

# Texas Cancer Reporting News

Cancer Registry Division 1100 West 49th Street Austin, Texas 78756 512-467-2239 1-800-252-8059

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## From the Director

New cancer incidence reporting rules went into effect on August 6, 1998. These rules will help us obtain more timely, complete and accurate cancer reporting which then will result in the availability of more current cancer incidence information.

The adoption of these new rules was the result of a cooperative effort by many. Representatives from the American Cancer Society, American College of Surgeons (ACoS), Baylor Health Care System, M. D. Anderson Cancer Center, Physician Reliance Network, Summit Hospital, Texas Hospital Association, and Texas Medical Association provided input for modifying some provisions in the rules which would make them more acceptable to all parties. Compromises were made especially for the "When to Report" section which allows a phase in period for achieving the 6 months report-We hope that the cancer ing requirement. reporters in Texas who currently meet the 6 months time frame will continue to do so and that other reporters will continue to improve the timeliness of their reporting.

Another important change in the new rules is the provision which allows the Texas Department of Health (TDH) or its designated representative to collect cancer information from non-compliant reporters on a cost recovery basis. Before such collection of data begins, all non-compliant reporters will be notified in writing and given 60 days in which to comply with the cancer reporting requirements. In addition, a non-compliant reporter will be given two weeks notice before arrival for collec-

tion of the information. The reporter will be billed for staff time, travel, equipment and other costs expended for the collection of these data.

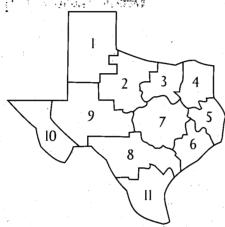
We are pleased that we could arrive at new cancer reporting rules that will assist us in gaining more complete and timely cancer incidence reporting. Although our new rules do not require reporting from physicians, ambulatory surgery centers and other health care providers, they do encourage such providers to furnish cancer information for patients that are solely diagnosed or treated outside of the required reporting facilities. The impact of gaining cancer reporting from these other sources needs further evaluation.

The Texas Cancer Registry (TCR) will continue to meet with representatives from the organizations mentioned earlier and other researchers to further improve our cancer reporting process and use of our data. We hope to schedule our next meeting in November. If you have any suggestions for improvement, please feel free to share them with me or one of our TCR staff and I will present them to this cancer registry working group. I will continue to update you on the progress of the working group via future issues of our newsletter. Your input is appreciated.

Nancy S. Weiss, Ph.D.

## Cancer Case Completeness

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PHR 1:	1995—96% PHR 4	: 1995—92%	PHR 7:	1999—95%	PHR 10:	1995—97%
	1996—81%	1996—77%		1996—88%		1996—92%
	1997—70%	1997—39%		1997—68%		1997—71%
7	1998—10%	1998—2%		1998—1%	.~	1998—1%
PHR 2:	1995—87% PHR 5	: 1995—94%	PHR 8:	1995—97%	PHR 11:	1995—97%
	1996—86%	1996—86%		1996-90%		1996—82%
	1997—54%	1997—60%		1997—71%		1997—48%
	1998—2%			1998—4%		1998—1%
PHR 3:	1999—99% PHR.6	: 1995—96%	PHR 9:	1995—89%	Statewide	.:
	1996—80%	1996—96%		1996—89%		1995—96%
	1997—43%	1997—63%	•	1997—77%		1996—86%
	1998—3%	1998—1%		1998—11%		1997—56%
		the state of the s		* .		1998—3%
			As of Oc	tober 13, 1998		



## Compliance

We have now surpassed our goal of 95% statewide complete reporting for 1995 cases, but are still lacking for reporting years 1996 and 1997. We appreciate your efforts in reporting 1995 cases and ask that you continue these efforts with the 1996 and 1997 cases as well.

## 1997 Annual Conference Survey Results

The survey results from our annual conference in 1997 are in. In essence, everyone that attended the conference was very pleased with the location and the training sessions provided. There were some who would have preferred a location closer to the city. Interest in having regional conferences around Texas for easy access and attendability were also mentioned. There was concern to keep the cost affordable. Many attendees said they would prefer smaller break-out groups with one-on-one training on staging and coding. There was a suggestion to have 3 to 3 ½ days for the conference to allow for extensive coding and staging training.

