATE	string (8)	Required:false
The date of death. There are multiple sources of information that can be used to obtain this date. Acceptable sources are listed in DTHDATESRC.			

Date Value Check

The date must follow to the following format:

Format YYYYMMDD. Must consist of valid date.
 Components of date should be right justified and zero filled.
 MM = 01 - 12, 88, 99
 DD = 01 - 31, 88, 99
 YYYY = **Minimum year** - system date year, 8888, 9999
 Use 88, 8888 for not currently known, in progress to obtain information.
 Use 99, 9999 for not known.
 If century is known, but year is unknown then give an estimate of year or code YYYY = 9999.
 If MM = 99 then DD must = 99.
 If century is known, but year is unknown then give an estimate of year or code YYYY = 9999.
 If YYYY = 9999 then MM and DD must = 99.

The following special parameters are used:	
Format YYYYMMDD	
YYYY	1700 (Minimum year) - system date year, 8888, 9999
MM	01 - 12, 88, 99
DD	01 - 31, 88, 99

Error Description
If VS is 2 then DTHDATE must not be null
If VS is not 2 then DTHDATE must be null
Date of death must be equal to or after date of birth
LIVEDATE must be less DTHDATE

13	DTHDATESRC	number (2,0)	Required:false
Source of information reporting subject is deceased			

Allowable Values

1	Relative (or Respondent) report of subject death
2	Linkage with national death indices (e.g., NDI, NDI+)
3	Linkage with another information source that reports termination of services due to death (e.g., social security benefits, medicare, medicaid).
4	Hospital record, medical file that reports
5	SEER
6	State Cancer registry
7	State Death Indices (e.g., through the health department)
8	Death certificate
9	Obituary
10	Other (e.g., specialized genealogy research)
99	Unknown

Error Description
If VS is not 2 then DTHDATESRC must be null
If VS is 2 then DTHDATESRC must not be null

14	AGE_DEATH	number (3,0)	Required:false
Age at death. Coding for this field is based on SEER, NAACCR and ACoS guidelines.			

Allowable Values	
998	Less than 1 year
999	Unknown

	AGE_DEATH_EST	number (1,0)	Required:false
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15

Accuracy of age of death.

Allowable Values

- | | |
|---|-----------------------|
| 1 | Exact |
| 2 | Within 1 year |
| 3 | Within 1+ to 5 years |
| 4 | Within 5+ to 10 years |
| 5 | 10 or more years |
| 9 | Unknown |

16

DOB

string (8)

Required:true

Date of birth.

Date Value Check

The date must follow to the following format:

Format YYYYMMDD. Must consist of valid date.

Components of date should be right justified and zero filled.

MM = 01 - 12, 88, 99

DD = 01 - 31, 88, 99

YYYY = **Minimum year** - system date year, 8888, 9999

Use 88, 8888 for not currently known, in progress to obtain information.

Use 99, 9999 for not known.

If century is known, but year is unknown then give an estimate of year or code YYYY = 9999.

If MM = 99 then DD must = 99.

If century is known, but year is unknown then give an estimate of year or code YYYY = 9999.

If YYYY = 9999 then MM and DD must = 99.

The following special parameters are used:

Format YYYYMMDD	
YYYY	1700 (Minimum year) - system date year, 8888, 9999
MM	01 - 12, 88, 99
DD	01 - 31, 88, 99

Error Description

must be a valid date of format YYYYMMDD

17

BIREST

number (1,0)

Required:true

Accuracy of date of birth.

Allowable Values

- | | |
|---|-----------------------|
| 1 | Exact |
| 2 | Within 1 year |
| 3 | Within 1+ to 5 years |
| 4 | Within 5+ to 10 years |
| 5 | 10 or more years |
| 9 | Unknown |

18	INDIVSRC	number (1,0)	Required:true
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Source of information for individual family member.

Allowable Values	
0	Self
1	1st degree relative
2	2nd degree relative
3	Other relative
4	Other
5	Dummy record (i.e. dummy spouse or parent)
9	Unknown

19	BLOOD	number (1,0)	Required:true
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Status of blood specimen.

Allowable Values	
0	Not needed / not applicable
1	Needed, but can't get (e.g. deceased, overseas, etc.)
2	Needed, Pending
3	Blood received
4	Refusal from patient
6	Sample lost or destroyed

20	BUCCAL_SALIVA	number (1,0)	Required:false
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Allowable Values	
0	Not needed, not applicable
1	Needed, but cannot get (e.g. deceased, overseas, etc.)
2	Needed, pending
3	Buccal_Saliva received
4	Refusal from patient
6	Sample lost or destroyed

21	EPI_Q_COLON	number (1,0)	Required:false
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Status of colon epidemiology questionnaire.

