

Cancer Registry Rules

1.0 Authority

1.1 This rule is adopted pursuant to 18 V.S.A. § 152(a).

2.0 Purpose

I. Introduction

This rule implements the Vermont Cancer Registry (VCR) created by 18 V.S.A. chapter 4 that Title 18, Section 152(a) of the Vermont Statutes Annotated (VSA) requires the Commissioner of Health to establish a uniform statewide population-based cancer registry system for the collection of information determining the incidence of cancer and related data.

These Cancer Registry Rules have been adopted to effect the purposes of the Cancer Registry Law, 18 VSA, Chapter 4.

3.0 Definitions

3.1 “Cancer” means all malignant neoplasms, regardless of the tissue of origin, including malignant lymphoma, Hodgkin’s disease, and leukemia, but excluding basal cell and squamous cell carcinoma of the skin.

3.2 "Health care facility" means all persons or institutions, including mobile facilities, whether public or private, proprietary or not for profit, which offer diagnosis, treatment, inpatient, or ambulatory care to two or more unrelated persons, and the buildings in which those services are offered. The term shall not apply to any institution operated by religious groups relying solely on spiritual means through prayer for healing, but shall include but is not limited to:

3.2.1 Hospitals, including general hospitals, mental hospitals, chronic disease facilities, birthing centers, maternity hospitals, and psychiatric facilities including any hospital conducted, maintained, or operated by the state of Vermont, or its subdivisions, or a duly authorized agency thereof; and

3.2.2 Nursing homes, health maintenance organizations, home health agencies, outpatient diagnostic or therapy programs, kidney disease treatment centers, mental health agencies or centers, diagnostic imaging facilities, independent diagnostic laboratories, cardiac catheterization laboratories, radiation therapy facilities, or any inpatient or ambulatory surgical, diagnostic, or treatment center.

3.3 "Health care provider" means a person, partnership, corporation, facility, or institution, licensed or certified or authorized by law to provide professional health care service in this state to an individual during that individual's medical care, treatment, or confinement.

4.0 Data Reporting Requirements

H. Establishment of Cancer Registry

~~A Vermont Cancer Registry (VCR) is hereby established within the Department of Health to collect information regarding statewide cancer incidence and related data.~~

III. Effective Date of Reporting

4.1 Reporting Timeliness

4.1.1 A health care facility or health care provider diagnosing or providing treatment to cancer patients must report each case of cancer to the Director of the VCR within 1280 days of admission or diagnosis as prescribed by these regulations if the cancer is diagnosed on or after November 1, 1993.

~~The definitions of "health care facility" and "health care provider" appear as Title 18, Section 9432 of the Vermont Statutes Annotated.~~

4.2 Reportable Neoplasms

4.2.1 The following neoplasms are reportable:

4.2.1.1 All cancers with a behavior code of "2" (in situ) or "3" (malignant) in the latest edition of the International Classification of Diseases for Oncology (ICD-O); and

4.2.1.2 Benign and borderline (behavior codes 0 and 1) primary intracranial and central nervous system tumors, including juvenile astrocytoma (M9421/3).

4.2.2 The following are not reportable to the VCR:

4.2.2.1 Skin primary (C440-C449) with any of the following histologies:

- Malignant neoplasm (8000-8005)
- Epithelial carcinoma (8010-8046)
- Papillary and squamous cell carcinoma (8050-8084)
- Basal cell carcinoma (8090-8110).

