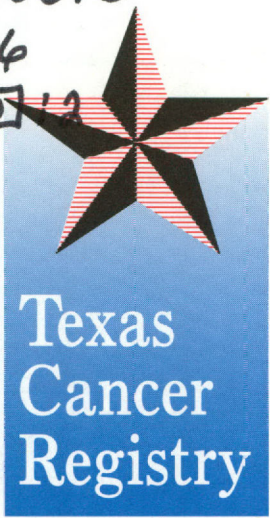


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Texas Cancer Reporting News

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

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From the Director

This last year, the Texas Cancer Registry (TCR) participated in an evaluation of the completeness, quality and timeliness of our 1996 cancer data as part of the North American Association of Central Cancer Registries' (NAACCR) certification process. Our data file had to be submitted by December 1998, and we sent our file even though we had not reached the completeness level for which we had hoped. We chose to participate to help us assess how we are doing and identify areas needing improvement.

We were evaluated on six certification measures: 1) completeness of case ascertainment; 2) completeness of information recorded (including missing/unknown data on age at diagnosis, sex, race, and state/county); 3) death certificate only cases; 4) duplicate primary cases; 5) passing EDITS (a special edit program for cancer data); and 6) timeliness. I am proud to say that we achieved the Gold Standard for four of the six measures. We did not achieve the completeness of case ascertainment standard which required our data to be at least 90% complete (Silver Standard). Our case completeness was 84.4% at the time of data submission. Also, we failed to achieve a death certificate only case percentage of 5% or less (Silver Standard); our percentage was 7.1.

Both of the measures we failed to achieve were a direct result of not having received complete cancer case reporting from all of our facilities. Improvement in the timeliness of your reporting will help us achieve gold standards for these other two measures. We then can join the ranks of being a nationally certified state cancer registry. We seek your help in reaching this important goal.

Nancy S. Weiss, Ph.D.

News from the Regions

PHRs 1, 9, 10

Greetings from Lubbock! Much has occurred in this office since the last newsletter. Pat Ploegsma and Karen Favens have moved on to bigger things. We wish them luck in their new endeavors. Please join us in welcoming Kimberly Kinney ART, CTR as the new Quality Control Auditor in the Lubbock Cancer Registry Regional Office. She has vast Cancer Registry experience in a ACOS hospital registry setting as well as teaching ICD-9 coding and medical terminology at a local college. She brings added resources and knowledge to this office setting as well as being a technical resource for the regional facilities reporting to the Lubbock office.

In April, we hosted the educational satellite teleconference "A Comparison of Cancer Staging Systems" by April Fritz, CTR. If you missed it or had trouble downlinking, call the Lubbock Office for assistance.

Shelley continues to offer training at the Lubbock office for facility reporting staff tailored to their specific needs. If you have staff that need training in the basics of abstracting, Sandcrab Lite software and casefinding - give her a call.

— Shelley Jordan, C.T.R.
PHR 1-9-10

PHR 2/3/4

Veronica Spears, who joined our regional staff in December, has accepted the position of Trainer/Data Coordinator for the Dallas-Ft. Worth area hospitals. The hospitals affected by the change will be receiving a letter introducing Veronica as their new contact.

continued on page 2

We are pleased to welcome Dora Rodriguez-Flores as our new Public Health Technician I. She comes to us from the Environmental Division of the Texas Department of Health.

Reminders for Reporters and Registrars -

- * Be sure to record staging information with dates of the procedure(s) on your abstract so that we may ensure proper coding of this data field. Staging information can be obtained from the pathology reports, operative reports, scans, x-rays, lab tests, scopes, History and Physical and the Discharge Summary. This information should be limited to all information available within two months after diagnosis with the exception of prostate primaries. It is a 4 month period for prostate primaries.
- * The first course of cancer-directed treatment (within 4 months after diagnosis or the first 4 months after treatment was planned) should be coded in the appropriate field and documented in the Treatment Documentation box. Always include the date of the procedure(s).
- * When sending in paper abstracts to the Arlington office, please remember to send them certified, marked confidential and double enveloped and to the attention of the Texas Cancer Registry. A completed Transmittal Form needs to accompany each submission. If you do not receive an acknowledgment letter within 7 working days of your submission, please call us to ensure that we received your data.

