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PURPOSE: To identify procedures to be followed for the reporting of all cancer cases to the Cancer Registry.

POLICY:

- 1. The John Dempsey Hospital is accredited by the American College of Surgeons' Commission on Cancer (ACoS-COC). The Cancer Registry will always collect data in accordance with the most current ACoS-CoC reportable neoplasm data collection rules.
- 2. The Cancer Registry is also responsible for collecting data on all patients with the diagnosis of reportable neoplasms as defined by the CT State Cancer Registry in accordance with its' adopted SEER Program data collection rules.
- 3. The Cancer Registry will conduct lifetime follow-up on patients who are diagnosed at John Dempsey Hospital with a reportable cancer or reportable benign neoplasm and/or received all or part of their first course of treatment at John Dempsey Hospital for patients diagnosed 2004 and forward.
- 4. Cancer registry data are also made available to support UConn internal research projects, quality monitoring, and hospital administrative projects upon request.

PROCEDURE:

- 1. Clinical Abstract Creation A Certified Tumor Registrar (CTR) will create a clinical abstract for all patients meeting reportable criteria as defined by the ACoS-CoC and/or the CT State Cancer Registry. This will be achieved utilizing an North American Association of Central Cancer Registries (*NAACCR*) compliant cancer data collection/management database application The abstract will include but not limited to the following:
 - A. . All ACoS-CoC and CT State Registry required patient demographic information.
 - B. . The patient's hospital specific identification number
 - C. ("T" number). The clinical abstract must also include -
 - 1. Date of Diagnosis
 - 2. Date of First Hospital Contact
 - 3. Class of Case as defined by ACoS-CoC and SEER Program
 - 4. Primary Tumor Site
 - 5. Tumor Sequence Number/s
 - 6. Tumor Histology
 - 7. Tumor Behavior
 - 8. Tumor Grade



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- 9. Diagnostic Procedure Information as applicable
- 10. Treatment Start Dates (and end dates as applicable)
- 11. Specific Treatment Modalities as applicable surgery, radiation, hormone therapy, chemotherapy, immunotherapy..
- 12. Family Cancer History
- 13. Social History, personal history of tobacco and alcohol use
- 14. Last Date of Contact/Date of Death
- 15. Vital Status
- 16. Last Date of Tumor Status Assessment

2. Case finding Procedures -. The Cancer Registry Staff will on a monthly basis -

- Process all pathology and cytology reports using the E-Path Monitoring Console application to create a file that identifies patients with reportable tumors, and import this file into the cancer registry case finding database.
- Create and importable ICD-10 diagnostic index using the Epic customized report writing
 feature for cancer registry specific needs. A ICD-10 code net captures all patients with
 reportable neoplasms managed in all UCONN's cancer diagnosing or treatment service
 lines. This file is imported into the cancer registry case finding database.
- After the conclusion of the monthly electronic case finding process an excel ICD-10 diagnostic index is created using the Epic customized report writing feature for cancer registry specific needs. The same patient criteria used for the importable ICD-10 diagnostic index is used for this report. This listing will be visually reviewed against the cancer registry's case finding database to assess and ensure completeness of the electronic case finding process. Any missed cases will be manually entered into the cancer registry case finding database.
- The Cancer Registry Manager will also performed semi-annual case finding audits to ensure completeness of case finding methods being utilized.
 - Mandatory Data Reporting: A Certified Tumor Registrar will: Submit all cases diagnosed 2004 and forward to the ACoS-CoC's Rapid Cancer Reporting System (RCRS). The submissions should be done on a monthly basis, but must be done reported at least quarterly.



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- Submit CT State Cancer Registry defined reportable cancer cases to the CT State Cancer Registry monthly.
- Other Data Reporting/Processing Projects A Certified Tumor Registrar will: Process and report cancer data as required by ACoS-CoC Special Studies Standard, and CT State Cancer Registry required special projects.

3. The Cancer Registry Manager or a CTR designee is responsible for:

- Coordinating Cancer Committee meetings, and its' sub-committees.
- Attending Cancer Committee Meetings. ACoS-CoC designates a CTR to be a required Cancer Committee member in its accredited cancer programs.
- Creating, and submitting Cancer Committee Meeting minutes to UCONN Health/JDH Medical Staff Office.
- Maintaining supporting documentation demonstrating compliance with ACoS-CoC Cancer Program standards to maintain continued ACoS-CoC accreditation.
- Serving as liaison on behalf of the UCONN Cancer Committee to the ACoS-CoC.
- Creating the annual cancer registry quality control plan in coordination with the Cancer Committee's physician Cancer Registry Quality Control Coordinator.

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Chief Executive Officer

Richard H.Sanon, M.D. Chief of Medical Staff

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