Allowable Values	
0	Not needed / not applicable
1	Needed, not requested yet

2	Questionnaire requested, pending
3	Questionnaire received, completed personally
4	Questionnaire completed by proxy
5	Refused
6	Needed but can't get (i.e. language, disability, etc.)
7	Deceased

22	COLON_1ST_FU	number (1,0)	Required:false
Status of the First Colon Follow Up questionnaire administered after the Baseline questionnaire.			

Allowable Values	
0	Not needed / not applicable
1	Needed, not requested yet
2	Questionnaire requested, pending
3	Questionnaire received
5	Refused (unable to complete/contact but will re-attempt next phase)
6	Permanently Lost (i.e. Withdrew, refused, medically incapable etc. Not to re-attempt contact)
7	Deceased

23	COLON_2ND_FU	number (1,0)	Required:false
Status of the Second Colon Follow Up questionnaire administered after the Baseline questionnaire.			

Allowable Values	
0	Not needed / not applicable
1	Needed, not requested yet
2	Questionnaire requested, pending
3	Questionnaire received
5	Refused (unable to complete/contact but will re-attempt next phase)
6	Permanently Lost (i.e. Withdrew, refused, medically incapable etc. Not to re-attempt contact)
7	Deceased

24	COLON_3RD_FU	number (1,0)	Required:false
Status of the Third Colon Follow Up questionnaire administered after the Baseline questionnaire.			

Allowable Values	
0	Not needed / not applicable
1	Needed, not requested yet
2	Questionnaire requested, pending
3	Questionnaire received

5	Refused (unable to complete/contact but will re-attempt next phase)
6	Permanently Lost (i.e. Withdrew, refused, medically incapable etc. Not to re-attempt contact)
7	Deceased

25	COLON_4TH_FU	number (1,0)	Required:false
Status of the Fourth Colon Follow Up questionnaire administered after the Baseline questionnaire.			

Allowable Values	
0	Not needed / not applicable
1	Needed, not requested yet
2	Questionnaire requested, pending
3	Questionnaire received
5	Refused (unable to complete/contact but will re-attempt next phase)
6	Permanently Lost (i.e. Withdrew, refused, medically incapable etc. Not to re-attempt contact)
7	Deceased

26	DIET_Q_HI	number (1,0)	Required:false
Status of Hawaiian Diet Questionnaire.			

Allowable Values	
0	Not needed / not applicable
1	Needed, not requested yet
2	Questionnaire requested, pending
3	Questionnaire received
5	Refused
6	Needed but can't get (i.e. language, disability, etc.)
7	Deceased

27	DIET_Q_AUS	number (1,0)	Required:false
Status of Australian diet questionnaire.			

Allowable Values	
0	Not needed / not applicable
1	Needed, not requested yet
2	Questionnaire requested, pending
3	Questionnaire received
5	Refused
6	Needed but can't get (i.e. language, disability, etc.)
7	Deceased

