

# **Radiation Therapy Id Project**

## **Data Access Manual**

# Radiation Therapy Id Project – Data Access Manual

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- Florida Department of Health (DOH)
- University of Miami/Sylvester Comprehensive Cancer Center (UM/SCCC)
- North American Association of Central Cancer Registries (NAACCR)
- National Cancer Institute/Surveillance, Epidemiology & End Results Program (NCI/SEER)
- Commission on Cancer/American College of Surgeons (COC/ACoS)

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## FLORIDA CANCER DATA SYSTEM

### PREFACE

In 1978, the Department of Health and Rehabilitative Services, now known as the Florida Department of Health, contracted with the Sylvester Comprehensive Cancer Center/University of Miami School of Medicine to implement and maintain the Florida Cancer Data System (FCDS). FCDS has been fully operational and collecting incidence data on cancer cases seen in Florida hospitals on or after January 1, 1981. Ambulatory diagnostic/treatment centers and pathology laboratories began cancer case reporting with patients seen on or after July 1, 1997.

Cancer reporting to FCDS is mandated by Florida statutes. All cancer cases seen in any health facility licensed under Florida Statute Section 395 or Section 408.07 must be reported to FCDS according to Florida Statute Section 385.202. This includes all hospitals, ambulatory diagnostic and treatment centers, clinical laboratories and physicians offices.

Currently, FCDS processes over 135,000 cancer cases each year. When these cases are unduplicated, there are approximately 95,000 newly diagnosed incidence cancer cases per year. Currently, the FCDS database contains approximately 2,000,000 case records.

The 2001 edition of the FCDS Data Acquisition Manual is compatible with national standards. These standards are created and endorsed by, the Centers for Disease Control and Prevention/National Program of Cancer Registries (CDC/NPCR), the North American Association of Central Cancer Registries (NAACCR), the National Cancer Institute/Surveillance Epidemiology & End Results Program (NCI/SEER), and the Commission on Cancer/American College of Surgeons (COC/ACoS)

### CONFIDENTIALITY

According to Florida Statute 381, Public Health: General Provisions, “Information submitted in reports required by this section is confidential, exempt from the provisions of s.119.07 (1), and is to be made public only when necessary to public health. A report so submitted is not a violation of the confidential relationship between practitioner and patient.”

The Health Insurance Portability and Accountability act of 1996 (HIPAA) became law April 14, 2001. While most organizations have two full years – until April 14, 2003 – to comply, questions regarding how this new law impacts cancer reporting have arisen. The North American Association of Central Cancer Registries (NAACCR) has provided materials that address these questions. As you will see, HIPAA regulations only minimally impact current state cancer reporting procedures. Specifically,

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HIPAA allows for the reporting of identifiable cancer data to public health entities. Because the Florida Cancer Data System falls under the definition of a public health entity, HIPAA allows your facility to continue to report data to us in compliance with state law. Written informed consent from each cancer patient reported to public health entities is not required under HIPAA; rather hospitals must simply document that reporting has occurred.

FCDS continues to adhere to strict security measures to assure patient and institutional confidentiality.

### **IMMUNITY FROM LIABILITY**

No institution or individual complying with Florida statutes cited above shall be civilly or criminally liable for divulging information or providing materials to the statewide registry as required by the law.

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### FLORIDA STATE LAWS

#### Title XXIX PUBLIC HEALTH Chapter 381 Public Health: General Provisions

##### 381.0031 Report of diseases of public health significance to department.

(1) Any practitioner licensed in this state to practice medicine, osteopathic medicine, chiropractic medicine, naturopathy, or veterinary medicine; any hospital licensed under part I of chapter 395; or any laboratory licensed under chapter 483 that diagnoses or suspects the existence of a disease of public health significance shall immediately report the fact to the Department of Health.

(2) Periodically the department shall issue a list of infectious or noninfectious diseases determined by it to be a threat to public health and therefore of significance to public health and shall furnish a copy of the list to the practitioners listed in subsection (1).

(3) Reports required by this section must be in accordance with methods specified by rule of the department.

(4) Information submitted in reports required by this section is confidential, exempt from the provisions of s. 119.07(1), and is to be made public only when necessary to public health. A report so submitted is not a violation of the confidential relationship between practitioner and patient.

(5) The department may obtain and inspect copies of medical records, records of laboratory tests, and other medical related information for reported cases of diseases of public health significance described in subsection (2). The department shall examine the records of a person who has a disease of public health significance only for purposes of preventing and eliminating outbreaks of disease and making epidemiological investigations of reported cases of diseases of public health significance, notwithstanding any other law to the contrary. Health care practitioners, licensed health care facilities, and laboratories shall allow the department to inspect and obtain copies of such medical records and medical-related information, notwithstanding any other law to the contrary. Release of medical records and medical-related information to the department by a health care practitioner, licensed health care facility, or laboratory, or by an authorized employee or agent thereof, does not constitute a violation of the confidentiality of patient records. A health care practitioner, health care facility, or laboratory, or any employee or agent thereof, may not be held liable in any manner for damages and is not subject to criminal penalties for providing patient records to the department as authorized by this section.

(6) The department may adopt rules related to reporting diseases of significance to public health, which must specify the information to be included in the report, who is required to report, the method and time period for reporting, requirements for enforcement, and required follow-up activities by the department which are necessary to protect public health.

This section does not affect s. 384.25.

History.--s. 2, ch. 29834, 1955; ss. 19, 35, ch. 69-106; s. 67, ch. 77-147; s. 4, ch. 89-311; s. 2, ch. 90-347; s. 15, ch. 91-297; s. 2, ch. 95-188; s. 184, ch. 96-406; s. 175, ch. 97-101; s. 4, ch. 98-151; s. 252, ch. 98-166; s. 8, ch. 2000-367.

Note.--Former s. 381.231.

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### Title XXIX PUBLIC HEALTH Chapter 385 Chronic Diseases

#### 385.202 Statewide cancer registry.--

(1) Each facility licensed under chapter 395 and each freestanding radiation therapy center as defined in s. 408.07 shall report to the Department of Health such information, specified by the department, by rule, which indicates diagnosis, stage of disease, medical history, laboratory data, tissue diagnosis, and radiation, surgical, or other methods of diagnosis or treatment for each cancer diagnosed or treated by the facility or center. Failure to comply with this requirement may be cause for registration or licensure suspension or revocation.

(2) The department shall establish, or cause to have established, by contract with a recognized medical organization in this state and its affiliated institutions, a statewide cancer registry program to ensure that cancer reports required under this section shall be maintained and available for use in the course of any study for the purpose of reducing morbidity or mortality; and no liability of any kind or character for damages or other relief shall arise or be enforced against any hospital by reason of having provided such information or material to the department.

(3) The department or a contractual designee operating the statewide cancer registry program required by this section shall use or publish said material only for the purpose of advancing medical research or medical education in the interest of reducing morbidity or mortality, except that a summary of such studies may be released for general publication. Information which discloses or could lead to the disclosure of the identity of any person whose condition or treatment has been reported and studied shall be confidential and exempt from the provisions of s. 119.07(1), except that:

(a) Release may be made with the written consent of all persons to whom the information applies;

(b) The department or a contractual designee may contact individuals for the purpose of epidemiologic investigation and monitoring, provided information that is confidential under this section is not further disclosed; or

(c) The department may exchange personal data with any other governmental agency or a contractual designee for the purpose of medical or scientific research, provided such governmental agency or contractual designee shall not further disclose information that is confidential under this section.

(4) Funds appropriated for this section shall be used for establishing, administering, compiling, processing, and providing biometric and statistical analyses to the reporting facilities. Funds may also be used to ensure the quality and accuracy of the information reported and to provide management information to the reporting facilities.

(5) The department may, by rule, classify facilities for purposes of reports made to the cancer registry and specify the content and frequency of the reports. In classifying facilities, the department shall exempt certain facilities from reporting cancer information that was previously reported to the department or retrieved from existing state reports made to the department or the Agency for Health Care Administration. The provisions of this section shall not apply to any facility whose primary function is to provide psychiatric care to its patients.

