Chapter 9: Screening for Reportability

SEER*DMS uses a combination of automated and manual screening tasks to determine whether a record contains data related to a reportable cancer. An automatic screening task will evaluate the record and attempt to set the reportability flag. If the auto-screener cannot set the flag, an editor will set the flag in a manual Screening task or Pathology Screening task. Record type and registry preferences determine which of these manual tasks is created, as described below.

- The standard Screening task is used for abstracts and other types of records that are submitted with coded values for site, histology, and behavior. The auto-screener evaluates these fields and attempts to set the reportability flag. The auto-screener will set the flag for nearly all of these records; a manual Screening task will only be necessary for a small percentage. The manual task is created if the auto-screener cannot determine reportability; or if, according to your registry's screening algorithms, the reportability value calculated by the auto-screener requires review.

- A manual Pathology Screening task is typically created for records containing data from electronic pathology reports. This task has a specialized interface that highlights keywords in text fields to facilitate the coding of site, laterality, histology, behavior, and grade. The user completing the task also sets the reportability flag for the record.

In this chapter, you'll learn about

- Values of the Reportability Flag
- Pathology Screening Tasks
- Standard Screening Tasks
- Requesting Follow-back Information
- Viewing a Record's Reportability Status

Values of the Reportability Flag

The possible values for the reportability flag are described below. Some values are not relevant for all record types (e.g., death certificate records can be non-reportable, but abstracts in many registries cannot be set to non-reportable). The criteria used to define each value are defined in the registry's configuration settings and documented on the Screening help page.

- **Reportable —** The record contains data related to an eligible case as defined by your registry's criteria. The record continues through the workflow, ultimately becoming part of a patient set in the database.

- **Auditable —** The record contains cancer-related data but is not a reportable case. The record is retained for use in casefinding audits. SEER*DMS processes the record to obtain potential follow-up information. If the record matches an existing patient set, the record should be linked at the patient level but not to a CTC. In some registries, the auto-screener is configured to force a review of auditable records in a manual screening task.

- **Non-reportable** - The record contains data for a disease that is of no interest to your registry. It is not reportable and would not be included in audits. SEER*DMS processes the record to obtain potential follow-up information. If the record matches an existing patient set, the record will be linked at the patient level but not to a CTC.

- **Unknown —** The reportability flag has not been set. The record may not have been screened at all; or the screening task may need to be completed in a manual Screening or Pathology Screening task.

- **Not applicable —** The record is not a medical record and does not require screening, for example, it may be a supplemental record from the department of motor vehicles. The record will not be processed in any of the automated or manual screening tasks.
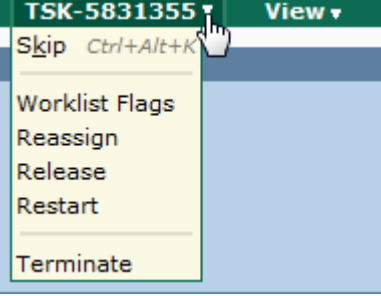
Pathology Screening Tasks

Requires system permission: *screening* and *rec_edit*

A manual Pathology Screening task is created to review and code HL7 records and other types of records containing data from electronic pathology reports. The text from the pathology report is displayed with keyword highlighting. You will review the text and determine whether the data represent a reportable cancer, a cancer that is not reportable but should be kept for casefinding audits, or a non-reportable disease.

If it is a reportable record, you will code the site, laterality, morphology, grade, and the reportability flag for each primary cancer documented in the pathology report.

To open a Pathology Screening task:

1. Click a **Pathology Screening** link in the worklist summary on the home page.

2. When working on Pathology Screening tasks, the next task in the filtered worklist will automatically open when you finish the first task. This allows you to work through a set of tasks without returning to the worklist; these could be unassigned tasks or tasks assigned to your account. To make this efficient, you should consider the following:

    a. If you want to work on a particular set of tasks, use the filters to define that list.

    b. You do not have to assign the tasks to your account. If another user completes a task first, SEER*DMS will auto-remove it from your list of tasks to complete.

    c. You will be able to stop at any time, you do not need to worry about starting to screen more records than you can complete in one session.