28	CLINICAL_COLON	number (1,0)	Required:false																			
Consent for clinical data collected in clinical treatment module.																						
<table border="1" style="width: 100%;"> <tr> <td colspan="2" data-bbox="337 195 1284 241">Allowable Values</td> </tr> <tr> <td data-bbox="337 241 373 287">0</td> <td data-bbox="373 241 1284 287">Not needed / not applicable</td> </tr> <tr> <td data-bbox="337 287 373 333">1</td> <td data-bbox="373 287 1284 333">Needed, can't get (hospital has no records/ correct hospital cannot be identified)</td> </tr> <tr> <td data-bbox="337 333 373 380">2</td> <td data-bbox="373 333 1284 380">Needed, pending consent</td> </tr> <tr> <td data-bbox="337 380 373 426">3</td> <td data-bbox="373 380 1284 426">Records received</td> </tr> <tr> <td data-bbox="337 426 373 472">4</td> <td data-bbox="373 426 1284 472">Consent received records pending</td> </tr> <tr> <td data-bbox="337 472 373 518">5</td> <td data-bbox="373 472 1284 518">Refused- consent</td> </tr> <tr> <td data-bbox="337 518 373 564">6</td> <td data-bbox="373 518 1284 564">Needed- but can't consent (lost contact/deceased, no proxy etc.)</td> </tr> </table> <table border="1" style="width: 100%; text-align: center;"> <tr> <td data-bbox="495 640 1123 686">Error Description</td> </tr> <tr> <td data-bbox="495 686 1123 732">If CENTER_NO=17 then CLINICAL_COLON must be null</td> </tr> <tr> <td data-bbox="495 732 1123 779">If CENTER_NO does not equal 17 then must not be null</td> </tr> </table>				Allowable Values		0	Not needed / not applicable	1	Needed, can't get (hospital has no records/ correct hospital cannot be identified)	2	Needed, pending consent	3	Records received	4	Consent received records pending	5	Refused- consent	6	Needed- but can't consent (lost contact/deceased, no proxy etc.)	Error Description	If CENTER_NO=17 then CLINICAL_COLON must be null	If CENTER_NO does not equal 17 then must not be null
Allowable Values																						
0	Not needed / not applicable																					
1	Needed, can't get (hospital has no records/ correct hospital cannot be identified)																					
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If CENTER_NO=17 then CLINICAL_COLON must be null																						
If CENTER_NO does not equal 17 then must not be null																						

29	RACE_ETHNIC_SOURCE	number (1,0)	Required:false														
Source of race/ethnicity information.																	
<table border="1" style="width: 100%;"> <tr> <td colspan="2" data-bbox="570 938 1052 984">Allowable Values</td> </tr> <tr> <td data-bbox="570 984 605 1031">1</td> <td data-bbox="605 984 1052 1031">Epidemiology questionnaire self report</td> </tr> <tr> <td data-bbox="570 1031 605 1077">2</td> <td data-bbox="605 1031 1052 1077">Other questionnaire self report</td> </tr> <tr> <td data-bbox="570 1077 605 1123">3</td> <td data-bbox="605 1077 1052 1123">Epidemiology questionnaire proxy</td> </tr> <tr> <td data-bbox="570 1123 605 1169">4</td> <td data-bbox="605 1123 1052 1169">Other questionnaire proxy</td> </tr> <tr> <td data-bbox="570 1169 605 1215">5</td> <td data-bbox="605 1169 1052 1215">Cancer registry</td> </tr> <tr> <td data-bbox="570 1215 605 1262">6</td> <td data-bbox="605 1215 1052 1262">Other external source</td> </tr> </table>				Allowable Values		1	Epidemiology questionnaire self report	2	Other questionnaire self report	3	Epidemiology questionnaire proxy	4	Other questionnaire proxy	5	Cancer registry	6	Other external source
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30	ADDITIONAL_RACE	number (2,0)	Required:false																				
To include reported RACE from source(s) other than BL Epi or FU Epi questionnaires. This includes race reported via other questionnaires such as family history questionnaire, information provided during blood/saliva collection, verbal information, etc.																							
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10	NATIVE AMERICAN (such as Inuit, Aleutian, First Nations Person)
11	POLYNESIAN (such as Hawaiian, Maori, Samoan, Tongan, Tahitian, Cook Islander)
12	MICRONESIAN (such as Chamorro and Guamanian)
13	AUSTRALIAN ABORIGINAL
14	MELANESIAN (such as Fijian, New Guinean)
15	CARIBBEAN BLACK (such as Jamaican, Trinidadian, Tobagonian)
16	CENTRAL/SOUTH AMERICAN (such as Costa Rican, Salvadorian, Colombian, Brazilian)
17	BLACK AFRICAN
18	NORTH AFRICAN (such as Egyptian, Algerian, Moroccan)
19	MIDDLE EASTERN (such as Iranian, Lebanese, Kuwaiti, Saudi)
97	MORE THAN ONE RACE
98	OTHER
99	DONT KNOW/REFUSED

ADDITIONAL_ETHNICITY

number (1,0)

