



SUMMER NEWSLETTER



PR & COMMUNICATIONS

Stay Connected

Our Organization updates our Website www.trac-ct.org regularly.

Social Media: Network with us on **Linked In** and follow us on **Facebook!**

If you would like to contribute to this newsletter, please email us:

TRAC@trac-ct.org

EDUCATION

Our 2020 TRAC Spring Educational Meeting earned three credits and it was our first virtual Educational meeting!

Please consider topics and/or faculty for our Annual Educational meeting this fall! We have a committee to help plan and secure speakers.

Contact Sara Mercado directly or email TRAC@trac-ct.org to host a meeting.

MEMBERSHIP

2020 Membership

Currently we have 41 members: 39 Active, 2 inactive.

A member of TRAC receives cost savings on education, opportunities to network with supportive professionals, and a chance for personal and professional development.

Join now!



From our last meeting:

Are you collecting information on COVID-19 in your registry? Leaders in public health have been collaborating with stakeholders down to the local level to formulate a plan and spearhead efforts to assess the impact of COVID-19 infection. NAACCR has established a standard description for collecting COVID-19 test data in the LAB TEXT field of an abstract.

President's Message

Brooke Chang, BA, CTR

These have been challenging times! The governor's orders pushed change in our work environment. The registry community can work from home during the Covid-19 Pandemic, and so it is. I imagine this change has been a tough transition for many who enjoy heading to the office each morning. The good news is, with the adoption and utilization of technology, we can meet virtually anywhere! We are no longer reliant on sitting in the same room to work together, brainstorm ideas, and communicate with our colleagues. Perhaps you faced some challenges in transitioning to your new work environment:

- 1) **Where are your manuals?** Perhaps your move has resulted in permanent work from home status. In that case, I hope you took them home. If you work in a more hybrid model, some days home and some days on campus, consider this: organize a folder on your personal hard drive for work with the electronic versions of your manuals. Also, remember to save websites in your favorites as you access them from home.
- 2) If you are having network/ internet connection problems, consider this: **Do you have the latest hardware from your network provider?** Many of us have an established internet connection that was set up when we contracted with our service providers. How long ago was that? If it was more than 2 years ago, it may be time to update your hardware. There are newer devices companies are installing or will send to you. These will better support your devices and internet connection from home.
- 3) How can I reach out to fellow registrars across the state and at the Central Registry for information on a shared patient? Consider joining a local and regional professional organization. **Are you a member of TRAC and/or CRANE?** The professionals, who are members of TRAC, shared best ways to contact one another while we are working from home. This is another example of why it is important to belong to a professional organization. We foster learning, interpersonal skills and confidence in one another. We want to share best practices and encourage others to succeed. We want to stay connected and be productive. TRAC has adopted a method to stay connected virtually. We have invested in a one-year subscription with WebEx. We have the capability to connect virtually as a group at any time. The platform will afford TRAC members the capability to provide/ obtain education as well as conduct business safely from our home, or anywhere we have an internet connection.

I hope discussing these tips are helpful. If you want to share more tips for working remotely, send me an email. I will post them in the Blog section on the TRAC website.

Stay Safe, Stay Well, Stay Connected.

-Brooke

“the **struggle** you're in
today
Is developing the
strength you need for
tomorrow”

Feeling buried.

What is your current mood?

Remember to take a break!



NCRA: REMEMBER



As NCRA has rescheduled their 46th Annual meeting to Virtual for SEPT 21-23, 2020. Conference registration closes Sept 10th! Follow the link for more details

<https://www.ncra-usa.org/Conference/2020-Virtual-Conference/2020-Virtual-Registration-Information>

In addition to the education, the Exhibit Hall is going to be virtual. The online marketplace will provide opportunity to highlight products and services. The State Basket Raffle Program is going virtual too! Nancy Allen has reached out to TRAC and the Executive Committee has agreed to participate.

If you would like to donate towards the TRAC gift basket, please send your money to Michele. We are working on securing a gift basket from a local business in the state. The deadline for TRAC to turn in our form is August 21st

All raffle drawings are on the last day of the virtual conference – Wednesday. Winners will be notified by email. State Associations will be responsible for shipping the items to the winner of their basket. NOTE: You do not have to be registered for the conference to purchase tickets! Pre-sale of tickets will begin AUG 26th.