On the other hand, smaller hospitals often feel a strain when their only medical records person is gone for more than one day. Smaller hospitals also are burdened by the expense of staying overnight and travel because of their small budgets. There was interest in attending seminars that are geared toward CTR certification, and also training for new tumor registrars. Many people felt we should encourage all hospitals to insist that anyone working in cancer registry must attend all seminars and at least one conference—especially if they are new to their job. When it comes to scheduling, attendees prefer to have the conference at a different time of the year than the Texas Tumor Registrars Association (TxTRA) or National Cancer Registrars Association (NCRA) meetings.

We appreciate your suggestions and look forward to next year's conference, which is tentatively scheduled for July 1999.

— Leticia Vargas, CTR

## PHRs 1, 9, & 10

Greetings from Lubbock!!! We greatly appreciate all the hard working people from facilities in Region 1, 9 and 10 who have completed 1997 reporting. What a bunch of dedicated professionals!! Thanks for your commitment to cancer reporting.

We have developed a casefinding schedule for our regions. We have completed casefinding studies for Region 10 (El Paso). Casefinding for Region 1 (Amarillo) is scheduled for the end of October and Region 9 is scheduled for the first of 1999. Casefinding is a quality-assurance procedure to insure that all cases for a certain year have been reported. Casefinding may include number correlation on accession registers, disease index review, and pathology lab review. The latter may also include a review of cytologies, bone marrows, and autopsies. Other sources to be reviewed may include surgery logs, chemotherapy or brachytherapy logs and outpatient treatment logs. As always, there are concerns that cases are not being picked up by facilities as more and more patients are being treated in physician offices or other outpatient settings!

This office of the TCR worked in conjunction with TxTRA members in El Paso to provide a regional educational conference on August 21, 1998. The guest speaker was Donna Gress, ART, CTR, from the ACoS speaker's bureau. She spoke on the revised 1998 ACoS surgery codes, the new Registry Operations and Data Standards (ROADS) changes, and some exciting tips on quality improvement. Other speakers included Dr. B. Monte Stewart, of Beaumont Army Medical Center, who spoke on "Lymphatic Mapping in Breast Cancer"; and Dr. Arlene Zaloznik, who spoke on "New Advances in Cancer Therapy."

If there is interest and a willingness to collaborate on an educational conference for the Midland /Odessa/San Angelo area or in the Lubbock /Amarillo area, please contact me at 806-767-0323.

— Pat Ploegsma, RRA, CTR Regional Program Manager

## PHRs 2, 3, & 4

We welcome Della Millican as the new Trainer and Data Coordinator in the Arlington office. Geri Knippen has been hired as the administrative assistant and coder. Please introduce yourself when you call the office and Geri answers the phone.

The PHR 2/3/4 Regional Workshop, co-sponsored by TxTRA, was held at the Arlington Community Center July 23-24 with approximately 50 registrars in attendance. Deidre McMillan, CTR, presented "Cancer Registry 101" for those new to the cancer registry field. Donna Gress, ART, CTR, speaker for the American College of Surgeons, presented "Quality Management and Improvement". Elizabeth Naftalis, M.D. spoke on Sentinal Node Biopsy. Pandora Ashley, CTR, and Carol Poehl, CTR, gave respective updates on NCRA and TxTRA activities. Elaine Allgood gave an update on TCR activities.

Regions 2/3/4 and Regions 5/6 hosted the TCR/TxTRA Regional Workshop September 21-22 in Tyler. Deidre McMillan, CTR, presented basic abstracting. Suzy Hoyler, CTR, presented Breast Surgery Codes and Quality Management. Linda McManus, Ph.D. spoke on human anatomy and brought a display of anatomical specimens showing tumor involvement. Freda Harder, a cancer survivor, gave an inspiring talk on surviving a cancer diagnosis.

Berta Hernandez received her degree in social work from the University of Texas at Arlington in August. Congratulations Berta!

A big thanks to all the cancer reporters and registrars who worked hard to submit their 1995 and 1996 data on time!

Elaine AllgoodRegional Program Manager

## More News from the Regions

## PHRs 5 & 6

The Texas Cancer Registry PHRs 5/6 in conjunction with the Texas Tumor Registrars Association, hosted it's first regional conference at the Embassy Suites Hotel in Houston on June 18th and 19th, 1998. The theme of the workshop was "An Uplifting Update on Breast Cancer".