Required:false

31

To include reported ethnicity from source(s) other than BL Epi or FU Epi questionnaire. This includes ethnicity reported via other questionnaires such as family history questionnaire, information provided during blood/saliva collection, verbal information, etc. Response to question "Do you consider yourself to be Hispanic/Latino? "

Allowable Values

1 Yes

2 No

8 Not Asked

9 Don't Know/Refused

Module: family-history

Module Contents

cancer

1. [CENTER_NO](#)
2. [PERSON_ID \(*PK\)](#)
3. [TUMOR_NO \(*PK\)](#)
4. [SITE](#)
5. [LATERAL](#)
6. [HISTO](#)
7. [BEHAV](#)
8. [AGEDX](#)
9. [DXDATE](#)
10. [DXEST](#)
11. [DXSRC](#)
12. [TISSUE](#)
13. [QUALIFY_TUMOR](#)

1	CENTER_NO	number (2,0)	Required:true																
	Center Identification Number																		
	<table border="1" style="width: 100%;"> <thead> <tr> <th colspan="2">Allowable Values</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">11</td> <td>Sinai Health Systems (formerly Cancer Care Ontario)</td> </tr> <tr> <td style="text-align: center;">12</td> <td>Cedars-Sinai & Cleveland Clinic (formerly USC Consortium)</td> </tr> <tr> <td style="text-align: center;">13</td> <td>University of Melbourne</td> </tr> <tr> <td style="text-align: center;">14</td> <td>University of Hawaii Cancer Center</td> </tr> <tr> <td style="text-align: center;">15</td> <td>Mayo Clinic</td> </tr> <tr> <td style="text-align: center;">16</td> <td>Fred Hutch, Seattle</td> </tr> <tr> <td style="text-align: center;">17</td> <td>UCSF: University of California at San Francisco (formerly CPIC, originally Northern California (NCCC))</td> </tr> </tbody> </table>			Allowable Values		11	Sinai Health Systems (formerly Cancer Care Ontario)	12	Cedars-Sinai & Cleveland Clinic (formerly USC Consortium)	13	University of Melbourne	14	University of Hawaii Cancer Center	15	Mayo Clinic	16	Fred Hutch, Seattle	17	UCSF: University of California at San Francisco (formerly CPIC, originally Northern California (NCCC))
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2	PERSON_ID (*PK)	number (12,0)	Required:true																
	Number that uniquely identifies an individual. *PERSON_ID + TUMOR_NO are the primary key for this table.																		
3	TUMOR_NO (*PK)	number (2,0)	Required:true																
	<p>Computer generated sequential number, starting with "1", assigned to each tumor for a given individual when entered into local system. No adjustment is made when a tumor is deleted from the system. Tumor numbers are never reused. Tumor_no is a machine-generated value that has no implied meaning such as sequence of diagnosis. The first tumor that is entered into the system is assigned 1, the second tumor entered into the system assigned 2, etc. For example, if a person has two tumors and tumor_no 2 is deleted, that number should never be reused for that individual. Should that person develop a second primary, that tumor should have tumor_no set to 3. *PERSON_ID + TUMOR_NO are the primary key for this table.</p> <p>This tumor is also mapped throughout the Registry to all block samples and molecular testing for that PERSON_ID.</p>																		
4	SITE	string (4)	Required:true																
	Location where this tumor originated in as much detail as is known and for which a code is provided in ICD-O-3.																		
	<table border="1" style="margin: auto;"> <thead> <tr> <th>Error Description</th> </tr> </thead> <tbody> <tr> <td>SITE must be C000-C809</td> </tr> </tbody> </table>			Error Description	SITE must be C000-C809														
Error Description																			
SITE must be C000-C809																			
5	LATERAL	number (1,0)	Required:true																
	Laterality of tumor. Side of the body in which the tumor originated. Note: laterality of left and right is not applicable for all sites. Coding for this field is based on SEER, NAACCR and AcoS guidelines.																		

Allowable Values	
0	Not a paired site
1	Right
2	Left
3	Unilateral, NOS
4	Bilateral
5	Midline
9	Paired site, no information

HISTO

number (5,0)

Required:true

6

First four digits of the ICD-O-3 morphology code which designates the histologic type of this tumor. Coding for this field is based on SEER, NAACCR and AcoS guidelines.

