


Name of Policy:	Abstracting	 Effective Date: 03/2009 Initial Effective Date: 1/1979
Policy Number:	3364-105-406	
Department:	Health Information Management	
Approving Officer:	Vice President & Executive Director	
Responsible Agent:	Director, Health Information Management	
Scope:	Health Information Management	
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy		<input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy

(A) Policy Statement

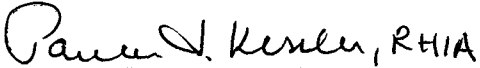

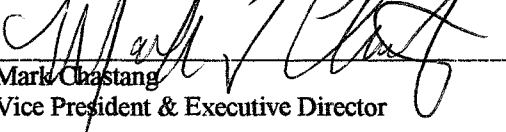
The abstract is the main method which summarizes the pertinent information about the patient, cancer diagnosis and treatment, and patient follow-up.

(B) Purpose of Policy

Allocation of University of Toledo Medical Center's (UTMC) resources for the diagnosis and treatment of cancer ensures optimal planning by the Cancer Program and Administration. Accurate and complete data by the Cancer Registry must be maintained to aid in this planning. Other purposes of the Cancer Registry data collected can be used for research investigations, studies of quality and outcome evaluation.

(C) Procedure

1. An abstract must be completed for all reportable primaries diagnosed and/or initially treated at UTMC since the Cancer Registry's reference date. An abstract must be completed for each primary if a patient has more than one cancer.
2. Components of an abstract include patient identification, cancer identification, stage of disease at diagnosis, first course of treatment, outcomes, case administration descriptors and any other requirements of the American College of Surgeons/Commission on Cancer (ACS/COC).
3. All records will be used in order to complete the abstract. This includes but is not limited to Inpatient, Outpatient, Clinic, Emergency Room, Radiology, Pathology, Radiation Therapy or Hematology/Oncology records.
4. For cases diagnosed elsewhere or referred elsewhere for treatment, completion is achieved through calling, writing or faxing physicians, hospitals or other Cancer Registries to obtain the required information. This may need to be performed multiple times in order to ensure thoroughness of the data being recorded.
5. The rules and regulations outlined in the *Revised for 2007 FORDS (Facility Oncology Registry Data Standards) Manual* will be followed for abstracting guidelines.
6. The Cancer Registry will abstract all reportable cases within six months of the date of first contact 90% of the time to be in accordance with the ACS/COC Standard 3.3

Approved by:	Review/Revision Date:
 _____ Paula F. Kessler, RHIA Director, Health Information Management	9/86 4/87 6/88 8/91 2/94 9/96
 _____ Prabir K. Chaudhuri, M.D. Chairman, Cancer Committee	1/99 3/02 4/03 8/04
 _____ Mark Chastang Vice President & Executive Director	7/05 5/06 11/07 4/08
Review/Revision Completed By: Health Information Management	3/09
Policies Superseded by This Policy: 10-406	Next Review Date: 03/1/2010

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.