The PHR 2/3/4 staff want to thank all the hardworking reporters and registrars who have been so cooperative in getting the remainder of the 1996 cases reported. We really appreciate you!!

— Elaine Allgood, CTR
Regional Program Manager

PHR 5/6

Greetings from the Space City. Regional staff have been busy closing out the 1996 cancer cases and death clearance match. As you all know, this process is one of our external steps in quality assurance for complete case ascertainment.

Marie Longoria, former Public Health Technician II trainer for regions 5/6, has accepted the Public Health Technician IV Team Leader position. Marie is looking forward to working with you.

We would like to thank those institutions who participated in our Facility Certification Workgroup Survey. Your input is very instrumental in trying to structure this pilot program for all regions to acknowledge abstractor and facility excellence in reporting. A lot of ground work has yet to be covered but we're working to recognize you!

Our own Diann Purvis, Regional Trainer and Data Coordinator, is part of this integral team.

We would like to extend a very gracious thank you to those institutions who have welcomed our regional staff to join them at their tumor board conferences. We would like to recognize the following facilities: Ben Taub General Hospital (Gay Davis, CTR), Houston Northwest Medical Center (Sandy Mullins, CTR), Kelsey Seybold (Kathy Stevenson, CTR), Memorial Hospital Memorial City (Ella Vernon, CTR), San Jacinto Methodist Hospital (Collie Smith, CTR), and Christus St. Joseph's Hospital (Debra Ravia, CTR). It is an upcoming event that we are looking forward to.

The Texas Cancer Registry Conference will be held in Austin, on July 28, 29 and 30 at the Red Lion Hotel. We look forward to seeing you, especially now that our scholarship fund is in place. Please check with the regional office for important guidelines in acquiring the fund.

— Judy Spong, M.S.; Marie Longoria, CTR; Diann Purvis;
and Wanda Taylor of the Region 5/6 Team

PHR 7

Our staff are looking forward to meeting with many of you at the Texas Cancer Registry Annual Conference and hope that all of you will be able to attend. We are quite excited about the agenda which is filled with many informative and timely sessions that will be of great value to you and your hospital for the next millennium. With the scholarships that are available this year, statewide attendance is sure to be great, providing lots of networking opportunities! Do not hesitate to come up and talk to me or any of our other staff during the conference.

Last April, staff attended a live satellite training teleconference entitled: "A Comparison of Cancer Staging Systems". During this session, the three major staging schemes, Summary stage, EOD and TNM were discussed and compared. These teleconferences are open to all hospital staff within the regional area free of charge. Two continuing education credits from the National Cancer Registrars Association were granted.

When submitting cases to us, don't forget to attach a transmittal form so that we can verify what was sent. The transmittal form needs to be submitted whether the cases are sent electronically or on reporting forms. Appendix B in the Cancer Reporting Handbook provides instructions for completing the transmittal form. As another reminder, when your facility completes its reporting for a given year, be sure to send us your disease index and your accession register. This insures that we have not overlooked any reportable cancers from your facility. We definitely appreciate all of your hard work in reporting your cancer cases.

— Annette Van de Werken, M.S., R.D., L.D.
Regional Program Manager

Many thanks go to the hostesses of our most recent training sessions: Gloria Wisdom, Minnie Montalvo, Cecilia Garza, Albina Henderson, Linda Lamb and Leonor Garza. Every training session brings a new light to our common problems with abstracting. Please remember that you are probably most ready to learn something right when your question pops up. So when you're in the middle of working the abstracts and you have a question, give us a call right then. You will probably learn more because you are putting it to use right away and it will prevent us from having to call you and ask about it later. We welcome telephone inquiries!

