	Ν	% of cohort
Total Cases <sup>3</sup>	519	1.0
Timing, Behavior, and Site	Ν	% of cases
Baseline	204	39.3
Invasive	202	38.9
Appendix	7	1.3
Colon <sup>4</sup>	23	4.4
Rectosigmoid junction	2	0.4
Rectum	10	1.9
Unknown⁵	160	30.8
In situ	2	0.4
Colon	1	0.2
Rectosigmoid junction	1	0.2
Unknown timing <sup>6</sup> – Invasive – Unknown <sup>5</sup>	18	3.5
Incident	297	57.2
Invasive	289	55.7
Appendix	13	2.5
Colon <sup>7</sup>	138	26.6
Rectosigmoid junction	9	1.7
Rectum	27	5.2
Unknown⁵	102	19.7
In situ	7	1.3
Colon	4	0.8
Rectum	3	0.6
Uncertain behavior - Appendix	1	0.2
Incident	297	
Race/Ethnicity <sup>8</sup>		
Non-Hispanic White	251	84.5
Non-Hispanic Black	24	8.1
Hispanic	14	4.7
Other	8	2.7
Age (in years) at Diagnosis <sup>9</sup>		
Under 50	14	4.7
50-64	128	43.1
65 and older	155	52.2
Diagnosis Confirmation <sup>10</sup>		
Medical	161	54.2
NDI Plus or death certificate only	21	7.1
None	115	38.7

Sister Study Colon and Rectal Cancer Outcomes (any type) <sup>1</sup> and Characteristics: Data Release 8.2 <sup>2</sup>	

Characteristic	Ν	%
Incident – Medically Confirmed	161	
Stage at Diagnosis <sup>11</sup>		
0	7	4.9
I	57	39.6
II	35	24.3
III	38	26.4
IV	7	4.9
Missing, cannot stage	17	

<sup>1</sup> Cancer events are defined by the following ICD10 cancer codes: invasive colon (including appendix) (C18), invasive rectosigmoid junction (C19), invasive rectum (C20), *in situ* colon (D01.0), *in situ* rectosigmoid junction (D01.1), *in situ* rectum (D01.2), uncertain behavior of appendix (D37.3), uncertain behavior of colon (D37.4), uncertain behavior of rectum (D37.5). Other ICD10 cancer codes that may be used when colon or rectum is indicated as one of the favored primary sites: invasive intestine (C26.0), invasive digestive organ (C26.9), invasive unspecified site (C80), *in situ* intestine (D01.4), *in situ* digestive organ (D01.9), uncertain behavior of digestive organ (D37.8, D37.9), unspecified behavior of digestive organ (D49.0).

<sup>2</sup> Data release 8.2 includes outcomes from follow-up phases that closed on or before 9/23/2018

<sup>3</sup> Excludes cancer diagnoses where colon or rectal site of origin could not be ruled out, but neither is the favored site [n=8].

<sup>4</sup> Colon sites include: Cecum [n=4]; Ascending [n=4]; Splenic flexure [n=1]; Descending [n=2]; Sigmoid [n=6]; Overlapping sites [n=1]; Not specified [n=5]

<sup>5</sup> Unknown site generally includes reports of colon or rectum, with the following exceptions: baseline includes unspecified intestine [n=5] and rectum or anus [n=2]; incident includes unspecified intestine [n=2], rectum or anus [n=2], multiple sites (transverse colon and rectum) [n=1]; and report of colon with other site(s) possible [n=1]

<sup>6</sup> Unknown timing represents cases that are unknown if diagnosis at or prior to baseline vs. post-baseline (i.e. incident case)

<sup>7</sup> Colon sites include: Cecum [n=34]; Ascending [n=29]; Transverse [n=12]; Descending [n=5]; Sigmoid [n=20]; Hepatic flexure [n=1]; Splenic flexure [n=1]; Overlapping sites [n=9]; Not specified [n=27]

<sup>8</sup> Race/ethnicity: precedence given to Hispanic ethnicity first, then Black race, then other race, then White race <sup>9</sup> For those missing age at diagnosis [n=17], age was imputed as the midpoint of the range of plausible ages at diagnosis

<sup>10</sup> Medical confirmation of reported colon or rectal cancer is generally from pathology report but may include other medical documentation; National Death Index (NDI) Plus or death certificate confirmation is specific to cases that do not have medical confirmation

<sup>11</sup> Stage at diagnosis is only available for cases with medical confirmation