

FEBRUARY/

MARCH

2009

MONTHLY
JOURNAL OF
UPDATES AND
INFORMATION

Florida Cancer Data System

Monthly Memo

What's New:

The following information is currently available on the FCDS website.

- FCDS Facility Change Form
- NAACCR Webinar: Collecting Cancer Data: Central Nervous System on **4/02/2009**. Session #7 of 8 is being held at 3 Florida facilities and requires registration
- FCDS Register Vol. 42
- 2004 Florida Annual Cancer Report: Incidence and Mortality



Happy
St. Patrick's Day



2008

Jean Byers Award for Excellence in Cancer Registration

FCDS proudly awards the 2008 Jean Byers Award for Excellence in Cancer Registration to one-hundred thirty-three (133) Florida hospitals in accordance with national standards for evaluating timeliness and completeness. One-hundred ninety-five hospitals were eligible. To be the recipient of the Jean Byers Award for Excellence in Cancer Registration, the hospital must meet all deadlines with respect to the 2006 cancer case reporting. On behalf of the Florida Department of Health and the Florida Cancer Data System, thank you to every Cancer Registrar at these hospitals for their dedication and for a job well done.

Following is a listing of Florida hospitals receiving the **2008 Jean Byers Award for Excellence in Cancer Registration:**

1300 - GULF COAST MEDICAL CTR
1405 - SHANDS STARKE

1505 - CAPE CANAVERAL HOSPITAL

1508 - PALM BAY COMMUNITY HOSPITAL

1547 - WUESTHOFF MEDICAL CTR- ROCKLEDGE

1548 WUESTHOFF MEDICAL CTR MELBOURNE

1601 WESTSIDE REGIONAL MED CTR

1606 MEMORIAL REGIONAL CANCER CTR
1607 NORTH BROWARD MEDICAL CTR

1609 IMPERIAL POINT MEDICAL CTR

1610 MEMORIAL HOSPITAL PEMBROKE

1636 HOLY CROSS HOSPITAL

1645 CORAL SPRINGS MEDICAL CTR
1649 MEMORIAL HOSPITAL MIRAMAR

1676 PLANTATION GENERAL HOSP

1681 NORTHWEST MEDICAL CTR

1686 FLORIDA MEDICAL CTR

1687 UNIVERSITY MEDICAL CTR

1688 MEMORIAL HOSPITAL WEST

1836 PEACE RIVER REGIONAL MEDICAL CTR
1846 CHARLOTTE REGIONAL MEDICAL CTR

1900 SEVEN RIVERS REGIONAL MEDICAL CTR

1905 CITRUS MEMORIAL HOSPITAL

2000 ORANGE PARK MEDICAL CTR

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For advanced FCDS IDEA Abstract Entry users, these keyboard shortcuts will help you abstract at top speed:

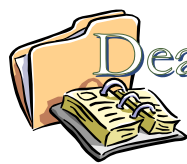
Tab - Move forward from field to field on same page

Shift-Tab - Move backward from field to field on same page

Alt-DownArrow - While in a drop down listbox such as City (it highlights and turns blue), Alt-DownArrow brings up the choices. *DownArrow* to your choice and press *Tab* to select your choice and go to next field.

Spacebar - While on a button such as "Copy to Address Current" (it outlines in black), press Spacebar to press/activate the button. Since the Enter key behavior was recently changed in Abstract Entry to avoid mistaken Submits, use Spacebar to activate buttons.

F11 - Turn on/off full screen mode. In Internet Explorer web browser, the F11 button makes the browser window full screen, showing more of the webpage.



Deadlines/Updates/Reminders

THE QC VISUAL REVIEW OF EVERY 35TH RECORD WAS INCREASED TO ONE OF EVERY 25TH- EFFECTIVE FEBRUARY 1, 2009

The QC Sampling Report automatically selects at least one of every 35th case that successfully passes the FCDS Edits and makes it into the FCDS master file. Effective with cases submitted on or after February 1st, 2009, the computer will automatically select one of every 25th case. For facilities reporting fewer than 25 cases, at least one case will be selected at random.

