



FLORIDA CANCER DATA SYSTEM

January 2006 Monthly Memo

WHAT'S NEW:

THE FOLLOWING INFORMATION IS CURRENTLY AVAILABLE ON THE FCDS WEBSITE.

- **FCDS TELECONFERENCES, DATA ACQUISITION MANUAL, JEAN BYERS AWARD**
(Downloads tab)
- **EDUCATIONAL RESOURCES, REGISTRAR RESOURCES, AND FCDS WEB MODULES**
(Edu & Training tab)
- **FCDS ARCHIVE OF MONTHLY MEMOS AND THE REGISTRARS**
(Newsletters tab)
- **FLORIDA STATUTES**
(Law & Rules tab)

FCDS MAILING INFORMATION

US Postal Service mail including Express mail, Priority mail, and Certified mail should be sent to the following PO Box address:

FCDS/University of Miami
Miller School of Medicine
P. O. Box 016960 (D4-11)
Miami, FL 33101

FCDS STREET ADDRESS SHOULD ONLY BE USED FOR COURIER PACKAGES (Federal Express, UPS, Airborne Express)

FCDS/University of Miami
Miller School of Medicine
1550 NW 10th Ave, Fox Bldg,
Room 410
Miami, FL 33136



News & Information

NAACCR VERSION 11 RECORD LAYOUT:

FCDS 2006 IMPLEMENTATION SCHEDULE

(Applies to facilities submitting full cancer abstracts, not Path or RT data)

PROCESS OBJECTIVES:	TIMELINE
Review and design changes required to database and software to move from NAACCR V10.2 to V11	On-going. Completion scheduled for February 2006.
Assessment of impact of updating to V11. Report will show impact on data collection by the hospital registrars.	March 1st, 2006
Revise and distribute to all cancer record abstractors and cancer registry software vendors all pertinent pages of revised FCDS Data Acquisition Manual and software enhancement requirements to accommodate the revised NPCR required data set.	Scheduled for May 2006.
Plan implementation schedule, setup teleconference with vendors/registrars to discuss implementation schedule and software requirements, follow up conference call with letters summarizing what was agreed upon.	
Alter Database, modify and test all Central Registry software for required changes to the NPCR required data set.	Scheduled completion June 15 th , 2006.
Require cancer registry software vendors to meet revised NPCR required data set. Cease collection of NAACCR V10.2.	Scheduled implementation on July 1 st , 2006.
Finish all V10.2 processing but allow uploading of V11 data during this timeframe.	Scheduled for July 1 st through July 14 th , 2006.
Begin collecting the revised NPCR required data set.	Scheduled to begin collecting on July 15 th , 2006 all records regardless of diagnosis date in Version 11 format.



News & Information



RECOGNITION FOR FLORIDA'S NEW CERTIFIED TUMOR REGISTRARS



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC) K52
Atlanta, Georgia 30341

November 15, 2005

TO: NPCR Program Directors/State Association Presidents

FROM: Cancer Surveillance Branch, Division of Cancer Prevention and Control

RE: Recognition of New Certified Tumor Registrars in your state

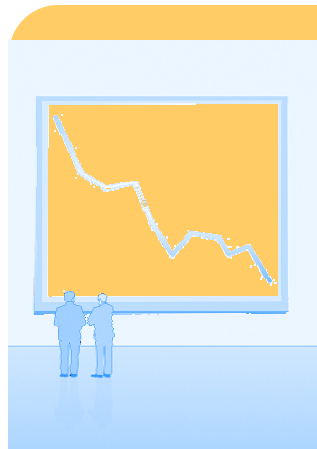
On behalf of the Centers for Disease Control and Prevention, Division of Cancer Prevention and Control, National Program of Cancer Registries (CDC-NPCR), we would like to take this opportunity to congratulate the individuals in your state who recently passed the certification examination sponsored by the National Cancer Registrars Association (NCRA) and are now recognized as a Certified Tumor Registrar (CTR).

