

The Florida Cancer Data System's Memo

JULY 2015

REMINDER

THE 2015 FLORIDA CANCER DATA SYSTEM ANNUAL CONFERENCE IS BEING HELD JULY 29-30 AT THE TRADEWINDS ISLAND RESORT IN ST PETE BEACH



[Hotel Map](#)

[RESERVATION PAGE FOR FCDS](#)

[Preliminary Agenda](#)

Register online!

Fill out your registration information here, press the submit button below, print the resulting page, and submit it along with your \$100.00 registration check payable to "Florida Cancer Data System". Our Tax-ID # is 59-0624458. The registration fee is non-refundable.

NEW: We now accept credit card payments through a third party credit card processing site used by University of Miami. Complete and submit your information below, then go to the FCDS payment page to read about this new option and to submit your payment.

For more information contact:

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305-243-4871 (Fax)

WHAT'S NEW:

The following information is currently available on the FCDS website.

FLORIDA ANNUAL CANCER REPORT: INCIDENCE AND MORTALITY - 2012

FCDS/NAACCR EDIT's Metafile - 15.0A Metafile, posted 6/30/2015 at 11:23am

FCDS/NAACCR WEBINAR SERIES: NAACCR 2014-2015 Cancer Registry and Surveillance Webinar series - Survivorship Care Plans 7/9/15, being held at 7 Florida facilities and [requires registration.](#)



**Florida Statewide
Cancer Registry**

FCDS is GOLD!

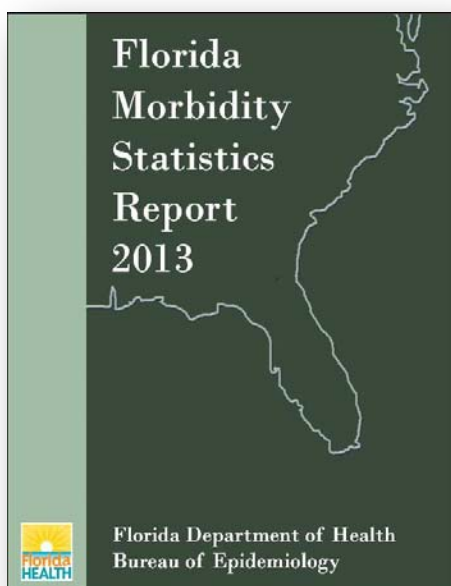


FCDS Achieves Gold Certification for 13th Year

The entire staff at FCDS and our counterparts at the Florida Department of Health are extremely proud and pleased to announce that the Florida Cancer Data System has been recognized nationally at the highest level of certification, NAACCR GOLD, for the 13th consecutive year. This North American award recognizes the population-based cancer registries in North America that have achieved excellence in the areas of completeness of case ascertainment, quality of the data and timeliness.

National recognition awards like this are not achieved by accident. This is a team effort between the FCDS, DOH and all of our reporters around the state. FCDS would like to thank each of you for your hard work and dedication in achieving special awards in cancer surveillance for our state and in your local communities. It is only through our combined efforts that we have made Florida stand out as one of the top state cancer registries in the country. You all are truly amazing. Thank you!!

2013 Annual Morbidity Report



The Florida Department of Health is pleased to announce that the 2013 Florida Morbidity Statistics Report is now available. This document is the annual comprehensive report for all disease morbidity in Florida and this edition marks the fifty-eighth publication since 1945. The report contains the official statistics, in tabular and graphic form, for the reported occurrence of reportable diseases and conditions in Florida. Unless otherwise noted, the data are final totals for the corresponding year. This report directly supports the mission of the department by identifying patterns and trends in the incidence of disease that are used as the scientific basis for development of disease control and prevention strategies and policies.

The 2013 report contains contributions from county health departments and other program areas within the Florida Department of Health including the Immunization, HIV/AIDS, Sexually Transmitted Diseases and Viral Hepatitis, and Tuberculosis Control sections. The cases reported in this document drive disease prevention and intervention efforts in Florida.