Many of you participated in casefinding studies in our regions during the last quarter and we thank you for your cheerful cooperation. Unfortunately we are finding many different methods for finding cases. All of you are finding *some* of your cases with your current methods. But the purpose for performing this quality assurance monitoring to your facility is to determine whether or not you are finding *all* of your cases. It is not our intention to come to your facility every year to check all of the reports done. It is our goal to work with you to find a system that will help you get better and better at finding *all* of your cases, year after year. Please let us know how we can help you in this.

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

The TCR conference is just around the corner. Remember, the dates for this event are July 28th-30th at the Red Lion Hotel in Austin. Everyone should have received a conference packet which contained a registration form, the proposed conference agenda, a training needs survey, a hotel reservation card as well as a hotel brochure with a map. If you did not receive the packet, please contact Jackie Shaw and another will be mailed to you. You will need to make your hotel reservation no later than June 30th. The hotel is requesting that you either mail the reservation card back to them or make your reservation by phone if you wish to not send your credit card information thru the mail. We will also need your completed registration form and training survey in our office no later than June 15th. If you or your facility wish to apply for the \$200.00 scholarship, you will need to indicate that on the registration form. We will be contacting you or the facility for your tax id# as well as an address to which you wish the scholarship mailed. The processing of payment of the scholarship will take place after the conference, but submission of this information beforehand will help speed up the process. If you wish, you also may provide this tax id information at the conference. We anticipate that you should receive payment 3-4 weeks after the conference. We hope to see you there!

— Jackie Shaw

Additional NAACCR audit info

The North American Association of Central Cancer Registries (NAACCR) has been contracted by the Centers for Disease Control to conduct audits of all the states which are part of the National Program of Cancer Registries. In order to conduct the audit of the Texas Cancer Registry, the NAACCR auditors must go back to the source document to review the data. NAACCR will randomly select 9-13 facilities to audit for casefinding and then will randomly select cases to reabstract within the selected facilities.

Only four sites are being reviewed - breast (female only), colorectal, lung and prostate. The 13 data items which will be reviewed on the selected cases are: general summary stage, diagnosis date, diagnosis year, date of birth, state of residence at time of diagnosis, primary site, subsite, histology, laterality, gender, sequence, and race. The auditors will be in Texas two weeks (June 14th - 25th) and will spend one day in each selected facility to conduct their reabstracting and recasefinding studies. The recasefinding will be done using pathology, non-gyn cytology, bone marrow, and

autopsy reports. The medical records disease indices, surgery logs, radiation therapy logs and any other case finding sources at the selected facilities will also need to be available for the auditors.

Upon completion of the audit, the state registry will have the first opportunity to reconcile the "queried" abstracts. Some abstracts may be sent back to the facility for further clarification if needed at this point. A final report will be sent to the Texas Cancer Registry in October. None of the selected facilities will be associated with any individual data since it is the State that is being audited and not the facility. This audit is designed to identify areas of strengths and weaknesses in the TCR's data collection in order to focus on further improvement.

If selected, you can expect a letter which will give the specific date the auditor will be in your facility. We realize how busy you are and would like to thank you in advance for your time and cooperation in this audit.

— Susan Perez, ART, CTR

Cancer Case Completeness

PHR 1:	1996	85%	PHR 4	1996	87%	PHR 7	1996	94%	PHR 10	1996	98%
	1997	77%		1997	53%		1997	83%		1997	85%
	1998	51%		1998	18%		1998	39%		1998	31%
PHR 2:	1996	90%	PHR 5	1996	92%	PHR 8	1996	95%	PHR 11	1996	96%
	1997	70%		1997	72%		1997	82%		1997	70%
	1998	31%		1998	14%		1998	21%		1998	22%
PHR 3:	1996	88%	PHR 6	1996	100%	PHR 9	1996	92%	Statewide:	1996	93%
	1997	64%		1997	80%		1997	82%		1997	73%
	1998	21%		1998	22%		1998	53%		1998	26%



As of May 17, 1999

Compliance

We are nearing our goal of 95% statewide complete reporting for 1996, but are still lacking for reporting years 1997 and 1998. Please assist us in gaining more complete and current cancer information for Texas by reporting in a timely manner.