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History.--ss. 2, 3, 4, 9, ch. 78-171; s. 5, ch. 82-213; s. 2, ch. 83-234; s. 96, ch. 86-220; s. 1, ch. 90-6; s. 3, ch. 95-188; s. 201, ch. 96-406; s. 190, ch. 97-101; s. 31, ch. 97-237; s. 24, ch. 99-397.

Note.--Former s. 381.3812.

### CONFIDENTIALITY

Title XXIX PUBLIC HEALTH Chapter 405 Medical Information Available For Research

405.01 Release of medical information to certain study groups; exemption from liability.

Any person, hospital, assisted living facility, hospice, sanatorium, nursing or rest home or other organization may provide information, interviews, reports, statements, memoranda, or other data relating to the condition and treatment of any person to research groups, governmental health agencies, medical associations and societies, and in-hospital medical staff committees, to be used in the course of any study for the purpose of reducing morbidity or mortality. No liability of any kind or character for damages or other relief shall arise or be enforced against any person or organization by reason of having provided such information or material, or by reason of having released or published the findings and conclusions of such groups to advance medical research and medical education, or by reason of having released or published generally a summary of such studies.

History.--s. 1, ch. 65-533; s. 19, ch. 90-344; s. 27, ch. 95-210.

Title XXIX PUBLIC HEALTH Chapter 405 Medical Information Available For Research

405.02 Limitation on publication of released information.—

Research groups, governmental health agencies, organized medical associations and societies, and in-hospital medical staff committees shall use or publish said material only for the purpose of advancing medical research or medical education in the interest of reducing morbidity or mortality, except that a summary of such studies may be released by any such group for general publication.

History.--s. 2, ch. 65-533; s. 20, ch. 90-344; s. 244, ch. 96-406.

Title XXIX PUBLIC HEALTH Chapter 405 Medical Information Available For Research

405.03 Confidentiality

In all events the identity of any person whose condition or treatment has been studied shall be confidential and exempt from the provisions of s. 119.07(1).

History.--s. 3, ch. 65-533; s. 21, ch. 90-344; s. 245, ch. 96-406.

Title XXIX Chapter 408

PUBLIC HEALTH Health Care Administration

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408.07 Definitions.--As used in this chapter, with the exception of ss. 408.031-408.045, the term:

- (1) "Accepted" means that the agency has found that a report or data submitted by a health care facility or a health care provider contains all schedules and data required by the agency and has been prepared in the format specified by the agency, and otherwise conforms to applicable rule or Florida Hospital Uniform Reporting System manual requirements regarding reports in effect at the time such report was submitted, and the data are mathematical reasonable and accurate.
- (2) "Adjusted admission" means the sum of acute and intensive care admissions divided by the ratio of inpatient revenues generated from acute, intensive, ambulatory, and ancillary patient services to gross revenues. If a hospital reports only subacute admissions, then "adjusted admission" means the sum of subacute admissions divided by the ratio of total inpatient revenues to gross revenues.
- (3) "Agency" means the Agency for Health Care Administration.
- (4) "Alcohol or chemical dependency treatment center" means an organization licensed under chapter 397.
- (5) "Ambulatory care center" means an organization which employs or contracts with licensed health care professionals to provide diagnosis or treatment services predominantly on a walk-in basis and the organization holds itself out as providing care on a walk-in basis. Such an organization is not an ambulatory care center if it is wholly owned and operated by five or fewer health care providers.
- (6) "Ambulatory surgical center" means a facility licensed as an ambulatory surgical center under chapter 395.
- (7) "Audited actual data" means information contained within financial statements examined by an independent, Florida-licensed, certified public accountant in accordance with generally accepted auditing standards, but does not include data within a financial statement about which the certified public accountant does not express an opinion or issues a disclaimer.
- (8) "Birth center" means an organization licensed under s. 383.305.
- (9) "Cardiac catheterization laboratory" means a freestanding facility that employs or contracts with licensed health care professionals to provide diagnostic or therapeutic services for cardiac conditions such as cardiac catheterization or balloon angioplasty.
- (10) "Case mix" means a calculated index for each health care facility or health care provider, based on patient data, reflecting the relative costliness of the mix of cases to that facility or provider compared to a state or national mix of cases.
- (11) "Clinical laboratory" means a facility licensed under s. 483.091, excluding: any hospital laboratory defined under s. 483.041(6); any clinical laboratory operated by the state or a political subdivision of the state; any blood or tissue bank where the majority of revenues are received from the sale of blood or tissue and where blood, plasma, or tissue is procured from volunteer donors and donated, processed, stored, or distributed on a nonprofit basis; and any clinical laboratory which is wholly owned and operated by physicians who are licensed pursuant to chapter 458 or chapter 459 and who practice in the same group practice, and at which no clinical laboratory work is performed for patients referred by any health care provider who is not a member of that same group practice.

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(12) "Comprehensive rehabilitative hospital" or "rehabilitative hospital" means a hospital licensed by the agency as a specialty hospital as defined in s. 395.002; provided that the hospital provides a program of comprehensive medical rehabilitative services and is designed, equipped, organized, and operated solely to deliver comprehensive medical rehabilitative services, and further provided that all licensed beds in the hospital are classified as "comprehensive rehabilitative beds" pursuant to s. 395.003(4), and are not classified as "general beds."

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(13) "Consumer" means any person other than a person who administers health activities, is a member of the governing body of a health care facility, provides health services, has a fiduciary interest in a health facility or other health agency or its affiliated entities, or has a material financial interest in the rendering of health services.

(14) "Continuing care facility" means a facility licensed under chapter 651.

(15) "Cross-subsidization" means that the revenues from one type of hospital service are sufficiently higher than the costs of providing such service as to offset some of the costs of providing another type of service in the hospital. Cross-subsidization results from the lack of a direct relationship between charges and the costs of providing a particular hospital service or type of service.

(16) "Deductions from gross revenue" or "deductions from revenue" means reductions from gross revenue resulting from inability to collect payment of charges. For hospitals, such reductions include contractual adjustments; uncompensated care; administrative, courtesy, and policy discounts and adjustments; and other such revenue deductions, but also includes the offset of restricted donations and grants for indigent care.

(17) "Diagnostic-imaging center" means a freestanding outpatient facility that provides specialized services for the diagnosis of a disease by examination and also provides radiological services. Such a facility is not a diagnostic imaging center if it is wholly owned and operated by physicians who are licensed pursuant to chapter 458 or chapter 459 and who practice in the same group practice and no diagnostic-imaging work is performed at such facility for patients referred by any health care provider who is not a member of that same group practice.

(18) "FHURS" means the Florida Hospital Uniform Reporting System developed by the agency.

(19) "Freestanding" means that a health facility bills and receives revenue which is not directly subject to the hospital assessment for the Public Medical Assistance Trust Fund as described in s. 395.701.

(20) "Freestanding radiation therapy center" means a facility where treatment is provided through the use of radiation therapy machines that are registered under s. 404.22 and the provisions of the Florida Administrative Code implementing s. 404.22. Such a facility is not a freestanding radiation therapy center if it is wholly owned and operated by physicians licensed pursuant to chapter 458 or chapter 459 who practice within the specialty of diagnostic or therapeutic radiology.

(21) "GRAA" means gross revenue per adjusted admission.

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(22) "Gross revenue" means the sum of daily hospital service charges, ambulatory service charges, ancillary service charges, and other operating revenue. Gross revenues do not include contributions, donations, legacies, or bequests made to a hospital without restriction by the donors.

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(23) "Health care facility" means an ambulatory surgical center, a hospice, a nursing home, a hospital, a diagnostic imaging center, a freestanding or hospital-based therapy center, a clinical laboratory, a home health agency, a cardiac catheterization laboratory, a medical equipment supplier, an alcohol or chemical dependency treatment center, a physical rehabilitation center, a lithotripsy center, an ambulatory care center, a birth center, or a nursing home component licensed under chapter 400 within a continuing care facility licensed under chapter 651.