Allowable Values	
8000 to 9990	Range
8000	No specific histologic type information
72860	Keratoacanthoma

BEHAV

number (1,0)

Required:false

7

ICD-O-3 5th digit behavior code. Coding for this field is based on SEER, NAACCR and AcoS guidelines.

Allowable Values	
0	Benign
1	Uncertain whether benign or malignant; borderline; low malignant potential
2	Carcinoma in situ
3	Malignant (Invasive)

AGEDX

number (3,0)

Required:true

8

Age at diagnosis.

Allowable Values	
0 to 130 or 998, 999	Range
998	Less than 1 year
999	Unknown

DXDATE

string (8)

Required:true

9

Date of diagnosis.

Date Value Check

The date must follow to the following format:

Format YYYYMMDD. Must consist of valid date.

Components of date should be right justified and zero filled.
MM = 01 - 12, 88, 99
DD = 01 - 31, 88, 99
YYYY = **Minimum year** - system date year, 8888, 9999
Use 88, 8888 for not currently known, in progress to obtain information.
Use 99, 9999 for not known.
If century is known, but year is unknown then give an estimate of year or code YYYY = 9999.
If MM = 99 then DD must = 99.
If century is known, but year is unknown then give an estimate of year or code YYYY = 9999.
If YYYY = 9999 then MM and DD must = 99.

The following special parameters are used:

Format YYYYMMDD	
YYYY	1700 (Minimum year) - system date year, 8888, 9999
MM	01 - 12, 88, 99
DD	01 - 31, 88, 99

10	DXEST	number (1,0)	Required:true
Accuracy of diagnosis date.			

- Allowable Values
- 1** Exact
 - 2** Within 1 year
 - 3** Within 1+ to 5 years
 - 4** Within 5+ to 10 years
 - 5** 10 or more years
 - 9** Unknown

11	DXSRC	number (2,0)	Required:true
Source of diagnosis information (site, histology, behavior, laterality).			

- Allowable Values
- 1** Pathology review (means your center's pathologist examined the tissue and may have also completed an internal review sheet;)
 - 2** Pathology report (means the documents from the hospital's medical records or pathologist. It often comes with the Biospecimens (block, tissue...))
 - 3** Other hospital record or clinic record
 - 4** Death certificate
 - 5** Self
 - 6** Relative
 - 7** SEER
 - 8** Other cancer registry (e.g. state)
 - 9** Unknown
 - 10** NDI, NDI+, site-specific state death indices (health department)
 - 11** Spouse

12 Other source, for example specialized genealogy

TISSUE

number (1,0)

Required:true

12

Status of tissue procurement.

Allowable Values

0 Not needed / not applicable

1 Permission granted by patient, pending request to hospital/clinic

2 Specimen requested from hospital/clinic, awaiting receipt

3 Specimen received

4 Refusal from patient

5 Lost or destroyed

6 Refusal from hospital/clinic

7 Unable to request tissue (tissue location overseas or location is unknown)

8 Pending permission from patient

QUALIFY_TUMOR

number (1,0)

Required:false

13

Flag indicating that the tumor qualifies a population sampled affected proband as eligible for inclusion in the study. The tumor must meet all site-specific eligibility criteria. Synchronous qualifying tumours should be sequentially ordered beginning with the largest in size.

Allowable Values

1 to 4 Range

Error Description

If FAMILY-MEMBERSHIP.PROBAND_FLG=1 And FAMILY.FSRC=1, then CANCER.QUALIFY_TUMOR must be 1 (at least one cancer record)

Module: family-history

Module Contents

cause-of-death

1. [CENTER_NO](#)
2. [PERSON_ID \(*PK\)](#)
3. [CRC_COD](#)
4. [COD_IMM_ICD](#)
5. [COD_IMM_TXT](#)
6. [COD_UND1_ICD](#)
7. [COD_UND1_TXT](#)
8. [COD_UND2_ICD](#)
9. [COD_UND2_TXT](#)
10. [COD_UND3_ICD](#)
11. [COD_UND3_TXT](#)
12. [COD_UND4_ICD](#)
13. [COD_UND4_TXT](#)
14. [COD_UND5_ICD](#)
15. [COD_UND5_TXT](#)
16. [COD_UND6_ICD](#)
17. [COD_UND6_TXT](#)
18. [COD_UND7_ICD](#)
19. [COD_UND7_TXT](#)
20. [COD_UND8_ICD](#)
21. [COD_UND8_TXT](#)
22. [COD_UND9_ICD](#)
23. [COD_UND9_TXT](#)
24. [COD_UND10_ICD](#)
25. [COD_UND10_TXT](#)
26. [COD_SOURCE](#)
27. [COD_ICD_VERSION](#)