The review remains the same. Abstracts with questionable coding discrepancies, text versus code discrepancies, or coded data items with omitted supporting required text will be sent to each reporting medical facility via the web. Some cases will require additional documentation to verify/validate the coding. The online process also remains unchanged. Please contact the Quality Control Field Coordinators if you have any questions about the review process at 305-243-4600.

THE AHCA 2007 FOLLOW-BACK RECORDS ARE NOW AVAILABLE ONLINE FOR REVIEW. THE DEADLINE IS MAY 15, 2009.

The AHCA 2007 follow-back records are now available online for review.

The deadline is May 15, 2009.

FCDS completed the matching of the 2007 In-Patient Discharges reported by the facilities' Finance-Billing/Medical Records Department to the Agency for Health Care Administration (AHCA). All records with principal or secondary diagnosis of cancer were linked to the FCDS database.

There are FCDS AHCA follow-back records for year 2007 available online for review. FCDS is now sending email notifications of records to review instead of mailing paper. If you do not have the FCDS IDEA AHCA Follow-back menu, you may request it or delegate it to another person (if you are a facility administrator/cancer registry manager).

What You Need To Do: You must review each case online. If the case is found not to be reportable, assign the appropriate disposition code; assign disposition code 07, accession number, and sequence number if the record was previously reported to FCDS, then press the Submit button. In addition, upon review, any case found to meet the FCDS Cancer Case Reporting Requirements outlined in Section I of the FCDS DAM and found not to have been previously reported must be reported to FCDS using IDEA. Assign a disposition code of 01, accession number, and sequence number to the reportable cases and press the Submit button.

The deadline to complete the review and submission of any missed cases is May 15, 2009.

Please keep in mind that all audits conducted by FCDS are dictated and closely monitored by the Florida Department of Health. Should you have any questions, please contact your Field Coordinator at (305) 243-4600. Thank you.

FCDS Edit #305- Clarification

If site = C619 and RX Summ Surg Prim Site not = 30, 50, 70, 80, or 90, then CS SSF 3 must = 096, 097, or 098.

Surgery codes 30, 50, 70, 80, or 90 for a prostate primary state that some form of a prostatectomy or a surgery, not otherwise specified was performed as part of the first course of treatment. Surgery code 99 means unknown if there was surgery performed.

On the other hand, CS SSF 3 codes 096, 097, or 098 indicate that there was no prostatectomy, unknown, or it was not part of the first course of treatment. Note that code 099 in the SSF3 field indicates that there was a prostatectomy performed and it does not mean an “unknown” code value.

Using code 99 in the surgery field and a 099 in the SSF 3 is a contradiction of statements. When the surgery is 99, the most appropriate SSF 3 code to use is 096.

SURGERY CODES

- 30 **Subtotal, segmental, or simple prostatectomy**, which may leave all or part of the capsule intact
- 50 **Radical** prostatectomy, NOS; **total** prostatectomy, NOS
Excised prostate, prostatic capsule, ejaculatory ducts, seminal vesicle(s) and may include a narrow cuff of bladder neck.
- 70 **Prostatectomy WITH** resection in continuity with **other organs**; pelvic **exenteration**
Surgeries coded 70 are any prostatectomy WITH resection in continuity with any other organs.
The other organs may be partially or totally removed. Procedures may include, but are not limited to, cystoprostatectomy, radical cystectomy, and prostatectomy.
[NOTE: In continuity with or “en bloc” means that all of the tissues were removed during the same procedure, but not necessarily in a single specimen] Da Vinci prostatectomy would be coded as any other prostatectomy depending on the extent of the procedure codes 50 -80 per FORDS.
- 80 Prostatectomy, NOS
- 90 Surgery, NOS
- 99 Unknown if surgery performed.