1997 DEATH CLEARANCE

The TCR will be performing the Death Clearance for 1997 deaths. Death clearance is an essential step in achieving complete population-based cancer reporting. It serves as a check on completeness of reporting and often identifies cases which should have been reported but were not. Death clearance includes identification of all deaths with cancer mentioned as the underlying cause of death on the death certificate which are not found in the TCR's database.

These cases are identified by matching the Bureau of Vital Statistics (BVS) death file to the full TCR database. Those cases that are not found in the TCR database must be followed-back to the facility where the death occurred. TCR staff may be contacting you to resolve each of the cases from your facility identified as missing from the TCR database. Resolution may entail obtaining an abstract (report) for the case, verifying that the patient was seen with no evidence of cancer or determining that there is no record of the case having been seen at your facility.

We realize that this is a time consuming process for you and appreciate your cooperation in responding to our requests as soon as possible. The results of the follow-back from all missing cases must be incorporated in the TCR database by either adding the case or creating a death certificate only (DCO) case. This must be accomplished before the TCR can publish the 1997 Texas cancer incidence rates. The goal of the TCR is to have the DCO cases account for 3% or less of the total cancer cases for a given year.

— Jane Yoakum

REMINDER - CANCER REPORTERS

Some facilities continue to report their 1998 cases using the NAACCR 5.0 or 5.1 versions, which do not contain all the required reportable data fields. Please remember that all 1998 cases submitted electronically must be reported in the NAACCR 1998 format (Version 6.0). To find out what NAACCR version your facility is using, contact your software vendor. The following is the NAACCR format/layout and version and how it relates to the Texas Cancer Registry cancer reporting requirement:

VERSION	FORMAT/LAYOUT <i>(year represents the year version was released)</i>	REQUIREMENT	RECORD LENGTH
5.0	1996 NAACCR	Cannot accept for any years	5,300
5.1	1997 NAACCR	All years prior to 1998	5,966
6.0	1998 NAACCR	For 1998 cases and diagnosis thereafter	5,966
7.0	1999 NAACCR	Beginning with cases diagnosed in 1999 <i>(not available until September 1999)</i>	5,966

TxTRA

This year's TxTRA planning committee has been working hard to make sure our annual conference will be a big hit. The conference will be held in Houston at the Red Lion Hotel October 20-22, 1999. Hope to see you there!

— Marie Longoria, CTR



SANDCRAB Lite USER - UPDATE

A new version of SANDCRAB Lite (SCL) is in the process of being developed. This new version (SCL Version 4.0) will be compatible with Windows 3.x, Windows 95, Windows 98, and Windows NT. Fields that will be affected by the new version include:

Registry Number (will be lengthened, CCYY12345)
Diagnosis Date (will include 9's)
Treatment Date (will include 9's)

If you are upgrading your PC to a newer model with a speed of 300 MHz or higher, there is an updated

version of the SCL files you need to request. The error message you will get with the existing SCL 3.0 software is:

"An error has occurred in your program. To keep working anyway click Ignore and save your work to a new file."

This is a WINDOWS error message. It comes up immediately after clicking on the SCL icon. Using Windows 95, you have the options to ignore or cancel. Using Windows NT, you only have the cancel option. If you get this message, contact the Texas Cancer Registry and we will ship a new file to override the problem. The new version of SCL, due to be released late Summer 1999, will have the corrected version of this file included in the installation disk.

