What is a 29-2071? According to the U.S. Bureau of Labor Statistics (BLS) Standard Occupational Classification (SOC) system, 29-2071 is the numerical occupational classification for “medical records and health information technicians.” I already don’t like the title, so maybe the definition will be better. The definition for this group starts off with “compile, process, and maintain medical records of hospital and clinic patients”, well I don’t like the definition either.

NCRA also didn’t like the title or definition, so in 2004 they applied to the BLS to have an occupational classification added with the definition “cancer registrar.” The BLS said our classification was too narrow. So NCRA went back to the drawing board and worked on making an occupational classification that would include cancer registrars, but also other professionals doing similar work. The NCRA Board of Directors at that time researched and contacted other professions like ours and determined we would increase our chances of being approved using the less narrow term of “medical registrar.”

Then we waited ten years for the next request for proposed revisions of the SOC to be published in the Federal Register. When that happened in 2014, the small Medical Registry Task Force worked quickly under a short deadline to submit corrections and changes to 29-2071. Then we waited two more years, and finally on July 22, 2016, we were notified we had a deadline of September 20, 2016 to make comments to the BLS about their revisions.

After reviewing their revisions, NCRA proposed that Medical Registrar be listed under the newly created broad category of 29-9020; comprising professionals in health information technology, health information management, and health informatics specialists and analysts. Our proposed new code would hopefully be 29-9022 – Medical Registrar.

I’ve just given you the 12 year history of what NCRA has done to pull “cancer registrars” out of a group which includes job titles like medical records specialists and HIM coders, but why is leaving this group so important? If you would go to www.ncra-usa.org/292071medianpay you would find the 2015 median pay for 29-2071 group, and that is why this needs to be changed. When cancer registrars are a minority in an occupational group that includes large numbers of HIM staff, the salaries are more likely to reflect the salaries of the larger HIM group. Unfortunately, many of those in that HIM group represent lower paying occupations.

How does this affect you the individual cancer registrar? Your salary, as determined by your Human Resources department, is directly related to the SOC. However, if cancer registrars were a part of a group of others doing similar data collection work like; trauma, cardiac, birth defects, brain tumors, implants, lupus, etc. chances are the median salary is going to be pulled up.

The medical registry task force will soon be looking for additional volunteers so we can begin to reach out to representatives from these other registry groups. There is power in numbers, as well as opportunity. I hope when we post the request for volunteers, you will consider joining us as we position cancer registrars for the future.
Editor’s Note

Happy Fall to All;
I find this time of year energizing, perhaps it is from the anxiety I feel knowing winter is coming and it’s not my favorite time of year anymore. I’m not looking forward to the freezing cold and white stuff that sticks to the road. I guess as I get older, priorities and endurance change.

It’s not that I don’t like change; heaven knows that in our profession we really must love change! But isn’t change also invigorating?

Throughout this issue, you will find fantastic articles addressing our professional changes. Let’s start with the Medical Registry Task Force challenge on the front page; what an endeavor! The Presidential Charges on page 6 create change, but what rewards the membership will reap. Of course we all know change is coming with the AJCC 8th Edition; but have no fear help is here. Read up on the updates from the College of American Pathologists and their resources (page 14) as well as check out the Education Committee Update on page 17 and the educational venues. How lucky we are to have magnificent committees and opportunities!

Once again I am thrilled to see so many new CTRs as listed on pages 13 and 14. And speaking of new; look on page 19 and the last page to see the outstanding number of new NCRA members who joined in only a four month period. Amazing!

Whether you read this issue on line or print it out for a time when you can sit in your favorite chair, take time to ponder what our great authors have provided to enhance our knowledge. Take time to reflect on all the changes we have grown through and succeeded in your career. I wish all of you enjoyment in all you do professionally and personally.

Sherry Giberti, CTR
Editor, The Connection

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Namaste, fellow cancer registrars. My heart is grateful for the opportunity to serve as your President this year. If my word choice to begin this Connection article seems a bit unusual, let me explain. The greeting “Namaste” is meant to convey gratitude and respect, often translated as “the spirit within me salutes the spirit in you.” I do salute all of you and have great respect for each of our daily data contributions.

“Namaste” is also what my yoga instructor says at the end of each class, when I’m supposed to feel relaxed and at peace. It follows her request to “let go of the worries of the day.” Of course, that’s where I have trouble; I’m thinking about how behind I am on 2016 cases!

Do you ever feel like the registry world starts something new every July? Of course, on July 1 each year, registrars all over the country traditionally begin to abstract cases diagnosed in January into newly upgraded registry software. It’s a routine most of us are used to, our registry software being updated to accommodate new and changed data items. It’s part of the ebb and flow of the cancer registry … the tide comes in and the tide goes out.

But the past few years have brought several changes that aren’t routine. When the tide brings new data items requiring additional training, and those new data items arrive after July 1, a storm rains down on every cancer registrar. To further complicate this weather pattern, some registrars are voluntarily abstracting in a much more timely manner—maybe one or two months after diagnosis—to provide more current data to their facilities, and this storm is swamping them.

In my last article, I expressed how NCRA has been there on my journey through all the storms, with education, support and mentorship. This storm is no different. NCRA offered education on directly coded stage—and some of our amazing members have been a great support to me as I realized a staging rule that’s new to me isn’t really new!

NCRA has been there with education on these new data collection changes, but I want you to know that NCRA is also there when annual data changes arrive much later than expected. Many NCRA volunteers and the NCRA staff are in the trenches on your behalf. We have liaisons that work with the standard setters, the Change Management Board, the Collaborative Stage Transition Group, and the National Coordinating Council for Cancer Surveillance. We are at the table and we are vocal.

I remember when we weren’t even at the table, so this is a good thing. Change takes time. So your volunteer leaders will continue to show up at the table, continue to be your advocate, and continue to say, “in order to have consistent timely data collection, there must be a commitment to follow the published deadlines.”

My hope is that by the time this article is published, we are all calmly abstracting 2016 and getting ready to purchase the eighth edition of the AJCC Cancer Staging Manual. Namaste.
The Danielle Chufar Memorial Annual Conference Scholarship was named in memory of the NCRA staff member who passed away in February 2004 from cancer. Danielle was a new RHIT professional who was preparing to take her CTR exam. The scholarship provides financial support to help an active NCRA member with no available funding attend NCRA’s Annual Educational Conference. The scholarship includes the conference registration fee, airfare (up to $600), and hotel for three nights. The number of applicants selected to receive scholarships is determined by the funds available. (The scholarship is funded each year by individual donations, speakers’ returned honoraria, and the annual state basket raffle.)

Applicants must complete the application and submit a 500- to 750-word essay on the topic chosen by NCRA’s Governance Planning and Evaluation Committee (GPEC). The 2017 theme is *The Future of Auto Populating the Cancer Registry Database, and How It Will Affect the Cancer Registry Profession: Outline the Advantages and Disadvantages.*

To be eligible, you must be an active NCRA member who’s been a member for at least one year AND be an active member during the year in which the scholarship is awarded. Associate, inactive, sustaining, student, and international members are not eligible. Members of the NCRA Board of Directors or GPEC are also not eligible. Note: only one person from each institution may apply. (If more than one person wishes to apply, the institution must decide which application to submit.) To download an application and learn more, go to [www.ncra-usa.org/conference](http://www.ncra-usa.org/conference).