As part of the health care team, registrars collect, maintain, and analyze information about the success of cancer treatment. By managing this cancer patient data, registrars help to assure that the patient receives the highest quality of care possible. We, at CDC-NPCR, support the efforts of the NCRA in educating and promoting cancer registry professionals and consider the registrar to be an important factor in our nation's cancer control efforts. The NCRA's certification process and continuing education programs ensure that high quality standards are maintained. Contributions from CTRs across the United States have played an important role in building a strong nationwide cancer registry infrastructure for central processing, enhancing, and aggregating high quality cancer incidence data in a timely manner enabling new efforts to prevent and control cancer.

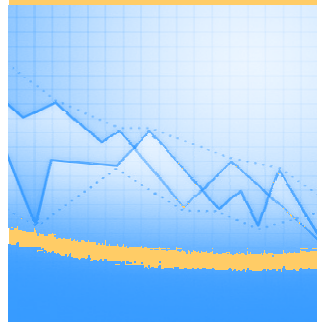
We appreciate the contributions of the cancer registry community and extend our thanks and congratulations for a continued job well done. You are encouraged to convey our congratulations to these new CTRs by forwarding this letter to the respective individuals, their facility administrator, the local media, and/or the governor of your state and/or by publishing this letter in your program's newsletter.

Peter W. Clark	Coral Springs, FL
Kathleen Doney	West Palm Beach, FL
Kellie S. Garland	Lakeland, FL
Gema G. Midence	Miami, FL
Rosemary Otruba	Auburndale, FL
Kimberly D. Perdue	Milton, FL
Sandra M. Schluessler	Cape Coral, FL