The program covered all facets of treatment management, new findings and pathology. A real treat was to listen to some joy and laughter by a "Doctor of Merriment". The new information on the revised surgical codes and changes in the ROADS was presented by veteran Rosemary McKee. Updates from the Texas Cancer Registry, Texas Tumor Registrars Association and the National Cancer Registrars Association kept all of us aware of the new changes. The first day a luncheon was served and a special recognition of this region's 1997-1998 new CTR's was held.

Committee members for this conference were:

- **★** Kathy Stevenson from Kelsey Seybold
- **★** Jackie Steele from Romac International
- ★ Mary Kimmel from Medical Registry Services
- ★ Sarah Taylor from UT M.D. Anderson Cancer Center
- ★ Collie Smith from San Jacinto Medical Center
- ★ Judy Spong, Diann Purvis and Marie Longoria from Texas Cancer Registry

To coordinate a smooth internal flow for the conference, the committee worked months behind the scenes, along with TCR's administrative technician, Wanda Hamilton, TDH purchaser, Robert Rodriguez; and UTMB Galveston's Sonia Beasley. The Texas Cancer Registry (PHRs 5/6) would like to acknowledge all the assistance given to us from the central office by Nancy Weiss, Ph.D. (Director) and Jane Yoakum (Director of Regional Programs).

The overwhelming response from over 60 participants turned the regional conference into the success we were hoping it would be.

Marie Longoria, CTR
 Data Coordinator & Trainer

#### PHR 7

Our staff have been providing training for hospitals with staff who are new to cancer reporting.

Casefinding and reabstracting studies were performed at selected hospitals in September. More of these studies will be scheduled in the next quarter. Staff are busy becoming experts on the new 1998 data fields so they can assist hospital staff with any questions they may have.

Staff members attended the teleconference training on data confidentiality hosted by the Illinois State Cancer Registry, the Centers for Disease Control and Prevention, and the North American Association of Central Cancer Registries on September 17th. The TCR plans to continue downlinking future educational teleconferences. We encourage reporters to attend.

Two staff members attended the annual TxTRA conference in October. They have also had the privilege to attend breast and tumor conferences monthly at St. David's Hospital in Austin.

St. Joseph's Hospital in Bryan, Texas passed their ACoS survey. Congratulations to them!

If you have records for 1996 or 1997, please submit them ASAP.

 Annette VandeWerken, MS, RD, LD Regional Program Manager

## Quality

### PHRs 8 & 11

Quarterly training sessions held in geographic areas are proving to be a fun way to share new information, technical assistance, and problem solving. Just seeing each others' smiling faces once in a while is great. These two Public Health Regions have been divided into the following areas: San Antonio, the Golden Crescent area, the Wintergarden Area, the Corpus Christi Bay Area, and the Rio Grande Valley. New Reporting Requirements were presented in March and April. Thanks to our hostesses so far, Pam Matthys in Victoria, Maggie Salinas in Corpus Christi, Christy Gaitan in Edinburg, Myra Haffner in Corpus Christi and Monica Gayda in McAllen.

Thanks also to the following presenters who have provided interesting and applicable information:

- ★ Pola Hernandez, CTR and Melinda Good, ART— Pointers for an ACoS Survey
- ★ Giuseppe Fraschini, M.D., Hematologist /Oncologist—Supportive Care
- ★ Erin Hazlewood, R.N., Director, Spohn Shoreline Oncology Unit—Breast Care Programs
- ★ Emile Salloum, M.D., Hematologist/Oncologist
  —Stem Cell Transplantation
- ★ Gerard Voorhees, M.D., Radiology Oncologist— Intervention Radiotherapy in Oncology
- ★ David F. Eanes, M.D., Pathologist—Overview of Diagnosis and Treatment of Nasopharynx
- ★ Drs. Salinas, Ratnam and Qurashi—Cancer of the Liver and Chemoembolization
- ★ Holly Rivera, R.D., L.D.—Diets for Patients with Heart Disease and Cancer

If you would like to attend one of our sessions please contact us! We would love to hear from you.

 Kathryn S. Woehler, RN, MPH, CTR Regional Program Manager

# Answers

## Coding Corner

Question: In the absence of a grade for the primary site, would we code the grade given for a metastatic site if given?

