

The ACRA REMINDER



January 2012

Alabama Cancer Registrars Association 2011-2012 Officers and Committee Chairs

President - Priscilla Foster
President Elect - Lou Ellen Marchman
Vice President - Diane Hadley
Secretary - Joanne Powers
Treasurer - Shantel Dailey
Treasurer Elect - Belinda Limbaugh
Historian/Parliamentarian - Pamela Tillman
Past President – Sheila Grant

Education – Patricia Caldwell
Bylaws – Judy Smith
Ways & Means – Silvia Ramsey
Membership – Cynthia Dixon
Donation – Janice Granger
Nominating – Diane Lolley
Ballots – Cindy Johnson

A Message from our President ...

Greetings from Priscilla Foster, President of ACRA 2011-2012

I would like to take this opportunity to wish each and everyone a very blessed and prosperous New Year. I pray that 2012 will be a great year for all of our members and prospective members. We have great plans for our association for this year. The board has been working along with Shantel Dailey to get our ACRA website up and running. We hope that you like what has been put in place for the association and that you will utilize the website for educational updates and very important information regarding meetings and changes.

We value your participation and comments and would like for you to think about topics of interest for our [2012 Annual Meeting](#) and submit them to us by the end of March.

We are here for you and are working for the association. We are focused on keeping our association abreast of all updates and changes that are forthcoming. We are working toward providing education information that will help you in your daily performance. We are excited and hope that you are excited too. We are ready to go to another level of expertise in our work to make 2012 a year of anticipation and great expectations.

Take a moment to visit our new up and coming website in February (a more definitive date to follow) and let us know what you think and how we can make this website better. We value your comments. Remember the website is a work in progress and we want your input. The website's address is www.alabamacra.org.

A note from your Vice President

I am very glad to be serving ACRA as Vice President this year and will try to do the best job that I can for all members and to assist our president. The newsletter is quite a challenge, especially after such wonderful newsletters in the past. During the week of April 9th – 13th we will celebrate National Cancer Registrars Week. Please plan events, luncheons and other inventive ways to celebrate. Take pictures during this special week and send to me so that I can include them in the next newsletter. My email is diane.hadley@adph.state.al.us



Membership Committee News!

Hello to all ACRA members. We are excited about our growth for the New Year. We want to thank each member for their dedication to the organization. Your support has been awesome!

Currently we have 65 members. We want to welcome our new members for 2011-12.

- Caress Alexander, Mobile Alabama
- Joan Baucom, Birmingham, Alabama
- Rebecca Thomas, Tuscaloosa, Alabama
- Ruthanne Whiddon, Anniston, Alabama
- Mischele White, Montgomery, Alabama

Membership Activities

- E-Birthday Cards and Holiday Greeting Cards were sent out by Kelly Evers
- Membership Roster was emailed to members on 12/31/11.

Note: We want to thank everyone for sending in corrections on the membership roster. If you know of someone who is a member and did not receive a copy of the membership roster, please contact me via email cynthiadixons@aol.com.

Member Benefits

Being a member of the association gives you access to newsletter, voting rights, discounted registration and opportunities to network with other registrars, just to name a few benefits.

Our goal is to recruit other healthcare and non-healthcare professionals to join our association.

We look forward to serving each of you this year. TEAM- Together Each Achieves More!

ACRA 2011-12 Membership Committee
Cynthia Dixon, Chairperson
Kelly Evers, Member
Caress Alexander, Member

The Education Committee for ACRA 2012

As we embark upon a new year it is the goal of the 2012 Education committee to provide opportunities for meaningful professional development and growth. It is our goal to provide cutting edge knowledge updates to the membership and other interested health care professionals. We are striving to become your resource for all of your educational needs. It is our plan to implement a mentorship program for new registrars and those preparing to take the certification exam. We will be reaching out to neighboring state associations to consider forming a Regional Consortium for CTRs. This will provide an avenue by which we will achieve a level of excellence in all areas; not just education alone but visibility with our legislatures and exposure to other health care providers as well as the general public regarding who we are and how what we do effect cancer treatment worldwide.