**LEAH KIESOW, MBA, CTR | IMMEDIATE PAST PRESIDENT**
Operational Challenge: The Montana Central Tumor Registry (MCTR) staff, Montana Cancer Control Programs (MCCP) management, and management at the Montana Department of Public Health and Human Services (DPHHS) made it a priority to increase the use of registry data. A particular emphasis was placed on increasing its use among the oncology community in Montana and in epidemiologic research. To that end, MCTR undertook strategic data-use activities, set clear data-use goals, and engaged stakeholders. As a first step, the MCTR underwent a comprehensive review of its data release policies and participated in a quality improvement (QI) planning process, which outlined goals and activities to increase data use.

Intervention: The QI Plan was developed in four steps:

1. Update the Confidential Data Release Policy. MCTR undertook a comprehensive review of state and federal regulations that governed the central registry and protected health information. This review determined that MCTR could implement an updated Confidential Data Release Policy to allow participation in research studies.

2. Assess data use from 2009–2013. Information was collected on historical data uses, meeting National Program of Cancer Registries (NPCR) standards for data-use, and the data needs of stakeholders via a stakeholder survey.

3. Develop a QI Plan. Findings from data-use assessments were shared with stakeholders. The QI Plan summarized the role the MCTR played in the MCCP mission. The plan also stated the goals and activities the MCTR would take to increase data use and to carry out MCCP’s mission.

4. Operationalize the QI Plan. The plan also outlined how the MCTR would implement it. The MCTR would integrate the plan into the MCCP’s integrated Performance Management System and MCTR’s NPCR work plan.

Operational Impact: The project had several implications for DPHHS and for public health in Montana. Using MCTR data to guide the use of public health and clinical resources will help to improve the outcomes of cancer patients and prevent many from ever developing cancer. Increasing the use of MCTR data expands the MCTR’s relevance and further justifies the public investment in this surveillance system. Stakeholder access to MCTR data continues to get easier. DPHHS is presently working with contractors to build a web-based query system of surveillance data, including central registry data. Additionally, the updated Confidential Data Release Policy has allowed the MCTR to participate in research studies. The QI Plan identified several projects for the MCTR to complete, including publishing an informational brochure about the registry, providing reporting facilities with Ten-Year Reporting History descriptions, and publishing at least half of the MCTR data reports at a lower literacy level.

Lessons Learned: The stakeholder survey revealed a need to educate data users about the central registries’ data timeliness, completeness, and quality. MCTR discovered stakeholder misconceptions about why data is two years old and misconceptions about the completeness of the registry. In addition, the cancer community expressed a demand for local data whenever possible.

The Registrars in Action column highlights the impact cancer registrars have on public health. Cancer registrars collect standardized data on a daily basis to submit to central cancer registries (CCRs), and the data are then submitted to the National Program of Cancer Registries (NPCR). Administered by the CDC, NPCR collects data on cancer occurrence (including the type, extent, and location of the cancer) and the type of initial treatment. Today, through NPCR, CDC supports central cancer registries in 45 states, DC, Puerto Rico, and the US Pacific Island jurisdictions.

You can read more success stories and synopses of important data-driven projects happening across the US on the CDC website at www.cdc.gov/cancer/npcr/success/index.htm. If you work at a hospital registry and have a success story to share, please email it to Peggy Meehan at pmeehan@ncra-usa.org.
2016-2017 Presidential Charges

LINDA CORRIGAN, MHE, RHIT, CTR | PRESIDENT

Each year the NCRA president consults with NCRA staff to develop and implement presidential charges, or activities that help NCRA move forward. The NCRA volunteer leadership (committees, liaisons, and task forces) help carry out these charges.

2017 Program Committee
- Incorporate poster session protocol into Annual Educational Conference P&Ps.

Advance Editorial Advisory Board
- Work with the staff to develop a 2016–2017 editorial schedule.
- Send a copy of all articles to the President at least three days in advance of deadline for any final edits.

Awards Committee
- Work with a past recipient and a past president to write an article on the awards program to help members understand the scoring and purpose. The goal of the article is to increase the number of qualified applicants.
- Coordinate with the Social Media Committee to promote awards nominee recruitment.
- Collaborate with the Mentoring Committee to encourage awards applicants under the Volunteer Excellence (in mentoring) category.
- Review and recommend edits for repackaging the nomination submission form to include the cover page, and revise the awards introduction text.
- Have the Awards Committee study the idea of offering an annual award to an employer that has 1) demonstrated ongoing encouragement of cancer registrar participation in NCRA as a volunteer and 2) consistently recognized the cancer registry staff to the public or within the agency/organization.

Bylaws Taskforce
- Summarize the outcome of the recent bylaws activity for the file and for the membership.

Council
- Establish requirements regarding how many CEs registrars must earn for specified educational topic(s).
- Determine viability for CTRs to submit CEs on a rolling basis instead of the (current) all-at-once approach.
- Promote the CTR credential to an international audience.

Education Committee
- Subcommittee to develop podcasts on TNM topics.

Advanced Education Subcommittee of the Education Committee
- Collaborate with the Independent Clinical Advisors (ICA) subgroup to develop online HIPAA training to fulfill the clinical practicum requirement.
- Develop a webinar series on AJCC TNM Staging on related sites—e.g., three types/areas of GYN, three types/areas of lung, and three types/areas of lymphomas.
- Develop Informational Abstracts for brain/CNS, lymphoma, and thyroid, and CE quizzes to post on CCRE.

POA Subcommittee of Education Committee
- Develop additional hands-on exercises for the Fundamentals of Abstracting workshop.
- Offer the Fundamentals of Abstracting workshop at the 2017 Annual Educational Conference.

CTR Exam Prep Subcommittee of Education Committee
- Review and update content for the one-day Intensive CTR Exam Prep Open Book Workshop and offer it at the 2017 Annual Educational Conference.

Formal Education Committee
- Develop a survey for directors of accredited programs to learn more about their program needs to better assist students with clinical practicum activities.
- Using the survey data, work collaboratively with other committees and program directors to develop opportunities to assist students with the 160 hours of clinical practice. This could include using existing and new products/services as well as engaging the independent clinical advisors.
- Based on research regarding improved student options for meeting the 160-hour clinical practicum, propose recommendations to the Formal Education Program Review Committee (FEPRC).
- Advise and recruit new institutions to offer CRM programs and NCRA accreditation.
- Write an article for The Connection to reach members who could serve as advisors/mentors for students: “I work, I teach.”

Continued on page 7
Formal Education Program Review Committee
- Based on the Formal Education Committee’s clinical practicum research, report adopted recommendations to the Board on expanded methods and opportunities for students to meet the 160-hour clinical practicum.

