

SOURCES OF DATA

Incidence

Cancer reporting to the 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 the FCDS according to Florida Statutes Section 385.202, this includes all hospitals, ambulatory diagnostic and treatment centers, clinical laboratories and physicians' offices.

The FCDS has been 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. Dermatologists began actively reporting cases January 1, 2011. Urologists, Medical Oncologists, and Hematology/Oncologists began reporting patients seen on or after January 1, 2013. Additional specialty physician reporting is expected in the future.

Incidence rates are based on cancers diagnosed in Florida residents during the respective reporting year. The data do not include cancers diagnosed before a person became a Florida resident. The majority of cancer cases in Florida residents diagnosed in other states are captured in the FCDS database through sharing of cancer incidence data among states, according to the North American Association of Central Cancer Registries (NAACCR) – Central Registry Standards. Cases are tallied according to the year of initial diagnosis. People with multiple primary cancers contribute multiple records to the database.

The NAACCR has established guidelines to evaluate data from its member registries. Six criteria measure data quality, timeliness, and completeness. The FCDS has achieved the highest standard defined by NAACCR, receiving “Gold Certification” for quality, completeness, and timeliness for data collected each year from 2000 to the present.

Mortality

The Florida DOH Office of Vital Statistics provides information on cancer deaths in Florida from death certificates. Cancer deaths are defined as those for which the underlying cause of death on the death certificate is cancer. The underlying cause of death is coded according to the International Classification of Diseases, Tenth Edition (ICD-10).

Hospital Discharge

AHCA provides hospital inpatient discharge data that include length of hospital stay and charges for inpatients with a principal diagnosis of cancer. All acute care hospitals and short-term psychiatric hospitals licensed under Chapter 395, *F.S.*, are required to report inpatient discharge data to AHCA. The conditions leading to hospitalization are coded according to the International Classification of Diseases, Tenth Edition, Clinical Modification (ICD-10-CM).

Screening and Tobacco Use

Since 1986, Florida has used the BRFSS survey to collect data on the prevalence of cancer screening in Floridians. The target population of BRFSS are people 18 years and older, who reside in a Florida household. The Florida survey is part of a larger, ongoing study sponsored by the CDC to collect data on individual risk behaviors and preventive health practices related to the leading causes of morbidity and mortality. Respondents are randomly selected to ensure that survey data are representative of all adults.

Every other year, survey respondents are asked if they have ever received certain cancer screening tests and when their last screening examination occurred. Screening behaviors and time since last screening are presented in the Annual Report for the following cancers: breast, cervix, colorectal and prostate. These tables and figures (Tables 10 – 13 and Figures 9 – 12.2) are updated on even years. The prevalence of cancer screening in adults by county (Table 14) is updated every 3 years.

The prevalence of current smoking is estimated based on the BRFSS survey data. Current smokers were defined as adults who had smoked at least 100 cigarettes during their life and reported smoking some days or everyday now. More information about the Florida BRFSS can be found on the DOH website:

<http://www.floridahealth.gov/statistics-and-data/survey-data/behavioral-risk-factor-surveillance-system/index.html>

BRFSS results by state since 1995 are also available online at:

<https://www.cdc.gov/brfss/>.

Population

Population estimates are provided from the Florida Legislature, Office of Economic and Demographic Research and have been allocated by race based on information from the US Bureau of the Census. These population estimates are available via the Florida Health Community Health Assessment Resource Tool Set (CHARTS)

<http://www.flhealthcharts.com/charts>. Population figures for the reference year are presented in Appendix A.1 for the state and for each sex, race, and age group.

Appendix A.2 lists population figures for Florida counties.

Age Standardization

The 2000 United States (U.S.) standard million population was first used for the *1998 Florida Annual Cancer Report* to calculate age-adjusted incidence and mortality rates, following national reporting guidelines. Incidence and mortality rates standardized to the 2000 U.S. standard million population cannot be compared to rates standardized to another population, such as the 1970 U.S. standard million population. Therefore, the age-adjusted rates in this report cannot be meaningfully compared to those in Florida Annual Cancer Reports prior to 1998. For trend analyses, all rates in this report have been age-adjusted to the 2000 standard.