A SCL survey is in the process of being developed. This survey will target facilities that use forms to report their cases and facilities that use SCL V2.0 and V2.1 for DOS. Please be on the look out for the survey and we would appreciate your feedback. If your facility is still using version 2.0, please call and request a newer version.

— Elena Faz, CTR

Texas Cancer Registry Releases 1995 Incidence Report

The Texas Cancer Registry has now released 1995 statewide cancer incidence rates. Our report, "Cancer in Texas, 1995", represents the first year of what we expect to be continuous statewide cancer incidence data.

Figure 1. Percentage of 5 Leading Cancers Texas All Races, 1995

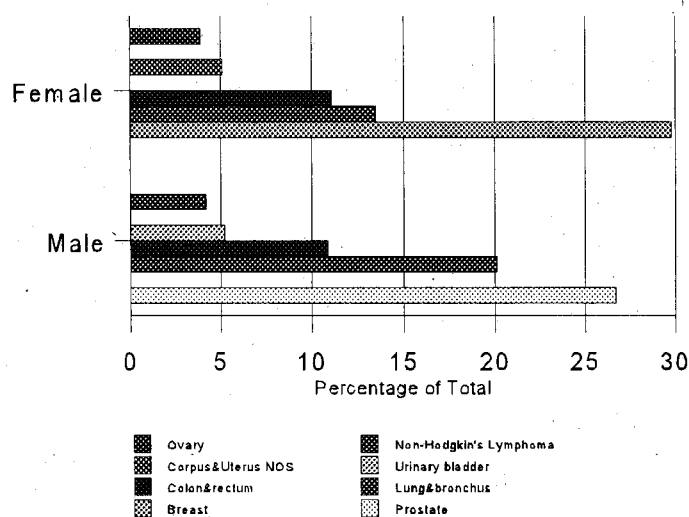
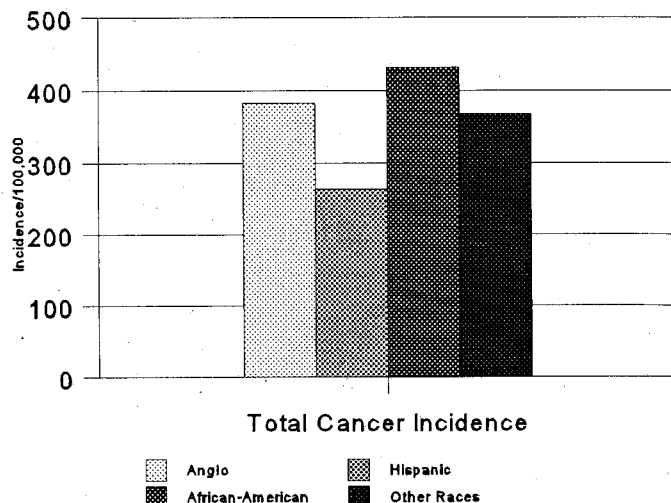


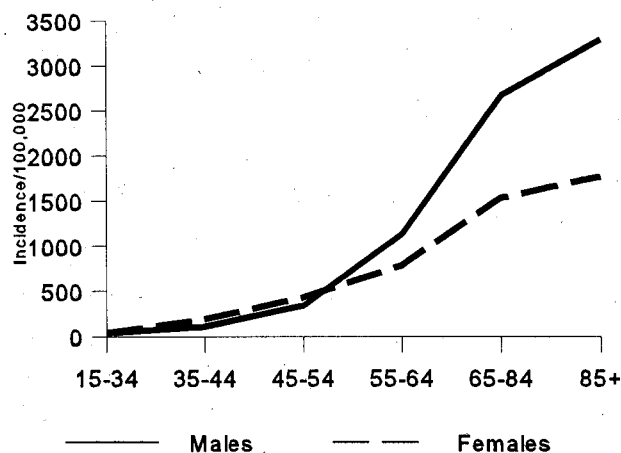
Figure 1 shows the 5 leading causes of cancer in Texas males and females of all races during 1995. Prostate cancer was the leading cancer site in Texas males, and breast cancer was the leading site in Texas females. The second and third leading sites in both males and females were lung and bronchus, and colon and rectum. This pattern is similar to the leading cancer sites in other populations. Total cancer incidence rates in Texas also varied by race/ethnicity. Overall, the highest cancer incidence rates occur in Texas African Americans and the lowest rates in Texas Hispanics (Figure 2). Cancer incidence also differed by age (Figure 3). Cancer incidence rates were slightly higher in