(24) "Health care provider" means a health care professional licensed under chapter 458, chapter 459, chapter 460, chapter 461, chapter 463, chapter 464, chapter 465, chapter 466, part I, part III, part IV, part V, or part X of chapter 468, chapter 483, chapter 484, chapter 486, chapter 490, or chapter 491.

(25) "Health care purchaser" means an employer in the state, other than a health care facility, health insurer, or health care provider, who provides health care coverage for her or his employees.

(26) "Health insurer" means any insurance company authorized to transact health insurance in the state, any insurance company authorized to transact health insurance or casualty insurance in the state that is offering a minimum premium plan or stop-loss coverage for any person or entity providing health care benefits, any self-insurance plan as defined in s. 624.031, any health maintenance organization authorized to transact business in the state pursuant to part I of chapter 641, any prepaid health clinic authorized to transact business in the state pursuant to part II of chapter 641, any multiple-employer welfare arrangement authorized to transact business in the state pursuant to ss. 624.436-624.45, or any fraternal benefit society providing health benefits to its members as authorized pursuant to chapter 632.

(27) "Home health agency" means an organization licensed under part IV of chapter 400.

(28) "Hospice" means an organization licensed under part VI of chapter 400.

(29) "Hospital" means a health care institution licensed by the Agency for Health Care Administration as a hospital under chapter 395.

(30) "Lithotripsy center" means a freestanding facility that employs or contracts with licensed health care professionals to provide diagnosis or treatment services using electro-hydraulic shock waves.

(31) "Local health council" means the agency defined in s. 408.033.

(32) "Market basket index" means the Florida hospital input price index (FHPI), which is a statewide market basket index used to measure inflation in hospital input prices weighted for the Florida-specific experience which uses multistate regional and state-specific price measures, when available. The index shall be constructed in the same manner as the index employed by the Secretary of the United States Department of

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Health and Human Services for determining the inflation in hospital input prices for purposes of Medicare reimbursement.

(33) "Medical equipment supplier" means an organization that provides medical equipment and supplies used by health care providers and health care facilities in the diagnosis or treatment of disease.

(34) "Net revenue" means gross revenue minus deductions from revenue.

(35) "New hospital" means a hospital in its initial year of operation as a licensed hospital and does not include any facility which has been in existence as a licensed hospital, regardless of changes in ownership, for over 1 calendar year.

(36) "Nursing home" means a facility licensed under s. 400.062 or, for resident level and financial data collection purposes only, any institution licensed under chapter 395 and which has a Medicare or Medicaid certified distinct part used for skilled nursing home care, but does not include a facility licensed under chapter 651.

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#### PUBLIC HEALTH Health Care Administration

(37) "Operating expenses" means total expenses excluding income taxes.

(38) "Other operating revenue" means all revenue generated from hospital operations other than revenue directly associated with patient care.

(39) "Physical rehabilitation center" means an organization that employs or contracts with health care professionals licensed under part I or part III of chapter 468 or chapter 486 to provide speech, occupational, or physical therapy services on an outpatient or ambulatory basis.

(40) "Prospective payment arrangement" means a financial agreement negotiated between a hospital and an insurer, health maintenance organization, preferred provider organization, or other third-party payor which contains, at a minimum, the elements provided for in s. 408.50.

(41) "Rate of return" means the financial indicators used to determine or demonstrate reasonableness of the financial requirements of a hospital. Such indicators shall include, but not be limited to: return on assets, return on equity, total margin, and debt service coverage.

(42) "Rural hospital" means an acute care hospital licensed under chapter 395, having 100 or fewer licensed beds and an emergency room, and which is:

(a) The sole provider within a county with a population density of no greater than 100 persons per square mile;

(b) An acute care hospital, in a county with a population density of no greater than 100 persons per square mile, which is at least 30 minutes of travel time, on normally traveled roads under normal traffic conditions, from another acute care hospital within the same county;

(c) A hospital supported by a tax district or subdistrict whose boundaries encompass a population of 100 persons or fewer per square mile;

(d) A hospital with a service area that has a population of 100 persons or fewer per square mile. As used in this paragraph, the term "service area" means the fewest number of zip codes that account for 75 percent of the hospital's discharges for the most recent 5-year period, based on information available from the hospital inpatient

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discharge database in the State Center for Health Statistics at the Agency for Health Care Administration; or

(e) A hospital designated as a Critical Access Hospital by the Department of Health in accordance with federal regulations and state requirements. Population densities used in this subsection must be based upon the most recently completed United States census.

(43) "Special study" means a nonrecurring data-gathering and analysis effort designed to aid the agency in meeting its responsibilities pursuant to this chapter.

44) "Teaching hospital" means any Florida hospital officially affiliated with an accredited Florida medical school which exhibits activity in the area of graduate medical education as reflected by at least seven different graduate medical education programs accredited by the Accreditation Council for Graduate Medical Education or the Council on Postdoctoral Training of the American Osteopathic Association and the presence of 100 or more full-time equivalent resident physicians. The Director of the Agency for Health Care Administration shall be responsible for determining which hospitals meet this definition.

History.--s. 71, ch. 92-33; s. 75, ch. 92-289; s. 13, ch. 93-129; s. 39, ch. 93-217; s. 17, ch. 95-144; s. 38, ch. 97-103; s. 2, ch. 98-14; s. 2, ch. 98-21; s. 14, ch. 98-89; s. 44, ch. 2000-153; s. 28, ch. 2000-163; s. 2, ch. 2000-227.

### 64D-3.006

64D-3.006 Reports, Medical Facilities and Freestanding Radiation Therapy Centers.

(1) The chief administrative officer of each civilian facility licensed under Chapter 395, F.S., and freestanding radiation therapy centers, as defined in Section 408.07, F.S., shall (and the United States military and Veterans Administration hospitals are requested to) appoint an individual from the staff, hereinafter referred to as "reporting officer," who shall be responsible for reporting cases or suspect cases of diseases on the notifiable disease list in persons admitted to, attended to, or residing in the facility (cf. Notification by Laboratories, Rule 64D-3.003, F.A.C.).

(2) Reporting of a case or suspected case of notifiable disease or condition by a facility or center fulfills the requirements of the licensed practitioner to report; however, it is the responsibility of the practitioner to ensure that the report is made as stipulated in Rule 64D-3.002, F.A.C. Reports shall be made within 72 hours of diagnosis. Special provisions for reporting sexually transmissible diseases, including HIV infection, are found in Rule 64D- 3.016, F.A.C., and for cancer, in subsection 64D-3.006(3), F.A.C.

(3) Reporting of cancer cases by a licensed practitioner, a hospital facility licensed under Chapter 395, F.S., and freestanding radiation therapy centers, as defined in Section 408.07, F.S., to the Florida Cancer Data System as required by Section 385.202, F.S., shall be accomplished within six (6) months of the date of each diagnosis and within six (6) months of the date of each treatment.

(4) Florida Cancer Data System staff will provide each freestanding ambulatory surgical center with an annual list of cancer cases for which reports are required and allow three (3) months from the date of notification for submission of reports to the Florida Cancer Data System for each case on the list. This annual list will be generated by comparing the ambulatory patient data maintained by the Agency for Health Care Administration

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with the Florida Cancer Data System file for each calendar year. This comparison will be made each year after the Florida Cancer Data System file for each year is complete, including all hospital and pathology laboratory data expected for that year. The list sent to each freestanding ambulatory surgical center will contain only those records from the Agency for Health Care Administration ambulatory patient dataset or from cancer case data received from ambulatory centers that cannot be matched with any previously reported case.