GPEC
- Complete and implement evaluation plan for updated SMP.
- Informatics Committee

Informatics Committee
- Continue to develop an awareness of cancer informatics among NCRA membership by updating the Cancer Informatics webpage on NCRA’s website.
- Investigate and develop an interactive learning format, possibly a workshop for the 2017 Annual Educational Conference.
- Coordinate with the Social Media Committee to develop social media activities that will help foster discussion and educate members about cancer informatics. This should include monthly Informatics Committee posts on Facebook to engage members in discussion.

Journal of Registry Management
- Update the JRM Policy to define Best Paper Awards protocols, including adding a process to address when a winner is unable to accept the financial award (i.e., CDC, NIH).
- Work with the Medical Registries Task Force to further expand opportunity for JRM content.
- Study and report on the current readership and usage (citations) of the JRM and its articles. Set goals to increase readership and citations, and define tasks to meet these.

Membership Committee
- Based on membership priorities, consider and propose potential new member affinity program(s).
- Research best practices and recommend a P&P to the Board for recruiting volunteer members for existing NCRA Committees.
- Launch the Member-Get-A-Member Campaign and track success of the program.
- Complete the review of the Member Needs Assessment Survey and develop a recommendation report to the Board.

Mentoring Committee
- Continue to recruit mentors and mentees in The Update and published materials.
- Continue to lobby mentors for photos and bios for the Meet the Mentors section of the website.
- Develop a breakout session on mentoring and submit an abstract for the 2017 Annual Educational Conference.

National Cancer Registry Week
- Develop a marketing plan to enhance NCRW activities, including coordination with the Social Media Committee to build a more robust social media presence. Add new celebration ideas from the 2016 member survey.
- Continue to review other organizations that celebrate a recognition week for ideas on event promotion and member involvement.

Nominating Committee
- Revise the nomination form, website content, and e-blast notification to clearly indicate that “although the NCRA Call for Nominations goes out to the entire NCRA membership, there is a candidate selection process in place and there is no guarantee that members who submit nomination forms will be selected for the final NCRA ballot.”
- Publish a condensed version of the biographical information and position statements of the candidates nominated for each position for review by members two weeks prior to launch of election for increased visibility.
- Develop a simple scoring system that can be used prior to the in-person Nomination Committee meeting.

Policy & Procedure Committee
- Develop an annual summary document of all P&Ps that have been reviewed, reviewed and changed, and/or newly added. This should be submitted with the spring Board report for the previous calendar year.

Program Recognition Committee
- Develop educational material or article for The Connection around problematic issues identified in CE applications to improve future applicant content.

Social Media Committee
- Publish two social media e-newsletters to update members on current social media activities.
- Continue to implement the NCRA Social Media Plan, building on efforts established with the 2016 winter/spring intern.

The Connection
- Seek options and opportunities to provide more timely industry news.
- Build on The Connection title and develop strategies to engage members (i.e., member feedback or letters to the editor).
- Coordinate with Social Media Committee to provide article teasers on social media platforms to increase readership.

Continued on page 8
Website Committee
• Review and provide feedback to help streamline NCRA’s professional association website to ensure it provides clear and concise information to the current membership base and those interested in cancer registry work.
• Review external websites and resources that would be useful to members (useful links) to include in the resources section of the website. This would include research on the legality of using information excerpted from standard setters.
• Review metrics tools (Google Webmaster Tools, Google Analytics, etc.) and determine which reports will be used to report NCRA web traffic.
• Work with Medical Registries Task Force to consider approaches for including new information/content on the other types of registries—trauma, pediatric, etc.—on the website.
• Search for and add news related to cancer registrars to the site (i.e., newsfeed service, Google News Alerts, etc.).

All Board Positions
• Report to Linda and Lori via one-on-one calls, with the goal of completing all by July 28, 2016.
• Following each Board meeting, report to President-Elect once you have reported back to volunteer leaders regarding Board meeting actions.
• President-Elect report to President on Presidential Charge #2.

Past President
• Research best practices in association committee member term limits and make recommendation to the Board regarding whether NCRA should adopt a term-limits policy. If so, define the parameters of such a policy.

Recruitment & Retention

JANET REYNOLDS, CTR | RECRUITMENT & RETENTION DIRECTOR

Are you taking full advantage of your NCRA membership? NCRA offers a wide range of member benefits to enhance your education, networking, and professional development as well as perks like professional liability insurance and discounted car rental rates. Your membership dues help support certification, education, and advocacy efforts to promote and grow our profession. Spend some time exploring our website to find both free and paid educational products, volunteer opportunities, a toolkit for recruiting new members, and an instructor's guide with presentations to help if you’re interested in speaking at a local HIM or Allied Health School.

NCRA will continue to focus on developing critical training to keep registrars current and to advocate for the profession. Below you’ll find highlights of several recent NCRA activities.

NCRA has compiled its staging transition-related webinars from the last two years and created CD and online versions to provide registrars access to first-rate training. NCRA has also posted, free-of-charge, all the TNM and Summary Stage sessions from recent annual conferences. Read more at www.ncra-usa.org/transition.

NCRA released the Cancer Case Studies, Second Edition workbook this year, and posted 15 online cases to its Center for Cancer Registry Education. Additionally, NCRA’s Education Committee posted 12 Informational Abstracts, complimentary fact sheets to assist registrars in preparing abstracts. Learn more at www.CancerRegistryEducation.org/rr.

NCRA offers several ways to prepare for the CTR Exam, including a live CTR Exam Prep webinar series; an online practice test; and a set of archived webinars. Learn more at www.NCRA-usa.org/CTRPrep.

Please stay connected to NCRA via social media; get details at www.ncra-usa.org/SocialMedia.
The Finance Committee met to review NCRA’s financials and investments in Las Vegas in April, prior to the Annual Educational Conference.

Most of NCRA’s cash flow is received between September and May, which aligns with dues renewals, CE fees, and annual conference revenues. The financial report for January 2016–August 2016 reflects a strong income-over-expenses ratio.

As was reported at the annual business meeting in April, the annual voluntary audit was completed with no issues found.

The Finance Committee has been involved in several initiatives over the last year, including working with NCRA staff to implement a three-year rolling budget. A rolling budget is one that’s continually updated—i.e., once a budget period (month or quarter) is complete, it’s dropped from the budget, and the upcoming period is added. This allows the NCRA Board and Finance Committee to review a budget that always looks three years ahead.

The Finance Committee met again in September to work on the 2017 budget. The timeline of events for this process is as follows:

**September 6, 2016:** Committees were asked to fill out their program plans for 2017.

**October 3, 2016:** Committee program plans were completed.

**October 4, 2016:** NCRA staff began working on the budget.

**November 3, 2016:** NCRA staff completes budget templates.

**November 29, 2016:** Initial draft budget is complete.

**December 12, 2016:** Final draft budget presented to the Finance Committee.

**January 6, 2017:** Final budget presented to the Finance Committee and Board.

In other news, NCRA received a notice of award for a new five-year cooperative agreement with the CDC’s NPCR program. NCRA will receive $1 million over five years, or $200,000 a year. The goal of the CDC-NPCR program is to enhance national cancer data and statistics to help public health professionals understand and address the nation’s cancer burden. NCRA is planning to help meet this goal with several projects, including a job task analysis to ensure CTR Exam content tests the skills needed in today’s workforce; strengthening the Center for Cancer Registry Education (CCRE); establishing an online Certificate/Badge program; conducting an educational needs assessment of central cancer registries; creating a survey to better understand EMR adoption and developing a plan to address the identified challenges; implementing the Cancer Surveillance Data Health Impact Communications Plan to showcase how NPCR data improve public health; creating the Institute for Medical Surveillance Workforce Research to serve as the central repository for medical surveillance workforce research for the purpose of enhancing recruitment and retention; and updating current materials and creating new programs with HIM colleges to promote careers in cancer surveillance and to encourage establishment of NCRA-accredited formal education programs.