4.2.2.2 Carcinoma in situ of cervix (/2) or cervical intraepithelial neoplasia (CIN III) of the cervix (C530-C539);

4.2.2.4 Prostatic intraepithelial neoplasia (PIN III) of the prostate (C619).

IV. Data to be Reported

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1. Reportable Cancers

All cancers with a behavior code of "2" (in situ) or "3" (malignant) in the latest edition of the International Classification of Diseases for Oncology (ICD-O) must be reported. However, the following skin cancers, as coded in ICD-O, are excluded from reporting:

A. ~~8000-8004 Neoplasms, malignant, NOS of the skin (C44.0-C44.9)~~

B. ~~8010-8045 Epithelial carcinomas of the skin (C44.0-C44.9)~~

C. ~~8050-8082 Papillary and squamous cell carcinomas of the skin (C44.0-C44.9)~~

D. ~~8090-8110 Basal cell carcinomas of any site except genital sites~~

NOTE: Skin cancers in the genital sites (vagina, clitoris, labium, vulva, prepuce, penis, and scrotum) ARE reportable since they are more likely to metastasize than the usual carcinomas of the skin. (These cancers are reportable both nationally and internationally.)

All benign brain-related tumors occurring in any of the following sites must be reported:

A. ~~The brain, meninges, spinal cord, cauda equine, a cranial nerve or nerves, or any other part of the central nervous system~~

B. ~~The pituitary gland, pineal gland, or craniopharyngeal duct~~

4.32. Data Elements

The following data categories are required to be reported in a machine readable format approved by the Director of the VCR for each case of cancer:

Each health care facility or health care provider shall report cases to VCR in the format defined in the VCR Procedure Manual and shall include all of the data elements detailed in the VCR Procedure Manual. The data elements include information related to:

- ~~A. Patient Identifiers and Demographics~~
- ~~B. Provider and Facility Identifiers~~
- ~~C. Cancer Identification~~
- ~~D. Extent of Disease at Diagnosis~~
- ~~E. First Course of Treatment~~
- ~~F. Follow-up~~
 - ~~No follow-up data needs to be reported prior to January 1, 1995.~~

5.0 V. Data Quality Control

5.1 **Reviews**

5.1.1 Each health care facility or health care provider shall permit periodic quality control reviews by the VCR, including case finding, abstracting, coding, and data submission processing.

5.1.2 Each new abstractor reporting to VCR must complete the New Registrar Procedure, as defined in the VCR Procedure Manual.

5.1.3 Health care facilities or health care providers reporting cases to the VCR shall adhere to the data quality standards as outlined in the VCR Procedure Manual.

5.2 **Timing**

Unless other arrangements are made with a facility or provider, no fewer than 10 working days' notice is established as the minimum notice period applicable whenever the VCR wishes to have access to information on site at a facility.

5.2- **Training**

The VCR will ensure the provision of cancer registry data reporting and data quality training and consultation.

5.3- **Mortality and Incidence Reconciliation**

Reporting facilities Health care facilities or health care providers shall assist the VCR in annual reconciliation of cancer mortality and incidence data.

~~VI. Procedure Manual~~

~~In order to facilitate reporting and to protect the data collected, the VCR will supplement these regulations with a VCR Procedure Manual which will be made available to all data reporters. Any data fields delineated in the VCR Procedure Manual will be consistent with data sets defined by the American College of Surgeons and the North American Association of Central Cancer Registries.~~

~~All identifying information regarding an individual patient, health care provider, or health care facility contained in records of interviews, written reports, and statements procured by the Commissioner of Health or by any other person, agency, or organization acting jointly with the Commissioner in connection with cancer morbidity and mortality studies shall be confidential and privileged and shall be used solely for the purposes of the study. In accordance with the Cancer Registry Law, the Commissioner shall, however, be able to publish statistical compilations, enter into agreements to exchange information with other cancer registries, and furnish confidential information to other states' cancer registries, federal cancer control agencies, or health researchers.~~

~~To ensure the protection and confidentiality of the identifying information collected by the VCR, the VCR Procedure Manual will contain, among other things, will use the following:~~

~~Procedures to safeguard and secure the registry database and printed data generated from the database containing identifying information;~~

~~Procedures to destroy (e.g., by shredding) all printed materials containing identifying information when such materials are to be disposed of; and~~

~~Procedures to make certain that all persons with access to VCR identifying information are aware of the Health Department's Confidentiality Regulation and policy and have signed a written statement acknowledging their responsibility to maintain confidentiality and subjecting them to penalties for violation of confidentiality requirements.~~