3. Click a task ID to open a Pathology Screening task. Instructions for completing a Pathology Screening task are provided on the next pages.

SEER*DMS **Pathology Screening (41 Tasks)**	As you complete each task, the next task in the list will open automatically. The number of tasks remaining is shown in the title bar.
TSK-5831355 ▾ View ▾ Skip *Ctrl+Alt+K* Worklist Flags Reassign Release Restart Terminate	The TSK menu allows you to skip a task and move to the next task. The task that you skipped will still be assigned to your account. You may also use the TSK menu to set worklist flags, assign the task to another user, or release it to the unassigned list. (Restart and Terminate will also be options if you have the *system_administration* permission.)

An example of a Pathology Screening task is displayed below.

To screen a pathology report:

1. Review the pathology text fields that are displayed.

   a. Key terms will be highlighted using a color scheme to designate positive for cancer, negative, or other (neutral).

      i. Keywords found in the text are listed on the left. The N column shows the number of times each keyword appears in the text. The Score = (N * the weight assigned to the keyword). The list is sorted by N. The totals of N for Positive, Negative and Other are shown below the total line.

      ii. The keyword list is maintained by your registry. If you see a term that should be highlighted, select **New Keyword** from the record menu and propose a new word or term for consideration. The keyword will not become effective and will not be highlighted in text until it is approved by a registry manager (see the *Pathology Keywords* section of *Chapter 27: System Administration*).

   b. The pathology text fields are displayed in an order that is based on a registry configuration parameter (*screening.pathology.fields.hl7_epath*). Confer with registry staff to determine an order that is appropriate for your registry. Submit a technical support issue if the order needs to be modified.

c. Determine whether the record is reportable, auditable, or non-reportable. These terms are defined in the *Values of the Reportability Flag* section of this chapter. You may also need to consult with a registry manager for the coding rules specific to your registry.

2. Choose a value for reportability by using your mouse or a keyboard command to depress the **Reportable**, **Auditable**, or **Non-Reportable** button. On each button, the shortcut letter is underlined. Press CTRL + ALT + that letter to depress the button using your keyboard (select Help > Shortcuts to view the keyboard shortcuts for the current page).

   A data entry panel will be displayed. The panel will have a slightly different set of fields, depending on the value that you selected for reportability, as described below. Use the auto-complete feature to enter values, as described in step 4.

   a. **Reportable**. The data entry panel will include site, laterality, morphology, grade, site title, and histology title. If the pathology report indicates multiple primaries, click **Add Primary**. You are required to enter values for site, histology, and behavior for each primary. Site title, histology title, laterality, and grade are optional fields.

Reportable (HL7 E-Path REC-3005144980)					
Site	Lat	**Histology**		Beh	Grade
<Site Title>		<Histology Title>			
Add Primary					
Demographic	Reportable	Auditable	Non-Reportable	Save	Close

   b. **Auditable**. The data entry panel will include the fields defining one primary cancer. In most registry configurations, you will be required to enter a coded value and/or comment to document the reason that the record is auditable.

Auditable (HL7 E-Path REC-3005144980)					
Site	Lat	Histology		Beh	Grade
<Site Title>		<Histology Title>			
	Code	Additional Comments			
Non-Reportable Reason:					
Demographic	Reportable	Auditable	Non-Reportable	Save	Close

   c. **Non-reportable**. You may enter a coded value and comments to document the reason that the record is non-reportable. In some registry configurations, you will also be able to code site, histology, and other variables for a single cancer site.