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**Income/expense report for January–August 2016**

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As of August 31, 2016, the NCRA investment portfolio total is $424,083.

**Asset allocations as of August 31, 2016**

- Cash Equivalents: 21%
- Equities: 24%
- Fixed Income: 55%
Organizing and preparing an education program can be stressful on many levels. Developing the curriculum, finding the speakers, gathering speaker information and objectives, and, finally, submitting the NCRA Program Recognition application for approval of CE hours are sure to make most program hosts anxious. The Program Recognition Committee (PRC) is here to help make your experience submitting a program for NCRA CE recognition as stress-free as possible. This article will highlight and discuss items that may cause a delay in reviewing and approving an application.

Common items that may cause a delay include missing or conflicting information, unclear learning objectives, and discrepancies between the timing of sessions and the number of CE hours requested.

One of the most common issues is missing or conflicting information. When we receive incomplete applications, we send them back to the program host with a request to provide the missing information. Many applications fail to list Speaker Special Qualifications (page 5). In this area, please list the experience the speaker possesses specific to the topic area. For example, if your topic is breast cancer staging, this section should focus on the speaker’s background as related to breast cancer staging. (Dr. X has 20 years’ experience as a breast surgeon, and is a professor of ……… at XYZ college. He has extensive experience providing education to multidisciplinary groups around breast cancer staging and surgical management.) Listing a speaker as an MD is not sufficient in most cases. Examples of conflicting information include titles of sessions that differ in various parts of the application or objectives that do not match exactly in both the Program Schedule and the Faculty Data & Objectives sections. Information on the Program Schedule page must be consistent with information on Faculty Data & Objectives page.

Another item that may delay the approval of applications is how objectives are written for each session. Objectives should always complete the statement: “At the conclusion of this educational session, the learner will be able to…” Examples include: demonstrate staging breast cases; list three updates to the CoC standards; verbalize common errors seen in abstracts sent to the central registry; analyze the difference between…; describe key concepts related to…; etc. Objectives should generally lead with an action verb such as define, describe, identify, distinguish, discuss, explain, differentiate, demonstrate, or list. Avoid leading the objective with the word “review,” as it implies addressing information already known and may be considered basic information that does not qualify for CE credits.

Lastly, the PRC also sees discrepancies between the time listed for a session and the number of CE hours requested for the session. CE hours are awarded based on the length of each session. Continuing Education value is assigned in the following manner:

- 15 minutes = 0.25 CE
- 30 minutes = 0.50 CE
- 45 minutes = 0.75 CE
- 60 minutes = 1.00 CE

No value will be awarded for time less than 15 minutes; the full time must be utilized for the credit to be awarded. Time is not rounded up to meet a time interval. For example:

- 8:00 am–8:15 am = 0.25 CE hours
- 8:00 am–8:25 am = 0.25 CE hours
- 8:00 am–8:45 am = 0.75 CE hours
- 8:00 am–8:55 am = 0.75 CE hours
- 8:00 am–9:00 am = 1.0 CE hours

Please remember to include breaks for every three hours of continuous programming. If a program exceeds three hours and a break is not included, .25 CE hours will be deducted from the total amount of CE hours awarded. It is helpful to list the break on the Program Schedule page so it’s not inadvertently overlooked.

Double-checking the application and having someone else proof that time frames listed match CE hours requested and that all information is complete can help avoid delays. Our goal is to approve quality educational programs for our members in a timely manner. Attention to detail in the application process will ensure you receive your approval in time for your event.

Special thanks to Robin Havens, the NCRA staff person who works with the Program Recognition Committee.
The NAACCR 2016 Annual Conference was held June 14–16, 2016 in St. Louis, at a hotel just opposite the famed Gateway Arch. The keynote address, “Strategies for Accelerating Translation of Research Findings into Cancer Prevention that Works,” discussed research-based interventions that have been proven effective to reduce cancer incidence. The speaker noted, for example, that Australia has found bringing HPV vaccines into the schools is the most effective way to reach the target population and that, rather than the government prohibiting smoking, it places a $20+ tax on a pack of cigarettes.

Several plenaries followed the keynote speaker on the first day. Below are highlights from a select few.

➤ Lung cancer screening with low-dose computed tomography is recommend by the US Preventive Services Task Force in adults aged 55 to 80 who have a 30-pack-year smoking history. Lung cancer screening can reduce cancer mortality by 20%.

➤ The lack of a standard system for pediatric staging creates problems for the comparability of pediatric cancers globally. To address this issue, key experts (oncologists, cancer registrars, and epidemiologists) formed a group to establish recommendations for pediatric stage for the major childhood cancers. The results, known as the Toronto Consensus Guidelines, have been endorsed by the UICC and the TNM committees, and will be included in the AJCC Cancer Staging Manual, 8th Edition. For the first time, TNM will have a chapter on childhood cancers. No information was given concerning the AJCC and pediatric stage.

➤ Natural language processing (NLP) technology has matured and may be able to automate information extracted from medical reports. This can help streamline case finding, abstraction, case consolidation, and quality assurance. The speaker noted that highly trained, experienced cancer registrars are key to accuracy of NLP. Registrars can optimize the interaction between computers and humans for the most efficient collection of cancer data.

➤ 211Counts.org is an online data dashboard of daily socioeconomic and health needs at the zip-code level for communities across the US. The association of social and economic determinants of health and cancer is well-documented, and this website opens opportunities for integration with cancer and other population health surveillance data.

The following includes highlights from a selection of the second day's plenaries.

➤ Missouri Cancer Registry looked at the zip codes of early- and late-stage breast cancers and determined that mobile mammography facilities in 39 specific zip codes could increase breast cancer screening and thus reduce late-stage breast cancer.

➤ A discussion of palliative and hospice care noted that these services should be regarded as a critical aspect of cancer control. Appropriate application of these services can reduce the physical, emotional, spiritual, and financial burdens of advanced cancer cases.

➤ Dr. Frederick Greene updated participants on the process of revising the FORDS manual. He emphasized the importance of adding codes for recurrence of cancer. The proposed new name of the manual is Standards for Oncology Registry Entry (SORE).

I attended several of Wednesday’s and Thursday's concurrent sessions; following are highlights from several of these.

➤ An overview of the V.16 Edits for stage was provided. There will be new edits for the new data items and edits to direct the accurate assignment of stage.