Please contact the Bureau of Epidemiology at 850-245-4401 if you have questions regarding disease surveillance in Florida or reporting requirements. The current 2013 report and previous reports published since 1997 can be accessed on our website:

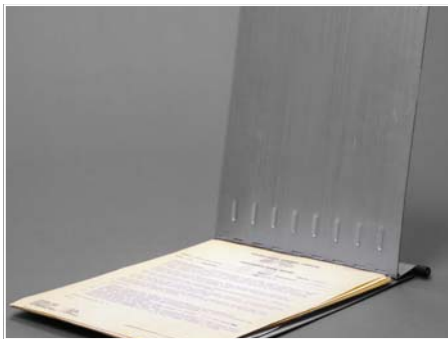
[www.Floridahealth.gov/
MorbidityStatisticsReport](http://www.Floridahealth.gov/MorbidityStatisticsReport).

Please feel free to share this link with other colleagues. Questions regarding the reports can be directed to me or to our Surveillance lead,

Janet J Hamilton, MPH at 850-245-4401 or Janet.Hamilton@flhealth.gov.

Sharon M. Watkins, PhD

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Florida Cancer Data System Deadlines, Updates, & Reminders

NCRA HAS CREATED SEVERAL FREE "INFORMATIONAL ABSTRACTS" FOR MAJOR CANCER SITES

NCRA recently crafted several site-specific “informational abstracts” that describe what text should be included based on the type of cancer being abstracted. <http://www.cancerregistryeducation.org/rr>



Registry Resources

In addition to online learning opportunities, NCRA offers a variety of resources that include publications and articles, and information pertaining to cancer registry operations. NCRA strives to deliver valuable information to enhance the registrar's knowledge and provide programs to help them to succeed in their profession. The Registry Resources section of the Center for Cancer Registry Education includes materials to assist registrars in their daily work. These items are complimentary and are designed to provide guidance on a variety of topics.

New Resource! Informational Abstracts

The abstract is the basis of all registry functions. It is a tool used to help accurately determine stage and to aid cancer research; therefore, the abstract must be complete, containing all the information needed to provide a concise analysis of the patient's disease from diagnosis to treatment. To assist registrars in preparing abstracts, NCRA's Education Committee has created a series of informational abstracts. These site-specific abstracts provide an outline to follow when determining what text to include.

Click on the links below to view, print or save the PDF copies of each informational abstract.

- [Informational Abstract: Bladder](#)
- [Informational Abstract: Breast](#)
- [Informational Abstract: Colon](#)
- [Informational Abstract: Lung](#)
- [Informational Abstract: Melanoma](#)
- [Informational Abstract: Prostate](#)

NCRA Education Foundation's Telecommute Tool-kit

Do you have questions about whether telecommuting is right for you? Does your facility have a formal Telecommute Program? If not, would you like to see one implemented? NCRA's Education Foundation has developed a tool-kit to help. Learn what it takes to develop a Telecommute Program and what makes a good telecommute worker. Understand administrators' reservations and how to overcome them. Get the answers in the [NCRA's Education Foundation Telecommute Tool-Kit](#).



Florida Cancer Data System

Deadlines, Updates, & Reminders

NAACCR CTR EXAM PREPARATION AND REVIEW WEBINAR SERIES (8/25/2015-10/13/2015)

In keeping with FCDS' long-standing commitment to provide Florida registrars with opportunity for early and continuing education and our collaboration with FCRA to "Grow CTRs in Florida", FCDS is pleased to announce a special NAACCR Webinar Series offered to Florida Candidate CTRs who plan to sit for the CTR Exam during the October 2015 testing window.

The NAACCR CTR Exam Preparation and Review Webinar Series is being offered free of charge to Florida Candidate CTRs via special arrangement with NAACCR. Florida registrants will not be able to attend the "live" sessions. But, you will have full access to view the next-day recordings of all eight 2-hour webinar sessions. You will also have full access to all course materials including presentations, handouts, quizzes, practice exercises, and more. And you will have full access to the course instructors for Q&A.