Non-Reportable (HL7 E-Path REC-3005144980)					
A record with a status of non-reportable may be used for a better date of last contact, but is otherwise considered to be purgeable. This status indicates that there is no need to keep this record in the registry for inclusion as a patient set or for quality reviews.					
	Code	Additional Comments			
Non-Reportable Reason:					
Demographic	Reportable	Auditable	Non-Reportable	Save	Close

3. You can either use your mouse or arrow keys to scroll through the text. If a data entry panel is displayed and you prefer to use keyboard controls, press **CTRL+ALT+T** to set the focus to the text panel. This will allow you to use the arrow keys to scroll through the text. Pressing CTRL + ALT + the letter assigned to the value that you selected for reportability will return focus to the data panel.

4. Enter search text or codes into each field. An auto-complete feature is implemented for the coded fields: site, laterality, histology, behavior, grade, and the non-reportable reason code.

Auto-complete is not used for the free text fields: site title, histology title, and the non-reportable comment field. Methods for entering values are described below.

Option 1: Type the full value and press either Tab or Enter to move to the next field. For example, you could type C541 for Site and press Enter.

Option 2: Enter medical terms to search for a value. This technique can be used on any field. As an example, enter "Endom" for histology. A list of terms will appear as you type. You can either continue to type; or use your arrow keys or mouse to select a value for morphology. This will assign codes to both histology and behavior.
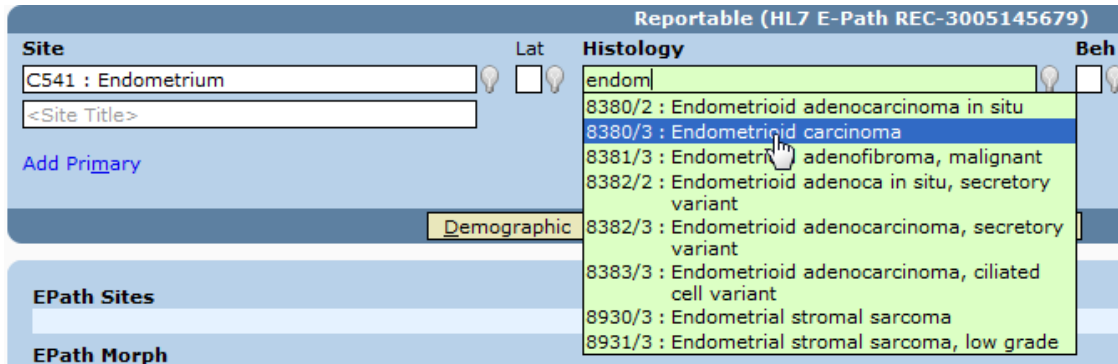
Option 3: Enter a question mark (?) or press CTRL + ALT + L to view all values in the field's lookup. Use your arrow keys to scroll to a value. Press Enter.
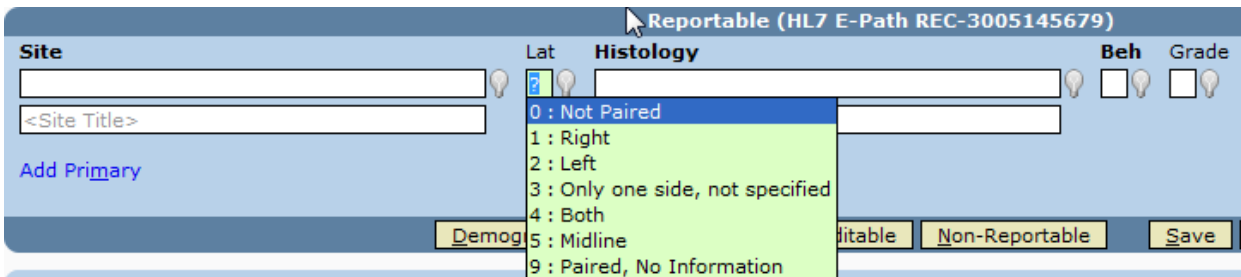
Option 4: Click the light bulb to open the standard lookup. If there are too many values to list at one time, you will be prompted to enter search terms.
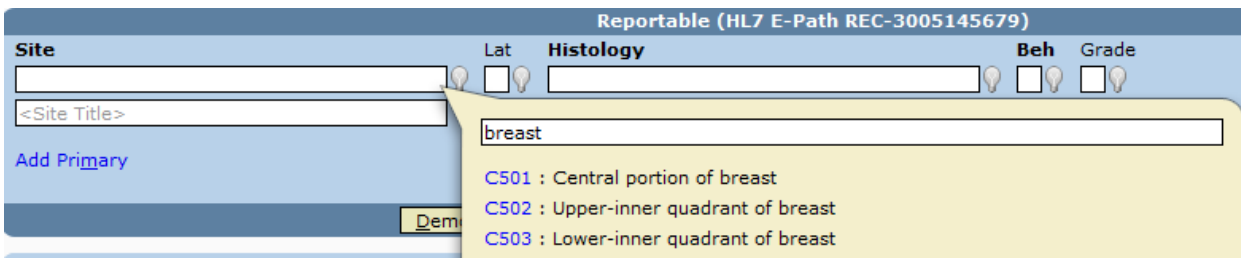
5. Completing or exiting Pathology Screening tasks:

   a. Click **Save** or press **CTRL+ALT+S**. The next Pathology Screening task will open. The list of tasks is based on the filter settings that you were using when you started screening records. You will be returned to the worklist when you finish the last task in the list.

   b. If you wish to stop screening before finishing all tasks, you may either click **Close** or **Release** to end the current task without saving any changes (the keyboard shortcut for Close is **CTRL+ALT+C**). If you use Close, the task will be assigned to your user account. If you use Release, the task will be unassigned. In either case, you will exit the task and return to the worklist.
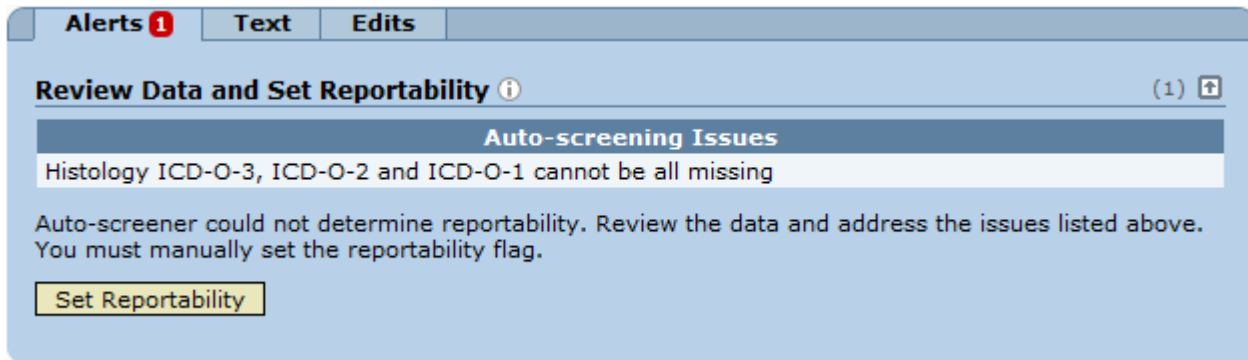
Standard Screening Tasks

Requires system permission: *screening* and *rec_edit*

A manual Screening task is created if the result of the auto-screener requires a manual review, for example, auditable abstracts require manual screening. The manual Screening task is also created if the auto-screener could not determine reportability based on the coded values for site, morphology, and other fields. This task is created for records, such as abstracts, which are submitted to the registry with coded fields. In contrast, the Pathology Screening task is designed to allow a registrar to code site, morphology, and other fields based on text fields.

To open a screening task, click a **Screening** link in the worklist summary on the home page. The Information column for each task will show a message from the auto-screener. For example, the auto-screener requires a valid value for site. If site was missing or blank then the auto-screener message would be "missing site". A similar message would be listed if the record failed other Auto-Screener Rules. The auto-screener rules and algorithms are described on the Screening help page.