1	CENTER_NO	number (2,0)	Required:true
	Unique identifier for a CFR center		
	Allowable Values		
	11	Sinai Health Systems (formerly Cancer Care Ontario)	
	12	Cedars-Sinai & Cleveland Clinic (formerly USC Consortium)	
	13	University of Melbourne	
	14	University of Hawaii Cancer Center	
	15	Mayo Clinic	
	16	Fred Hutch, Seattle	
	17	UCSF: University of California at San Francisco (formerly CPIC, originally Northern California (NCCC))	
2	PERSON_ID (*PK)	number (12,0)	Required:true
	Identifier for person that is globally unique within the BC-CFR central database. *This field is the primary key for the table.		
3	CRC_COD	number (1,0)	Required:true
	Flag indicating the immediate or underlying cause of death was due to colorectal cancer. ICD-O: C18[0-9]*, C199, C209, C218, C260 ICD-9: 153.[0-9]*, 154.[0-3]* Text: includes colon, colorectal, bowel, large intestine		
	Allowable Values		
	1	Cause of death involved CRC	

	COD_IMM_ICD	string (6)	Required:true
4	First, primary or immediate cause of death in ICD. NOTE: Some sources, like SEER, do not give a primary/immediate Cause of Death but only a derived underlying cause of death. In these cases this element should be marked '999999=unknown' and the derived value go into COD_UND1_ICD.		
	COD_IMM_TXT	string (250)	Required:false
5	First, primary or immediate cause of death in text if ICD not available		
	COD_UND1_ICD	string (6)	Required:false
6	First underlying cause of death in ICD. Note for some sources, like SEER, this maybe a derived COD.		
	COD_UND1_TXT	string (250)	Required:false
7	First underlying cause of death in text if no ICD		
	COD_UND2_ICD	string (6)	Required:false
8	2nd underlying cause of death in ICD		
	COD_UND2_TXT	string (250)	Required:false
9	2nd underlying cause of death in text if no ICD		
	COD_UND3_ICD	string (6)	Required:false
10	3rd underlying cause of death in ICD		
	COD_UND3_TXT	string (250)	Required:false
11	3rd underlying cause of death in text if no ICD		
	COD_UND4_ICD	string (6)	Required:false
12	4th underlying cause of death in ICD		
	COD_UND4_TXT	string (250)	Required:false
13	4th underlying cause of death in text if no ICD		
	COD_UND5_ICD	string (6)	Required:false
14	5th underlying cause of death in ICD		
	COD_UND5_TXT	string (250)	Required:false
15	5th underlying cause of death in text if no ICD		
	COD_UND6_ICD	string (6)	Required:false
16	6th underlying cause of death in ICD		
	COD_UND6_TXT	string (250)	Required:false
17	6th underlying cause of death in text if no ICD		
	COD_UND7_ICD	string (6)	Required:false
18	7th underlying cause of death in ICD		
	COD_UND7_TXT	string (250)	Required:false
19	7th underlying cause of death in text if no ICD		
	COD_UND8_ICD	string (6)	Required:false
20	8th underlying cause of death in ICD		

21	COD_UND8_TXT	string (250)	Required:false
	8th underlying cause of death in text if no ICD		
22	COD_UND9_ICD	string (6)	Required:false
	9th underlying cause of death in ICD		
23	COD_UND9_TXT	string (250)	Required:false
	9th underlying cause of death in text if no ICD		
24	COD_UND10_ICD	string (6)	Required:false
	10th underlying cause of death in ICD		
25	COD_UND10_TXT	string (250)	Required:false
	10th underlying cause of death in text if no ICD		
26	COD_SOURCE	number (1,0)	Required:false
	Source of Cause of Death for all primary and underlying causes. This should be from the single best source the site has for that individual. General rule of thumb for selecting COD_SOURCE when more than 1 is applicable should be NDI > SEER/Other Cancer Registry > Medical Record > Linkage to other databases > Death Certificate > Family member/spouse/contact. Though this might vary by site. NOTE: The source of the ICD code is derived as follows. For COD_SOURCE options 1,2,3,4,5 & 9 the source of the ICD code is the same as COD_SOURCE. For COD options 6,7,8 the ICD code source is "Assigned by Site".		