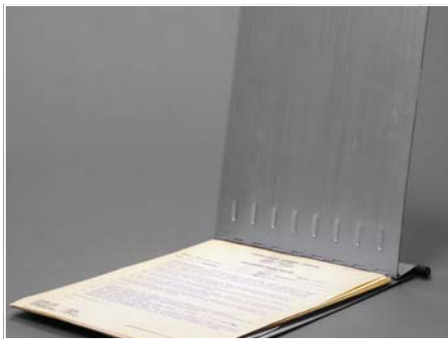
The course has been updated to follow the 2015 CTR Exam content described in the CTR Examination Handbook. And, the course includes a practice test and a post-test follow-up session to discuss how well you tested. The complete syllabus is provided below.

A special registration portal has been posted on the FCDS NAACCR Webinar Registration Site. All participants must register on the FCDS website. If you try to register for this course directly through NAACCR you will be asked to pay the \$400/subscription fee for the "live" course. FCDS-sponsored participants must register via FCDS registration portal using the link provided below.

NOTE ONE: This is a dedicated CTR Prep Course. Sessions are presented by experienced CTR instructors and include lectures, Q&A sessions, study materials, on-line discussions, interactive quizzes, and a timed CTR Exam practice test.

NOTE TWO: This is not a beginning abstractor course. Please do not register for this series if you do not plan to sit for the CTR Examination during the October 2015 testing window. This frees up registration for actual candidate CTRs. Thank you.

Please contact Steven Peace, CTR at FCDS for more information on the course. Steve's direct phone is (305) 243-4601 or e-mail speace@med.miami.edu.



Florida Cancer Data System

Deadlines, Updates, & Reminders

NAACCR CTR EXAM PREPARATION AND REVIEW WEBINAR SERIES (8/25/2015-10/13/2015)

Please do not contact NAACCR directly to register.

Webinar Sessions

*Dates Provided are “Live” Webinar Dates – Recordings will be available the following day.

Webinar Date*	Time	Topic
8/25/15	1pm-3pm	Introduction to the Exam Format; Registry Operations and Management; Central Registry Activities
9/1/15	1pm-3pm	Data Collection: Casefinding, Abstracting, Coding; Follow-Up, Survivorship, and Outcomes
9/8/15	1pm-3pm	Data Collection: Coding Surgery Data Items; Anatomy & Physiology
9/15/15	1pm-3pm	Data Quality Assurance; Cancer Committee and Cancer Conference
9/22/15	1pm-3pm	Analysis and Data Usage
9/29/15	1pm-3pm	Data Collection: ICD-O-3 Coding; Multiple Primary and Histology Coding Rules Hematopoietic and Lymphoid Neoplasm Coding
10/6/15	1pm-3pm	Data Collection: Staging Systems
10/13/15	1pm-3pm	Timed Test; Overview; Test Taking Tips; Q&A
10/17/15 thru 11/7/15		CTR Exam Testing Window

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Date of Diagnosis



Date of Diagnosis

(clinical or pathologic)



FCDS has been receiving a number of phone calls and emails recently asking for clarification on Date of Diagnosis Instructions.

Specifically, registrars have been asking for clarification related to which date is the correct Date of Diagnosis when diagnostic imaging (CT Scan, PET Scan, MRI) clinically indicates there is evidence of a neoplasm but there is a week or more between date of dx on imaging and date of biopsy or resection that provides histologic evidence that the neoplasm is indeed malignant.

Date of Initial Diagnosis is not dependent on the date of biopsy or resection. The Date of Initial Diagnosis IS NOT NECESSARILY the date of the best confirmation of cancer diagnosis. In fact many neoplasms are diagnosed initially by imaging where it is clear there is tumor, and then later confirmed as cancer on biopsy or resection.

There is no rule that states you should use the date of tissue confirmation as the Date of Initial Diagnosis. More often the date of tissue confirmation (biopsy/resection) occurs after the diagnosis has been established by imaging. When this occurs, the Date of Diagnosis is the imaging date and not the date of biopsy.

