

**DEPARTMENT OF STATE HEALTH SERVICES
CONFIDENTIAL CANCER REPORTING FORM**

Example 3

SHADED ITEMS WILL BE COMPLETED BY CANCER REGISTRY STAFF	This form MUST be used for all cases diagnosed on or after 2008.
(580) DATE OF ADMIT/FIRST CONTACT: 09092008 (MMDDYYYY)	(2460) PHYSICIAN MANAGING: TX4321
(550) REGISTRY NUMBER: 200800100	(2470) PHYSICIAN FOLLOW UP: TX9991
(540) REPORTING FACILITY NUMBER: 998	(2410) FACILITY REFERRED FROM: 0000000000
(500) REPORTING SOURCE: 1	(2420) FACILITY REFERRED TO: 0000000000
(2300) MEDICAL RECORD #: 00A123	(560) SEQUENCE NUMBER: 00
(610) CLASS OF CASE: 2	(2220) OTHER PRIMARY TUMORS: (SITE,MORPHOLOGY, and DATE)
(2230) LAST NAME: ENDEAVOR	
(2240) FIRST NAME: PATIENCE	
(2250) MIDDLE NAME:	
(2390) MAIDEN NAME:	(630) PRIMARY PAYER AT DX: 99
(2280) ALIAS NAME: ENDEAVOR PATTI	(390) DATE OF INITIAL DX: 09022008 (MMDDYYYY)
(2330) STREET ADDRESS: 321 ELSEWHERE CR	(420, 430) ICD-O-2 MORPH/BEHAVIOR BEFORE 2001:
(2335) ADDRESS AT DX SUPPLEMENTAL: GARDEN STATE APARTMENTS	(522, 523) ICD-O-3 MORPH/BEHAVIOR DX ON OR AFTER 2001: 81403
(70) CITY: SANDCRAB	(400) PRIMARY SITE: C187
(80) STATE: TX	(440) GRADE OF TUMOR: 3
(100) ZIP CODE: 99999	(410) LATERALITY: 0
(90) FIPS COUNTY CODE AT DX: 481	FINAL DIAGNOSIS (2580, 2590)
(2320) SSN: 999999999	(2590) MORPHOLOGY/BEHAVIOR AND GRADE: ADENOCARCINOMA, POORLY DIFF
(240) DATE OF BIRTH: 01011955	(2580) PRIMARY SITE AND LATERALITY: SIGMOID COLON
(250) PLACE OF BIRTH: 002	
(160) RACE 1: 02	
(161) RACE 2: 88	
(162) RACE 3: 88	(490) DIAGNOSTIC CONFIRMATION: 1
(163) RACE 4: 88	
(164) RACE 5: 88	(780) TUMOR SIZE (MM): DX PRIOR TO 2004
(190) SPANISH/HISPANIC ORIGIN: 0	(760) SUMMARY STAGE 1977:
(220) SEX: 2	(759) SUMMARY STAGE 2000:
(2680) OTHER PERTINENT INFORMATION: 53 YO AAF, BORN IN MAINE	

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(2800) (2004 and >) CS TUMOR SIZE: 050	(2640) RX TEXT-CHEMO
(2810) CS EXTENSION: 40	10/15/2008 Patient started chemo, type not documented in chart
(2820) CS TUMOR SIZE/EXT EVAL: 3	
(2830) CS LYMPH NODES: 10	
(820) REGIONAL LYMPH NODES POSITIVE: 01	(1400) HORMONE CODE: 00
(830) REGIONAL LYMPH NODES EXAMINED: 14	(2650) RX TEXT-HORMONE
(2850) CS METS AT DX: 00	(1410) IMMUNOTHERAPY CODE: 00
(2880) CS SITE-SPECIFIC FACTOR 1:	
(2900) CS SITE-SPECIFIC FACTOR 3:	
(2600) SUMMARY STAGE DOCUMENTATION: 9/2/08 Colonoscopy: apple core lesion in sigmoid colon cons/w adenoca 9/4/08 CT Abd & Pel: essentially negative 9/9/08 Sigmoid colectomy path report: PD adenoca, 5cm, ext thru muscularis propria into subserosal adipose tiss, 1/14+pericoloic lns, margins free	(3250) RX SUMM-TRANSPLANT/ENDOCRINE: 00
FIRST COURSE TREATMENT	(2660) RX TEXT-IMMUNOTHERAPY
(1292) RX SUMM-SCOPE OF REG LN SURGERY: 5	(1639) RX SUMM-SYSTEMIC/SURG SEQUENCE: 3
(1200) RX DATE-SURGERY: 09092008 (MMDDYYYY)	(1250) DATE OTHER TREATMENT STARTED: 00000000 (MMDDYYYY)
(1290) SURG RX CODE: 30	(1420) OTHER TREATMENT CODE: 0
(1340) REASON FOR NO SURGERY: 0	(2670) RX TEXT-OTHER
(1294) RX SUMM-SURG OTHER/DIST RX CODE: 0	
(2610) RX TEXT-SURGERY 9/9/08 Sigmoid colectomy	
(1210) DATE RADIATION STARTED: 00000000 (MMDDYYYY)	(1750) DATE OF LAST CONTACT OR DEATH: 10302008 (MMDDYYYY)
(1570) RAD-REGIONAL RX MODALITY CODE: 00	(1760) VITAL STATUS: 1
(2620, 2630) RX TEXT-RADIATION	(2090) DATE ABSTRACTED: 02012009 (MMDDYYYY)
(1380) RX SUMM-SURG/RAD SEQUENCE: 0	(570) ABTRACTOR INITIALS: UTO
(3230) RX DATE-SYSTEMIC: 10152008 (MMDDYYYY)	(50) NAACCR RECORD VERSION: 11.2
(1390) CHEMOTHERAPY CODE: 01	FOR CRD USE ONLY