Vice President's Message

Sara Mercado, RHIT, CTR

Our first virtual meeting was a success. NCRA awarded TRAC with three CEs. I have sent out certificates of attendance. Many have asked whether the fall meeting will be virtual as well. Given the progression of the COVID-19 pandemic, and the uncertainty of what the upcoming months have in store, we have decided it would be best for the Annual TRAC meeting this fall to be in virtual format. The response to the May meeting has been overwhelmingly positive, and TRAC remains committed to providing quality educational opportunities for its members. We encourage your feedback and suggestions.

From the Treasurer's Desk

Michele Wojewodzki, CTR

We had excellent attendance for our virtual meeting with 53 (35 members/ 18 nonmembers) not counting our speakers. The meeting was FREE to our members. We received payment from 15 nonmembers. Those who paid and the members who did not require payment have received their credits.

FROM THE STATE

Cathy Phillips, CTR

Connecticut Cancer-COVID-19 Research Initiative

The logo for the Connecticut Cancer-COVID-19 Research Initiative (C3RI) features a teal square on the left containing the text 'C3RI' in white. To the right of the teal square is a vertical orange bar, and further right is a grey square.

The Connecticut Cancer-COVID-19 Research Initiative (C³RI) began exploring the possibility of collecting data related to incidence, management, and outcomes of cancer patients affected by the SARS-CoV-2 pandemic in mid-April. This effort came in response to inquiries from various interested parties, including the National Cancer Institute (NCI), the Connecticut Tumor Registry (CTR), the Yale-New Haven Health System, Hartford Health Care System, and local researchers and clinicians. After some initial discussions, other hospital systems in Connecticut were asked to join the collaborative, which now also includes Middlesex Health, Nuvance Health, and Trinity Healthcare systems.

The C³RI has several short- and long-term goals; short-term goals include:

- ◆ Enumerate the number of new cancers diagnosed with COVID-19 during the pandemic.
- ◆ Assess changes to work-up and treatment planning, including delays, alterations, and cancellations.
- ◆ Assess the impact of COVID-19 infection on newly diagnosed patients; including the necessity of hospital and/or ICU admission, and use of mechanical ventilation.

Long-term goals include:

- ◆ Enumerate the number of existing cancer patients diagnosed with COVID-19 during the pandemic.
- ◆ Assess the impact of COVID-19 infection on existing cancer patients; including the necessity of hospital and/or ICU admission, and use of mechanical ventilation.
- ◆ Assess the potential recurrence or progression of disease of cancer patients infected with COVID-19, including the necessity of additional treatment and/or hospitalization.

Connecticut Cancer-COVID-19 Research Initiative



In order to achieve these goals, the C³ RI has developed seven new data fields to collect these data. They include COVID-19 infection status; date of first positive COVID-19 test; change or delay to diagnostic work-up; change or delay to treatment; Hospitalization with/without admission to ICU; use of mechanical ventilation for COVID-19 infection; and COVID-19 related cause of death. Collection of each data variable is optional for hospitals, but strongly encouraged. CTR has the ability to capture some of these data via file linkages (CHIME data, Vital Records Death file, Infectious Disease COVID-19 database linkage), nevertheless, information from hospitals is regarded as high quality and thus preferable. CTR may be able to share the information obtained from some of the linkages with the reporting hospital(s).

Additional information and coding guidance will be provided in the near future. Anyone with questions may contact Cathryn Phillips at cathryn.phillips@ct.gov.

NAACCR and SEER

COVID-19 CODING GUIDELINES

As the COVID-19 pandemic takes its course, evidence is developing that cancer survivors are disproportionately affected by the new disease, from an increased risk of poor outcomes if infected to new barriers and challenges to receiving oncology care. Identifying unusual changes and differences in the patterns of cancer incidence and cancer care are long-stated well-established goals of the SEER Program.