Diagnostic Confirmation is completely independent from the Date of Diagnosis. The best diagnostic confirmation is most often a tissue diagnosis with histologic examination of tissue from primary tumor (biopsy/resection). BUT, the date of the biopsy is not necessarily the Date of Diagnosis. We do not collect date of tissue dx – only the Date of Initial Diagnosis.

(Continued on page 8)

Date of Diagnosis

(Continued from page 7)

According to the 2015 FCDS DAM, 2015 FORDS and 2015 SEER Program Coding Manual – below are instructions from FCDS.

Date of Initial Diagnosis -- Coding Instructions

Use the first date of diagnosis whether clinically or histologically established.

When diagnostic imaging or other test confirms a diagnosis (including when the diagnosis uses one of the “Ambiguous Terms” defined in Section I), the date of diagnosis is the date of the first diagnosis, whether on imaging, confirmatory test, or biopsy/resection.

If the physician states that in retrospect the patient had cancer at an earlier date, use the earlier date as the date of diagnosis.

Refer to the list of “Ambiguous Terms” in Section I for language that represents a diagnosis of cancer. This list should be used for both clinical and pathological first confirmation of cancer.

Note: This has become increasingly problematic, especially nearing deadline with a lot more “out of Florida” contractors getting instructions for coding from registrars, managers, and other folks who do not know what the actual coding instructions are.



QUESTIONS? ANSWERS. and CLARIFICATION

QUESTION:

Is a GIST of the greater curvature of stomach reportable or not reportable)?

ANSWER:

Gastrointestinal stromal tumors (GISTs) are a rare type of soft tissue sarcoma (mesenchymal tumor). They are different from carcinomas of the gastrointestinal tract because they develop in the muscle layer and grow outward. Many GIST are not malignant/not reportable.

These tumors are reportable if they have specific factors in the absence of pathologist annotation of malignancy including if they were noted to have multiple foci, there is evidence of metastasis, or positive lymph nodes or there is other evidence of malignancy noted by surgeon, pathologist, or during clinical workup following initial diagnosis. Mets usually occur in larger tumors with active mitosis.

If the tumor has a size less than 5cm and there is no mention of active mitosis, this particular GIST is not reportable.

QUESTION:

Which topography code to use for an Apocrine gland Carcinoma of the Axilla?

ANSWER:

While apocrine breast cancer does exist it is very rare and occurs in the breast ducts not axilla. Further, the region of the axilla is the most common site for these tumors but, they can occur in many other locations in ducts of skin.

“Apocrine gland carcinoma is a rare form of sweat gland neoplasm with a distinctive cytologic appearance. Although the region of the axilla remains the most common site for these tumors, apocrine gland carcinoma of the anogenital region, eyelid, ear, chest, wrist, lip, foot, toe, and finger have been reported. Classically, these slow-growing lesions present as painless, colorless or reddish, firm or cystic nodules. More than half of the reported patients with apocrine carcinoma had lymph node metastases at the time of diagnosis. Wide local excision is standard therapy for these lesions. A therapeutic lymph node dissection is indicated for confirmed lymph node metastases and may have a role in the setting of a large or highly aggressive tumor with narrow surgical margins. Although apocrine gland carcinoma responds poorly to chemotherapy, adjuvant radiotherapy may

(Continued on page 10)



QUESTIONS? ANSWERS. and CLARIFICATION

(Continued from page 9)

be used in advanced local or regional disease.”

Source: Am J Clin Oncol. 1999 Apr;22(2):131-5.

QUESTION:

A patient has a history of three meningiomas diagnosed in 2010 all on the right side. Those are all one primary. In 2014, a new brain MRI reveals slight increase in size of the right frontal meningioma and "0.4cm meningioma of anterior inferior falx." Is the falx meningioma a new primary?

ANSWER:

This patient's "first primary" of multiple meningiomas meets the criteria for being reported as meningiomatosis for seq 60...this is because multiple were dx'd at same time. But, we don't have anything tangible in MPH Rules to manage this for subsequent tumors (seq 62>).