➤ A short presentation on AJCC 8th Edition updates noted what physicians think is important and why. The AJCC 8th Edition will include an explanation of the prognostic factors, the grade system for specific sites, updated morphology codes, and more illustrations. It will also include more neuroendocrine chapters, and ovary, fallopian tube, and peritoneal cancers will be merged into one chapter. The prognostic factors will indicate if they are required versus recommended. The new edition will also include guidance for collecting the data to assign stage.

➤ Some sessions presented the results of registry studies that looked at the quality of AJCC Stage. Two interesting findings were a lack of information in the medical record to assign stage, and the primary error was the missing of a subgroup in the stage categories. For example, T1 was assigned, but the subgroup was missing—i.e., T1a or T1b, etc.

Many sessions were devoted to leveraging registry data with other databases, electronic reporting, biomarkers, and the ever-increasing natural language processing for data collection that can “code” from diagnostic and treating documents with a high accuracy rate. As I reported last year, cancer reporting is steadily becoming almost completely electronic and I believe that the job duties of registrars will evolve accordingly.

The NAACCR Annual Meeting is an educational conference for central cancer registries but offers many sessions that might be of interest to anyone in cancer surveillance, including hospital registrars.
The NCRA Education Foundation: What are we? What do we do?

SARA BIESE, RHIT, CTR | EDUCATION FOUNDATION CHAIR

The NCRA Education Foundation is a nonprofit organization that supports advancement of the cancer registry profession through education and research.

What are some of the Foundation’s accomplishments?
The Foundation developed An Introduction to the Cancer Registry, which consists of 12 recorded presentations outlining key aspects of the profession. We sent a CD with the presentations, an instructor’s guide, student handouts, cancer registry manuals, publications, and other resources to HIM schools throughout the country. This served two purposes: 1) provide instructors with resources on the subject of cancer registry, since it’s a requirement for HIM curriculum and 2) serve as a recruitment tool to show prospective cancer registrars what we do. The 12 recorded presentations are also available on the NCRA Center for Cancer Registry Education, www.cancerregistryeducation.org.

Expanding on these presentations, the Foundation developed cancer coding lessons/activities to enhance HIM students’ understanding of the types of coding and staging involved in an abstract. The lessons include coding site, histology, cancer treatment, surgery, and assigning AJCC Cancer Staging as well as SEER Summary Stage. They were presented to HIM instructors at the Assembly of Education in July 2015.

By offering such resources to people outside the profession, we hope to provide a glimpse into what cancer registrars do and increase recruitment of new cancer registrars.

The Foundation also developed the Telecommuting Toolkit for Cancer Registrars. This toolkit offers resources to help registrars develop a proposal and present it to their administrators to encourage telecommuting within their organization. The toolkit includes proposal and presentation tips, a sample agreement, and a self-assessment.

What is the Foundation working on now?
The Foundation is currently researching and seeking private funding opportunities to support the development of a process to enhance recruitment and retention. More details will be shared soon.

Who are the directors of the Foundation?
The Foundation consists of up to nine directors. Our current directors are:

- Sara Biese, Chair, Wisconsin
- Betty Gentry, Vice-Chair, Georgia
- Tiffany Johnson, Secretary, Wisconsin
- Eileen Abate, Director, New York
- Lillian Antonelli-Twal, Director, New York
- Dianne Cleveland, Director, Texas
- Joe Holcomb, Director, Oklahoma
- Herman Menck, Director, California

Additional members include:
- Linda Corrigan, NCRA President, Maryland
- Lori Swain, NCRA Executive Director, Virginia

How can I contribute to the Foundation?
1. Donate through our website, www.ncraeducationfoundation.org, or when you pay your NCRA membership dues.
2. Volunteer!
Each spring, three of the nine directors’ terms end. Directors can apply for another three-year term. We also do a call for volunteers and nominees in late winter. As you can see by the list of directors above, we are already short one director—and we’d love to have you be involved!

Why should you volunteer your time to the Foundation?
Read comments from our current directors on why they volunteer.

- It is a wonderful experience! You meet so many wonderful and interesting people!
- I volunteer on the Foundation to “pay it forward” in recognition of a registrar who was both a mentor and a friend who taught with patience and grace. It is a pleasure working with a group of creative, energetic individuals who bring so many talents to the table.
- The Foundation strives to enhance our profession and provide knowledge that allows cancer registrars to empower themselves. Being a part of the Foundation allows me to network with other cancer registrars throughout the country.
- Volunteering for the Foundation gives me the opportunity to use my skills and expertise. I have learned a great deal about the NCRA organization and have met some terrific people with whom I have remained good friends. All the NCRA positions I have served have helped me grow as a leader.
- I enjoy working with individuals who can work together to solve problems and get things done. It is a pleasure working with a group of creative, energetic individuals who bring so many talents to the table.
- The Foundation strives to enhance our profession and provide knowledge that allows cancer registrars to empower themselves. Being a part of the Foundation allows me to network with other cancer registrars throughout the country.
- Volunteering for the Foundation gives me the opportunity to use my skills and expertise. I have learned a great deal about the NCRA organization and have met some terrific people with whom I have remained good friends. All the NCRA positions I have served have helped me grow as a leader.
- It is a wonderful experience! You meet so many wonderful and interesting people!

If you’d like to be part of this organization, watch for the NCRA call for volunteers/nominees in late winter or email me at sara.biese@hshs.org.

I’d like to thank all those who have already volunteered their time and donated to the Education Foundation!
New CTRs

The summer CTR Exam was taken by candidates at testing centers worldwide during the June 18–July 9 2016 testing window; 100 candidates passed the exam and formally became Certified Tumor Registrars. NCRA’s Council on Certification proudly congratulates all new CTRs!

**Alabama**
Annetta Kirkman, *Tuscaloosa*
Katherine Wolfson, *Harvest*

**Arizona**
Sandra McDonald, *Tucson*
Tracy Sahlin, *Peoria*

**Arkansas**

**California**
Jane Fielder, *Ventura*
Mary Lee Kenoyer, *Monterey*
Mandi Polt, *Ventura*
Noah Reid, *San Francisco*
Michele Summers, *San Diego*
Melissa Wilcoxon, *Yucca Valley*

**Colorado**
Patricia A. Kochenower, *Colorado Springs*
Daniel Winn, *Denver*

**Connecticut**
Ann Marie Szymula, *Plainville*

**Delaware**
Jennifer Nack, *Dover*

**Florida**
Deana Duarte, *Cape Coral*
Wedly Sylvain, *Jacksonville*
Sharon Whitfield, *Milton*

**Georgia**
Janae Burris, *Marietta*
Sherrill Tillotson, *Savannah*

**Hawaii**
Sharon Blevins, *Honolulu*
Raymond Pang, *Honolulu*

**Illinois**
Kathleen Sobeski, *Cary*

**Indiana**
Colleen M. Condron, *Fort Wayne*
Sonya R. Freeman, *Indianapolis*
Mary Sokolowski, *Fort Wayne*

**Kansas**
Victoria Lauseng, *Salina*

**Kentucky**
Sharon Eberhart, *Louisville*

**Louisiana**
Barbara Antill, *Schriever*
Trish Robin, *Baton Rouge*
Cora M. Spain, *Breaux Bridge*

**Maryland**
McKenzie Bedra, *Annapolis*
Saba Khan, *Ellicott City*

**Michigan**
Jennifer Bader, *Freeland*
Erin Weber, *Sawyer*

**Minnesota**
Abby Leitner, *Dassel*
Karen C. Lin, *New Brighton*

**Missouri**
Tara Hamp, *Morrisville*
Karen Nelson, *Wentzville*

**Montana**
Jennifer Hamblock, *Livingston*

**Nebraska**
Ramona Kamal, *Lincoln*

**Nevada**
Sandra Alarcon-Cortez, *Las Vegas*

**New Jersey**
Carrieann Bennett, *Long Branch*
Adrian Botchway, *Marlboro*
Amy Cass, *Toms River*
Claudia Morales, *Lodi*
Tammy L. Petit, *Vineland*
Katelyn Roman, *Trenton*
Hannah Stanko, *South Plainfield*