Once you open the task, the record will be displayed in the record editor. Messages from the auto-screener will be displayed in the **Alerts** tab in the right panel of the record editor. In this example, the auto-screener could not determine reportability because there is no value for histology.

To set a record's reportability flag in a standard Screening task:

1. Review the auto-screener messages displayed on the **Alerts** tab.

2. Review the record to ascertain reportability:

    a. Click the links in the left navigation panel to review fields on other data pages.

    b. If text is not displayed on the main data panel, click **View Text** to open a pop-up window showing the text fields or go to the Text tab in the right panel.

3. If you are able to ascertain reportability for this record, set the reportability status field:

    a. Click **Set Reportability** on the Alerts tab.

    b. Select a **Reportability** value from the drop-down list.

    c. If you have selected *Auditable* or *Non-Reportable*, document your findings by selecting a coded value in the **Non-Rpt Reason** field and entering text for the **Non-Rpt Comment**.

4. If you are unable to determine reportability, use one of these options.

    a. If further information from the abstractor or physician is required, you may submit a request for follow-back information (see the *Requesting Follow-back Information* section of this chapter).

b. If you require assistance, you may reroute the screening task to your manager or a colleague by following the instructions in *Chapter 4: Using the Worklist*.

5. Click **Save**.

6. Click **Save & Exit**.

Requesting Follow-back Information

Requires system permission: *screening, rec_edit*, and *fb_initiate*

In SEER*DMS, a request for follow-back information is referred to as a "follow-back need". If you determine that additional information must be obtained from the reporting facility, you should submit a follow-back need. Your request will be associated with the record, allowing all users to review pending follow-back issues when reviewing the record data. If the information is required to ascertain reportability, you should save the record in a screening task so that the task can be completed at a later time. Otherwise, you should set the reportability status and move the record forward in the workflow. Methods for saving the record and exiting the task are described in the *Pathology Screening Tasks* and *Standard Screening Tasks* sections of this chapter.

You will receive an e-mail notification when a response is processed and the follow-back need is closed. You or another staff member may update data fields based on the new information.

Viewing a Record's Reportability Status

If you are editing an unlinked record, the reportability status is displayed in the Info box of the record editor. An information icon will appear next to the value if a comment was made by the user who set the reportability flag or a reason not reportable was coded.
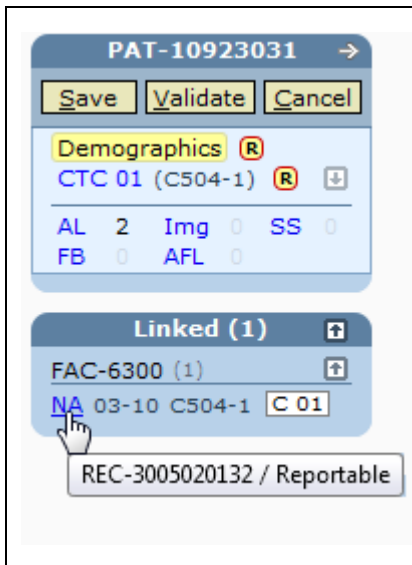
To view the reportability status of a linked record in the patient set editor, hold your mouse over the Record Type. The Record ID and reportability status will be shown in a box just below type.

The following icons are used throughout SEER*DMS to indicate the record's reportability status:

- **N**   Non-reportable
- **A**   Auditable
- **U**   Unknown (the record has not yet been screened)
- **N/A**   Not applicable; the record type is not screened (e.g., supplemental records)
- ---   No icon is displayed if the record is reportable.

The icons are displayed in the Type column of search and match results tables. If an icon is not displayed next to the record type, the record is reportable.

The icons are also shown next to the Type field for the Incoming Record of a Match-Consolidate task. In the figure below, the record is auditable.