Meningiomas arising from the falx can be classified into anterior, middle, and posterior meninges – middle or midline (laterality code 5).

These tumors are completely covered by the overlying cortex and tend to grow predominately into one cerebral hemisphere but are often bilateral. This person sounds like they may have a condition developing known as meningiomatosis which is also often associated with neurofibromatosis and von Recklinghausen disease. This condition and tumors can even develop a "whirl" formation in meninges.

Because this is a new meningioma noted on imaging – this would be a new primary unless patient is described as having meningiomatosis.

Laterality is midline = 5.

Please note that meningiomatosis carries the same histology code of 9530 but a behavior of /1 instead of /0 due to multiplicity.

NAACCR 2014-2015 Webinar Series

The Florida Cancer Data System is happy to announce that for another year we will be presenting the NAACCR Cancer Registry and Surveillance Webinar, 2014-2015 series at seven locations throughout Florida. Be sure to mark your calendars for each of these timely and informative NAACCR webinars.

- Boca Raton Regional Hospital (Boca Raton)
- Moffitt Cancer Center (Tampa)
- M.D. Anderson Cancer Center Orlando (Orlando)
- Shands University of Florida (Gainesville)
- Gulf Coast Medical Center (Panama City)
- Baptist Regional Cancer Center (Jacksonville)
- Florida Cancer Data System (Miami)

Special thanks to the hosting facilities for their participation and support. For a complete description of the webinars, click here: https://fcds.med.miami.edu/scripts/naaccr_webinar.pl All webinars start at 9am.

Please go to the FCDS website to register online for your location of choice. Registration link is: https://fcds.med.miami.edu/scripts/naaccr_webinar.pl. A separate registration will be required for each webinar. The number of participants allowed to be registered for each webinar will be dependent on space availability. For more information, please contact Steve Peace at 305-243-4601 or speace@med.miami.edu.

DATE	TOPIC
*10/2/14	Directly Coded Stage Data: Using the AJCC Cancer Staging Manual 7th Ed. and
*11/6/14	Collecting Cancer Data: Hematopoietic and Lymphoid Neoplasms
*12/4/14	Using the Multiple Primary and Histology (MP/H) Coding Rules
*1/8/15	Collecting Cancer Data: Testis
*2/5/15	Collecting Cancer Data: Uterus
*3/5/15	Abstracting and Coding Boot Camp: Cancer Case Scenarios
*4/2/15	Collecting Cancer Data: Stomach & Esophagus
*5/7/15	Collecting Cancer Data: Larynx and Thyroid
*6/4/15	Collecting Cancer Data: Pancreas
7/9/15	Survivorship Care Plans
8/6/15	Collecting Cancer Data: Central Nervous System
9/3/15	Coding Pitfalls

*All NAACCR 2012-2013 Webinars presented in series are available on the FCDS website, on the Downloads page:
<http://fcds.med.miami.edu/inc/educationtraining.shtml>

NAACCR CANCER REGISTRY AND SURVEILLANCE WEBINAR SERIES

Seven Florida facilities will host the 2014-2015 webinar series, registration is required



**REGISTER FOR THE
NEXT WEBINAR**

FCDS is the host site for Miami, FL with space for 25-30 participants.

CEU information for the 2015 FCDS Annual Conference:

CE Hours: 8.75

NCRA Recognition
Number: 2015-077

CEU information for the 2014 FCDS Annual Conference:

CE Hours: 8.25

NCRA Recognition
Number: 2014-113

2015-2016 FCDS Educational Webcast Series

FCDS is pleased to announce the 2015-2016 FCDS Webcast Series schedule and topics. This year FCDS will be concentrating on preparing registrars and abstractors for direct-assignment of SEER Summary Stage 2000 (SS2000) and AJCC TNM, 7th edition. The SS2000 entry is a requirement for all 2015> cases. The AJCC TNM entry will be a requirement for all 2016> cases. FCDS does not plan to cover the basics of SS2000 or AJCC TNM staging as there are resources for self-instruction currently available. FCDS strongly recommends that registrars and abstractors attend ALL of the AJCC Self-Instruction Modules I-IV as well as work practice cases until they are comfortable assigning AJCC TNM for general use cases. FCDS will be covering site-specific stage.