(5) For reportable cancer cases, each facility licensed under Chapter 395, F.S., and each freestanding radiation therapy center as defined in Section 408.07, F.S., shall electronically submit to the Florida Cancer Data System all available data items as specified in the Data Acquisition Manual and Confidential Abstract Report. Those facilities and centers with fewer than thirty-five (35) cancer cases annually requiring abstracting may submit to FCDS paper copies of portions of the case record that include all available information that is needed for abstracting by FCDS staff. The coding schemes, record layouts, and definitions for these items are those issued by the Florida Cancer Data System in its Data Acquisition Manual and Confidential Abstract Report, DOH Form 2029, dated July 1997, incorporated herein by reference. These documents are available from the Florida Department of Health, Bureau of Epidemiology, 4052 Bald Cypress Way, Bin A-12, Tallahassee Florida 32399-1720.  
*Specific Authority* 381.0011(13), 381.003(2), 381.0031(6), 384.33, 385.202(5), 392.66 FS. *Law Implemented* 381.0011, 381.003, 381.0031, 384.25, 385.202, 392.53 FS. *History*—New 12-29-77, Amended 6-7-82, Formerly 10D- 3.77, Amended 2-26-92, 7-21-96, Formerly 10D-3.077, Amended 11-2-98, 7-5-99, 6-4-00.

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### **Sending Radiation Therapy data to FCDS**

Beginning January 1, 2003, all Florida Radiation Therapy Centers must send a list of patient identifiers to the Florida Cancer Data System. There are two methods of submitting these data items: file upload or single web entry.

With the file upload method, you must send a file in a specific format and layout. With the single web entry method, you must enter and save each record on the web data entry screen.

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### Tab separated file layout for uploads via FCDS IDEA

Field#	Item Name	Maximum Field Length
1.	FCDS Facility Number	4
2.	Patient ID / Medical Record #	12
3.	Patient Social Security Number	9
4.	Patient Last Name	25
5.	Patient First Name	14
6.	Patient State	2
7.	Patient Zip Code	5
8.	Patient Date of Birth	8
9.	Date of Encounter	8
10.	Patient Sex	1
11.	Patient Race	2
12.	ICD-9-CM Diagnosis Code	5

#### File structure notes:

- Files must be in ASCII, with one CR/LF sequence at end of each record.
- Fields are separated by 1 tab character, beginning after field 1 and no tab after field 12. Since there are 12 fields, each record must have exactly 11 separating tabs. Files with extra/missing tabs - in any record - will be rejected.
- No embedded CR/LF, TABS other than as field separators, or other control characters in text fields.
- No quotes "" around fields, just data.
- Dates are in YYYYMMDD format – do not add “/” or “-“. Dates will be validated (don't submit 99999999 or 20030229)..
- No "Header" records with variable names, just data.
- All fields are required. Do not use blanks for missing information. Required fields that are missing/unknown, such as Sex, have codes for missing.
- Field lengths are the maximum allowed length for that field. Don't add extra trailing spaces to field.
- Files may be compressed before upload using the DOS/Windows ZIP compression standard. PKZIP or WINZIP are examples of programs that produce the correct compressed format.

## Radiation Therapy Id Project – Data Access Manual

Field#	Item Name	Maximum Field Length
1	FCDS Facility Number	4

This is a required data item containing the FCDS Facility number for your Radiation Center. Appendix A has a list of FCDS Facility numbers. Contact FCDS if your facility is not on this list.

Field#	Item Name	Maximum Field Length
2	Patient ID or Medical Record Number	12

This is a required data item containing your facility's patient id number or medical record number that will uniquely identify a patient in your records.

Field#	Item Name	Maximum Field Length
3	Patient Social Security Number	9

This is a required data item containing the patient's Social Security Number. Enter 999999999 in this field if the SSN is unknown or missing.

Field#	Item Name	Maximum Field Length
4	Patient Last Name	25

This is a required data item containing the patient's last name.

Field#	Item Name	Maximum Field Length
5	Patient First Name	14

This is a required data item containing the patient's first name.

Field#	Item Name	Maximum Field Length
6	Patient State	2

This is a required data item containing the USPS 2 character Postal abbreviation for the patient's address state. Appendix B has a list of valid state abbreviations.

## Radiation Therapy Id Project – Data Access Manual

Field#	Item Name	Maximum Field Length
7	Patient Zip code	5

This is a required data item containing the USPS 5 digit Postal code for the patient's address.

Field#	Item Name	Maximum Field Length
8	Patient Date of Birth	8

This is a required data item containing the patient's date of birth in YYYYMMDD format. The date will be validated so 9s or other invalid dates will cause the file upload to be rejected.

Field#	Item Name	Maximum Field Length
9	Date of Encounter	8

This is a required data item containing the date of encounter at your facility in YYYYMMDD format. The date will be validated so 9s or other invalid dates will cause the file upload to be rejected

Field#	Item Name	Maximum Field Length
10	Patient Sex	1

This is a required data item containing the patient's sex. Use the following codes: 1=Male, 2=Female, 3=Hermaphrodite, 4=Transsexual, 9=Unknown/not stated

Field#	Item Name	Maximum Field Length
11	Patient Race	2

This is a required data item containing the patients race. Use the following codes: 1=White, 2=Black, 3=American Indian, 98=Other, 99=Unknown

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Field#	Item Name	Maximum Field Length
12	ICD-9-CM Diagnosis Code	5

This is a required data item containing the ICD-9-CM diagnosis code. Enter 999.9 if the code is unknown. All codes must be 3 digits/letters followed by a decimal point, followed by a number. The following codes and ranges are accepted:

140.0 - 208.9  
230.0 - 234.9  
235.0 - 238.9  
273.2  
273.3  
273.9  
284.9  
285.0  
288.3  
289.8  
V58.0  
V58.1  
999.9

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### Appendix A FCDS Facility Numbers for Radiation Centers

The following are the FCDS Facility numbers for Florida Radiation Centers as of July 2003. Contact FCDS if you do not know which facility number to use or if your facility is not on this list.

County	FCDS Facility#	Facility Name
ALACHUA	8000	AYERS SURGERY CENTER
ALACHUA	8713	COMMUNITY CANCER CTR OF NORTH FL
ALACHUA	8001	EYE SURGICENTER
ALACHUA	8002	N FLORIDA REGIONAL MEDICAL CENTER
ALACHUA	8270	NORTH FLORIDA ENDOSCOPY CENTER
ALACHUA	8276	ORTHOPAEDIC SURGERY CENTER
ALACHUA	8600	RADIATION THERAPY OF GAINESVILLE
ALACHUA	8601	SHANDS UNIVERSITY OF FLORIDA
ALACHUA	8224	SURGERY CTR OF NORTH FL INC
BAY	8273	BAYMED SURGERY CENTER
BAY	8602	GULF COAST CANCER TREATMENT CENTER
BAY	8004	MULLIS EYE INSTITUTE INC
BAY	8005	NORTHWEST FLORIDA GASTROENTEROLOGY
BAY	8006	NORTHWEST FLORIDA SURGERY CENTER
BAY	8284	THE LASER AND SURGERY CENTER
BREVARD	8007	AMBULATORY SURGICAL CARE
BREVARD	8685	AMERICAN CANC TREATMENT TITUSVILLE
BREVARD	8603	AMERICAN CANCER TREATMENT CENTER
BREVARD	8008	ASC OF BREVARD
BREVARD	8009	BREVARD SURGERY CENTER
BREVARD	8604	CANCER CARE CENTERS OF BREVARD
BREVARD	8606	CANCER CARE CENTERS OF PALM BAY
BREVARD	8605	CANCER CARE CTRS OF MERRITT ISLAND
BREVARD	8213	HEALTHSOUTH MELBOURNE SURG CTR
BREVARD	8269	MELBOURNE SAME DAY SURGERY
BREVARD	8010	MERRITT ISLAND SURGERY CENTER
BREVARD	8683	RAD THER CTR OF BREVARD TITUSVILLE
BREVARD	8607	RADIATION THERAPY CENTER OF BREVARD
BREVARD	8011	SHERIDAN SURGERY CENTER
BREVARD	8239	SURGERY CENTER OF MELBOURNE
BROWARD	8013	ATLANTIC SURGICAL CENTER
BROWARD	8608	BOCA RATON RADIATION TX REG CTR
BROWARD	8014	CLEVELAND CLINIC OF FLORIDA
BROWARD	8019	COLUMBIA OSS
BROWARD	8609	CORAL SPRINGS RTX REGIONAL CENTER

