

FCDS MONTHLY MEMO JANUARY/FEBRUARY 2000

FREESTANDING SURGERY & RADIATION THERAPY FACILITIES - ACCRP Announcement

On December 28, 1999 the Florida Department of Health and the Florida Cancer Data System (FCDS) mailed out a program announcement and information packet outlining the new Ambulatory Centers Cancer Reporting Program (ACCRP). The materials provided an overview of the requirements of the new reporting program and several administrative options for cancer case reporting. Ambulatory patient care centers are required by law to report cancer cases to the FCDS beginning with cases diagnosed July 1, 1997 (Florida Statutes – Chapter 381.0031).

We have had a very positive response from both radiation therapy and surgery centers since announcing the program. FCDS is looking forward to working with all of the new ambulatory care centers and would like to encourage centers to contact us with questions and concerns.

ACCRP - AHCA AMBI UNMATCHED CANCER RECORDS REQUEST LIST

On January 21, 2000, FCDS/ACCRP mailed out case identification notices for 1997 and 1998 entitled “AHCA Ambi Unmatched Cancer Records Requests”. The 1997 listings only included patient encounters between July 1, 1997 and December 31, 1997. The 1998 listings included patient encounters for the entire 1998 calendar year. Each patient encounter reported to AHCA was matched against the FCDS masterfile. Only unmatched records appear on these listings. This process is used so that ambulatory care facilities are only asked to report cases that have not been reported from any other source.

Each facility **MUST REVIEW EVERY CASE** on the “AHCA Ambi Unmatched Cancer Record Request” and supply the required information (copies or full case abstracts) according to the instructions outlined in the cover letter.

The Deadline for submission of copies of records and/or full case abstracts is June 30, 2000.

FACILITIES WITH FEWER THAN 35 UNMATCHED CANCER CASES- COPIES OF RECORDS

Any facility with fewer than 35 unmatched cancer cases need only supply copies of medical records. This includes facilities for which the initial listing shows greater than 35 cases, but, after review of the medical records listed on the Ambi Unmatched Cancer Records Request, the facility actually has fewer than 35 cancer cases to report (based on the first full year of AHCA ambulatory patient encounters, 1998).

(NOTE: Any facility with an initial listing of greater than 35 cases MUST provide copies of reports for ALL records sufficient to prove that unreported cases do not meet the FCDS case reporting criteria. Every record must be accounted for.)

The pertinent parts of the record that need to be copied and mailed to FCDS include the following: Face sheet, Summary Report, History & Physical, Operative Reports, Pathology Reports, Consultation Reports, Radiology Reports, Laboratory Reports, and any other pertinent reports that will assist FCDS in abstracting these cases for you.

A **Batch Transmittal Form** (FCDS DAM – Section I, Forms) **MUST** be submitted with any casefinding list or patient records sent to FCDS.

FACILITIES WITH GREATER THAN 35 CASES ANNUALLY – REQUIRED REPORTING

Any Facility that determines after review of the “AHCA Ambi Unmatched Cancer Records Request” list that they have greater than 35 cases must submit a full abstract report for each case of cancer identified. An FCDS Data Acquisition Manual (DAM) was sent to all facilities with greater than 35 cases listed on their “AHCA Ambi Unmatched Cancer Records Request”.

Full case abstracts must be electronically submitted to FCDS.

The Deadline for submission is June 30, 2000.

If a case does not meet the FCDS reporting criteria (FCDS DAM – Section I), the appropriate Disposition Code must be documented on the “AHCA Ambi Unmatched Cancer Records Request” list form. A copy of the facesheet and pathology report, history & physical or other report which explains why the case will not be reported is also required.

FACILITIES WITH NO CANCER CASES TO REPORT TO FCDS FOR EITHER 1997 & 1998

Any facility that received a memo stating that there were ZERO cases identified for their facility do not need to do anything at this time regarding cancer case reporting to FCDS. Keep in mind that this may not be the case for 1999 reporting. FCDS will notify each facility regarding 1999 case reporting requirements.

FACILITIES REPORTING PRIOR TO THE AHCA UNMATCHED CANCER LIST

Several Freestanding facilities have already been voluntarily reporting cancer cases to FCDS. Reporting by these facilities will continue as in the past. The “AHCA Ambi Unmatched Cancer Records Request” list is actually a quality control exercise for these facilities. The cases identified through the notification process will be considered ‘Missed Cases’ and need to be checked to see if they are reportable. These must also be reported back to FCDS by the June 30, 2000 deadline.