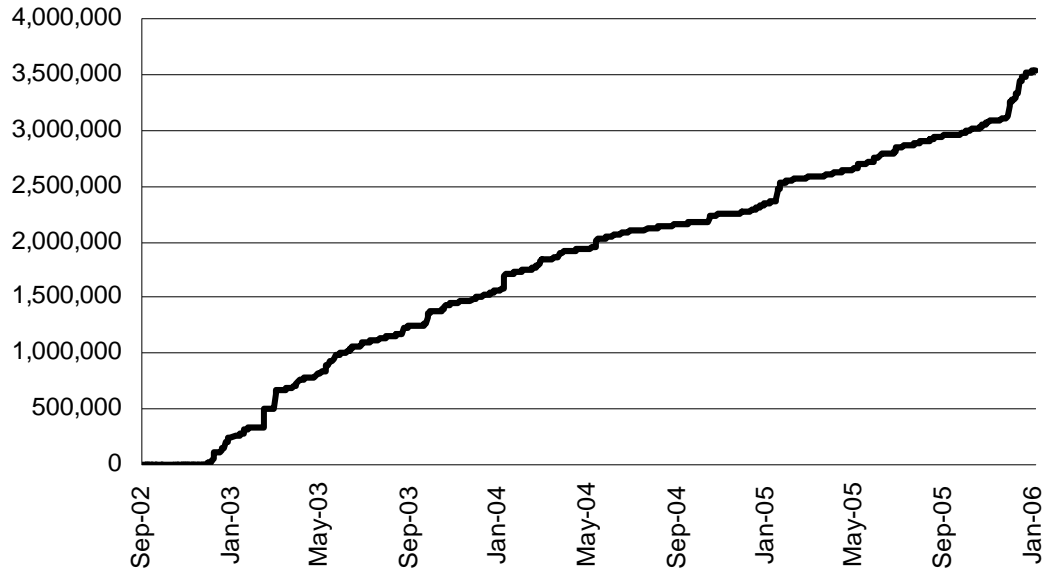
Pathology & Radiation Reporting



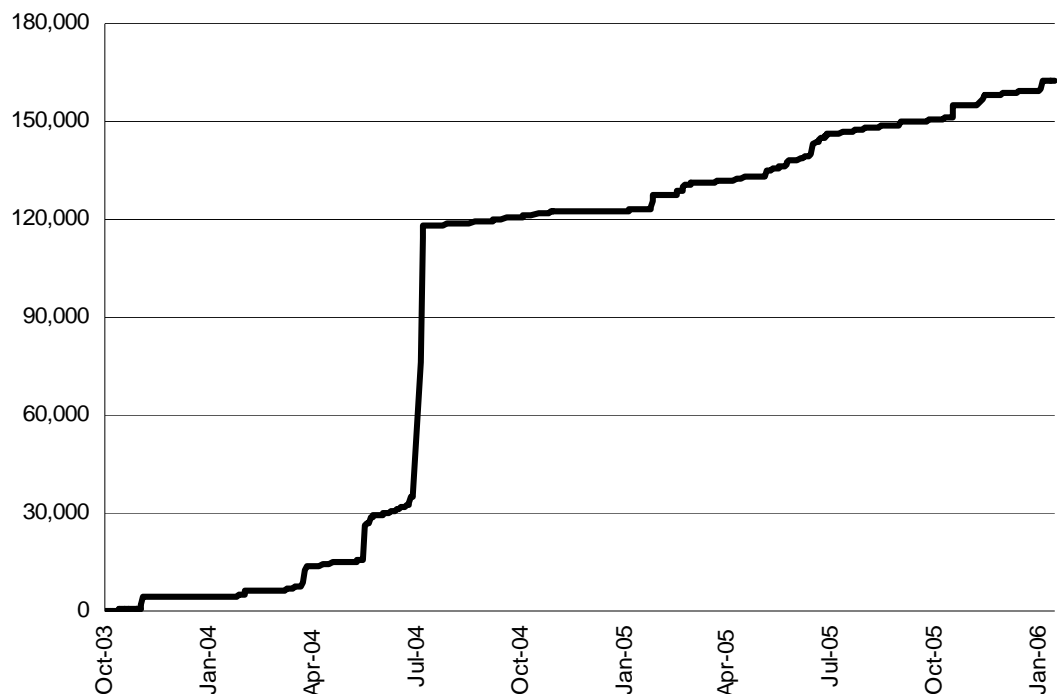
Florida Cancer Data System Pathology Labs & Radiation Therapy Centers Reporting



Path



Radiation





Education and Training

FCDS 2006 TELECONFERENCE SERIES

On January 30th and 31st, 2006, FCDS hosted two phone conferences to assist hospitals and ambulatory surgery centers with the AHCA 2004 audit process. The PowerPoint slide presentations for these two conferences are available on the FCDS website, <http://www.fcds.med.miami.edu>, under Downloads.

On Tuesday, February 28, 2006, FCDS will host a phone conference entitled Quality Control Sampling Reports Findings (October-December 2005). The teleconference will be free of charge.

The call in Information is as follows:

Date: Tuesday, February 28, 2006
Time: 2:00 p.m. – 4:00 p.m. EST
Dial In Number: 877-322-9654
Participant Code: 784678

PowerPoint slide presentations will be available on the FCDS Website, <http://www.fcds.med.miami.edu>, as an adjunct to the conferences, as well as the instructions to access the system for the Question and Answer session at the end of the presentations. We recommend that the participants download the presentations and follow the slideshow from a computer during the call. For those participants that do not have access to the FCDS Website, please contact FCDS for a copy of the slideshow.

FCDS is please to provide this type of educational format as a method for providing training in cancer information and reporting requirement issues in the state of Florida. If you have any suggestions for future topics, please submit them to FCDS at 1-800-906-3034 or e-mail Megsys Herna at mherna@med.miami.edu. Thank you.

NAACCR CTR EXAM READINESS INSTITUTE.

Little Rock, Arkansas

February 9-10, 2006

Sponsored by: NAACCR

- Prepare eligible candidates to take the Certified Tumor Registrar (CTR) exam.
- Increase participants knowledge and understanding of
 - o Cancer registry organization and operation
 - o Anatomy, physiology, and histology
 - o Abstracting and coding
 - o Statistics and epidemiology
 - o Computer principles
 - o ICD-O-3
 - o Staging systems
 - Collaborative Staging
 - AJCC Cancer Staging, 6th Edition
- Answer participants questions about the CTR exam

Please visit NAACCR website for more information <http://www.naacr.org>.

