February is Black History Month.

Did you know?? According to the American Cancer Society, the cancer death rate is about 33% higher for blacks than for whites. Black women are more likely to die from breast cancer than whites. And prostate cancer strikes and kills more African-American men than any other group of men, anywhere in the world. Researchers are now trying to unravel this mystery. Visit the ACS website at http://www2.cancer.org for more info.

FCDS IDEA has added the FCDS edits to the Single Record Abstract module. These edits closely match the ones in the NAACCR EDITS metafile. There are a few additional Florida-specific edits that are not in the NAACCR EDITS metafile. Most of these Florida-specific edits apply to the state-specific fields such as FCDS facility number and FCDS Smoking History.

When an individual abstract is submitted via the FCDS IDEA web page, the FCDS edits are run. If the abstract does not pass all the edits, an edit report is generated, allowing you to make corrections, and resubmit the corrected abstract. FCDS does not receive any data from the Single Record Abstract module until it has passed all edits. If your case fails a “forceable” or “overrideable” edit, the case will generate an edit report, allowing you to make any changes and then accept the case after you submit it a second time.

The individual records are batched Saturday morning and sent to your field coordinator, who will process the batch for: errors related to multiple records, cases that need forces and overrides, etc. Also, you can see which accession numbers you have already entered, and what batches have been generated during your upload processing by scrolling through the messages after you log into the FCDS IDEA system. Your field coordinator will send you any batch errors via regular mail until we have the FCDS online edits running. You can see a current list of FCDS edit messages by visiting our website: fcds.med.miami.edu, under “Downloads.”

Please remember to use the FCDS IDEA logout menu choice when you are done with the system. Since July 2001, there were 3,926 successful logins, but only 568 people used the logout menu selection. The system will time-out your session anyway after 30 minutes, but for added security, please remember to LOGOUT when you are through with your abstracting or upload session.

Mark you calendar for the next FCDS Incidence Abstracting Workshop in April 17-19, 2002.

FCDS conducts semi-annual workshops in incidence cancer case reporting. The three-day intensive course covers only the basics of cancer reporting for Florida.

The Incidence Abstracting workshop will cover 2001 FCDS Data Acquisition Manual, Introduction to Abstracting, Case Identification, Introduction to ICD-O-3 & ICD-O-2, Anatomy & the Spread of Cancer, Cancer Staging, Data Submission, Edits & Corrections, FCDS IDEA. There will be lots of hands on exercises and abstracting from medical records.

The workshop will be held in the Double Tree Hotel in Coconut Grove, FL. The cost of this workshop is $100.00. For more information please contact Bleu Herard 800-906-3034 / 305-243-4600 or Betty Fernandez at (305) 243-2635.
FDA APPROVES GLEEVEC FOR LEUKEMIA

On May 10, 2001, Gleevec (imatinib mesylate, also known as STI-571), was FDA-approved as a promising new oral treatment for patients with chronic myeloid leukemia (CML).

CML occurs when pieces of two different chromosomes break off and reattach on the opposite chromosome, forming the so-called “Philadelphia” chromosome. This chromosome translocation leads to a blood cell enzyme being “turned on” all the time. As a result, potentially life-threatening levels of both mature and immature white blood cells occur in the bone marrow and the blood. This new drug, Gleevec, a specific inhibitor of the translocation-created enzyme, works by blocking the rapid growth of white blood cells.

Patients with Leukemia may have the following symptoms: abdominal discomfort, bone and joint pains, and fatigue. Some patients are diagnosed when a routine blood test reveals a high white blood cell count with increased numbers of immature white blood cells.

Leukemia is a systemic disease and Stage at DX and FCDS Stage at First Contact is always coded to distant, “7”; Tumor Size = 999, Regional Nodes Positive = 99, Regional Nodes Examined = 99, Scope of Regional Node Surg = 9.


Education & Training


SEER recently introduced several new web-based training modules on their website with additional modules under development. When the site is completed it will contain 12 individual training modules, each covering a particular area of cancer registration.

The following SEER training modules are currently available:

SEER TRAINING MODULES
♦ SEER Summary Stage 2000
♦ ICD-O-3 Training module
♦ Cancer Registration
♦ Cancer Treatment
♦ Cancer as a Disease
♦ Casefinding — coming soon!
♦ Anatomy & Physiology & Diagnostic Test — coming soon!