Our annual Fall Education Conference 2012 will provide members with knowledgeable speakers and learning opportunities. We will also focus on areas of potential career ladders for those interested in advancement. We will include Registry informatics this year as well. This will be a year like no other in our association's history as we aim for excellence in all that we do! So make sure you check the newsletter each quarter for educational snippets and the ACRA website. You will be able submit questions regarding difficult cases as well providing answers for others.

We Are On The Move!

Pat Caldwell, LPN, CTR
ACRA Education Chair 2012

Marketing Committee for Alabama Cancer Registrars Association 2012

Committee Chair: Yolanda Graham-Gatson

The marketing committee is a newly formed committee for the Alabama Cancer Registrars Association.

The Marketing Committee will be responsible for marketing our association and working with different organizations to inform them of whom we are and our purpose, goals, etc.

The Committee will:

1. Promote activities to increase the awareness of the Cancer Registry profession and our association.
2. To seek active liaison with other health care professionals and other state registrars associations.
3. Promote understanding of, respect for, and interest in the profession within our communities.
4. Work closely with the Education Committee, the Donation Committee, and the Ways and Means Committee.
5. Contact registrars at hospitals in the state to encourage and motivate them to get involved with the Association.

I encourage you to share your ideas to help make this a successful venture.

Alabama Cancer Registrars Association

2011 Annual Education Conference

“Navigating Education with Wealth of Knowledge”

The 2011 annual meeting was a huge success due to your great participation and our informative speakers! A special thanks to Past President Sheila Grant, Education Chair Priscilla Foster, and the 2011 Board members. We are truly appreciative of Saint Vincent’s Hospital and their staff for graciously hosting the conference. Their hospitality and facility was outstanding!!



Dr. Helen Krontiras, UAB



Dr. Frederick Green, COC Surveyor

Wonderful Speakers!



Yolanda Graham-Gaston received the Distinguished Registrar’s Award presented By President Sheila Grant



Installation of the New ACRA 2011 – 2012 Officers



The ACRA Baskets were a huge hit! Thanks to the Ways & Means Committee and everyone that made a Basket!!

Message from New Data/Education Manager



I would like to introduce myself to those of you who may not know me. My name is Tara Freeman and I am the new **Data/Education Manager** for the ASCR. Although, I left the ASCR for over a year to pursue my medical coding passion, in some ways it feels as if I never left. I am happy to be back among ASCR colleagues and I look forward to the opportunity to meet all of you. I am married and I am a mother to two very active girls who keep me very busy with their extracurricular activities. When I'm not traveling to band functions, basketball games or guitar lessons, I like to watch television shows and spend time with my family. I am also an analytical person who likes to learn new things. I am new to the position and I welcome any ideas that any of you may have that

will help us all learn more about this evolving profession. Please give me a call at 334-206-7035 or e-mail tara.freeman@adph.state.al.us with any ideas or suggestions. I look forward to hearing from a lot of you.

Collaborative Staging Updates

Highlights of the CSv02.04 release:

- The new release will be effective for all cases diagnosed January 1, 2012 and later
- Over 100 changes are incorporated in v02.04:

11 updates to CS Coding Instructions, Part I, Section 1

16 updates to CS Coding Instructions, Part I, Section 2

110 updates to the site-specific schemas and associated sections in the CS Coding Instructions, Part II (Schemas)

Each change is fully documented in the CS Release Notes

Calling all 2010 reportable cases!

Please make sure that you have identified all 2010 cases that are reportable to the ASCR and submit to your regional coordinator as soon as possible.

2010 Data Resubmission

Reminder your regional coordinator will send out the 2010 Data Resubmission letters in February. Please respond promptly and remember to zip your file if it contains over 500 cases. When uploading your file that is zipped place a dot in Non NAACCR format.

Hospital News and Announcements



Regional Medical Center Anniston affiliation with UAB brings leading-edge to cancer care.