**New York**
Shannon L. Alwaise, *Poughkeepsie*
Jemily Dalistan, *Brooklyn*
Kelly Johnson, *Yonkers*
Kevin Lawlor, *Glendale*
Matthew Perkins, *Albany*
Sara Restrepo, *Jamaica Estates*
Kelsey Schlotow, *Albany*
Deborah Symonds, *Rochester*

**North Carolina**
Laura Defino-Coscia, *Apex*
Miranda Edwards, *Greenville*
Leigh Jones, *Lexington*
Destiny Justice, *Charlotte*
Jonathan Rakestraw, *Midway*
Isaiah Zipple, *Hillsborough*

**Ohio**
Rene Diaz, *Loveland*

**Oklahoma**
Judy L. Hanna, *Guthrie*

**Oregon**
Claire Clement, *Phoenix*
Carrie Rupp, *Salem*

**Pennsylvania**
Amanda Bailey, *Philadelphia*
Laura D. Devitt, *Adamsburg*
Terrance Jones, *Phoenixville*
Christina Lisella, *Reading*

**Puerto Rico**
Camille Gonzalez-Mictil, *Carolina*
Carelli Santiag-Del Valle, *San Juan*
Yarenid Santiago-Colon, *Arecibo*

**South Carolina**
Jeanette Brown, *Greenville*
Sandra Dulske, *Boiling Springs*
Joni Walker, *Sumter*

**South Dakota**
Amanda R. DeGroot, *Sioux Falls*

**Tennessee**
Michelle Armistead, *Goodlettsville*
Khaliah Williams, *Smyrna*

**Texas**
Megan Baldwin, *Lubbock*
Cynthia L. Castro, *Wylie*
Sunny M. Lane, *Humble*
Selene Lucatero, *Baytown*
Elizabeth Matthews, *Arlington*

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Updates from the College of American Pathologists Cancer Committee

CHRISTINE GIBSON, CTR, CCRP | NCRA LIAISON TO CAP

The AJCC 8th Edition may impact timelines for collaborating standard setters. The College of American Pathologists (CAP) Cancer Committee is working to incorporate the new required data elements into their laboratory information systems. Put it on your calendar to routinely check the CAP website at www.CAP.org for the latest news. I have included some highlights of committee activities below:

- In August, CAP released updated cancer protocols for Pancreas (Endocrine), Distal Extrahepatic Bile Ducts, Pancreas (Exocrine), Lip and Oral Cavity, and for the following pediatric tumors: Ewing Sarcoma, Extragonadal Germ Cell, Hepatoblastoma, Neuroblastoma, Rhabdomyosarcoma and Wilms Tumor.

- Current Laboratory Accreditation Program (LAP) requirements include completeness of reports, internal auditing, and synoptic formatting of the required data elements (RDE). Laboratories are allowed eight months to incorporate new and revised RDEs into their reporting systems. The CAP Cancer Checklists should bring pathology reports into better harmony with the Commission on Cancer (CoC) Standard 2.1.

- The Ask the Pathologist (ATP) forum on the CoC CAnswer website has been a great help for cancer registrars and has resulted in improved CAP cancer protocols. Cancer registrar questions help shape definitions—making them more understandable—for terms as they relate to histologic descriptions, data elements, values, and required elements.

- At the CAP 2016 Annual Meeting, CAP presented a poster titled “Pathologist-Cancer Registrar Forum Improves Cancer Protocols.” The poster covered the design of ATP, questions by anatomical site, month and referral patterns, and how the forum helps registrars and pathologists facilitate accuracy of data reporting.

- Visit the AJCC website to read its September 13 news release, Implementation of the AJCC 8th Edition Cancer Staging System. An excerpt is below.

The CAP is making every effort to accelerate the revision of its protocols. This will be facilitated by prioritization of the protocols for the most prevalent cancers in 2016, followed by the revisions to the remaining protocols in the first quarter of 2017. For CAP accreditation, laboratories will NOT be surveyed for patient reports using the AJCC 8th Edition until 8 months after the official release of the specific revised CAP Cancer Protocols. The AJCC encourages laboratories and vendors utilizing the CAP Cancer Protocol and electronic Cancer Checklist (eCC) content to plan for expedient implementation for their users once the CAP content is released.

CoC Surveys performed in 2017 will not be affected by the 8th edition change because surveyors will review pathology reports generated during 2014, 2015, and 2016. CoC Surveys performed in 2018 and beyond will continue to review cancer pathology reports for Standard 2.1 based on the usual 8-month window for implementation of CAP Cancer Protocol required data elements.

CAP is a huge supporter of NCRA’s work and adherence to the changing standardization requirements. To keep current, we must stay connected and take advantage of any and all educational opportunities. Prospective Board candidates should view the presentations at www.ncra-usa.org/BoDPresentations to better understand the responsibilities and time commitment required.
NCRA Offers Special 2017 Continuing Education Subscription

Save Now and Earn CEs!

NCRA is offering a special 2017 CTR membership renewal subscription to the Center for Cancer Registry Education (www.CancerRegistryEducation.org) that includes access to 20 online learning products for $180. If you were to pay the full price, the cost would be $850. To see the complete list of trainings, go to www.ncra-usa.org/renew.

This special offer is the most cost-effective way to earn the CEs you need to maintain your CTR credential and keep current with changes in the cancer registry profession! The subscription runs January 6, 2017, through December 31, 2017. It is a per-person subscription; there is no carryover into 2018. Offer ends December 31, 2016.

You can combine your 2017 membership dues renewal with this subscription offer to pay with just one transaction of $310. The breakdown is as follows: membership dues ($105) + CTR maintenance fee ($25) + subscription ($180). You can also renew your membership as you always have, and we will include a link in your dues receipt to purchase the subscription separately. Act soon to take advantage of this opportunity to earn the CEs you need to maintain your CTR credential for $180!

For details or to sign up, go to www.ncra-usa.org/renew! Questions? Call (703) 299-6640, ext. 317, or email ccre@ncrausa.org.

NCRA 2016 Awards: Honoring Excellence

Do you have a colleague or know a member who has given back much through their professional service to NCRA and deserves to be recognized for his/her excellence? Now is your opportunity to nominate that person for one of the worthy NCRA awards for excellence! Each year, NCRA offers a wonderful opportunity to say thank you, acknowledge, and recognize cancer registry professionals for their outstanding contribution to the profession. The following five awards are offered:

Distinguished Member Award
Given to an NCRA member for outstanding contributions to the profession.