INFORMATIONAL MODULES
♦ ICD-O-3 Satellite Training Video
♦ Summary Staging 2000 Manual

Future CTR Exam Dates

<table>
<thead>
<tr>
<th>Application Deadline</th>
<th>Exam Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>February 1, 2002</td>
<td>March 16, 2002</td>
</tr>
<tr>
<td>August 1, 2002</td>
<td>Sept. 14, 2002</td>
</tr>
</tbody>
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Visit the NBCR Website for Testing Information: http://nbcr.org

1998 FCDS ANNUAL REPORT

The 1998 FCDS Annual Cancer Report is now available on line at FCDS.med.miami.edu. The annual report publications began in 1995, providing updates on cancer incidence and mortality in Florida. The purpose of this report is to provide researchers, policy makers, health professionals and the public with an overview of the status of cancer in Florida.

The series was developed by the Bureau of Epidemiology of the Florida Department of Health in collaboration with the Florida Cancer Data System (FCDS) at the University of Miami School of Medicine, Sylvester Comprehensive Cancer Center. For more details visit our website at http://FCDS.med.miami.edu.

Q. Pathology says DCIS (ductal carcinoma in situ), cribriform and micro papillary. I coded morphology as 8523/3. Is this correct?

A. 8523/3 is INCORRECT. There was no mention of invasive cancer, so behavior cannot be coded as ‘/3’. The tumor is stated to be insitu /non-invasive. You do not change behavior to malignant just because you have multiple sub-types of the histology.

8507/2 is the correct code - intraductal micropapillary carcinoma. Rule F does not say anything about changing non-invasive cancers to invasive without mention of invasion.

ICD-O-3 Rules apply to cases Diagnosed on or after 1/1/01.

Education & Training

The principal distinction between skin (or melanoma) surgery codes 40 (Wide excision or re-excision of lesion or minor amputation) and 50 (Radical excision of a lesion) is the extent of surrounding tissue removed. The type of surgical procedure documented in the medical record operative notes can be used to assign the correct code.

American Cancer Society

ACS has the word out. This character has hit the airwaves in an ad campaign about colon cancer. The pest in the bulging red suit is a colon polyp—a small growth on the lining of the intestines that can lead to colon cancer. He brings humor and focus to a critical problem: few people 50 and older get the tests needed to find and even prevent colon cancer.

Found at an early stage, it is highly treatable. Adults should know the risks for colon cancer, know when to get tested, and do it. Visit the American Cancer Society website at http://www.cancer.org

COC FLASH UPDATE

FURTHER UPDATE ON CODING SURGERY FOR MELANOMA THROUGH 2002

The American Cancer Society website at http://www.cancer.org has the word out. This character has hit the airwaves in an ad campaign about colon cancer. The pest in the bulging red suit is a colon polyp—a small growth on the lining of the intestines that can lead to colon cancer. He brings humor and focus to a critical problem: few people 50 and older get the tests needed to find and even prevent colon cancer. Found at an early stage, it is highly treatable. Adults should know the risks for colon cancer, know when to get tested, and do it. Visit the American Cancer Society website at http://www.cancer.org
### Education & Training

#### CoC March 2002 Workshop Canceled

The year 2003 will have many important changes related to the CoC’s standards, “ROADS,” and the AJCC Collaborative Stage and TNM staging. For this reason, the CoC has decided that it would be more beneficial to their course participants to wait until these changes are finalized and nearing implementation before they continue any further instructional courses. While CoC still plans to offer instructional presentations of these changes during the NCRA meeting, they will postpone more complete educational courses until a later date. The CoC will contact those who have already registered for the March Workshop, and a full refund will be provided. If you have any questions regarding the refund, please contact Mary Ann Marts at mmarts@facs.org.

#### FCDS Incidence Abstracting Workshop, April 17-19, 2002

The next FCDS Incidence Abstracting Workshop! FCDS conducts semi-annual workshops in incidence cancer case reporting. The three-day intensive course covers only the basics of cancer reporting for Florida. The April 17-19, 2002 workshop will cover all of the 2001 reporting requirements. The cost of this workshop is $100.00. The workshop will be held in Double Tree in Coconut Grove, FL. For more information please contact Bleu Herard 305-243-4600. Program registration and flyers will be available on the training program web site at [http://cancer.sph.emory.edu](http://cancer.sph.emory.edu) or contact Steven Roffers, PA, CTR at (404) 727-4535.