Following a careful evaluation of various options available for collecting timely and clinically relevant data on pandemic effects on cancer survivors, the SEER Program determined that the most effective method for collecting timely data on new incident cases is direct abstraction of COVID-19 information in NAACCR abstracts fields that are currently required for data collection under current program contract requirements and within the framework of present NAACCR standards. Technical guidance regarding the implementation of COVID-19 data abstraction is provided in the the following document:

[COVID-19 Abstraction Guidance v1.0 \(PDF, 295 KB\)](#). See the [COVID-19 Q&A page](#) for more details.

The previous guidelines released in June 2020 have been updated with clarifications and SEER has now provided a list of Q&A to supplement the abstraction guidelines.

References/ Links:

- 1) to find the most updated .pdf <https://seer.cancer.gov/tools/covid-19/>
- 2) for Q&A <https://seer.cancer.gov/tools/covid-19/qa.html>

COC Cancer Program News – Updates and Alerts

Rapid Cancer Reporting System (RCRS) pilot testing will begin on August 3, 2020

Online August 6, 2020

We are pleased to announce that the Rapid Cancer Reporting System (RCRS) pilot testing will begin on August 3, 2020.

Over the next month the National Cancer Database (NCDB) team will be working with a select group of volunteers to complete the pilot phase of the RCRS and will incorporate their valuable feedback into subsequent versions of the RCRS with an anticipated go live of the new system in Fall 2020.

The Rapid Quality Reporting System (RQRS) and the annual NCDB Call for Data have served as vital reporting and quality improvement tools providing both real-time and long-term assessment of hospital level adherence to quality of cancer care measures for CoC-accredited cancer programs.

Beginning in Fall 2020, the Rapid Cancer Reporting System (RCRS) will replace the RQRS and the NCDB annual Call for Data submissions. With the RCRS, cancer programs will submit new, updated and completed cases for all disease sites on a frequent basis (similar to how the RQRS currently works). The RCRS will serve as the new, single source of data submission for all CoC-accredited cancer programs.

Cases submitted to the RCRS will include all disease sites from 2004 through current. The initial RCRS rollout will include

For the full notice: <https://www.facs.org/quality-programs/cancer/news/rqrs-pilot-080620>

REMINDER: AUG 31, 2020 is the DEADLINE for NCDB Call for Data Submissions and corrections

Virtual COC Site Visits:

Peter Hopewood, MD, FACS, a general surgeon with Cape Cod Healthcare Cancer Programs, Falmouth, MA; Chair, ACS Committee on Cancer Liaison Committee; and a site reviewer for both the ACS Commission on Cancer and the National Accreditation Program for Breast Centers, and **Rosemary Crawford, BS, CTR**, registrar, Lawrence and Memorial Hospital, New London, CT. They discuss their experiences conducting the first virtual CoC site visit, which reproduced the schedule of an in-person, single-day visit into a virtual experience that included an image-based tour of the facility, de-identified chart reviews and more.



Do you recognize that face? It is Rosemary Crawford, BS CTR from L+M Hospital in New London, CT. Click here to watch the YouTube video (approx. 18 min long) https://youtu.be/bRXOiTTN5_E



Cancer Awareness Calendar

AUGUST is National Immunization Awareness Month (CDC)

SEPTEMBER: National Prostate Cancer Awareness month, Childhood Cancer Awareness Month, GYN and Ovarian Cancer Awareness Month, Blood Cancer Awareness Month

SEPT 15-OCT 15 National Hispanic Heritage Month (Presidential Proclamation)

OCTOBER: National Breast Cancer Awareness Month. ACS will be planning Making Strides Against Breast Cancer Events

OCT 16th is National Mammography Day

<https://www.cancer.org/>

Some links for more information

- National Prostate Cancer Awareness Month ([ZERO — The End of Prostate Cancer](#))
- Childhood Cancer Awareness Month ([American Childhood Cancer Organization](#))
- Ovarian Cancer Awareness Month ([National Ovarian Cancer Coalition](#))
- Gynecologic Cancer Awareness Month ([Foundation for Women's Cancer](#))
- Blood Cancer Awareness Month ([The Leukemia & Lymphoma Society](#))
- National Hispanic Heritage Month – September 15-October 15 ([Presidential Proclamation](#))

“Individually we are one drop, but together we are an ocean.” -Ryunosuke Satoro (Japanese poet)