Speaking at the announcement of the UAB-RMC cancer treatment affiliation were (from left) Dr. Jefferson M. Trupp, chairman and medical director of RMC's Radiation Oncology Center; Dr. Edward Partridge, director of the UAB Comprehensive Cancer Center; and David McCormack, president and CEO of RMC.

At a symbolic ribbon cutting, Dr. Edward Partridge, director of the UAB Comprehensive Cancer Center, said RMC's good reputation for cancer care is why it was selected as one of the inaugural UAB Cancer Care Network affiliates. Others are Medical Center of Central Georgia in Macon, Ga., Southeast Alabama Medical Center in Dothan, Russell Medical Center in Alexander City, and Gulf Coast Medical Center in Panama City, Fla. Dr. Partridge said UAB anticipates announcing additional affiliates throughout the coming year and expects cancer patients will seek out hospitals in the network for the highest quality cancer care.

What the UAB affiliation means to RMC is the ability to utilize UAB's resources for continuing education by RMC's doctors and nurses, quality assurance in UAB's cancer programs, the opportunity for cancer patients locally to participate in clinical trials using the latest cutting-edge technology for their treatment, and access to research expertise and resources at the local level. The UAB Comprehensive Cancer Center is the only National Cancer Institute-designated center in a six-state region.

David McCormack, president and CEO of RMC, said, "We are very excited to expand the excellent cancer care offered at RMC to the patients of Calhoun and surrounding counties. To be chosen to join the UAB Cancer Care Network is a testament to the level of care we provide. "RMC's medical staff of 185 physicians, representing all major specialties, and more than 1,400 employees provide the human connection and caring spirit between technology and patient care."

Continuing Medical Education

Neuroendocrine Tumor Regional Conference

"Multidisciplinary Management of NET Cancers"

For Details & Registration: www.nanets.net

February 04, 2012

The Battle House – A Renaissance Hotel
26 North Royal Street
Mobile, Alabama

Jointly Sponsored by:



North American
NeuroEndocrine
Tumor Society



National Cancer Registrars Association 38th Annual Educational Conference



NCRA's 38th Annual Educational Conference will be jammed packed with cutting-edge plenary sessions, timely panel discussions, and informative breakout sessions. With over 30 sessions, you won't want to miss this opportunity to earn up to 20 CE credits.

APRIL 18-21, 2012

GAYLORD NATIONAL | WASHINGTON, DC

To download or print the brochure - http://www.ncra-usa.org/files/public/NCRA_RegBro2012web.pdf



NCRA 2012 Scholarships

Two scholarships are available to attend NCRA 2012: the Danielle Chufar Scholarship and James A. Bradley Memorial Scholarship. Both cover the full conference registration fee, round-trip coach airfare, and hotel for three nights. **Learn More and Download Applications.** Go to www.ncra-usa.org Annual Conference – Scholarships

State Association Basket Raffle

State associations create beautiful baskets that represent their communities and are raffled during NCRA 2012. Remember to buy your tickets.



National Cancer Registrars Week 2012

Cancer Registrars: Partners in Progress | April 9 - 13, 2012. NCRW was established as an annual celebration to promote the amazing work of Cancer Registry professionals. Founded by National Cancer Registrars Association, NCRW is officially celebrated the second week in April; however, by the nature of their work, Cancer Registrars should be celebrated year-round for their incredible dedication toward quality cancer data management.



NCRA Call for Volunteers

- [Ways to Help](#): See for additional methods to lend a hand.
- [Partners in Education \(PIE\)](#): Mentoring and Volunteer opportunities.
- [Leadership](#): Apply your skills in an elected position. As a member-based organization, NCRA relies on its membership for committee leadership and expertise.

Reasons to Volunteer with NCRA

1. It's FUN.
2. It's Free.
3. Opportunity to give back to the cancer registry field.
4. A chance to meet new & likeminded people.
5. Simple to do.
6. Develop and hone new talents and skills.
7. It's immensely satisfying.
8. Great for your resume.
9. It's a growth opportunity.
10. A chance to get involved in the cancer registry field and community.