REPORTING OPTIONS - CONTRACTUAL AGREEMENTS WITH A HOSPITAL REGISTRY

Some facilities have made contractual agreements with a hospital registry to take care of all cancer reporting requirements. A letter outlining these arrangements must be sent to FCDS for our files.

REPORTING OPTIONS - CONTRACTUAL AGREEMENTS WITH INDEPENDENT CONTRACTORS

Some facilities have opted for contracting with an independent cancer registry professional or cancer reporting service to take care of all of their facilities cancer reporting requirements. FCDS maintains a reference list of Abstract Services. Inclusion on the list does not imply any endorsement by FCDS. The list is provided only as a service to reporting facilities and should not be considered exclusive or inclusive.

Release of Information - At the discretion of the reporting facility, FCDS correspondence with regard to data submission/transmission, edits and corrections, may be mailed directly to an authorized contractor. A Release of Information Form must be completed by the facility and submitted to FCDS. (See Forms Data Acquisition Manual (DAM- Section I-20).) Each facility is responsible for notifying FCDS of any changes in contractual agreements that affect the release of information.

REPORTING OPTIONS – USING YOUR OWN STAFF

Facilities may opt to train a current staff member(s) in cancer reporting. Should you choose this option, each facility should be sure that the person(s) selected for training has a strong background in medical terminology, the disease process, coding system, etc. Also that the staff member is reliable, dependable and has time to devote to learning how to report cases as well as time to do the actual case reporting. Cancer reporting is a very involved process and requires dedication and commitment in order to be done correctly. FCDS offers bi-annual workshops for training anyone interested in cancer reporting.

FCDS EDUCATION & TRAINING – FCDS Incidence Training Workshop, May 22-24, 2000

FCDS conducts semi-annual training workshops for cancer case reporting. The three-day intensive course covers only the basics of cancer reporting for Florida. One additional workshop will be offered in late spring, 2000 to assist in orienting and training new ambulatory patient care facilities so that they can meet the June 30, 2000 reporting deadline. The next FCDS Incidence Training Workshop will be held May 22-24, 2000 in Miami at the Holiday Inn, Coral Gables. The cost of this workshop is \$100.00. Please contact Bleu Herard at FCDS for further information at (305) 243-2635.

CONFIDENTIALITY

FCDS adheres to all Florida Statutes and Department of Health guidelines regarding patient and institutional confidentiality. Please Remember that the “Ambi Unmatched Cancer Records Request” list contain CONFIDENTIAL information about your patients. If these lists are going to be disposed of please make sure that they are appropriately destroyed. No institute or individual complying with Florida Statute 385.202 and Florida Administrative Code, Rule 64D 3.006 shall be civilly or criminally liable for divulging information required by the law.

AHCA 1999 AMBULATORY PATIENT ENCOUNTER DATA

To date the 1999 AHCA ambulatory patient encounter data files have not been received. When AHCA sends the 1999 patient encounter files, FCDS will match the freestanding facilities’ data against the FCDS files, and provide each facility with an “AHCA Ambi Unmatched Cancer Records Requests” listing. This will become an annual request for cancer cases.

NOTIFICATION TO NON-COMPLIANT FACILITIES & FACILITIES THAT ARE CHRONIC FCDS POLICY OFFENDERS

In mid-July 2000 a memo will be mailed out to the administrators of facilities that have been identified as having continued and chronic problems in meeting FCDS cancer reporting deadlines and/or adhering to FCDS policies and procedures. Meeting cancer reporting and other FCDS deadlines and following FCDS policies and procedures are one component of the mandatory state cancer reporting program, a legal requirement for all healthcare facilities operating in the state of Florida. Failure to meet reporting requirements may be grounds for the suspension and/or revocation of a facility’s license to operate.

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Chronic problems may include but are not limited to:

- ✓ Failure to comply with FCDS Policies and Procedures
- ✓ Failure to meet deadlines for End of Year Reporting
- ✓ Failure to meet deadlines for Death Certificate Notification of Missed Cases
- ✓ Failure to meet deadlines for AHCA Notification of Missed Cases
- ✓ Failure to meet deadlines for Quality Control Projects

FCDS wishes to acknowledge the fine efforts put forth on behalf of the many reporting facilities who DO continually meet Florida cancer reporting requirements...we Thank You. The Florida statewide cancer surveillance system cannot be effective in its efforts to reduce morbidity and mortality attributed to cancer without the complete and continued cooperation from ALL Florida healthcare facilities.