Answer: No. If there is no grade provided for the primary site, code this field 9 (unknown), even if a grade is given for a metastatic site.

—SEER Program Code Manual, 3rd Edition, page 101.

Question: What would be the appropriate code for adenocarcinoma of prostate with cribriform differentiation?

Answer: The appropriate code would be cribriform carcinoma (8201/3) since it is more specific than adenocarcinoma.

—SEER Program Manual, 3rd Edition, page 96.



### The Best in Texas!

There are three new certified tumor registrars in the great state of Texas since the exam was given in March of

this year. Please join us in congratulating them on receiving their certification. They are Sandra Jean Mullins at Houston North West Medical Center in Houston, Tamara Rosini-Laney at Hendrick Cancer Center in Abilene, and Allison Yost at Abilene Regional Medical Center in Abilene. Congratulations ladies!

— Shawna Waterman, CTR

## **Professional Conferences**



# 1998 NCRA Annual Conference

The 1998 NCRA Annual Conference in Boston had a record-setting atten-

dance of over 900 registrants. It began with a choice of three pre-conference workshops: Pre-Certification, Survey Savvy, and Goal Setting. I attended the Goal Setting workshop, "Is this a Job or a Profession?" We used the Self-Directed Search (SDS) to assess our vocational choices and to reveal new possibilities worthy of consideration. For copies of the assessment booklet, contact Psychological Assessment Resources, Inc. (PAR), P.O. Box 998, Odessa, Florida 33556 or 1-800 -331-TEST.

There were a variety of tracks attendees could follow depending on their needs. These included tracks for hospital-based registries, central cancer registries, cancer program managers, technology, software, data usage, pediatric and basics.

One of the sessions I attended was "Anatomy of a Successful Cancer Program Annual Report" by Mindy Burch, CTR. Mindy had an abundance of slides to show different ways of putting together an Annual Report. She also had a display of annual reports used for marketing with a range of cost.

Dan Miller, MD, MPH, from the CDC presented "The Registry Profession of the Future: No More Dinosaurs." This presentation was very well received and scored high on the evaluations.

All sessions were taped. You may request these from Infomedix at 714/530-3454.

— Pandora Ashley, CTR

## 1999 NCRA Annual Conference

The 25th NCRA Annual Conference will be held May 25-28, 1999, in Dallas at the Adam's Mark Hotel, located downtown with the DART Light Rail just outside the hotel. It's convenient to shopping, restaurants and entertainment. The hotel has 1,844 guest rooms with 205 Suites. The meeting space was completed in September of 1998 and will be spacious enough to serve our large group well. A big celebration is planned to celebrate the association's 25th birthday. The planning committee met recently to put together an exciting educational program.

This is an important meeting for all registrars in Texas. Please mark these dates on your calendar and obtain funds to attend so you will not miss out on this national meeting in your own state. For additional information on the 1999 meeting, please feel free to contact me at 254/724-2638.

- Pandora Ashley, CTR



# TxTRA—Texas Tumor Registrars Association

October 21-23, was TxTRA's 26th Annual Education Con-

ference in Fort Worth at the Radisson Plaza Hotel. This year's conference primarily focused on the diagnosis, staging, and treatment of head and neck cancers. We hope you enjoyed the conference.

— Leticia Vargas, CTR

## Our Website Adds Statewide Data

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Check out the new Texas Cancer Registry Website! The site has been recently updated to include 1992 cancer incidence data, our first year of statewide data. Most importantly, the site now has many new "look-up" features that will be of great use to cancer reporters, cancer researchers, the media and the public. These look-up features will be updated as we add additional years to our statewide database. To access our site, point your web browser to: http://www.tdh.state.tx.us/tcr.

On the home page you will find our mission statement, a brief description of the Texas Cancer Registry, a map showing all of our regional offices and their coverage, the complete text of the Texas Cancer Reporting Act (the bill that created the Texas Cancer Registry), and the new reporting rules. At the top and bottom of our home page, you will find a series of 9 large red buttons from which you can access other pages of our web site. The "Welcome!" button will always return you to this home page.

The "Publications" button will take you to a listing of some of the Texas Cancer Registry publications. By clicking on the report cover, you can read a copy of the abstract or other synopsis of the report. You also can order a copy of the full report directly from this page. Our newest report, "Cancer Incidence & Mortality in Texas Public Health Regions 1, 7-11, 1985-1992," is at the top of the list, along with our 1996 cancer mortality report. In addition, we plan to add several of the primary tables from some of these reports so users will be able to retrieve and print them.