Figure 2. Cancer Incidence in Texas By Race/Ethnicity



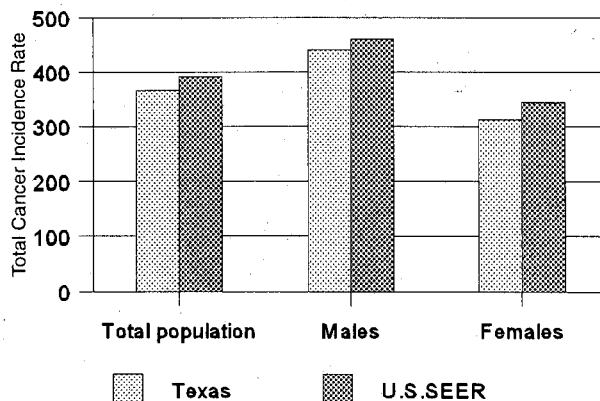
females during the younger years (35-55), but much higher in males after age 60 due to prostate cancer incidence rates in that age group.

Figure 3. Age-Specific Rates for Total Cancer Texas Males and Females, 1995



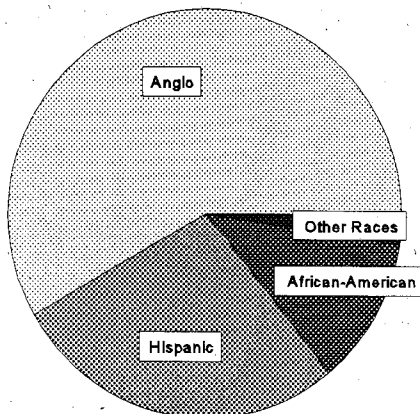
To evaluate how well cancer incidence in Texas reflects national data, the 1995 rates were compared to the SEER program incidence rates for the same year. We found the Texas all races cancer rate to be lower than the SEER rate for both males and females (Figure 4). The lower rates may be the result of differences in the race/ethnic composition of the two populations. Hispanics, which have substantially lower overall cancer incidence rates, account for a larger proportion of the Texas population than the SEER population.

Figure 4. Total Cancer Incidence Rates in Texas 1995 vs. SEER Program, 1995



In this statewide report, race/ethnic groupings in Texas are reported using the North American Association of Central Cancer Registries (NAACCR) definitions. The Anglo race consists of the non-Hispanic white population of Texas. Two other major groups include the Hispanic population and the African-American population. All other races (American Indians,

Figure 5. Texas Population, 1995



Asian Indians, Chinese, Japanese, etc.) are combined together into a single group of "Other Races". Texas Anglos constituted 58.6%, Hispanics 27.4%, African Americans 11.7%, and Other Races 2.3% of the population in 1995, as shown in **Figure 5**:

The incidence rates are presented for a standard set of cancer site groupings, as done by the National SEER (Surveillance, Epidemiology and End Results) Program, making comparisons with other populations easier. This report also includes for the first time data for stage of disease-at diagnosis.

Copies of the Texas 1995 statewide cancer incidence report are available from the Texas Cancer Registry and may be requested by calling 1-800-252-8059. In addition, the incidence rates for 1995 for the state of Texas and by Texas Public Health Region and Texas county will be posted on our web site: <http://www.tdh.state.tx.us/tcr>.