Outstanding New Professional Award
Given to a new NCRA member for significant involvement in the profession.

Literary Award
Given to an NCRA member(s) for preparation of important published material related to the Cancer Registry.

Educational Achievement Award
Given to an NCRA member for significant contributions to Cancer Registry education.

Volunteer Excellence Award
Given to an NCRA member for significant volunteer contributions to the organization. A new component has been added to recognize outstanding mentors.

Please take a few minutes to review the criteria for each of the awards and take the opportunity to nominate a colleague and/or professional friend. To nominate a member, submit the following by January 31, 2017:

- Completed award nomination form
- Short narrative summary of why the nominee deserves this award
- Resume or curriculum vitae of the nominee
- Letters of Recommendations (for Volunteer Excellence for Mentoring)

For more details and examples of the judging criteria in each category, or to learn more about the award nominations application process, please visit www.ncra-usa.org/awards.
Membership Committee Update

CHARLOTTE TERBOT, CTR | MEMBERSHIP COMMITTEE CHAIR

The Membership Committee is pleased to announce that at the end of our fiscal year in July, we had 5,877 members, exceeding our goal of 5,842. Of that total, we had 5,403 members renew and 474 new members join, which is a record high from the past few years. Congratulations on being part of our success and goals! Our 2017 goal is 6,000 members.

We have six committee members who are serving on three newly structured subcommittees. I will serve with Mary Marshall, CTR, and Farrah Scodius, CTR, on recruitment. Frances Okubo-Hughes, BA, CTR, and Augusta Rullow, CTR, will focus on activities related to retention. Ebony Johnson, CTR, and Sheron Keeling, CTR, will develop strategies to improve NCRA's engagement. We will work collaboratively to address the Membership Committee’s presidential charges.

CURRENT MEMBERSHIP ACTIVITIES AND CAMPAIGNS

Member-Get-A-Member
Have you heard about the new membership campaign where you can tap into your network of colleagues and help NCRA grow? You can win an NCRA lunch bag and also be entered in monthly drawings for a $100 Visa gift card. Visit www.ncra-usa.org/MGAM to learn more. The deadline is December 31, 2016.

Membership Toolkit
As a companion for the Member-Get-A-Member campaign, we’ve developed an online resource to help you reach out to potential members and encourage them to join NCRA. The toolkit contains a sample recruitment email, links to the NCRA Membership Benefits Value Chart, member testimonials, and more. Visit www.ncra-usa.org/toolkit.

PROMOTE YOUR STATE ASSOCIATION
State associations, we want to hear from you! Please notify NCRA when you’re holding your state meetings so we can post them on our website. NCRA can also provide your association with a one-year membership to use as a raffle (anyone who has not been an NCRA member for at least three years is eligible to redeem the complimentary membership). To include a listing on the NCRA website, send an email containing conference dates, location, and registration page URL to info@ncra-usa.org.

If you have suggestions for future committee activities, please contact me at cterbot@gmail.com.

CALL FOR PAPERS

The Journal of Registry Management, official journal of the National Cancer Registrars Association, announces a call for original manuscripts on registry methodology or research findings related to the subjects listed below.

TOPICS:
1. BIRTH DEFECTS REGISTRIES
2. CANCER REGISTRIES
   - AJCC TNM STAGE
   - CANCER AND SOCIOECONOMIC STATUS
   - CANCER AND HEALTH DISPARITIES
3. TRAUMA REGISTRIES
4. RECRUITMENT, TRAINING, AND RETENTION
5. PUBLIC RELATIONS
6. QUALITY REVIEW
7. REGISTRY MANAGEMENT

Address all manuscripts to Vonetta L. Williams, PhD, MPH, CTR, Editor-in-Chief, Journal of Registry Management, (813) 745-1783, JRMEditor@ncra-usa.org.

Manuscript submission requirements can be found in “Information for Authors” on the inside back cover of each Journal and on the NCRA website at www.ncra-usa.org/jrm.
The Education Committee is well aware of the ever-changing nature of the work our registrars perform. With the release of the AJCC 8th Edition manual—and with its publication comes the need for increased educational offerings. We also recognize that many registrars work remotely and don’t have access to a community of peers when questions arise. We’re continuing to revise our online courses to help fill that gap, and will be working over the next few months to offer resources to help registrars navigate the transition in staging manuals.

This fall, we’ll continue to offer a variety of online webinars covering topics ranging from the staging and pathology of pancreatic cancer to the coding of radiation treatment for breast and prostate cases to RQRS reporting. You can view the webinar schedule on the CCRE website, [www.cancerregistryeducation.org/live-webinars](http://www.cancerregistryeducation.org/live-webinars); webinars are archived, so you can watch them at a later date if you can’t view them live. We’re currently narrowing down potential topics for our spring webinar series. More information will be posted on [cancerregistryeducation.org](http://cancerregistryeducation.org) as it becomes available. We’re excited about plans we have in the works and hope you’ll find the webinars valuable!

**Informational Abstracts**
The Education Committee is also continuing to expand our Informational Abstracts to cover more sites. As you know, these provide helpful hints for newer abstractors and cover some of the challenges when it comes to specific sites. They’re available on the CCRE website at [www.cancerregistryeducation.org/rr](http://www.cancerregistryeducation.org/rr). Our newest offerings include kidney, pancreas, and urinary sites (renal pelvis and bladder). A webinar explaining how to use the Informational Abstracts was posted in late October. Please let the committee know if there are additional sites you’d like us to develop an abstract for. And, don’t forget—you can earn CEs by completing the accompanying quizzes.

**Staging Shorts**
The Education Committee is also involved in building a library of shorts on topics to challenge both new and experienced cancer registrars. We already have shorts available on coding, and we’re working on some site-specific ones, as well; we’re hoping to start with a few of the top sites and look at tips and tricks for using the various manuals we all have stacked up on our desks. We’ll keep you posted via the Update once those become available. Our library already includes several narrated PowerPoint presentations, including a few on staging challenges. We’re always looking for new sources of expertise, so if you’re interested in getting involved in a webinar or a short, please contact Mary Maul, Manager of Education Programs, at [mmaul@ncra-usa.org](mailto:mmaul@ncra-usa.org).

**CTR Prep**
The most recent CTR Exam period began October 15, and we had a group of enthusiastic exam candidates in our latest prep series. The Education Committee wishes them all the best, and we are just as anxious about the results as they are! Plans and curriculum review for the Fundamentals of Abstracting Workshop (to be offered at NCRA 2017) are well underway, and we are also focusing on enhancing remote training opportunities during the next quarter.

**Personal Notes**
As a first-time NCRA committee member, I want to express my gratitude for the support I’ve experienced as I settle into my new role on the Education Committee. I’m thrilled to participate in the work that NCRA is doing. We truly do have a close-knit community, and I’m grateful and proud to be a part of NCRA’s Education Committee. Here’s to a bright future for our Cancer Registry profession and I extend my best wishes for a safe, healthy holiday season to all our members. See you in Washington, DC, this spring.