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County	FCDS Facility#	Facility Name
BROWARD	8271	CORAL SPRINGS SURGICAL CENTER
BROWARD	8291	DIGESTIVE DISEASE ENDOSCOPY CENTER
BROWARD	8015	EYE CARE AND SURGERY CENTER
BROWARD	8016	FOUNDATION FOR ADVANCED EYE CARE
BROWARD	8017	MEMORIAL SAME DAY EAST
BROWARD	8012	MEMORIAL SAME DAY WEST
BROWARD	8268	OAKRIDGE AMBULATORY SURGERY CENTER
BROWARD	8021	RAND SURGICAL PAVILLION CORPORATION
BROWARD	8610	SOUTH FLORIDA RADIOTHERAPY CTR
BROWARD	8229	ST LUCIE SURGERY CENTER
BROWARD	8280	SURGERY CENTER OF FT LAUDERDALE
BROWARD	8278	SURGERY CENTER OF WESTON
BROWARD	8020	SURGERY CTR AT CORAL SPRING
BROWARD	8673	TAMARAC CANCER CENTER
BROWARD	8022	UNITED SURGICAL CENTER
BROWARD	8611	W BROWARD REGIONAL CANCER CENTER
BROWARD	8274	WESTON OUTPATIENT SURGICAL CENTER
CHARLOTTE	8613	CHARLOTTE CO RADIATION THERAPY REG
CHARLOTTE	8684	CHARLOTTE COMMUNITY RAD ONC PA
CHARLOTTE	8612	CHARLOTTE COUNTY RADIATION TX CTR
CHARLOTTE	8023	HARBORSIDE SURGERY CENTER
CHARLOTTE	8024	ST LUCIES OUTPATIENT SURGERY CENTER
CITRUS	8236	AGAPE MEDICAL CENTER INC
CITRUS	8614	CANCER TX CTR OF NATURE COAST
CITRUS	8251	CITRUS UROLOGY CENTER INC
CITRUS	8026	ENDOSCOPY ASSOCIATES OF CITRUS
CITRUS	8025	HEALTHSOUTH CITRUS SURGERY CENTER
CITRUS	8616	ROBERT BOISSONEAULT LECANTO
CITRUS	8615	ROBERT BOISSONEAULT OF INVERNESS
CITRUS	8222	SEVEN RIVERS COMMUNITY HOSPITAL ASC
CITRUS	8290	SUNCOAST ENDOSCOPY CENTER
CLAY	8617	FLORIDA CANCER CENTER ORANGE PARK
CLAY	8027	ORANGE PARK SURGERY CENTER
COLLIER	8028	AMBULATORY SURGERY CENTER OF NAPLES
COLLIER	8117	CLEVELAND CLINIC NAPLES
COLLIER	8029	COLLIER SURGERY CTR
COLLIER	8035	ENDOSCOPY CENTER OF NAPLES
COLLIER	8252	FLORIDA COASTAL SURGERY CENTER
COLLIER	8030	GASKINS EYE CARE AND SURGERY CENTER
COLLIER	8212	GULFSHORE ENDOSCOPY CTR INC
COLLIER	8031	MONTGOMERY EYE CENTER

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County	FCDS Facility#	Facility Name
COLLIER	8032	NAPLES DAY SURGERY NORTH
COLLIER	8033	NAPLES DAY SURGERY SOUTH
COLLIER	8034	NEWGATE SURGERY CENTER INC
COLLIER	8672	NORTH COLLIER REG RADATION CENTER
COLLIER	8250	PHYSICIANS DAY SURGERY CENTER INC
COLLIER	8618	S COLLIER RADIATION TX REGIONAL CTR
COLLIER	8215	THE FACIAL PLASTIC SURGERY CENTER
COLLIER	8197	TOTAL BACK CARE CENTER
COLUMBIA	8234	NORTH FLORIDA SURGERY CTR LAKE CITY
COLUMBIA	8241	SOUTHERN SURGERY CENTER
COLUMBIA	8619	SUWANNEE VALLEY CANCER CENTER
DADE	8036	AMBULATORY SURGICAL CTR
DADE	8219	BERAJA CLIN LASER AND SURGER CTR
DADE	8620	COLUMBIA DEERING RADIATION ONCOLOGY
DADE	8044	COLUMBIA N MIAMI BCH SURGERY CTR
DADE	8047	COLUMBIA SURGICAL PARK CENTER LTD
DADE	8038	CORAL VIEW AMB SURG CTR
DADE	8048	ENDOSCOPY CENTER INC
DADE	8039	GASTROINTESTINAL CENTER OF HIALEAH
DADE	8040	HIALEAH AMBULATORY CARE CENTER
DADE	8697	HIALEAH CANCER CARE CENTER LTD.
DADE	8228	LEAGUE AGAINST CANCER INC
DADE	8216	MEDICAL ARTS SURGICAL CENTER
DADE	8042	MIAMI EYE CENTER
DADE	8262	MIAMI HAND CENTER
DADE	8301	NORTH MIAMI BEACH SURGICAL CENTER
DADE	8045	PALMETTO GENERAL HOSPITAL
DADE	8049	REED CENTER FOR AMB UROLOGICAL SURG
DADE	8043	SANTA LUCIA SURG CTR-MIAMI VISION
DADE	8259	SURGERY CENTER OF CORAL GABLES LLC
DADE	8244	THE PALMETTO SURGERY CENTER
DADE	8037	THE SURGERY CENTER OF CORAL GABLES
DADE	8050	VENTURE AMBULATORY SURGICAL CENTER
DESOTO	8622	CENTRAL RADIATION THERAPY INSTITUTE
DUVAL	8054	COLUMBIA PARKSIDE SURG CTR JAX
DUVAL	8691	FIRST COAST ONCOLOGY
DUVAL	8623	FL CANCER CTR AND WELLS COMPLEX
DUVAL	8687	FLORIDA CANCER CENTER BEACHES
DUVAL	8666	FLORIDA CANCER CENTER PALATKA
DUVAL	8298	JACKSONVILLE BEACH SURGERY CENTER
DUVAL	8272	JACKSONVILLE CENTER FOR ENDOSCOPY

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County	FCDS Facility#	Facility Name
DUVAL	8051	JACKSONVILLE SURGERY CENTER
DUVAL	8258	MAYO CLINIC JACKSONVILLE ASC FOR GI
DUVAL	8052	MAYO OUTPATIENT SURGERY CENTER
DUVAL	8217	MEDICAL PARTNERS SURGERY CTR
DUVAL	8053	NORTH FL EYE CLINIC SURGICENTER
DUVAL	8198	PLAZA SURGERY CENTER
DUVAL	8055	RIVERSIDE PARK SURGICENTER
DUVAL	8056	SAMUEL WELLS SURGI CENTER
DUVAL	8057	SAN PABLO SURGERY CENTER
DUVAL	8671	ST JOHNS ONCOLOGY CENTER
DUVAL	8624	ST LUKES HOSPITAL MAYO CLINIC JAX
DUVAL	8059	UNIVERSITY OF FLORIDA FACULTY CLINI
ESCAMBIA	8285	BAPTIST MEDICAL PARK ASC LLC
ESCAMBIA	8060	CORDOVA AMBULATORY SURGICAL CENTER
ESCAMBIA	8199	ENDOSCOPY CTR OF PENSACOLA
ESCAMBIA	8253	INTERVENTIONAL THERAPEUTICS INC
ESCAMBIA	8061	MEDICAL CTR CLINC AMB SURG CTR
ESCAMBIA	8062	NORTH FLORIDA SURGERY CENTER
ESCAMBIA	8625	WEST FLORIDA MEDICAL CENTER CLINIC
HERNANDO	8627	CANCER CARE CENTERS OF FLORIDA
HERNANDO	8626	FL COMMUNITY CANCER CTR BROOKSVILLE
HERNANDO	8275	FLORIDA ENDOSCOPY SURGERY CENTER
HERNANDO	8063	FOREST OAKS AMB SURG CTR
HERNANDO	8227	HERNANDO ENDOSCOPY AND SURGERY CTR
HERNANDO	8064	MEDICAL CENTER SURGERY ASSOC LP
HERNANDO	8065	SUNCOAST SURGERY CTR OF HERNANDO
HIGHLANDS	8068	HIGHLAND SURGICAL CTR OF CENTRAL FL
HIGHLANDS	8628	HIGHLANDS REGIONAL ONCOLOGY CTR
HIGHLANDS	8629	RADIATION ONCOLOGY ASSOCIATES INC
HILLSBOROUGH	8069	AMBULATORY SURGERY CENTER
HILLSBOROUGH	8282	ARMENIA SURGERY CENTER
HILLSBOROUGH	8070	BRANDON SURGERY CENTER
HILLSBOROUGH	8630	CANCER CARE CENTER OF TAMPA
HILLSBOROUGH	8631	CENTER FOR RAD ONCOLOGY BRANDON
HILLSBOROUGH	8695	CENTER FOR RAD ONCOLOGY SUN CITY
HILLSBOROUGH	8072	CENTER FOR SPECIALIZED SURGERY
HILLSBOROUGH	8632	FL COMMUNITY CANCER CTR BRANDON
HILLSBOROUGH	8633	FL COMMUNITY CANCER CTR SUN CITY
HILLSBOROUGH	8693	FLORIDA COMMUNITY CANC CTR TAMPA
HILLSBOROUGH	8160	OMEGA EYE ASSOCIATES
HILLSBOROUGH	8694	PLANT CITY CANCER TREATMENT CTR