CS SSF 3 CODES

- 096 Unknown if prostatectomy done
- 097 No prostatectomy done within first course of treatment
- 098 Prostatectomy performed, but not considered first course of treatment because, for example; disease progression.
- 099 Prostatectomy done:
 Extension unknown
 Not documented in patient record
 Primary tumor cannot be assessed

FCDS Mail-File Change Form



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

Revised: March 30, 2009

FCDS FACILITY CHANGE FORM

Please complete this form if you have any facility changes. Place a check in the appropriate box in front of the item that needs to be changed. Complete the item with the updated information. Initial and date the completed form and return via fax (305)-243-4871 to your Field Coordinator. You may access and print the FCDS Facility Change form on the FCDS website at: <http://fcds.med.miami.edu/inc/downloads.shtml>

Update: ☐ Facility ☐ Vendor ☐ Courtesy ☐ Contractor ☐ County Health Dept. ☐ Physician

Add: ☐ Facility ☐ Vendor ☐ Courtesy ☐ Contractor ☐ County Health Dept. ☐ Physician

Delete: ☐ Facility ☐ Vendor ☐ Courtesy ☐ Contractor ☐ County Health Dept. ☐ Physician

Date Facility Closed: _____ **AHCA Number:** _____

CLIA#: _____ **NPI Number:** _____

FCDS Facility #: _____ (Leave blank if adding a new facility) **Option:** _____ (See Reverse For Codes)

☐ **Facility/Vendor/Courtesy/Contractor/Name:** _____

☐ **Registrar Name: (Ms. /Mrs. /Mr.)** _____

Credentials: _____ **Title:** _____

☐ **Supervisor Name: (Ms. /Mrs. /Mr.)** _____

Credentials: _____ **Title:** _____

☐ **Administrator Name: (Ms. /Mrs. / Mr.)** _____

Credentials: _____ **Title:** _____

☐ **Mailing Address:** _____

City: _____ **State:** _____ **Zip:** _____ **County:** _____

☐ **Physical Address:** _____

City: _____ **State:** _____ **Zip:** _____ **County:** _____

☐ **Phone Number: ()** _____ ☐ **Fax Number: ()** _____

E-Mail Address: _____

NOTES: _____

COMPLETED BY: _____ **DATE:** ____/____/____

ENTERED BY: _____ **DATE:** ____/____/____

2008 Jean Byers Award for Excellence in Cancer Registration

Continued from page 1

2246 LAKE CITY MEDICAL CTR	3978 TOWN AND COUNTRY HOSPITAL
2305 JAMES M JACKSON MEMORIAL HOSPITAL	3988 SOUTH BAY HOSPITAL
2306 HOMESTEAD HOSPITAL	4170 SEBASTIAN RIVER MEDICAL CTR
2336 BAPTIST HOSPITAL OF MIAMI	4206 JACKSON HOSPITAL
2338 MERCY HOSPITAL	4516 LEESBURG REGIONAL MEDICAL CTR
2348 DOCTORS HOSPITAL	4546 SOUTH LAKE HOSPITAL
2349 HIALEAH HOSPITAL	4590 LEESBURG REGIONAL MEDICAL CTR NORTH
2359 MIAMI CHILDRENS HOSPITAL	4601 CAPE CORAL HOSPITAL
2374 JACKSON NORTH MEDICAL CTR	4605 LEE MEMORIAL HEALTH SYSTEM
2376 SOUTH MIAMI HOSPITAL	4645 GULF COAST HOSPITAL
2377 WESTCHESTER GENERAL HOSPITAL	4647 LEHIGH REGIONAL MEDICAL CTR
2383 PALMETTO GENERAL HOSPITAL	4670 SOUTHWEST FL REGIONAL MEDICAL CTR
2405 DESOTO MEMORIAL HOSPITAL	4690 LEE MEMORIAL HOSPITAL HEALTHPARK
2605 BAPTIST MEDICAL CTR BEACHES	4770 CAPITAL REGIONAL MEDICAL CTR
2606 SHANDS JACKSONVILLE MEDICAL CTR	5100 BLAKE MEDICAL CTR
2636 BAPTIST REGIONAL CANCER CTR-JAX	5105 MANATEE MEMORIAL HOSPITAL
2638 ST VINCENTS MEDICAL CTR	5110 LAKEWOOD RANCH MEDICAL CTR
2648 MEMORIAL HOSPITAL JACKSONVILLE	5200 OCALA REGIONAL MEDICAL CTR
2650 MAYO CLINIC HOSPITAL	5202 WEST MARION COMMUNITY HOSPITAL
2672 WOLFSON CHILDRENS HOSP NCC	5205 MUNROE REGIONAL MEDICAL CTR
2700 WEST FLORIDA HOSPITAL	5390 MARTIN MEMORIAL HOSPITAL SOUTH
2736 BAPTIST HOSPITAL OF PENSACOLA	5471 MARINERS HOSPITAL
2738 SACRED HEART HOSPITAL	5505 BAPTIST MEDICAL CTR NASSAU
3505 FLORIDA HOSPITAL WAUCHULA	5606 TWIN CITIES HOSPITAL
3701 OAK HILL HOSPITAL	5607 NORTH OKALOOSA MEDICAL CTR
3715 SPRING HILL REGIONAL HOSPITAL	5670 FORT WALTON BEACH MED CTR
3805 HIGHLANDS REGIONAL MEDICAL CTR	5805 FLORIDA HOSPITAL APOPKA
3836 FLORIDA HOSPITAL HEARTLAND DIVISION	5836 FLORIDA HOSPITAL CANCER INST SOUTH
3903 BRANDON REGIONAL HOSPITAL	5849 FLORIDA HOSPITAL EAST ORLANDO
3932 H LEE MOFFITT CANCER CTR	5850 WINTER PARK MEMORIAL HOSPITAL
3937 ST JOSEPH HOSPITAL	5851 ORLANDO REGIONAL LUCERNE HOSPITAL
3977 MEMORIAL HOSPITAL OF TAMPA	5936 ST CLOUD REGIONAL MEDICAL CTR