**Committee Members**
Juliet Wilkins (Chair), Eileen Abate, Anne August, Danette Clark, Dainille Clark, Lorraine Colwell, Carole Eberle, Susanna Mitchell, Jennifer Ruhl, Louise Schuman, Cari Vida

**NCRA Board Director for Education:** Paulette Zinkann

**NCRA Staff:** Mary Maul
Renew Today To Ensure Continuation Of Your Member Benefits:

- Discounted registration fees for the annual conference and CTR Exam.
- Up to 20 percent off NCRA’s educational and professional development products, including webinars, publications, learning modules, online courses, and much more. Visit www.CancerRegistryEducation.org to learn more.
- Professional Liability Insurance is a new NCRA member benefit. All NCRA members are eligible to apply and take advantage of the low annual premiums and the 50% discount on the administrative fee. Learn more at www.ncra-usa.org/PLInsurance
- Access the “members-only” NCRA Membership Directory to connect with other cancer registry professionals.
- Complimentary subscriptions that help you stay current: The Update, NCRA's bi-weekly e-newsletter, The Connection, NCRA's quarterly newsletter, and the Journal of Registry Management, the only peer-reviewed academic journal dedicated to the cancer registry profession.
- And much more!

The 2017 membership dues remain the same as 2016:
- Active - $105
- Associate - $90
- Inactive - $50
- International - $65
- Student - $40
- Sustaining - $200

Three easy ways to renew:
- Online at www.ncra-usa.org/renew. You will need to log-in to access your account.
- Fax or mail the Membership Dues Invoice (mailed to you early October). Can’t find your copy? Call 703-299-6640, ext. 310 or e-mail member@ncra-usa.org.
- Renew by phone. Call 703-299-6640, ext. 310.

While renewing your membership, please review and update your member profile to ensure that you continue receiving valuable information from NCRA. To update your profile, log-in to the “Members-Only” section of the NCRA website (www.ncra-usa.org) and click the “Edit My Profile” link.

**Special Offer for Renewing Members**
2017 Annual Subscription to the Center for Cancer Registry Education for $180
Learn More: www.ncra-usa.org/SpecialSubscription

Questions?
Contact member@ncra-usa.org or call 703-299-6640, ext. 310 or 319.
Welcome to the New Members Who Joined May – August 2016

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<thead>
<tr>
<th>Name</th>
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<tr>
<td>Caroline H Adiwijaya</td>
<td>Bedford, MA</td>
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<td>Mohammed M Ahmed</td>
<td>Owings Mills, MD</td>
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<td>Djobby Akre</td>
<td>Detroit, MI</td>
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<td>Amal D Al-Shehri</td>
<td>Dhahran, Saudi Arabia</td>
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<td>Khin Aung</td>
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<td>Nancy W Ayoub</td>
<td>E. Brunswick, NJ</td>
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<td>Monique Baer</td>
<td>Temecula, CA</td>
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<td>Vicki Beckner</td>
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<td>Noaïda Benitez</td>
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<td>Jessica Bidlack</td>
<td>Trabuco Canyon, CA</td>
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<td>Mehrdokht Boldaji</td>
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<td>Tanayha Boyd</td>
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<td>Laura Bradley</td>
<td>Panama City, FL</td>
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<td>Holly R Brown</td>
<td>Ashland, OH</td>
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<td>Angela K Brumley</td>
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<td>Bountiful, UT</td>
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<td>Ann D Buchi</td>
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<td>Curtis R Burner</td>
<td>Lansing, IL</td>
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<td>Vicki Burwell-Rankin</td>
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<td>Brian Cahill</td>
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<td>Kenneth Cunningham</td>
<td>Lindenhurst, IL</td>
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<td>Longview, WA</td>
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<td>Richmond, IN</td>
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<td>Grosse Pte Woods, MI</td>
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<td>Michelle DiSanto</td>
<td>Tampa, FL</td>
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<td>Jamie L Dreyer</td>
<td>Des Moines, IA</td>
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<td>Melissa Nay</td>
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continued on Page 20
Welcome New Members, continued

Nancy Nazario, Rio Piedras, PR
Linda Nielsen, Dearborn, MI
Lara E Nolan, Conyers, GA
Nora S Noriega, Palmdale, CA
Melissa Norman, Laguna Niguel, CA
Wanda K North, Ponte Vedra Bch, FL
Julie O’Hara, Boulder, CO
Beth Otto, Goshen, IN
Yolanda V Owusu-Ansah
Marvinette N Palmer, New Canton, VA
Catherine Peters, Alachua, FL
Lisa Peterson, Slidell, LA
Jane Phillips, Humble, TX
Stephanie Pierce, Highland, MI
Laura Pinela, Montgomery, IL
Emily Pitcher, San Francisco, CA
Andrea Plank, Palmyra, MO
Jennifer Pols, Akron, OH
Claudia A Potts, Dayton, OH
Audrey Potts, Dartmouth, MA
Elizabeth J Pulcini, Tucson, AZ
Zahra Qamar, Port Jefferson Station, NY
Rolando P Ramirez, Miami, FL
Samantha J Reynolds, Wausau, WI
Laura K Ritter, Knoxville, TN
Trish Robin, Pierre Part, LA
Priscilla Rodriguez, Denver, CO
Sheryl Russell, Hixson, TN
Catherine Rylands, Charleston, SC
Tracy L Sahlin, Peoria, AZ
Atta Sarwar, Manalapan, NJ
Michelle Saunders, Athens, GA
Katherine Savillo, Plainsboro, NJ
Catherine Scalamogna, Allison Park, PA
Andrea Schmitt
Mary A Shepard
Angela Shireling
Regina Sifuentes
Jody Simon
Vongmaly Sirimanivong
Angela Slovak
Kathleen Sobeski
John Stachelek
Shirley Stafford
Lori Sumner
Candice A Swift
Jennifer Takle
Francis Tam
Omeg Taylor
LaToya Thompson
Barbara S Thorne
Jessica Tompkins
Felicia Tunstall
Elaine Turlington
Stacy Uyeji
Christina Velarde
Andrew C Wang
Karen D Weathington
Erin Weber
Joyce Weinstock
Raquel C Welch
Jeanne Williams
Tamara Yokell
Kimberly Yunker
Louise Zamudio
Katherine Zeiss
Greenville, WI
Norfolk, VA
San Diego, CA
Antioch, CA
Tampa, FL
Phoenix, AZ
Adrian, MI
Cary, IL
S. Lyon, MI
Fairfield, CA
Ramona, CA
Longwood, FL
Moody, TX
Walnut Grove, MN
Tarrytown, NY
Mobile, AL
McDonough, GA
Philadelphia, PA
Salt Lake City, UT
Odenton, MD
Secane, PA
Seattle, WA
Fredericksburg, VA
Sacramento, CA
Sanford, NC
Burlington, NJ
Sawyer, MI
Reisterstown, MD
Denver, CO
San Diego, CA
Boulder, CO
Elba, NY
St John, IN
Raleigh, NC