CREDENTIAL MAINTENANCE

To maintain certified status, the current continuing educational requirements of NCRA must be met biennially. The required continuing education and training keeps the CTR abreast of new developments in the field of oncology and registry data management. Thus, the CTR's knowledge and skills are continuously enhanced and reinforced.

A CTR's 2-year cycle ends on December 31st. The deadline to submit required (annual) CTR Maintenance fee &/or (biennial) CE hours is January 31st. CTRs are out of compliance when requirement (s) are not updated by February 1st.

Per the Continuing Education Committee Policy and Procedures, NCRA's Council on Certification established a 10% random audit of all submitted CE Summary forms. If audited, CTRs will be asked to submit copies of attendance documentation of CE activities. The purpose of the audit is to ensure compliance with the CTR's CE requirements at the time of certification renewal.



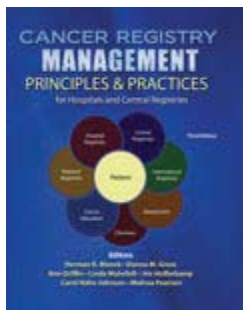
Download [A Guide for CTR Maintenance](#).

2012 CTR Exam

- Exam Dates
March 3-17, 2012
Application due by January 31, 2012

September 8-22, 2012
Application due by July 31, 2012
- [Download the 2012 CTR Exam Handbook & Application](#).

New 3rd Edition
Cancer Registry Management Principles & Practice for Hospitals and Central Registries



NAACCR 2012 Live Webinars

Upcoming NAACCR Live Webinars held in Montgomery. Contact Tara Freeman at 334-206-7035 for more information.

- 2/2/12
Collecting Cancer Data: Lung
- 3/1/12
Abstracting and Coding Boot Camp: Cancer Case Scenarios
- 4/5/12
Collecting Cancer Data: Lower Digestive System

NAACCR 2012 Webinar Recordings

Upcoming NAACCR Webinar Recordings on the **Data Collection of Thyroid Cases** will be held at the Cullman County Health Department in February, March – **Pancreas cancer**, April – **Lung cancer** exact dates TBA from 9:00 a.m. to noon. Contact Diane Hadley at 256-775-8970 for more information.

Upcoming NAACCR Webinar Recordings on the **Data Collection of Bladder Cases** will be held at the Mobile County Health Department on February 7th, March 13th – **Breast cancer**, April 1st – **Prostate cancer**. Contact Mark Jackson at 251-433-7809 for more information.

A 3 hour CEU certificate will be given to all webinar attendees.

Questions and Answers from past NAACCR Webinars

Question: What histology code is assigned if the path report says DCIS with comedo CHANGE as opposed to with comedo features?

Answer: I would assign 8500/2. Change is not an ambiguous term used to code histology.

Question: Please explain the difference between the epiglottis that is coded to Larynx (C32) and that not coded to Larynx (C10.1). Are both staged as Larynx?

Answer: The epiglottis is kind of like a big flap. The flap is open when you breathe, and it closes and covers the entrance to the larynx when you swallow. The part that faces down into the larynx when it is closed is the posterior epiglottis (C32.1). The part that faces outward when it is closed is the anterior portion of the larynx and called the anterior epiglottis (C10.1). The surface of the anterior epiglottis is more like the upper esophagus, and the surface of the posterior is more like the respiratory tract. If the primary site is epiglottis (C32.1), use the Supraglottic Larynx CS schema when assigning codes for CS data items. If the primary site is anterior surface of the epiglottis (C10.1), use the Anterior Surface of the Epiglottis CS schema when assigning codes for CS data items.

BOOK REVIEW

Over-Diagnosed, Making People Sick

In the Pursuit of Health by Dr H. Gilbert Welch.