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2008 Jean Byers Award for Excellence in Cancer Registration

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5969 CELEBRATION HEALTH FL HOSPITAL

5970 FLORIDA HOSPITAL KISSIMMEE

6001 COLUMBIA HOSPITAL

6003 DELRAY MEDICAL CTR

6007 GLADES GENERAL HOSPITAL

6036 ST MARYS MEDICAL CTR

6045 WEST BOCA MEDICAL CTR

6047 GOOD SAMARITAN MEDICAL CTR

6069 PALMS WEST HOSPITAL

6070 PALM BEACH GARDENS MEDICAL CTR

6074 JUPITER MEDICAL CTR

6105 FLORIDA HOSPITAL ZEPHYRHILLS

6170 COMMUNITY HOSP OF NEW PORT RICHEY

6171 PASCO REG MED HOSPITAL

6201 NORTHSIDE HOSP HEART INSTITUTE

6203 EDWARD WHITE HOSPITAL

6205 HELEN ELLIS MEMORIAL HOSPITAL

6206 LARGO MEDICAL CTR

6246 ALL CHILDRENS HOSPITAL

6249 MEASE DUNEDIN HOSPITAL

6250 MORTON PLANT HOSPITAL

6252 SUN COAST HOSPITAL

6273 PALMS OF PASADENA HOSPITAL

6274 ST PETERSBURG GENERAL HOSPITAL

6278 MEASE COUNTRYSIDE HOSPITAL

6305 LAKELAND REGIONAL MEDICAL CTR

6346 BARTOW MEMORIAL HOSPITAL

6347 HEART OF FLORIDA HOSPITAL

6349 WINTER HAVEN HOSPITAL

6446 PUTNAM COMMUNITY MEDICAL CTR

6570 FLAGLER HOSPITAL

6600 COLUMBIA LAWNWOOD REGIONAL MED CTR

6704 GULF BREEZE HOSPITAL

6707 SANTA ROSA MEDICAL CTR

6805 SARASOTA MEMORIAL HOSPITAL

6810 ENGLEWOOD COMMUNITY HOSPITAL

6870 DOCTORS HOSPITAL

6910 ORLANDO REGIONAL SOUTH SEMINOLE HOSPITAL

6936 FLORIDA HOSPITAL ALTAMONTE

7005 VILLAGES REGIONAL HOSPITAL

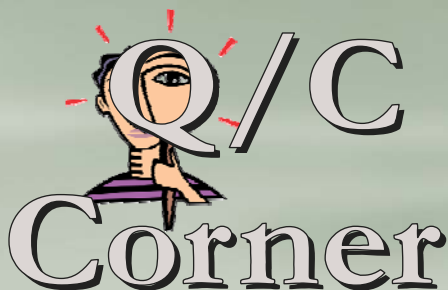
7105 SHANDS LIVE OAK

7205 DOCTORS MEMORIAL HOSPITAL

7405 BERT FISH MEDICAL CTR

7406 HALIFAX HOSPITAL MEDICAL CTR

7446 FLORIDA HOSPITAL FISH MEMORIAL



Source: CS Staging Website, <http://www.cancerstaging.org/cstage/faq.html#prostate>

Prostate - CS Staging

QUESTION:

A clinical prostate cancer patient had an unknown clinical apex status. TURP was the only treatment, no prostatectomy performed.