If you feel that your facility might be a chronic offender and you would like one last opportunity to avoid being added to this list...contact Steven Peace (305) 243-4602. Steve will provide you with details and a timeline for cleaning up any outstanding cases for which you are still responsible. FCDS does maintain complete records regarding each facility's performance in meeting deadlines & adherence to policies & procedure.



NAACCR WebPages–Questions & Answers - Summary Staging <http://www.naacr.org/techhelp/faq.html>

Q. What summary stage scheme should be used for cutaneous lymphoma (9700/3-9708)

A. Use the “Skin, other Melanoma Scheme”

Q. What Summary stage should be assigned for Paget’s Disease of the nipple with underlying intraductal carcinoma? The AJCC Manual for Staging assigns an in-situ stage, should the Summary stage also be in-situ?

A. Summary stage should be local.

Q. Pathology reports reads: Parotid: Carcinoma in-situ, ex: pleomorphic adenoma of parotid (malignant mixed tumor) How should summary stage be coded?

A. Ask the pathologist about the carcinoma in-situ. Sarcoma (mixed malignant tumor) cannot be in-situ. In the absence of further information, assign a summary stage of 1, localized.

Q. At original submission, a bilateral testicular lymphoma was staged as local. We restaged to regional, NOS. Is this the correct Summary stage?

A. Summary stage guidelines would place this case into Stage IE. Please refer to TNM supplement 1993, page 46 “Involvement of both organs of a paired site is considered as involvement of a single organ.”

Q. How should Summary stage be coded for a bladder tumor that spreads rather than invades? The pathology report shows in-situ bladder cancer involving Von Braunn’s nest and the prostatic duct. Urine cytology is positive for transitional carcinoma.

A. Summary stage is coded in-situ. For all staging systems, mucosal spread of in-situ cancer does not change the stage. An in-situ classification is based on invasion, not mucosal spread.

Q. A local cancer registry publication had an article that said to code Summary stage as unknown for all cases with non-specific primary sites (those site codes ending in .8). Is this statement correct?

A. No, .8 indicates that the lesion overlaps two sites or two subsites and many of these lesions can be staged. For example, if a breast lesion is described as 12 o’clock, the site code would be C50.8, but the case can still be staged.

SOFTWARE OPTIONS

FCDS maintains a listing of vendors specializing in cancer reporting software. The list is reviewed annually and may be used as a reference when seeking out cancer reporting software vendors. FCDS Comprehensive Abstracting Software 3.0 is still free of charge but when changes are implemented as a result of DOH or CDC requirements, FCDS will not update the software. At that time the software will become completely obsolete.

Company	Contacts	Address	Phone	Fax
Columbia/HCA – Meditech	Patty Pulliam	1 Park Plaza/ Bldg 2 West 1 st Floor, Nashville, TN 37203	615-344-1745	615-313-6268
	Betsy Miller			
ERS – Electronic Registry System	Sally Kruse	270 Northland Blvd, Suite 111, Cincinnati, OH 45246	513-771-7330	
	Ashok Ramaswamy			
EUCAN Cancer Registry Systems	Blair James	3079 Yellow Creek Rd # 1765 Evanston, WY 82930	307-789-5264	307-789-5266
IMPAC Medical System, Inc	Donna Getreuer	40 Winding Brook Lane Stamford, CT 06902	203-363-0038	203-363-0042
MRS – Medical Registry Services Inc	Pete Tobdzic	One University Plaza Hackensack, NJ 07601	201-487-2266	201-487-5184
ONCO	Ted Williamson, MD	1665 Liberty St SE, PO Box 2226 Salem, OR 97308	503-363-0049	503-363-0975
ONCONET – Freestanding XRT Ctr	Robert O’Connor, RT, PA	820 Lakeview Drive South China, ME 04358	207-445-4140	207-445-3395
Registry Plus – Abstract Plus		http://www.registryplus.org/		
RMCDS - Rocky Mtn Cancer Data	Larry Derrick	420 Chipeta Way, Suite 120 Salt Lake City, UT 84108	801-581-4307	

COMMISSION ON CANCER NEWSLETTER, January 2000

Requirement Eliminated for Collecting Cases Diagnosed and Treated only in the Office of Staff Physician for Commission on Cancer Approved Cancer Programs

The Commission on Cancer Workgroup on Outpatient Accessions met and reported that based on the findings and recommendations of the workgroup, the Committee on Approvals enacted the following measures:

- Effective immediately, the requirement of approved programs to capture cases diagnosed and treated only in the office of staff physicians is **eliminated**.