The most exciting feature on the web site is the 1992 statewide cancer incidence data. The "Cancer Data" button enables users to download a multitude of tables of cancer incidence rates in Texas. These

tables will be updated as we add additional years of statewide data. From here the user may select tables of incidence rates for the entire state of Texas, for all races, or by race/ethnicity. Users may also select tables of rates for each of the 11 Public Health Regions in Texas, either for all races or by race/ethnicity. We even have tables of 1992 cancer incidence rates for every Texas county. There is an alphabetical list of Texas counties, or you can

just select the first letter of the county

and go directly to all counties starting with that letter. Therefore, users interested in rates for Zavala

County don't have to scroll through all the other 253 counties to get there!

These new features are in addition to the regular features we have described previously. The "Reporting Software" page describes the Sandcrab Lite software. You can download your own copy of this free cancer reporting software directly from the website. We also have

a "Related Web Sites" page, which provides some links to other cancer resources. Use this to begin your search for other information about cancer that you don't find on the Texas Cancer Registry site.

The Texas Cancer Registry website is a work in progress. We will continue to make modifications and additions to this site whenever appropriate, and we have more improvements planned. Please use our site to obtain information about cancer in Texas, and to keep current with the activities of the Texas Cancer Registry. We welcome any suggestions you may have for other features that we can add to the Texas Cancer Registry website that will facilitate cancer reporting in Texas.

David Risser, Ph.D., MPH
 Epidemiologist, Texas Cancer Registry

## Uses of TCR Data

Data collected by the Texas Cancer Registry (TCR) provide a valuable resource for cancer research in Texas. We use these data to answer questions from private citizens with a concern about either their own cancer diagnosis, or about cancer incidence in their area. Other health professionals and graduate students often request data for research studies or to learn about market demand. Calls also come from the media and other programs within

Texas government as well as other state, city, and county health departments.

To give you a better idea of one way our data are used, the chart to the right shows the nature of the data requests we have received during the first six months of this year. The majority of our requests come from health professionals and other researchers who are trying to obtain information about cancer in Texas. Many of these come from groups such as the American Cancer Society or the Texas Cancer Council. Often we use our data to prepare specific types of tables that they request, or to prepare estimates of the numbers of cancers we may expect to see in the future in a given area. Some of these requests come from private companies who want to get an indication of the market demand for a new medical device or a new treatment. In

fact, only a relatively small percentage of these requests come from private citizens with a general concern about cancer. We also received numerous requests from students for data or information for thesis projects or other studies.

Some of our calls come from persons who are concerned about a specific excess of cancer in their area of the state. These "cancer clusters" are investigated using a formal protocol. Information

about how we conduct cancer cluster investigations is now available in a new brochure, which is available upon request.

We also make use of these data to produce a variety of monographs about cancer in the state of Texas—the most recent one being "Cancer Incidence and Mortality in Texas Public Health Regions 1, 7-11, 1985-1992." We also produce an annual "Texas Cancer Mortality Statistics" report. In

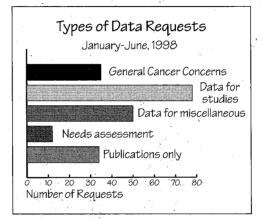
addition, the 1992 statewide data is highlighted in a special issue of "Texas Cancer Reporting News." Please contact us if you need a copy of any of these reports. We produce other reports about cancer in Texas which are published in "Disease Prevention News", the TDH newsletter, as well as articles which we submit to professional journals outside of TDH.

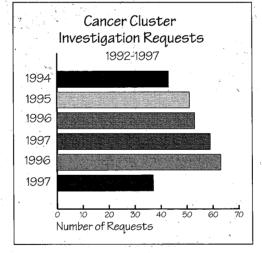
During recent months, we have begun receiving a larger number of requests than usual for our publications due to increased use of our website (http://www.tdh.state.tx.us/tcr). It is now possible for users to email directly to the Cancer Registry from our website to request a copy of one or more of our publications.