What is the code for SSF4 since we cannot use 999?

ANSWER:

Code Site-specific Factor 4 (Prostate Apex Involvement) to 550 "Clinical apex involvement: Unknown and Prostatectomy apex involvement: Unknown. "Prostatectomy apex involvement: Unknown" can be used for cases in which no prostatectomy was performed. (8/05).

QUESTION:

If a patient was clinically T2c with positive biopsy in the apex and had a prostatectomy that involved right and left lobes and focally the apex, what should be coded for CS SS4?

ANSWER:

Code Site-specific Factor 4 (Prostate Apex Involvement) to 220 which can be used when the apex is involved both clinically and at prostatectomy but it is unknown if this is arising in or extending to the apex. (8/05).

QUESTION:

Site-specific Factor 4 (Prostate Apex Involvement), how is clinically apparent apex involvement with no prostatectomy coded?

ANSWER:

The new definitions for Site-specific Factor 4 (Prostate Apex Involvement) have been written to allow for both clinical findings as well as findings at prostatectomy. If the tumor is arising in the apex, use code 350. If it cannot be determined if this apical involvement is arising in, or extending to, the apex, use 250. (8/05).

QUESTION:

If invasive adenocarcinoma is found in one lobe of the prostate, and the other lobe only indicates high grade PIN (or if it shows adenocarcinoma in situ), is the CS Extension-Clinical Extension coded as 23 (involves both lobes) or is the case coded as involving one lobe, since only one lobe showed invasive adenocarcinoma?

ANSWER:

Several issues come into play in this question. First, based on SEER rules, high grade PIN would be disregarded, but adenocarcinoma in situ would be a factor in determining whether one or both lobes were involved. Next, was the tumor apparent or inapparent prior to the biopsy? If it was inapparent and diagnosed by needle biopsy, then Extension code would be 15 even if diagnosed in both lobes. If it was apparent and diagnosed by needle biopsy, the code would be 23 if the second lobe was involved with adenocarcinoma in situ, but somewhere in the 20-22 range if the second lobe was involved with PIN III. (9/23/04).



Georgia Center for Cancer Statistics

THE NATIONAL CANCER INSTITUTE'S ATLANTA SEER CANCER REGISTRY
IN CONJUNCTION WITH
THE ROLLINS SCHOOL OF PUBLIC HEALTH,
THE GEORGIA CENTER FOR CANCER STATISTICS,
AND THE WINSHIP CANCER INSTITUTE

May 11-15, 2009

INTERMEDIATE COURSE: CANCER CASE ABSTRACTING, STAGING, AND CODING

Cancer Surveillance: Epidemiology and Data Utilization is designed to help participants learn the basics of cancer epidemiology and more effective ways to utilize cancer data. Topics will include descriptive epidemiology, analytic epidemiology, survival analysis, administrative/clinical uses of registry data, data presentation, advanced data editing, data analysis and cancer abstracting

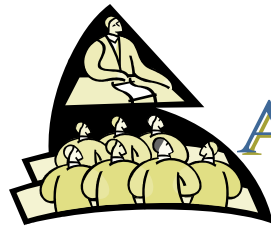
July 20-24, 2009

**BASIC COURSE: PRINCIPLES AND PRACTICES OF CANCER REGISTRATION,
SURVEILLANCE AND CONTROL**

- Intensive review of ICD-O coding and Collaborative Staging
- Basic review of multiple primary rules & other staging schemes
- Anatomy, physiology & medical terminology of cancer sites
- Extensive hands-on abstracting using mock medical records
- And much, much, more.....

Register online and obtain more information at:
<http://www.sph.emory.edu/GCCS/training/practice/index.html>
or GOOGLE : Georgia Center for Cancer Statistics

Courses fill up quickly! Payment must be received to guarantee space.