— David R. Risser, Ph.D.

Visit Our Website!

We are now posting TCR job announcements on our webpage. Just sign on to our website and click on "Job Opportunities" to see job titles, salaries and closing dates of positions we have open. There is also a link to the Bureau of Human Resources webpage, which lists other positions in the Texas Department of Health and gives information about the application process.

Check it out at <http://www.tdh.state.tx.us/tcr>

— Ruth Powers

Greatest Accomplishments!

Please join us in congratulating our newest Certified Tumor Registrars in Texas. They received their certification in March of this year. Again congratulations for a job well done!

Sonia Beasley, CTR
UT Medical Branch, Galveston
Galveston, Texas

Linda Powell, CTR
Department of VA Medical Center
Houston, Texas

Cindy Dorsey, CTR
Seton Healthcare Network
Austin, Texas

Virginia Sredanovich, CTR
Medical Center Hospital of Odessa
Odessa, Texas

Sandra Gamber, CTR
Seton Healthcare Network
Austin, Texas

Patricia M. Swetland, ART, CTR
Seton Healthcare Network
Austin, Texas

Mildred Jordan, CTR
All Saints Episcopal Hospital
Fort Worth, Texas

— Leticia Vargas, CTR

Error in Cancer in Texas 1995 Report

Please note that our recently released report, Cancer in Texas 1995, contains an error in one of the incidence rates. In Table 6 on page 16 of the report, the rate in African American women for "All Sites Combined" (at the top of the table) should be 335.6, rather than 5.6 as listed. Some of these reports were mailed out before we identified this error, so please be sure to check your copy and make the correction.

Staffing News

We are excited to have 3 new staff members at the TCR.

Henrietta Jimenez is our new Administrative Tech II and you will hear her friendly greeting when you call our office. Henrietta has been with TDH for 11 years and most recently with Radiation Control. She lives in Elgin, which is approximately 25 miles east of Austin and has 3 children, ages 11, 16, and 17.

Cheryl Bowcock serves as our Research Specialist IV who evaluates and monitors overall cancer registry data quality and assists in planning and conducting cancer-related research projects. Cheryl has worked with health-related data with TDH for 11 of the past 16 years, beginning as a statistician in the Cancer Registry in 1983. She came to us from the Office of Border Health. Cheryl shares her home with several lovable cats and enjoys volunteer work with animal rescue.

continued on back page

Staffing News continued from page 7

Shau Mei Young, our Research Specialist II, is originally from Taiwan and has been in the USA for over 17 years. Shau Mei has a Masters of Science degree in Statistics and has TDH experience with Research and Public Health Assessment. She stays busy outside of TCR with a husband and 4 teenage children, ages 18, 15, and twin 13 year old boys.

We regret having to say farewell to Judy Kropp and Ruth Powers. Ruth has been very helpful in putting our newsletters together, a talent that will be greatly missed.

— Annette Van de Werken, M.S., R.D., L.D.

Pocket Staging Cards

The American Joint Committee on Cancer's (AJCC) pocket staging cards are back, due to popular demand! With thanks to the American Cancer Society (ACS) who funded this project, the staging cards have been revised to correspond with the *Cancer Staging Manual, 5th edition*. Single cards are available at no charge from the local ACS offices, or from the National Cancer Information Center by calling 1-800-ACS-2345. Multiple copies can be ordered from the Texas Division for \$1.00 per set. The sites available are breast, cervix uteri, colon/rectum, lung, and prostate.

— Leticia Vargas, CTR

How to Contact Us

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Austin (PHR 7)	512/467-2239
	or 1-800-252-8059
Houston (PHR's 5,6)	713/767-3180
Lubbock (PHR's 1,9,10)	806/767-0323
San Antonio (PHR's 8,11)	210/949-2169

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

Just write us a note to let us know that you would like to be on our newsletter mailing list if you are not already receiving it.



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