- The workgroup will create a proposal for collaborations between the National Cancer DataBase (NCDB) and state registries.
- The workgroup will also develop an independent category of approval for non-hospital treatment facilities and physician groups.

For further information regarding class 6 physician reporting, contact the Commission on Cancer, Nancy Etzold at (312) 202-5291 (netzold@facs.org) or Asa Carter at (312) 202-5180 (acarter@facs.org).

Cancer-Directed Versus Non-Cancer-directed Surgical Procedures: Clarification Needed, COC Newsletter, January 2000

There have been several questions regarding how to determine cancer directed vs non-cancer-directed surgical procedures. A small Workshop with representatives from the National Cancer Institute - Surveillance, Epidemiology, and End Results (SEER) Program, the National Cancer Data Base (NCDB), and the Commission on Cancer (CoC) met to clarify the correct use of these codes. The CoC stated that there is **no change** to the surgery code scheme at this time. Any necessary changes to the codes will be addressed in the next edition of ROADS.

The CoC also advised Registrars to code the procedures and not to identify it as either cancer-directed or non-cancer-directed. This approach will simplify the collection of all procedures and will result in more complete data. The North America Association of Central Cancer Registries (NAACCR) Uniform Data Standards Committee is reviewing these recommendations for approval. For future information look at the CoC WebSite www.facs.org and future issues of News from the Commission on Cancer. A packet was mailed from the CoC to the Approved Cancer programs with clarifications. For more details, contact Lynda Douglas (312) 202-5435 (Ldouglas@facs.org) or Pat Tary (312) 202-5410 (ptary@facs.org).

ANNOUNCEMENTS - EDUCATION

University of Southern California Cancer Surveillance Program This program is co-sponsored by Southern California Cancer Registrars Association. The objective of the USC Cancer Registrar Training Program, established in 1976, is to prepare individuals to be employed as cancer registrars with the basic skills necessary to initiate and operate a cancer registry as part of a hospital cancer program. The 24-day program is presented each Spring, with classes held two days per week for 12 consecutive weeks. The subject matter is presented in six modules: Introduction to Cancer, Abstracting, Biostatistics & Epidemiology, Follow-Up, Computerization, and Cancer Program Management. Contact: Donna Morrell, CTR, Director. Phone: (323) 442-2334. [E-mail: dmorrell@hsc.usc.edu](mailto:dmorrell@hsc.usc.edu)

April 15, 2000 - SEER*Stat Course

The National Cancer Institute's Surveillance, Epidemiology and End Results (SEER) program has developed two Windows-based systems for analyzing cancer registry data for use in cancer surveillance and control. The first, SEER*Stat, allows for the calculation of rates (age-adjusted and crude), trends, frequencies, and survival rates (relative and observed). The second, SEER*Prep, permits a user to format databases containing individual tumor records for use in SEER*Stat.

Objectives: Course will be taught from a hands-on perspective with each participant working through a series of structured examples on individual PC's. Upon completion, participants should be able to use SEER*Stat to analyze data to address questions pertaining to cancer surveillance and control.

Requirements: Class participants must supply their own laptop computer, which must be a Pentium with at least 21 MB RAM, running Windows 95, 98 or NT, and have either an internal or external CD-ROM drive. **Content:** SEER*Stat, Set-up and systems requirements, Production of counts and frequencies, Incidence rates Trends, Survival rates. **Course organizer:** Carol Kosary, MA, National Cancer Institute

Faculty: Faculty will consist of experts from the National Cancer Institute and Information Management Services, Inc. who were involved in the design and development of the system.