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County	FCDS Facility#	Facility Name
HILLSBOROUGH	8073	ST JOSEPH'S SAME DAY SURGERY CTR
HILLSBOROUGH	8260	SURGIKID OF FLORIDA INC
HILLSBOROUGH	8071	TAMPA BAY SURGERY CENTER
HILLSBOROUGH	8074	TAMPA EYE & SPECIALTY SURGERY CTR
HILLSBOROUGH	8075	TAMPA OUTPATIENT SURGICAL FACILITY
HILLSBOROUGH	8076	USF ENDOSCOPY CTR TAMPA FL
INDIAN RIVER	8682	CANCER CARE CENTER OF SEBASTIAN
INDIAN RIVER	8077	FL EYE INSTITUTE SURGICENTER INC
INDIAN RIVER	8078	HEALTHSOUTH INDIAN RIVER SURG CTR
INDIAN RIVER	8208	MONNETT EYE AND SURGERY CENTER
INDIAN RIVER	8256	ROSATO PLASTIC SURGERY CENTER
INDIAN RIVER	8079	VERO EYE CENTER
LAKE	8635	INTERCOMMUNITY CANCER CENTER
LAKE	8636	LAKE CANCER CARE CENTER
LAKE	8081	LAKE SURGERY AND ENDOSCOPY CENTER
LAKE	8709	LAKELAND REGIONAL CANCER CENTER
LAKE	8082	LEESBURG REG AMB SURG CTR
LAKE	8083	MID FLORIDA SURGERY CENTER
LAKE	8708	ONCOLOGY SPECIALISTS OF FLORIDA
LAKE	8240	PLASTIC SURGERY CENTER OF LAKE CTY
LAKE	8704	ROBERT BOISSONEAULT ONC INST
LAKE	8281	TOTAL EYE CARE SURGERY CENTER INC
LEE	8084	BARKLEY SURGICENTER INC
LEE	8200	BONITA BAY SURGERY CENTER
LEE	8296	BONITA COMMUNITY HEALTH CENTER
LEE	8085	CAPE CORAL ENDOSCOPY AND SURG CTR
LEE	8637	CAPE CORAL RADIATION THERAPY CENTER
LEE	8096	CENTER FOR DIGESTIVE HEALTH
LEE	8086	COLUMBIA CAPE CORAL SURGERY CENTER
LEE	8087	DERMATOLOGICAL AND COSMETIC SURGERY
LEE	8088	EYE SURGERY AND LASER CENTER
LEE	8089	GULF COAST ENDOSCOPY CENTER
LEE	8277	GULF COAST ENDOSCOPY CENTER SOUTH
LEE	8091	HEALTHSOUTH PHYSICIANS SURGERY CTR
LEE	8090	LEE CTY CTR FOR FOOT AND ANKLE SURG
LEE	8638	RADIATION THERAPY REGIONAL CENTER
LEE	8639	RADIATION THERAPY REGIONAL CENTER
LEE	8242	RIVERWALK AMBULATORY SURGERY CENTER
LEE	8294	SUMMERLIN BEND SURGERY CENTER LLP
LEE	8283	SUNCOAST SURGERY CENTER
LEE	8300	SURGERY CTR OF SW FLORIDA INC

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County	FCDS Facility#	Facility Name
LEE	8094	SURGI AND LASER CTR OF SW FL
LEE	8095	SURGICARE CENTER
LEE	8093	SW FL ENDOSCOPY CENTER
LEE	8092	SW FL INST OF AMBULATORY SURGICTR
LEE	8265	UNIVERSITY EYE SURGERY CENTER
LEON	8097	ALPHA AMBULATORY SURGERY CENTER
LEON	8696	SOUTHEAST REGIONAL CANCER CENTER
LEON	8263	SOUTHEASTERN SURGERY CENTER
LEON	8100	TALLAHASSEE ENDOSCOPY CENTER
LEON	8101	TALLAHASSEE OUTPATIENT SURGERY CENT
LEON	8102	TALLAHASSEE SINGLE DAY SURGERY CENT
LEVY	8297	ENDOSCOPY SURGERY OUTPATIENT CTR
MANATEE	8201	BRADENTON ENDOSCOPY CENTER INC
MANATEE	8104	CORTEZ FOOT SURGERY CENTER
MANATEE	8105	EYE ASSOCIATES SURGERY CENTER
MANATEE	8106	GULF COAST SURGERY CENTER
MANATEE	8107	MANATEE ENDOSCOPY CENTER
MANATEE	8286	MANATEE SURGICAL CENTER INC
MANATEE	8640	RADIATION ONCOLOGY CTR OF BRADENTON
MANATEE	8641	RADIATION ONCOLOGY SVS OF MANATEE
MANATEE	8103	WEST FLORIDA SURGERY CTR
MARION	8108	CENTRAL FLORIDA EYE INSTITUTE
MARION	8109	ENDOSCOPY CENTER OF OCALA INC
MARION	8707	OCALA COMMUNITY CANCER CENTER
MARION	8676	RADIATION ONCOLOGY ASSOCIATES OF MA
MARION	8642	ROBERT BOISSONEAULT ASSOC OCALA
MARION	8679	ROBERT BOISSONEAULT ONC INST TIMBER
MARION	8110	SURGERY CENTER OF OCALA
MARION	8202	THE OCALA EYE SURGERY CENTER
MARION	8111	UROLOGY CENTER OF FLORIDA
MARTIN	8230	COLUMBIA SURGERY CENTER STUART
MARTIN	8112	MARTIN MEMORIAL SURGICENTER
MARTIN	8113	SURGERY CENTER OF STUART
MARTIN	8206	TREASURE COAST CTR FOR SURGERY
MARTIN	8220	WATERS EDGE SURGERY CENTER
MONROE	8703	BARDMOOR CANCER CENTER
MONROE	8643	KEY WEST CANCER CENTER
NASSAU	8701	FIRST COAST ONCOLOGY NASSAU
OKALOOSA	8712	FORT WALTON BEACH RADIATION CTR
OKALOOSA	8231	HEALTHSOUTH CRESTVIEW SURGERY CTR
OKALOOSA	8114	HEALTHSOUTH EMERALD COAST SURG CTR