Date	Time Schedule 3 rd Thursday	Presentation Title
8/20/2015	1:00pm – 3:00pm	2015 Reporting Requirements: FCDS Annual Meeting Highlights
9/17/2015	1:00pm – 3:00pm	Lung and Pleural Neoplasms: Background, Anatomy, Risk Factors, Signs and Symptoms, MPH Rules, Anatomic Staging (TNM, SS2000, SSFs) and TX
10/15/2015	1:00pm – 3:00pm	Brain and CNS Tumors: Background, Anatomy, Risk Factors, Signs and Symptoms, MPH Rules, Anatomic Staging (TNM, SS2000, SSFs) and TX
11/19/2015	1:00pm – 3:00pm	Prostate and Bladder Neoplasms: Background, Anatomy, Risk Factors, Signs and Symptoms, MPH Rules, Anatomic Staging (TNM, SS2000, SSFs) and TX
December	N/A	No Webcast Scheduled
1/21/2016	1:00pm – 3:00pm	Breast Neoplasms: Background, Anatomy, Risk Factors, Signs and Symptoms, MPH Rules, Anatomic Staging (TNM, SS2000, SSFs) and TX
2/18/2016	1:00pm – 3:00pm	Colon (incl. Appendix) and Rectum Neoplasms: Background, Anatomy, Risk Factors, Signs and Symptoms, MPH Rules, Anatomic Staging (TNM, SS2000, SSFs) and TX

Webcasts available on the FCDS website, on the Downloads page: <http://fcds.med.miami.edu/inc/teleconferences.shtml>

There is no fee and each 2-hour webcast will be recorded and available on the FCDS website, <http://fcds.med.miami.edu/inc/teleconferences.shtml>. Webcast materials are also available on the FCDS website.

Florida Cancer Data System

Cancer Reporting Completeness Report



TOTAL NUMBER OF CASES IN THE FCDS MASTERFILE AS OF JUNE 30, 2015

Total number of *New Cases* added to the FCDS Master file in June, 2015: **32,753**

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
2014	157,065	1,455	40	9,334	0	Pending	167,894	30,510
2013	178,540	7,473	201	8,647	0	Pending	194,861	2,040
2012	177,530	10,556	2,036	9,250	0	2,122	201,531	203

		<u>Actual</u>	<u>Expected</u>
% Complete for:	2014	88%	100%
	2013	100%	100%
	2012	100%	100%

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

The Florida Cancer Data System (FCDS) is Florida's statewide, population-based cancer registry and has been collecting incidence data since 1981 when it was contracted by the State of Florida Department of Health in 1978 to design and implement the registry. The University of Miami Miller School of Medicine has been maintaining FCDS (<http://fcds.med.miami.edu>) since that time.

The FCDS is wholly supported by the State of Florida Department of Health, the National Program of Cancer Registries (NPCR) of the Centers for Disease Control and Prevention (CDC) and the Sylvester Comprehensive Cancer Center at the University of Miami Miller School of Medicine.

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Missed an FCDS or NAACCR Webinar?



Did you know that both FCDS and NAACCR Webinars can be viewed after-the-fact. And, Continuing Education Hours are available to registrars that view recorded webinars? All FCDS Webcasts are recorded and posted on

the FCDS Website (Education Tab). FCDS Webcast Recordings are available free of charge and can be viewed anytime/anywhere by anybody. Access to NAACCR Webinar Recordings is available only to registrars with Active/Current FCDS Abstractor Codes. Access to NAACCR Recordings is password protected. Contact FCDS for more information on viewing recorded webinars, or to obtain the password to view individual NAACCR Webcast Recordings.