

ATTACHMENT A  
**Texas Cancer Registry**  
**2017 Casefinding Data Collection Program**

**CHECKLIST**  
**For Required Documents**  
**From Medical Records**

To ensure complete cancer information is obtained from the medical record, please use this checklist as a guide for submitting each medical record to your Texas Cancer Registry regional office via Web Plus for abstracting.

The TCR must have the following items listed in the table that makes reference to the patient's cancer. Pertinent reports from other hospitals in your medical record that contain cancer information, i.e., consult notes, second opinion pathology reports, should also be included.

**All 2017 admissions for each patient must be submitted for review.**

Documents Needed	Included in electronic file to TCR Regional Office
Admission/Face Sheet	
History & Physical	
Discharge Summary	
Consult Report(s)	
Pathology Report(s)	
X-ray Reports	
Reports of scans (CT, PET, CAT, MRI, etc.)	
Surgery (Operative) Reports	

**Examples:**

A CT scan may show a mass consistent with cancer.

**OR**

A CT scan may show that there is no recurrence of cancer.

These are both good examples of information necessary to diagnose/stage the cancer.

A patient comes to your facility for lab work only. The face sheet states "cancer". The only information available is the lab results. Please provide the physician's orders for the lab request.

**Note:** ▪ Some of the information listed above may not be available in every medical record. A complete review of the medical record must be performed in order to identify any cancer information needed.

- Facilities who use special numerical race codes, please submit a key listing indicating the race assigned to each code.

When uploading files in Web Plus, please **do not** upload individual files for each patient. Create each individual file and zip them into one zipped file. Please ask your IT staff for assistance if needed.

Each individual patient file should be saved using the following naming format: Patient first and last name **initials** (not complete full names) and medical record number – **Sample file name for John Doe with medical record number 123456 would be file name - JD123456.**

Please include a comment at upload indicating which TCR staff member the file is for in order to distribute properly.

Please contact your assigned TCR staff member if you have questions about individual medical records or uploading files in Web Plus.