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County	FCDS Facility#	Facility Name
OKALOOSA	8645	OKALOOSA WALTON RADIATION CENTER
OKALOOSA	8644	WEST FLORIDA HOSPITAL
OKEECHOBEE	8698	BIG LAKE CANCER CENTER
OKEECHOBEE	8266	SURGERY CENTER OF OKEECHOBEE INC
ORANGE	8115	AMB ANKLE AND FOOT CTR OF FL
ORANGE	8650	CANCER CENTERS OF FLORIDA
ORANGE	8689	CENTRAL FL RAD ONC WINTER PARK
ORANGE	8648	CENTRAL FL RTX ONC GRP WINTER PARK
ORANGE	8122	COLUMBIA SAME DAY SURGICENTER-ORLAN
ORANGE	8245	HEALTH CENTRAL SURGERY CENTER
ORANGE	8116	HEALTHSOUTH CENTRAL FL OPD SURG CTR
ORANGE	8120	HEALTHSOUTH ORLANDO CTR OPD SURG
ORANGE	8246	LAKESIDE SURGERY CENTER
ORANGE	8649	MD ANDERSON CANCER CENTER
ORANGE	8647	MD ANDERSON CANCER CTR WINTERPARK
ORANGE	8255	MNH SURGICAL CENTER INC
ORANGE	8119	OAKWATER SURGICAL CENTER
ORANGE	8221	ORLANDO SURGERY CTR LTD
ORANGE	8121	PHYSICIANS SURGICAL CARE CENTER
ORANGE	8123	SURGICAL LICENSED WARD
ORANGE	8124	UNIVERSITY SURGICAL CENTER
ORANGE	8125	UROLOGICAL AMBULATORY SURGERY CTR
ORANGE	8126	WINTER PARK AMBULATORY SURGERY CTR
OSCEOLA	8128	DOCTORS SURGERY CTR/LEVIN EYE CTR
OSCEOLA	8127	KISSIMMEE SURGERY CENTER
OSCEOLA	8705	OSCEOLA CANCER CENTER
PALM BEACH	8209	BETHESDA OUTPATIENT SURGERY CENTER
PALM BEACH	8706	BOCA RATON COMPREHENSIVE CA CTR
PALM BEACH	8130	BOCA RATON OUTPATIENT SURG & LASER
PALM BEACH	8299	CENTER FOR GASTROINTESTINAL
PALM BEACH	8131	DELRAY OUTPATIENT SURG AND LASER
PALM BEACH	8132	INTRACOASTAL OPD SURGICAL CTR
PALM BEACH	8141	JUPITER EYE CENTER
PALM BEACH	8133	KIMMEL OUTPATIENT SURGICAL CENTER
PALM BEACH	8264	LAKE WORTH SURGICAL CENTER
PALM BEACH	8237	LASER AND SURG CTR THE PALM BEACHES
PALM BEACH	8135	N COUNTY SURGICTR PLM BCH
PALM BEACH	8211	NORTHPOINT SURGERY AND LASER CENTER
PALM BEACH	8143	OUTPATIENT CENTER OF BOYNTON BE
PALM BEACH	8254	OUTPATIENT PLASTIC SURGERY CENTER
PALM BEACH	8261	OUTPATIENT SURGERY CENTER OF BOCA

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County	FCDS Facility#	Facility Name
PALM BEACH	8137	PALM BEACH EYE CLINIC
PALM BEACH	8138	PALM BEACH LAKES SURGERY CENTER
PALM BEACH	8134	PALM BEACH OUTPATIENT SURGICAL CTR
PALM BEACH	8714	PALMS WEST REGIONAL CENTER
PALM BEACH	8140	PRESIDENTIAL EYE SURGICENTER
PALM BEACH	8692	RADIATION ONC CTR OF PALM BEACH
PALM BEACH	8653	RADIATION THERAPY AT GOOD SAMARITAN
PALM BEACH	8142	SURGICAL CENTER OF FLORIDA
PALM BEACH	8302	WATERSIDE AMB SURGICAL CTR INC
PALM BEACH	8136	WATERSIDE AMBULATORY SURGICAL CTR
PASCO	8654	CANCER CARE CENTERS OF FLORIDA
PASCO	8700	CENTER FOR RAD ONC ZEPHYRHILLS
PASCO	8655	FL COMM CANCER CTR NEW PORT RICHEY
PASCO	8656	FL COMMUNITY CANCER CTR ZEPHYRHILLS
PASCO	8145	FLORIDA MEDICAL CLINIC PA
PASCO	8147	HOLIDAY SURGERY CENTER
PASCO	8153	MEADOW LANE SURGERY CENTER
PASCO	8148	MEDICAL DEVELOP CORP OF PASCO CTY
PASCO	8205	MORTON PLANT MEASE TRINITY OPD CTR
PASCO	8657	NEW HOPE CANCER CENTER
PASCO	8144	NEWPORT RICHEY SURGERY CENTER
PASCO	8658	PASCO PINELLAS CANCER CENTER
PASCO	8146	PASCO SURGERY CENTER
PASCO	8150	SEVEN SPRINGS SURGERY CENTER INC
PASCO	8151	SUNCOAST EYE CENTER
PASCO	8152	SUNCOAST SKIN SURGERY CLINIC
PINELLAS	8659	ALAN C SCHEER
PINELLAS	8154	BAY AREA ENDOSCOPY CENTER
PINELLAS	8155	BAYFRONT MED PLAZA SAMEDAY SURGERY
PINELLAS	8157	BELLEAIR SURGERY CTR
PINELLAS	8279	C MED INC
PINELLAS	8203	CENTER FOR SPECIAL SURGERY
PINELLAS	8156	CLEARWATER ENDOSCOPY CENTER
PINELLAS	8158	COLUMBIA COUNTRYSIDE SURGERY CENTER
PINELLAS	8660	CORNERSTONE CANCER CENTER
PINELLAS	8161	COUNTRYSIDE SURGERY CENTER
PINELLAS	8159	DIAGNOSTIC CLINIC CENTER FOR OPD
PINELLAS	8223	DIGESTIVE DISEASE ASSOCIATES
PINELLAS	8162	EAST LAKE OUTPATIENT CENTER
PINELLAS	8662	FL COMMUNITY CANCER CTR CLEARWATER
PINELLAS	8661	FL COMMUNITY CANCER CTR DUNEDIN

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County	FCDS Facility#	Facility Name
PINELLAS	8167	FLORIDA SPINE INSTITUTE
PINELLAS	8165	HEALTHSOUTH ST PETERSBURG SURG CTR
PINELLAS	8257	MORTON PLANT BARDMOOR SURG CTR
PINELLAS	8664	PINELLAS RADIATION ASSOCIATES
PINELLAS	8163	ST LUKES CATARACT CENTER
PINELLAS	8164	ST PETERSBURG MEDICAL CLINIC
PINELLAS	8166	SUNCOAST ENDOSCOPY CENTER
PINELLAS	8663	TAMPA BAY ONCOLOGY CENTER
PINELLAS	8665	WEST COAST RADIOTHERAPY CENTER
POLK	8711	CENTRAL FL CANCER INST
POLK	8168	CENTRAL FLORIDA EYE ASSOCIATES
POLK	8169	CENTRAL FLORIDA SURGICENTER
POLK	8170	EYE SURGERY AND LASER CENTER OF MID
POLK	8214	LAKELAND SURG AND DIAGNOSTIC CTR
POLK	8702	WATSON CLINIC LLP
POLK	8249	WINTER HAVEN AMB SURGICAL CENTER
SARASOTA	8171	AESTHETIC PLASTIC SURGERY CENTER
SARASOTA	8292	BAY VIEW ENDOSCOPY CENTER
SARASOTA	8176	BON SECOURS VENICE HEALTHPK SURGERY
SARASOTA	8172	CAPE SURGERY CENTER
SARASOTA	8173	CENTER FOR ADVANCED EYE SURGERY LP
SARASOTA	8293	COASTAL MEDICAL CENTER
SARASOTA	8210	COLUMBIA DOCTORS SAME DAY SURG
SARASOTA	8710	DATTOLI CANC CTR BRACHYTHERAPY INST
SARASOTA	8174	ENDOSCOPY CENTER OF SARASOTA
SARASOTA	8675	ENGLEWOOD ONCOLOGY CENTER
SARASOTA	8667	ENGLEWOOD RADIATION THERAPY REG CTR
SARASOTA	8175	EYE CENTER OF FLORIDA
SARASOTA	8295	GULF COAST ENDOSCOPY CTR OF VENICE
SARASOTA	8289	LASER AND SURGICAL SVCS
SARASOTA	8668	SARASOTA ONCOLOGY CTR AND PORTER PA
SARASOTA	8287	SARASOTA PLASTIC SURGERY CENTER INC
SARASOTA	8680	SARASOTA RAD THERAPY REG CTR
SARASOTA	8677	SARASOTA RADIATION AND MEDICAL ONCO
SARASOTA	8177	SARASOTA SURGERY CENTER
SARASOTA	8243	SURGERY CENTER OF SARASOTA
SARASOTA	8178	SURGERY CTR AT ST ANDREWS
SARASOTA	8179	SURGICARE CTR OF VENICE INC
SARASOTA	8669	VENICE ONCOLOGY CENTER
SARASOTA	8681	VENICE RAD THERAPY REG CTR
SEMINOLE	8670	CANCER CARE