Advanced Quality Abstracting Webinar:



This is a brand new cutting edge program developed by NCRA's Advanced Education Committee led by Herman Menck and taught by some of the industry's leading trainers! This series is aimed at understanding and addressing complex coding issues to reduce discrepancies in collaborative and TN&M staging and multiple primary and histology coding. This is an advanced series based on data compiled from IACoS/COC I&R, SINQ, NPCR Train the Trainer seminars, and state inquiry systems that goes well beyond the basics. This is a quality education program that you can access from the convenience of your own desktop, LIVE! Each webinar will last 90 minutes and end with a live Q&A session.

(Individual webinars are \$50 Member rate /\$75 Regular rate)

Learning Objectives

Participants of this series will:

Understand how to abstract and code difficult data items.

Develop a higher competence for quality control/review of other abstractors

Develop greater confidence with MPH (multiple primary/histology)

Schedule @ 2pm ET

May 14, 2009 - Advanced Quality Abstracting for Lung

Register now : <http://www.ncra-usa.org/files/public/Adv.Web.pdf>

2009 CTR Examination Preparation Workshops



This course is a concentrated 3-day review of all the areas that may be tested on the CTR exam. The workshop covers the 2009 content of the exam, emphasizing areas that are not usually covered in state meetings or in other short CTR exam prep classes. If you are planning on taking the CTR Examination in 2009, you should consider attending this workshop.

For more information on this workshop go to www.afritz.org/CTRws.htm.

The workshop will be August 13-15, in Reno, NV, prior to the September 12-26 examination period. Register now .



Registration Fee: \$50.00/person

****Online Registration:** <https://fcds.med.miami.edu/scripts/register.pl> ******

Please complete online registration form and mail the registration confirmation along with \$50.00 check or money order payable to Florida Cancer Data System by July 10th, 2009 to:

Florida Cancer Data System
PO. Box 016960 (D4-11)
Miami, FL 33101
Attention: Bleu Thompson



Principles of Oncology Training Program for 2009

AFritz and Associates
Preparing Cancer Registry Professionals for the Future

April's flagship training course, Principles of Oncology for Cancer Registry Professionals will be offered twice during 2009. This is a concentrated five-day training program in cancer registry operations and procedures emphasizing accurate data collection methods. The training program includes extensive site-specific, hands-on case coding, abstracting and staging sessions using practice cases that are representative of the many situations registrars may face. April has been teaching this course for more than 15 years, during which the material has been continually improved and updated.

The course is best suited for registrars with less than three years experience. Although there are no prerequisites for attendance, April recommends that new registrars should work in the registry for 3 to 6 months before attending so that they have a basic knowledge of how a registry operates or, alternatively, have some experience in other medical areas (e.g., nursing, medical records, etc.)

Register now for the classes scheduled for April 20-24 and November 16-20 in Reno, NV.

For more information on the Principles of Oncology program, go to
www.afritz.org/htm.

Happy Valentines Day
February 14th



February 16th



PROJECT DIRECTOR:

Jill A. Mackinnon, PhD, CTR

ADMINISTRATIVE

DIRECTOR:

Gary M. Levin, BA, CTR

EDITORIAL STAFF:

Melissa K. Williams

CONTRIBUTORS:

Mayra B. Alvarez, RHIT, CTR

Megsys C. Herna, BA, CTR



Florida Cancer Data System Cancer Reporting Completeness Report

TOTAL NUMBER OF CASES IN THE FCDS MASTERFILE AS OF MARCH 25, 2009

Total number of *New Cases* added to the FCDS Master file in March 2009: 18,723

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

ADMISSION	HOSPITAL	RADIATION	AMBI/SURG	PHYSICIAN	DERM	DCO	TOTAL	NEW
2008	88,371	3,266	197	0	589	Pending	92,477	16,695
2007	160,101	8,191	578	0	1,035	Pending	170,045	1,822
2006	159,818	8,868	2,846	385	1,006	2,694	175,745	206

		<u>Actual</u>	<u>Expected</u>
% Complete for:	2008	59%	75%
	2007	100%	100%
	2006	100%	100%

**Expected % based on 165,000 reported cases/year*