DEPARTMENT OF STATE HEALTH SERVICES CONFIDENTIAL CANCER REPORTING FORM

EXAMPLE 6

SHADED ITEMS WILL BE COMPLETED BY CANCER REGISTRY STAFF	This form MUST be used for all cases diagnosed on or after 2007.
(580) DATE OF FIRST CONTACT: 01122007 (MMDDYYYY)	(2460) PHYSICIAN MANAGING: TX00001
(550) REGISTRY NUMBER: 200700001	(2470) PHYSICIAN FOLLOW UP: TX00005
(540) REPORTING FACILITY NUMBER: 998	(2410) FACILITY REFERRED FROM: 0000000000
(500) REPORTING SOURCE: 1	(2420) FACILITY REFERRED TO: 0000000000
(2300) MEDICAL RECORD #: 0000A1	(560) SEQUENCE NUMBER: 00
(610) CLASS OF CASE: 1	(2200) OTHER PRIMARY TUMORS:
(2230) LAST NAME: DILLYDALLY	(SITE,MORPHOLOGY, and DATE)
FIRST NAME: FREDERICK	ு இருக்கு கடுக்கு இருக்கு இருக இது நடிக்கு அன்னுக்கு இருக்கு இருக்கு இது இருக்கு இர
(2250) MIDDLE NAME: Z	
(2390) MAIDEN NAME:	(630) PRIMARY PAYER AT DX: 99
(2280) ALIAS NAME: Dillydally Freddy	(390) DATE OF INITIAL DX: 01122007 (MMDDYYYY)
(2330) STREET ADDRESS: 111 Unknown Rd	(420, 430) ICD-O-2 MORPH/BEHAVIOR BEFORE 2001:
(2335) ADDRESS AT DX SUPPLEMENTAL:	(522, 523) ICD-O-3 MORPH/BEHAVIOR DX ON OR AFTER 2001: 96803
(70) CITY: Anywhere	(400) PRIMARY SITE: C770
STATE: TX	(440) GRADE OF TUMOR: 6
(100) ZIP CODE: 11111	(410) LATERALITY: 0
(90) FIPS COUNTY CODE AT DX: 481	FINAL DIAGNOSIS (2580, 2590)
(2320) SSN: 700555000	(2590) MORPHOLOGY/BEHAVIOR AND GRADE:
(240) DATE OF BIRTH: 02141975	Large B-cell Lymphoma
PLACE OF BIRTH: 001	
(160) RACE 1: 02	(2580)
(161) RACE 2: 88	PRIMARY SITE AND LATERALITY: Cervical Lymph Nodes
(162) RACE 3: 88	WASTA OF THE TWO CO.
(163) RACE 4: 88	
(164) RACE 5: 88	(490) DIAGNOSTIC CONFIRMATION: 1
(190) SPANISH/HISPANIC ORIGIN: 0	(780) TUMOR SIZE (MM): DX PRIOR TO 2004
(220) SEX: 1	(760) SUMMARY STAGE 1977:
(2680) OTHER PERTINENT INFORMATION:	(759) SUMMARY STAGE 2000:
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(2640) RX TEXT-CHEMO
1/14/2007 Pt started on CHOP and Rituxan
(1400) HORMONE CODE: 01
(2650)
RX TEXT-HORMONE
1/14/07 CHOP
(1410)
IMMUNOTHERAPY CODE: 00 (3250)
RX SUMM-TRANSPLANT/ENDOCRINE: 00 (2660)
RX TEXT-IMMUNOTHERAPY
(1639) RX SUMM-SYSTEMIC/SURG SEQUENCE: 3
(1250) DATE OTHER TREATMENT STARTED: 00000000 (MMDDYYYY)
OTHER TREATMENT CODE: 0
(2670) RX TEXT-OTHER
(1750) DATE OF LAST CONTACT OR DEATH: 01152007 (MMDDYYYY)
(1760) VITAL STATUS: 1
(2090) DATE ABSTRACTED: 05012007
(MMDDYYYY)
(570) ABSTRACTOR INITIALS: CLW
(50) NAACCR RECORD VERSION: 11
FOR CRD USE ONLY