## Radiation Therapy Id Project – Data Access Manual

County	FCDS Facility#	Facility Name
SEMINOLE	8182	FL SURGERY CTR ALTAMONTE
SEMINOLE	8181	FLORIDA EYE CLINIC ASC
ST. JOHNS	8183	ST AUGUSTINE ENDOSCOPY CENTER
ST. JOHNS	8247	ST AUGUSTINE SURGERY CENTER
ST. LUCIE	8184	ATLANTIC CTR FOR SPECIALIZED SURG
ST. LUCIE	8185	DAY SURGERY INC
ST. LUCIE	8699	MID FLORIDA CANCER CENTER
ST. LUCIE	8288	ST LUCIE SURGICAL CENTER
ST. LUCIE	8186	TREASURE COAST COSMETIC SURGERY CEN
VOLUSIA	8187	AMBULATORY SUR CTR OF CENTRAL FL
VOLUSIA	8188	ATLANTIC SURGERY CENTER
VOLUSIA	8189	ATLANTIC SURGERY CTR INC
VOLUSIA	8204	DAYTONA RADIATION ONCOLOGY
VOLUSIA	8190	DELAND SURGERY CENTER
VOLUSIA	8191	NEW SMYRNA BCH AMBULATORY CARE CTR
VOLUSIA	8192	ORMOND EYE SURGI CENTER
VOLUSIA	8194	PHYSICIANS AMBULATORY SURGERY CTR
VOLUSIA	8195	SUNRISE SURGICAL CENTER
VOLUSIA	8196	VOLUSIA ENDOSCOPY CENTER
VOLUSIA	8674	WEST VOLUSIA CANCER CARE CENTER

## Radiation Therapy Id Project – Data Access Manual

### Appendix B USPS State Abbreviations

ALABAMA	AL	MONTANA	MT
ALASKA	AK	NEBRASKA	NE
ARIZONA	AZ	NEVADA	NV
ARKANSAS	AR	NEW HAMPSHIRE	NH
CALIFORNIA	CA	NEW JERSEY	NJ
COLORADO	CO	NEW MEXICO	NM
CONNECTICUT	CT	NEW YORK	NY
DELAWARE	DE	NORTH CAROLINA	NC
DISTRICT OF COLUMBIA	DC	NORTH DAKOTA	ND
FLORIDA	FL	OHIO	OH
GEORGIA	GA	OKLAHOMA	OK
HAWAII	HI	OREGON	OR
IDAHO	ID	PENNSYLVANIA	PA
ILLINOIS	IL	PUERTO RICO	PR
INDIANA	IN	RHODE ISLAND	RI
IOWA	IA	SOUTH CAROLINA	SC
KANSAS	KS	SOUTH DAKOTA	SD
KENTUCKY	KY	TENNESSEE	TN
LOUISIANA	LA	TEXAS	TX
MAINE	ME	UTAH	UT
MARYLAND	MD	VERMONT	VT
MASSACHUSETTS	MA	VIRGINIA	VA
MICHIGAN	MI	WASHINGTON	WA
MINNESOTA	MN	WEST VIRGINIA	WV
MISSISSIPPI	MS	WISCONSIN	WI
MISSOURI	MO	WYOMING	WY

## Radiation Therapy Id Project – Data Access Manual

### FCDS Radiation Therapy File Upload page

Radiation Therapy data files submitted to FCDS must be in FCDS Radiation Therapy Version 1.0 format. Please read the FCDS Radiation Therapy Data Access Manual on our website under Downloads for complete file layout information.

Enter the full path + filename. Ex: C:\My Documents\uploadfile.dat, or browse to the file location and select the file:

 

Check this box if the uploaded file is in compressed, standard ZIP format. Compressed ZIP files are about 70-90% smaller and will accelerate upload times depending on your Internet access method.

Check this box if you want this to be a TEST upload. The upload file will be checked for basic file structure errors (required fields, incorrect codes..), but no data will be stored from the file. Use this option to fine-tune the program that creates your upload file.

After upload, you may return to the FCDS IDEA Main Menu, and print a listing of the data we have received. Contact Mark Rudolph/FCDS [mr@miami.edu](mailto:mr@miami.edu) at 305-243-2626 to help diagnose problems relating to uploading files.

## Radiation Therapy Id Project – Data Access Manual

### Confirmation of Receipt

Date submitted: Tue Jul 22 11:25:01 2003  
Person submitting: Mark Rudolph  
File uploaded: F:\test\_data\rt\5 good records.txt

Thank you for your data. Examine this report to verify what you have submitted to FCDS is correct. Close this window after you have saved or printed this report for your records. You uploaded the following data:

**Facility#: 8000 AYERS SURGERY CENTER**  
**FCDS Batch#: 7**  
**FCDS Field Coordinator: Meg Cuadra**

Rec#	Patient ID / Medical Record #	Encounter Date	ICD-9-CM Diagnosis Code
1	MR11111111	20030321	V58.1
2	MR22222222	20030110	140.1
3	MR33333333	20030205	145.8
4	MR44444444	20030306	273.2
5	MR55555555	20030422	V58.0

Report end

## Radiation Therapy Id Project – Data Access Manual

### Example of file upload errors

Error:The FCDS Facility# (Field #1) is not valid for Radiation Therapy submissions

Error:The FCDS Facility# (Field #1) is not valid. Contact your FCDS field coordinator for the correct number.

Error:The Patient ID / Medical Record# (Field #2) is missing

Error:The FCDS Facility# (Field #1) is not valid. Contact your FCDS field coordinator for the correct number.

Error:The Date of Encounter [20030399] (Field #8) does not appear to be a valid date

Error:The Patient Zipcode [99999] (Field #7) is not a valid Florida zipcode (range 32000-34999)

Error:The ICD-9-CM Diagnosis Code [123.4] (Field #12) is not a code accepted by FCDS

Error:The number of tab-separated fields [13] is not exactly 12

## Errors

File structure errors:

**No data from this upload file has been stored at FCDS.** The entire file has been rejected because there was at least one file structure error (missing information, out of range codes, ...) in the upload file. Please make corrections in the program that created the upload file, make a new upload file, and resubmit the data to FCDS. Contact your vendor if you believe the data you coded was correct, but the upload still had errors. Contact Mark Rudolph/FCDS 305-243-2626 mr@miami.edu for questions relating to upload error checking. The file structure and data dictionary can be found on our website [fcds.med.miami.edu](http://fcds.med.miami.edu) under Downloads/Data Access Manual. Close this window after you have saved/printed this report.

Date submitted: Tue Jul 22 11:40:14 2003

Person submitting: Mark Rudolph

Upload file: F:\test\_data\rt\5 with errors.txt  
File type: Plain text file  
Number of records: 6  
Number of file structure errors: 8

# Radiation Therapy Id Project – Data Access Manual

## Single Record Web Entry Screen

Radiation Treatment Center Follow Back  
9/8/2003 1:44:37 PM

  
Logout

**Center Information**

Facility Number	Patient ID
Facility Name	

**Patient Information**

Patient Last Name	
First Name	
Social Security Number	
Date of Birth(YYYYMMDD)	
Sex	Enter Sex
Race	Enter Race
State	FLORIDA
Zip Code	

**Treatment Information**

Encounter Date (YYYYMMDD)	ICD9 CM Diagnosis Code (XXX.X)
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