Registration: The course fee of \$100 includes course materials and two snacks. This course is a Pre-Conference Workshop of the NAACCR 2000 Annual Conference to be held at the Hilton Riverside in New Orleans. To register, use the conference registration form and payment instructions. Class size is limited. For more information contact June A. Harnacke, NAACCR Office Manager. Email: jharnack@naaccr.org

April 16, 2000 NAACCR Short Course, Central Cancer Registries: Design, Management, and Use

Course objectives and description:

- To provide training in the design and management of central cancer registries and in the use of population-based data
- To increase the knowledge and confidence of personnel already active in central cancer registries
- To prepare other interested professionals with little experience in central cancer registries

This course is offered over two days preceding the NAACCR Annual Meeting to be held at the Hilton Riverside in New Orleans. It follows a format of lectures and discussions, utilizing a textbook compiled for the course.

Course content: Types of registries, Data set planning, Administration of central registries, Computerization, Case finding and abstracting, Death clearance, Quality control and data editing, Follow-up, Calculation and assessment of incidence rates, Calculation and assessment of survival analysis, Research uses of registry data, Use of registry data for cancer prevention and control

Course organizers: Herman R. Menck, MBA, Thomas C. Tucker, MPH, Kentucky Cancer Registry, Jerri Linn Phillips, CTR, National Cancer Data Base, Commission on Cancer. Faculty is drawn from subject experts within NAACCR.

Registration fee of \$275 includes all course materials and two snack per day. To register, use the conference registration form and payment instructions. Class size is limited. For more information contact June A. Harnacke, NAACCR Office Manager. Email: jharnack@naaccr.org

April 18-20, 2000 – North American Association of Central Cancer Registries Annual Meeting

The NAACCR 2000 Annual Meeting will be held in New Orleans, Louisiana at the Hilton Riverside. For more information contact June Harnacke, Office Manager, NAACCR, 2121 West White Oaks Drive, Suite C, Springfield, IL 62704-6495. For reservations call the Hilton Riverside Hotel call directly, (504) 561-0500.

- **April 16, 2000 - NAACCR -Year 2000 Pop! Advanced Workshop - 8:30 a.m. - 5 p.m.**
Training for the change to the Year 2000 population standard -- clear presentations of age-adjustment, their impact on cancer rates, and train-the-trainer approach to handling questions from consumers of cancer data. For more information contact June Harnacke, Office Manager, NAACCR, 2121 West White Oaks Drive, Suite C, Springfield, IL 62704-6495
- **April 16, 2000 - SEER*Prep Course - 12:30 p.m. - 5 p.m.**
The National Cancer Institute's Surveillance, Epidemiology and End Results (SEER) program has developed two Windows-based systems for analyzing cancer registry data. The first, SEER*Stat, allows for the calculation of rates, trends, frequencies, and survival rates. The second, SEER*Prep, is a data preparation tool that permits a user to format databases in SEER250 or NAACCR Analytic format containing individual tumor records for use in SEER*Stat.

Objectives: The course will be taught from a hands-on perspective with each participant working through a series of structured examples on individual PC's. Upon completion, participants should be able to use SEER*Prep to prepare their own registry data and state mortality data for use in SEER*Stat.

Requirements: Class participants must supply their own laptop computer, which must be Pentium with at least 21 MB RAM, running Windows 95, 98 or NT, and have either an internal or external CD-ROM drive. If possible, participants are encouraged to bring a data file from their registry for preparation in the class. Participants will be contacted before the class to ensure the data they provide are formatted correctly and contain an appropriate number of records. Content: SEER*Prep, Preparing and formatting incidence data, SEER 250 format, NAACCR format, Preparing and formatting mortality data, Using resulting database in SEER*Stat. Course organizer: Carol Kosary, MA, National Cancer Institute. Faculty: Faculty will consist of experts from the National Cancer Institute and Information Management Services, Inc. who were involved in the design and development of the system.

Registration: The course fee of \$50 includes course materials and an afternoon snack. To register, use the NAACCR 2000 Annual Conference Registration Form and payment instructions. This course is a Pre-Conference Workshop to the NAACCR 2000 Annual Conference to be held at the Hilton Riverside in New Orleans. Class size is limited. For more information contact June A. Harnacke, NAACCR Office Manager, Email: jharnack@naaccr.org

May 9-12, 2000 - National Cancer Registrar Association (NCRA) - 26TH ANNUAL EDUCATIONAL CONFERENCE, in Albuquerque, New Mexico. For more information contact NCRA (913) 438-6272 or email NCRA at: ncra-info@applmeapro.com