#### NCRA Annual Educational Conference, May 21 - 24 2002

The National Cancer Registrars Association will host the Annual NCRA Educational Conference at the Opryland Hotel in Nashville, TN on May 21-24, 2002. The theme is “Data Driven, Knowledge Bound, Destiny: The Cure” Visit the NCRA website: [www.ncra-usa.org](http://www.ncra-usa.org) for more information and a PowerPoint on the Internet. Email may be sent as follows: info@ncra-usa.org  NCRA telephone numbers are 703-299-6640 (phone); 703-299-6620 (fax).

#### NAACCR Annual Conference, June 11 - 13, 2002

The 2002 meeting of the North American Association of Central Cancer Registries will be held at the Westin Harbour Castle Hotel in Toronto, Ontario, Canada from June 11-13, 2002. The theme is “Achieving Equity in Cancer Control.” In addition to the main conference, there will be pre- and post-workshops on registries operations, research and medical informatics. Watch the News & Events section of NAACCR web site for more details as they become available, [http://www.naaaccr.org](http://www.naaaccr.org). For more information, please contact Darlene Dale at Cancer Care Ontario, (416) 217-1228, or email Dale@cancercare.on.ca.

### Principles and Practice of Cancer Registration, Surveillance, and Control, November 4-8, 2002

Principles and Practice of Cancer Registrations, Surveillance, and Cancer Control will be held at the Emory University in Atlanta, Georgia November 4-8, 2002.

A staff of recognized experts in cancer registration, surveillance, and cancer control teaches this intensive and comprehensive training program.

The instructors are accomplished adult trainers and are internationally recognized as leaders in their fields.

Complete details are available on the training program web site at [http://cancer.sph.emory.edu](http://cancer.sph.emory.edu) or contact Steven Roffers, PA, CTR at (404) 727-4535.

#### FCRA/FCDS Combined Annual Conference, July 31 - August 2, 2002

The Florida Cancer Registrars Association (FCRA) and the Florida Cancer Data System (FCDS) will co-host a combined Annual Educational Conference at the Hyatt Sarasota on Sarasota Bay from July 31, 2002 to August 2, 2002. The cost of the conference is $75. For more information, please contact Jamie Suarez, CTR, FCRA Program Chair at Jsuarez@uhs.com or Bleu Herard, FCDS at 305-243-4600. Program registration and flyers will be mailed to all FCRA members as well as all FCDS-identified facilities, contractors and courtesy mailing parties in March.

#### Advanced Cancer Registry Training Program, August 5 - 7, 2002

The Advanced Cancer Registry Training Program specifically covers: abstracting, staging, and coding really difficult cancer cases; 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 website [www.sph.emory.edu/GCCS/training/practice/index](http://www.sph.emory.edu/GCCS/training/practice/index) prior to registering for this advanced training (or have at least one year of experience working in a cancer registry). Registration Fee: $500. The course will be held on the campus of Emory University in the Rita Anne Rollins Conference Room located on the 8th Floor of the Rollins School of Public Health, 1518 Clifton Road, NE, Atlanta, GA 30322. For further information about the training program, accommodations or travel arrangements, contact: Steven Roffers, PA, CTR, Phone: 404-727-4535, Fax: 404-727-7261, E-mail: sroffer@sph.emory.edu

**REMINDER**

CTR’s Continuing Education and Certification Hours are due by February 28, 2002.

Download the blue form or submit online by visiting [http://www.ncra-usa.org/](http://www.ncra-usa.org/)
QUALITY CONTROL - Every 25th Record Sampling Report

The FCDS QC staff is currently reviewing reports from the 3rd & 4th Quarter for the Every 25th Record Sampling Report. These reports provide FCDS & you with a visual review of at least every 25th record that FCDS receives from every facility. The report contains all the data downloaded to FCDS by your facility. A copy of each of the cases reviewed will be mailed to you. FCDS asks that you review each case report and provide us with feedback on any comments or questions noted on any of the reports.

The QC staff is also currently performing on-site re-abstracting audits in randomly selected facilities.

You will be contacted if your facility has been selected for an audit.

UPDATE - 2001 FCDS DATA ACQUISITION MANUAL

A few minor errors/data item changes & clarifications have been identified. The 2002 DAM Errata will be mailed out soon. Thanks.

DEADLINES

HOSPITALS

Hospitals should now be reporting August 2001 cancer cases

Reminder: All Hospitals should be at least for 70% complete for the 2001 Reporting Year by the end of February, 2002

AMBULATORY CENTERS CANCER REPORTING PROGRAM (ACCRP)

Ambulatory Centers can expect AHCA 2000 patient encounters sometime this summer.