**EDUCATION
AND
TRAINING**



Education and Training

NPCR EDUCATION AND TRAINING SERIES: HOW TO COLLECT HIGH QUALITY CANCER SURVEILLANCE DATA

March 20-23, 2006
The William F. Bolger Center for Leadership
Development
Potomac, MD

April 3-6, 2006
Marriott Evergreen Conference
Resort
Atlanta, GA

EDUCATION AND TRAINING

Course Description:

The workshop will focus on gray areas in cancer data abstracting relevant for data collectors in both incidence and population-based cancer registries. Topics will include the NPCR quality assurance audit findings, coding complex and compound histology with ICD-O-3, Collaborative Staging, collection of treatment data, site-specific abstracting and coding as well as use of Registry Plus software products.

Reference Materials:

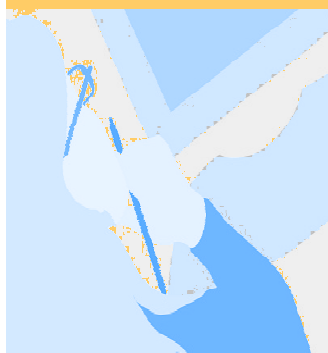
Attendees will need to bring the following materials with them to the workshop:

- International Classification of Diseases for Oncology, Third Edition (ICD-O-3)
- Collaborative Staging Manual and Coding Instructions, Version 01.02.00 (If you don't want to travel with the entire manual, bring the breast, lung, colon, rectosigmoid/rectum, prostate, melanoma of skin, and brain and cerebral meninges, other parts of central nervous system chapters. Also bring the card that includes the standard tables.

Instructor:

Shannon Vann, CTR;
Program Manager of Education and Training; NAACCR, Inc.

Please visit the NAACCR website for details on the above training at www.naacccr.org
under the heading of Education and Training





Deadlines & Reminders

FCDS 2005 QUALITY ASSURANCE AUDIT RECONCILIATION PROCESS

In 2005, thirty-one facilities were randomly selected to participate in the Quality Assurance Audit, in which casefinding and re-abstracting were the two major components. FCDS views this audit as an essential activity evaluating data for high quality, completeness and timeliness.

All facilities audited have already received a packet containing Casefinding Logs and Reconciliation Request forms as part of the Quality Assurance Audit Reconciliation Process. The Casefinding Logs were compiled by the auditor(s) of the Sein Group, Inc. that represent “missed cases” or cases not reported to FCDS by the audited facilities. All the identified cases must be reviewed to determine if the cases are reportable or not reportable to FCDS. If they are reportable, an abstract for each missed case must be submitted to FCDS no later than February 10, 2006. If they are not reportable, the facility must indicate the reason why they are not reportable on the form and return this information to FCDS no later than February 10, 2006. *Note: A Casefinding Log not enclosed in this packet indicates that the auditor(s) did not find any missed cases during the casefinding portion of the audit.*

The Reconciliation Request forms summarized the comparison of data items coded by the auditor(s) during the re-abstracting portion of the audit to the data originally submitted to FCDS by the audited facility through the regular cancer reporting process. If any discrepancies were found, the field on the report containing the discrepant data item will be preceded with one asterisk (*) indicating the discrepancy. The facilities must review all forms and reply in the following way:

1. If the original submission to FCDS was in error, you would write **AGREE** on the Reconciliation Request form OR
2. If you disagree with the auditors, perhaps because your source documents may have been more complete than the ones reviewed by the auditors, write **DISAGREE** on the Reconciliation Request form and provide a brief explanation indicating the source of any supporting information, such as, pathology reports, Op reports, etc.

Completed Reconciliation Request forms and any missed cases must be submitted to FCDS no later than February 10, 2006.

The 2006 Quarterly Assurance Audit will be conducted in the Fall. All facilities that will participate in the 2006 Quarterly Assurance Audit will be notified by June .