Submitted by Karen Hood, RHIA, CTR



Dr. Welch is a physician that has over 25 years of experience in his medical practice and as a researcher. He states that he has been in excellent health and hasn't seen a doctor since he was a child. He starts his introduction by telling us how if he went into a clinic for a routine visit with no complaints, he could probably be given these diagnoses, that he would not necessarily need any treatment for and they are:

1. Borderline hypertension
2. Overweight
3. Gastroesophageal reflux disease
4. Benign Prostatic Hyperplasia
5. Degenerative Joint Disease
6. Raynaud's Disease

Chances are on that "routine visit", the doctor could order a panel of over 20 lab measurements and possibly some imaging studies. The point is all of these diagnosis, visits, screening, and medications do not necessarily mean we are getting "healthier". He mentions that we are living longer, but we are living longer sicker!

In chapter 2, Dr. Welch tells us how the rules were changed that allowed us to get more diagnoses of disease. For example, the ranges were lowered for diabetes (fasting blood sugar was 126-140), Hypertension (high blood pressure was 160/100), Hyperlipidemia (high cholesterol was 240) and Osteoporosis in women (T-score was 2.5). The drug companies were then allowed to sell more drugs to treat these "new" cases they were diagnosed because of the lowered "normal" measurement. Over-diagnosis happens when patient get diagnosis for conditions that they don't develop or have any symptoms.

In chapter 3, he tells us how with the new imaging studies we are able to again find more or "see" more diagnosis. Asymptomatic patients were scanned in a study and about 10% of people had gallstones, 40% of people had damaged knee cartilage, and 50% of people had bulging disc in the back. There is also a prevalence of abdominal aortic aneurysm, blood clots in the leg and lung that are found on diagnostic imaging when the person has absolutely no sign or symptoms. The same goes for polyps, nodules and cysts found on CT.

Chapters 4, 5, and 6 discuss how we look harder for prostate, breast, and other cancers. Screening for prostate cancer is a perfect example of over-diagnosis. The more we screened with the PSA (prostate specific antigen) test, the more prostate biopsy we do, the more cancer we find BUT the lifetime risk of death from prostate cancer is still only 3 percent. Most men who die from prostate cancer are around 80 years old. He mentions very few people die of thyroid cancer and many don't require treatment even though the diagnosis rate is 20 times the death rate. Studies on autopsy have shown, of a thousand women, 2-40% who died of reasons other than breast cancer, had pathologic evidence of breast cancer. For breast cancer he discussed the controversy concerning screening and the use of mammography.

You may wonder, "Why is over-diagnosis a problem?". The example Dr. Welch gives is a case in which he treated a patient with mild diabetes who had no symptoms. Because of the medication, the patient blacked out from low blood sugar while he was driving. He broke his neck and was in the hospital a month. Dr. Welch discontinued his medication. The patient is now 90 and he has not been treated for diabetes since the accident.

Maybe over-diagnosis is the result of our healthcare reimbursement system being driven by diagnosis for payments. In conclusion, his suggestions are to change our paradigms when it comes to diagnosis and treatment. Early may be good, but not always better, and there is more to prevention than early diagnosis, mainly, health promotion and healthy lifestyles.



Birthday Wishes

October

2 – Mark Jackson
8 – Patricia Caldwell
9 – Lou Ellen Marchman
17 – Jennifer Ballard
26 – Briana McCants
28 – Bailey, Bobbie

November

5 – DeeAnn Hennis
10 – Yolanda Graham
10 – Teisha Robertson
14 – Kay Cook
18 – Bonnie Nelson

December

17 – Sheila Grant
19 – Judy Lang
31 – Diane Hadley

January

2 - Priscilla Foster
11 – Caress Alexander
11 - Silvia Ramsey
15 - Tara Freeman
15 – Yolanda Topin
24 - Kelly Evers
26 - Pamela Tillman

February

17- Wendy Richardson
14 - Hope Mitchell
25 - Karen Hood

March

16 – Krystina Carlton
18 – Nell Downs
20 – Joanne Powers
27 – Rosalind Patterson