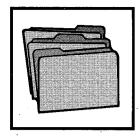
The data that are collected by the Texas Cancer Registry are used in many ways to help learn more about cancer in Texas, leading to improvements in cancer prevention and control. We are rapidly moving

toward having multiple years of statewide cancer incidence data, due in large part to all of your diligent efforts in data collection. It is our expectation that this will provide an outstanding resource for cancer researchers not only in Texas, but for cancer research in general.

— David Risser, Ph.D., MPH Epidemiologist, Texas Cancer Registry







## Casefinding Audit for Texas

The Texas Cancer Registry has contracted with CTRs to perform casefinding audits for 1995 and 1996 cases in

selected hospitals across the state. A casefinding audit is a quality control activity performed to ensure that all reportable cases for a given year from all the diagnostic and treatment sources have been reported. The audit also serves to validate the "expected number" of cancer cases for a reporting institution. The "expected number" of cases is the number of reportable cancer cases that the health facility estimates they will see in a given year. This expected number is usually based on the number of beds, type of services provided, number of cases reported in previous years, as well as other factors. This estimated number needs to be verified and a casefinding audit is an important tool for that purpose.

The Invitation for Bid was sent out last spring. The contract was awarded to three contractors: Judy Jacobs from Beaumont, Tricia Vowels from Wolfforth, and Cancer Program Consulting Service out of Lubbock. The contractors visited the facilities during the months of August and September to perform the audits. They reviewed the disease index from each facility and compared all the cancer cases diagnosed or treated there with the state data base to identify non-reportable and reportable cases that may not have been reported. They also reviewed reports from pathology, cytology, autopsy, and surgery, as well as radiation, oncology, and outpatient treatment records to identify unreported cancer cases.

During this process the contractors tested the new CRABNET software that was developed by the TCR to use while performing the casefinding audit. The software allows the contractor to compare the cancer cases from the facility with the state database and to identify unreported cases. The TCR will be sending the results of the audit in writing to each facility.

We appreciate all of the registrars who responded to our Invitation for Bid.

Annette VandeWerken, MS, RD, LD
 Regional Program Manager



# Electronic Reporting Facilities (NAACCR Reporters)

All 1998 cases submitted electronically must be reported in the North American Association of Central Cancer Registries (NAACCR) version 6.0. Previous years cases may be submitted in the NAACCR version 5.1.

Submissions in an incorrect format, with missing or incomplete data, or with an unacceptable level of errors will be returned to the reporting facility.

Please remember that non-analytical cancer cases with active disease (i.e., cases initially diagnosed or treated elsewhere) are reportable. All available data items, such as street and city, should be included. Many facilities are reporting their non-analyticals without street addresses and city. If this is a problem you are having with your software, please contact your vendor for transmit procedures.

Many facilities send in disks that are blank and/or the file name contains no data. This could result from using a bad disk or transmit problems. Please check your disk before sending it in. One way to do this is:

After transmission, leave disk in the A: floppy drive. Exit to a DOS prompt. At the DOS prompt, type A: and <return>. This should take you to the A:>. Type DIR and <return>. The file name will display along with the number of bytes used. Example: STATE.DAT 535,859. This number represents the number of bytes used by this file. If the file name is displayed with 0 bytes used, a problem has occurred.

If you need assistance checking your disk, please feel free to contact me at 1-800-252-8059.

— Elena Faz, CTR

## SANDCRAB Lite Update

ANDCRAB Lite is a software provided free of charge to reporters. Among its many features are data submission by diskette, on-line edit checking to ensure data integrity, and on-line selection boxes for several fields, eliminating the need to look up codes in the handbook.

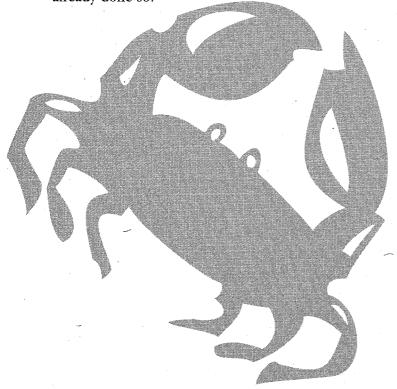
## Version 3.0 for Windows

SANDCRAB Lite Version 3.0 for Windows is now available. Over 170 copies of this version have been mailed to the hospitals, educational institutions and contractors who have requested it.