Deadlines & Reminders

FAPTP/FCDS QUALITY CONTROL REVIEW

In an effort to ascertain the completeness and the quality of the pediatric cancer data collected by FCDS, the FCDS database was matched with the data from FAPTP (Florida Association of Pediatric Tumor Program, Inc.) for diagnoses years 2001 through 2003. Records were linked at the patient and at the tumor level. At the patient level, the records were matched by first name, last name, sex, date of birth, and county of residence. At the tumor level, the primary site, the morphology, and the date of diagnosis were used to determine the common tumors. A listing of records that were reported to FAPTP that did not match to an FCDS record and/or copies of abstracts that may have primary site and/or morphology discrepancies were mailed to the hospitals where missed cases and site and/or morphology discrepancies were found for resolution. All forms and abstracts must be completed and submitted to FCDS according to the current reporting guidelines and record layout no later than February 17, 2006.

These Quality Assurance reviews are important to FCDS because they assess case assessment to standardized interpretation of data definitions, coding rules and guidelines, policies and procedures and serve to identify areas that may require further education and training.

AHCA AUDIT- 2004 CASES

HOSPITALS

Upon review of the Unmatched Cancer Records Request 2004 listing, any case found to meet the FCDS Cancer Case Reporting Requirements outlined in Section I of the 2005 FCDS DAM and found not to have been previously reported must be reported to FCDS by February 28, 2006.

AMBULATORY SURGERY CENTERS

Any facility with fewer than 35 cancer cases identified on the Unmatched Cancer Records Request 2004 listing needs only submit copies of patient records to FCDS for each of the cases on the list. A Batch Transmittal Form must be included with any chart copies submitted. The following reports (if available) from each patient record must be submitted by March 15, 2006: Face sheet, Summary, History & Physical, Operative Reports, Consultation Reports, Pathology Reports, Radiology Reports, Laboratory Reports and all other pertinent reports.

Any facility with greater than 35 cancer cases on the "AHCA Ambi Unmatched Cancer Records Request" list must determine whether or not each of the identified case records must be reported to the FCDS by referring to the FCDS reporting criteria outlined in Section I of the 2005 FCDS Data Acquisition Manual. If the case meets the FCDS reporting criteria, a full case abstract must be submitted to FCDS by March 15, 2006.





FCDS Florida Cancer Data System
A Joint Project of the Sylvester Comprehensive Cancer Center and the Florida Department of Health

PROJECT DIRECTOR:

Lora Fleming, MD, PhD

DEPUTY PROJECT DIRECTOR:

Jill Mackinnon, PhD, CTR

ADMINISTRATIVE DIRECTOR:

Gary M. Levin

EDITORIAL STAFF:

Melissa K. Williams

CONTRIBUTORS:

Megsys C. Herna, BA, CTR

UHSylvester
Comprehensive Cancer Center

HEALTH
FLORIDA DEPARTMENT OF HEALTH

MILIFR
FLORIDA INSTITUTE OF LIFE SCIENCES

Florida Cancer Data System

Cancer Reporting Completeness Report

TOTAL NUMBER OF CASES IN THE FCDS MASTERFILE AS OF DECEMBER 31, 2005

Total number of New Cases added to the FCDS Master file in December 2005: 14,562

The figures shown below reflect initial patient encounters (admissions) for cancer by year.

ADMISSION YEAR	HOSPITAL	RADIATION	AMBI/SURG	PHYSICIAN OFFICE	DERM PATH	DCO	TOTAL CASES	NEW CASES
2005	45,903	1,061	126	0	31	Pending	47,121	12,368
2004	146,752	3,837	772	5	509	Pending	151,875	1,764
2003	148,018	4,615	3,018	488	661	2,741	159,541	430

		<u>Actual</u>	<u>Expected</u>
% Complete for:	2005	31%	50%
	2004	100%	100%
	2003	100%	100%

**Expected % based on 152,000 reported cases/year*

DR. MARTIN LUTHER KING, JR. DAY OBSERVANCE JANUARY 16TH

