

**Pediatric Data Collection System (PDCS)
V25 Implementation Vendor Meeting Questions**

Q1: What age groups are included in the Pediatric Data Collection System?

A: The PDCS API, DLL, and Java library cover a variety of age ranges according to schema. Some schemas apply to all ages, some only to age 00-39. A Pediatric ID will be assigned based on the age ranges within the API. However, edits will only require fields be collected for patients 00-19.

Below is a sample edit enforcing these reporting requirements. The edit is for the data item FOXO1 Gene Rearrangements and is required for patients with a Pediatric ID of 9a: Rhabdomyosarcoma. A separate edit, FOXO1 Gene Rearrangements, Date DX (SEER) (Ped7148), will check for valid values within the field. The edit that checks for valid values applies to all ages and will allow blanks.

FOXO1 Gene Rearrangements, Pediatric ID, Required (SEER) (PED7149)

1. The edit is skipped for any of the following conditions:
 - a. Date of Diagnosis pre-2025, blank (unknown), or invalid.
 - b. Pediatric ID is blank or XX.
 - c. Type of Reporting Source = 7 (Death Certificate Only)

2. This edit verifies that FOXO1 Gene Rearrangements is blank if Pediatric Primary Tumor is blank for Pediatric ID 9a

3. This edit verifies that FOXO1 Gene Rearrangements is not "8" (not applicable) and not blank for the Pediatric IDs for which it is required by a standard setter.
 - a. Age at Diagnosis = 000-019.

Required for Pediatric ID:

9a: Rhabdomyosarcoma

Note: Pediatric edits have been removed from the standard NAACCR metafile. A metafile with the pediatric edits is available upon request. Please contact Jim Hofferkamp jhofferkamp@naaccr.org for questions or to get a copy.

There is no plan to change the age range in the API/DLL/Java library.

Q2: When the same SSDI is used for both adults and the PDCS, will the SSDI have different value sets, or can the same set of values be used regardless of PDCS/Adult site?

A: When the same SSDI is used for overlapping adult and pediatric schemas (i.e., S Category Clinical for Testis [adult] and Testicular [pediatric]) the SSDI validation table (value and notes) are the same, and either source can be used. This is true if ANY site/histology combination in the pediatric schema belongs to an adult schema that uses the same SSDI:

- B Symptoms [3812]
- S Category Clinical [3923]

- S Category Pathological [3924]

HOWEVER, when SSDIs are used for both adults and pediatrics but for different schemas (i.e., Chromosome 1p Status for CNS [adult] and Renal Sarcoma [pediatric]), the validation tables differ:

- Chromosome 1p Status [3801]
- BRAF Mutational Analysis [3940]

Q3: What is the difference between the Derived Pediatric T, N, M & Stage Group [1142-1145] and Toronto T, N, M & Stage Group [1146-1149]?

A: Derived Pediatric T, N, M & Stage Group [1142-1145] are for use by SEER for analysis of US population-based registry data. Toronto T, N, M & Stage Group [1146-1149] are also derived and are intended to be used as stage-specific population-based data harmonized for the purpose of international comparisons.

Q4: Should Derived Pediatric T, N, M & Stage Group [1142-1145] and Toronto T, N, M & Stage Group [1146-1149] be derived at the facility level or only at the central registry?

- A. There is no requirement that they be derived at the facility level, though some facilities may wish to have the derived values. However, these data items, if derived at the facility, should not be transmitted to the central registry.