

QA Matters: Preparing for the 2026 Head and Neck Recode

September 2025

The AJCC has provided advance notice of a recode that will be implemented with 2026 registry software updates. The change affects certain head and neck primaries diagnosed in 2025 and will require review and reassignment of staging information for affected cases.

Documenting key information in text fields during initial abstraction will help ensure that affected cases can be reviewed and recoded efficiently when the 2026 updates become available.

This QA Matters brief summarizes the upcoming 2026 Head and Neck recode and outlines steps registrars can take now to prepare for the change.

Key Points

- **Beginning with diagnosis year 2025, all cases coded to C11.1 will be considered nasopharynx primaries.**
- **The schema discriminator currently used for these cases will no longer be used beginning with 2026 software updates.**
- **Certain 2025 diagnosed cases will require manual review and stage reassignment.**
- **Thorough text documentation during abstraction will support efficient review and recoding of affected cases.**

If you need help accessing or understanding this information, contact Linda.Bloschies@vermont.gov.

Why This Matters

- Accurate primary site assignment is essential for correct staging and analysis.
- Changes to site classification may affect Summary Stage, EOD, and AJCC staging fields and affected cases may require reassignment of values.
- Documenting key clinical and staging information now can reduce future review and recoding effort.



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Understanding the Change

Currently, a schema discriminator is used to classify C11.1 cases.

Under current rules:

- Posterior wall is coded to nasopharynx.
- Adenoid and pharyngeal tonsil are coded to oropharynx.

Beginning with the 2026 implementation:

- All C11.1 cases will be coded to nasopharynx.
- The schema discriminator will no longer be used.
- Pharyngeal tonsils will no longer be abstracted as oropharynx primaries.

Affected Data Items

The following data items may be affected by the reclassification of certain C11.1 cases from oropharynx to nasopharynx.

All Facilities:

- Grade Clinical
- Grade Pathological
- Grade Post Therapy Clinical
- Grade Post Therapy Pathological
- Summary Stage 2018

CoC Accredited Facilities:

- AJCC TNM Clinical T, N, M, and Stage Group
- AJCC TNM Pathological T, N, M, and Stage Group
- AJCC TNM Post Therapy Clinical T, N, M, and Stage Group
- AJCC TNM Post Therapy Pathological T, N, M, and Stage Group
- EOD 2018 Primary Tumor, EOD 2018 Regional Nodes, EOD 2018 Mets

Preparing for the Recode

All 2025 diagnosed cases with Schema Discriminator 1 coded as "2" will require manual review and AJCC stage reassignment using nasopharynx staging criteria when the change goes into effect in 2026. Accurate text documentation completed during initial abstraction will help support this review process.

Recommendations for Registrars

- Document relevant staging and clinical details in text fields while abstracting affected 2025 cases.

- Review C11.1 cases carefully to ensure complete documentation.
- Be aware that all C11.1 cases will be classified as nasopharynx beginning with the 2026 implementation.
- Include sufficient text documentation to support future review of primary site assignment and staging.

References

[NAACCR 2026 Implementation Guidelines and Recommendations](#) (Revised October 2025)
[AJCC Guidance for 2026 Implementation](#)

Questions?

If you have questions regarding this topic, need assistance interpreting coding guidance, or have other cancer registry-related questions, please contact the Vermont Cancer Registry at AHS.VDHHSICancerRegistry@vermont.gov.