SANDCRAB Lite Version 3.0 for Windows hardware requirements are:

- A 486 or Pentium based personal computer
- 12 MB or more RAM
- Windows 3.x or Windows 95
- 1.44 MB 3 1/2" floppy drive
- Approximately 6 MB (6,000,000 bytes) or more free hard disk space for the SANDCRAB Lite program. Additional disk space will be needed as records are added to the database.

If you are already using SANDCRAB Lite 3.0 please return the registration information form included with your release packet if you have not already done so.



## Version 2 Update

If you are currently using SANDCRAB Lite version 2.0 software, you must request the version 2.1 update disks for your 1998 data. They will not automatically be sent to you. Eventually, all facilities that have submitted data using SANDCRAB Lite 2.0 will be contacted about upgrade software, but the quickest way to receive the version 2.1 software is to request it.

# Hospitals using Commercial Software Packages

If SANDCRAB Lite is used in facilities to report non-analytical or state reportable only cases, and another commercial software package is also used, duplication of registry numbers can be avoided by starting with a high number, such as 961001, instead of 960001, for the facility's first 1996 SAND-CRAB Lite case.

## Useful Reference Material

The SANDCRAB Lite manual does not replace the Texas Department of Health, Texas Cancer Registry, Cancer Reporting Handbook. It was designed to be used in conjunction with the Cancer Reporting Handbook. Consult the January 1998 edition when entering cases for 1998 and beyond. Consult the July 1996 edition when entering cases for 1996 and 1997. The older edition of the handbook should be used for any cases prior to 1996.

- Elena Faz, CTR, writer for this page

## Reminder:

Please enclose a completed transmittal form with all Sandcrab Lite submission disks!

## Staffing News

Please welcome Jackie Shaw, Ruth Powers and Lori Calihan to the Cancer Registry Division. Jackie is the Staff Services Officer for the division. She has worked for the Texas Department of Health for the past nine years—three years in the Pharmacy Division and six with the Immunization Division. Jackie has a husband and a four-legged kid named Brandi. Her hobbies consist of hiking and trout fishing in the mountains of New Mexico.

Ruth is the office manager/graphic designer. She has worked as office manager in a non-profit organization. She has also done newsletter layout, technical writing, and audiovisual media. Her hobbies include quilting, dance, and spending time with her pet guinea pig, Peanut.

Lori is the new network specialist. Her career

includes five years with the federal government and 21 years with another state agency, serving most recently as a system support specialist. Lori has 3 sons, a grandson, and two cats. Her hobbies include weekend shopping, cooking Sunday dinner for her children and reading.

Farewells goes out to Aisha Bryant, Antonio Duran, Thomas Hutcherson, Marla Meadors and Irma Villarreal. We wish them all success in their new endeavors.

Congratulations to Madelyn Lock and her husband Ling Lock who are the proud parents of Ryan Matthew Lock, born July 21st, weighing in at 7 pounds 4 ounces. Madelyn reports that the baby sleeps during the day and is up at night!

— Leticia Vargas, CTR

## SANDCRAB Lite Order Form

Which version are you requesting?	Please give us the following information:				
☐ SANDCRAB Lite version 2.1 Update (for computers with existing SANDCRAB Lite versions	Name				
1.0 or 2.0)	Title				
☐ SANDCRAB Lite version 3.0 for Windows (for computers with existing SANDCRAB Lite soft-	Reporting Institution				
ware who wish to upgrade to Windows version)	Street Address				
What computer environment will SANDCRAB Lite	City State Zip				
be run in? Check all that apply.  ☐ DOS only	Phone				
□ Dos/Win 3.x	Fax this form to:				
☐ Windows 95	(512) 467-8507				
☐ Network—What type?	Or mail it to:				
What type printer will be used?	Cancer Registry Division SANDCRAB Lite Texas Department of Health 1100 W 49th Street Austin, TX, 78756				

## How to Contact Us

## Phone Numbers for Public Health Regions

Arlington (PHRs 2, 3, 4)

817/264-4479

Austin (PHR 7)

512/467-2239

or 1-800/252-8059

Houston (PHRs 5, 6)

713/767-3180

Lubbock (PHRs 1, 9, 10)

806/744-3577

San Antonio (PHRs 8, 11)

210/949-2165

### E-mail address:

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#### Website:

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Questions regarding information found in this newsletter, or suggestions for future editions can be directed to Susan Perez in Austin.

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