June 19-21, 2000 - Emory University in Atlanta, Georgia - Advanced Cancer Registry Training Program. A staff of recognized experts in cancer registration, surveillance, and control teaches this intensive and comprehensive training program. This Advanced Cancer Registry Training Program will focus on abstracting, staging, and coding really difficult; bizarre, rare, and unusual cancer cases; calculating incidence, prevalence, age-adjusted survival, and other rates; using registry data (preparation, analysis, annual reports, etc.); and using the Internet to locate comparable data and useful cancer information and resources. Participants must have attended the Principles Practice training program prior to registering for this advanced training (or have at least one year of experience working in a cancer registry). For complete details search the training program WebSite at <http://cancer.sph.emory.edu> or contact Steven Roffers, PA, CTR at (404) 727-4535.

July 24-28, 2000 & December 4-8, 2000 - The National Cancer Institute's Surveillance, Epidemiology and End Results (SEER) program, Principles of Oncology for Cancer Registry Professionals presented by Bolger Center for Leadership Development Potomac, Maryland. Registration fee: \$595.00. Principles of Oncology is a five-day training program in cancer registry operations and procedures emphasizing accurate data collection. The training program includes extensive site-specific, hands-on case abstracting and coding sessions using both full medical records and abstracts that demonstrate the many situations that registrars may face. Faculty includes April Fritz, BA, ART, CTR, Manager of Data Quality at the National Cancer Institute's SEER Program, april.fritz@nih.gov- For more information, contact the National Cancer Institute at (301) 496-8510 or contact April Fritz, ART, CTR, 6130 Executive Blvd, Room EPN343J, Rockville, MD 20852, phone: 301 402-1625, fax: 301 496-9949.

August 14-15, 2000 - The Florida Cancer Data System (FCDS) Annual Conference once again will be held in conjunction with Florida Cancer Registrar Association (FCRA) Annual Conference at the Melbourne Beach Hilton Oceanfront, Melbourne, FL. The Hilton is located just 10 minutes from Melbourne's International Airport at 3003 North Highway A1A, Indialantic, Florida 32903-2133. Tel: (407) 777-5000, Fax: (407) 777-3713. Registration fee is the same as last year, \$25.00. For registration information please contact Betty Fernandez or Bleu Herard at (305) 243-4600.

August 16-18, 2000 - FCRA Annual Conference will be at the Melbourne Beach Hilton, Oceanfront, Melbourne, FL, 3003 North Highway A1A, Indialantic, Florida 32903-2133 Tel: 1/407/777-5000, Fax: 1/407/777-3713. The cost of the conference is \$150 for FCRA Members registering before August 5, 2000 and \$175 for FCRA Members registering after August 5, 2000. Non-members registration is \$175 before August 5, 2000 and \$200 after August 5, 2000. For more information please, contact Lynn McGuill, at (321) 799-7125.

August 14-18, 2000 and November 6-10, 2000, Emory University in Atlanta, Georgia will conduct a training course entitled Principles and Practice of Cancer Registration, Surveillance, and Control. A staff of recognized experts in cancer registration, surveillance, and control teaches this intensive and comprehensive training program. The instructors are internationally recognized as leaders in their fields. Complete details are available on the training program web site at <http://cancer.sph.emory.edu> or contact Steven Roffers, PA, CTR at (404) 727-4535.

May 22-25, 2001 - National Cancer Registrar Association -NCRA Annual Conference will be held at the Hilton in the Walt Disney World Village, Orlando, Florida. Carol Johnson, president-elect is now looking for Florida Registrars and Central Registry volunteers to help staff the hospitality & registration booths as well as the cocktail reception. Any suggestions for local speakers, and volunteers are welcomed. Contact Steve Peace at 305-243-4602 or contact Carol Johnson, 301-402-6226, carol.johnson@NIH.gov or contact Edie Kutlus (302) 798-3978, Ekutlus@cppsinc.com, NCRA (913) 438-6272 or email NCRA at: ncra-info@applmeapro.com



DEADLINES

HOSPITALS

AUGUST 1999 cases are DUE by the end of FEBRUARY 2000

FREESTANDING FACILITIES

ALL AHCA Unmatched Cancer Records Listings and Abstracting Must be Completed
by JUNE 30, 2000.

REMINDER

FCDS requires that all facilities submit cases at least quarterly.