Allowable Values	
1	SEER
2	Cancer registry
3	NDI US
4	NDI AUS
5	Linkage_Other database, e.g. Dept of Health
6	Death certificate
7	Medical record
8	Other family member, spouse, friend (contact)
9	Unknown

27	COD_ICD_VERSION	number (2,0)	Required:false
	Version of ICD for all cause of deaths from COD source. NOTE: this value is sometimes determined by the ICD version in use at time of death which is usually accurate but not perfect especially if the death occurred in early January when a code change might have been in progress.		

Allowable Values	
2	ICD-2
3	ICD-3
4	ICD-4
5	ICD-5
6	ICD-6
7	ICD-7
8	ICD-8

9	ICD-9
10	ICD-10
88	Not Applicable
99	unknown

Module: derived

Module Contents

d_RACE_ETHNIC

- [1.CENTER_NO](#)
- [2.PERSON_ID](#)
- [3.RACE_SUMMARY](#)
- [4.RACE_SUM_NIH](#)
- [5.ETHNIC_SUM_NIH](#)

1	CENTER_NO	number (2,0)	Required:true
Center Identification Number.			

Allowable Values	
11	Sinai Health Systems (formerly Cancer Care Ontario)
12	Cedars-Sinai & Cleveland Clinic (formerly USC Consortium)
13	University of Melbourne
14	University of Hawaii Cancer Center
15	Mayo Clinic
16	Fred Hutch, Seattle
17	UCSF: University of California at San Francisco (formerly CPIC, originally Northern California (NCCC))

2	PERSON_ID	string (12)	Required:true
Number that uniquely identifies an individual.			

3	RACE_SUMMARY	number (2,0)	Required:true
A summary of all available RACE variables from both the baseline and follow-up epi questionnaires, including additional information that may have been provided at a later date from other sources.			

Allowable Values	
1	CAUCASIAN/WHITE
2	BLACK OR AFRICAN AMERICAN (does not include Africans or persons of Caribbean origin)
3	Latino, Hispanic, Mexican American, Mexican, Cuban, Puerto Rican
4	JAPANESE (includes Okinawan)
5	CHINESE
6	FILIPINO, MALAY, INDONESIAN
7	KOREAN
8	SOUTHEAST ASIAN (such as Vietnamese, Laotian, Thai, Hmong, Kampuchean)
9	SOUTH ASIAN (such as Indian, Pakistani, Sri Lankan)
10	NATIVE AMERICAN (such as Inuit, Aleutian, First Nations Person)
11	POLYNESIAN (such as Hawaiian, Maori, Samoan, Tongan, Tahitian, Cook Islander)
12	MICRONESIAN (such as Chamorro and Guamanian)
13	AUSTRALIAN ABORIGINAL

14	MELANESIAN (such as Fijian, New Guinean)
15	CARIBBEAN BLACK (such as Jamaican, Trinidadian, Tobagonian)
16	CENTRAL/SOUTH AMERICAN (such as Costa Rican, Salvadorian, Colombian, Brazilian)
17	BLACK AFRICAN
18	NORTH AFRICAN (such as Egyptian, Algerian, Moroccan)
19	MIDDLE EASTERN (such as Iranian, Lebanese, Kuwaiti, Saudi)
97	MORE THAN ONE RACE
98	OTHER
99	DONT KNOW/REFUSED

RACE_SUM_NIH

number (2,0)

Required:true

4

Summarizes RACE into one of 5 NIH categories. If a subject falls into more than one category they are grouped into '6=More than one race'.

Allowable Values

1 AMERICAN INDIAN

2 ASIAN

3 PACIFIC ISLANDER

4 BLACK

5 WHITE

6 MORE THAN ONE RACE

99 UNKNOWN

ETHNIC_SUM_NIH

number (1,0)

Required:true

5

A summary of ethnicity based on answers provided in baseline and follow-up questionnaires (if answered) Response to question "Do you consider yourself to be Hispanic/Latino?"

Allowable Values

1 Yes

2 No

9 Unknown