The professional practice experience is the hands-on application of the program coursework. The clinical practice will provide the student with experience in the technical aspects of cancer registry operations and compliment the knowledge gained during the academic portion of their education.

To qualify for the Certified Tumor Registrars (CTR) certification exam under Eligibility Routes A, Path 1 & 2, students are required to complete 160 hours of work experience at a cancer registry after successfully completing an NCRA-accredited Formal Education Degree Program or an NCRA-accredited Formal Education Certificate Program. During the clinical practice, students must be under the direct supervision of a Certified Tumor Registrar (CTR).

**When you should begin the Professional Practice/Clinical Practicum requirement:**

Students will not begin the Clinical Practicum until they have completed all the courses in the CRM/CIM program. The theoretical foundation provided in the NCRA Accredited Formal Education Program courses are essential to understanding the general concepts and principles of cancer registry functions and operations. Additionally, about half of the 160 hours of work experience will focus on abstracting, coding and staging, which is a large part of a registrar’s educational training. The clinical supervisor will expect the student to have basic knowledge and skills in all areas of the cancer registry.

According to the NCRA Formal Education Accreditation standards, NCRA accredited programs must have affiliation agreements with facilities where students can do the Clinical Practicum hours as required by the program. Any agreement for the clinical
practice should be viewed as an arrangement between the program (in the case of college/university-based programs), on behalf of the student, and the healthcare facility. In the case of a student from the NCRA American Health Information Management Association (AHIMA) Cancer Registry Program (CRM), the student may secure a facility independently, or NCRA may serve as the program Administrator and negotiate an affiliation agreement with a facility on behalf of students. Facilities affiliated with NCRA are listed on the NCRA Job Bank under the position title, “Clinical Student.”

Locate Clinical Host Sites in addition to those contracted by the CRM/CIM Program:

1. To increase your chances of being able to begin the clinical practicum as soon as your coursework is complete, begin contacting people in your network and potential sites before you complete your program. The clinical practicum does not have to be four, forty-hour work weeks. Clinical practicum activities are varied and assigned a certain number of hours. By being proactive and networking in your area, you may develop opportunities at multiple facilities and have a better chance of completing the activities. In addition, certain times of the year may be more feasible than others due to surveys and data submission requirements, and more options makes it easier for the student.

2. Use the NCRA Directory of Clinical Site Hosts to identify other possible host sites in your area. The list is located on the NCRA Job Bank.

3. Contact cancer registries in your area. If they are not available, ask for names of other facilities in the state or region. A list of CoC accredited programs in your area can be obtained from the Commission on Cancer website. They have a search function for CoC accredited cancer programs in the US.

4. Contact your state cancer registrar’s association and join as a student, if possible. The network of registrars in your area will prove to be a valuable asset for you in the future. A list of state association contacts can be found on the NCRA web site.

5. Contact the state’s central cancer registry to see if they are available to host you for some of the activities listed in the Clinical Practicum list of tasks. A list of NPCR central cancer registries can be found on the CDC NPCR website and SEER central cancer registries on the SEER web site.

6. If one facility is unable to accommodate the entire 160 hours, recommend solutions such as sharing time with another facility or the central cancer registry or splitting the session into increments.
7. You may complete casefinding requirements and a portion of your abstracting requirement using the exercises on the SEER*Educate website. The Formal Education Program Review Committee (FEPRC) has approved up to 15 abstracts being completed, under the supervision of an Independent Clinical Advisor (ICA)/Mentor CTR, that may count toward the fulfillment of the 30 abstracts required. Speak with your Independent Clinical Advisor about this option.

**Basic Guidelines for Students:**

1. Review this packet and the Professional Practice/Clinical Practicum requirements.

2. Use the Clinical Site Fact Sheet to help gather general information about the clinical site.

3. Complete the Introductory Letter for Professional Practice (optional) and share with clinical supervisor as soon as they have agreed to host the clinical.

4. **!! Important:**
   Contact the clinical supervisor at least two weeks prior to the start date. If possible, arrange for a personal visit. When making a personal visit, call the clinical supervisor for an appointment. Confirm that you are prepared to provide the facility with the following:

   * Up-to-Date record of immunizations – the facility should give you a list of the immunizations that are required.
   * Recent background check.
   * Recent drug test.
   * Professional liability insurance - check with the facility regarding the amounts required. Information about professional liability insurance is available on the NCRA web site, Member Benefits section.
   * Documentation that you have completed the coursework for the Cancer Registry Management (CRM)/Cancer Information Management (CIM) Certificate Program.

The facility should give you the following information prior to your start date:

   * Start date and time, and where to report
   * Dress code
   * Identification
   * Parking
   * Any materials that student is required to bring

5. You will be required to sign a confidentiality statement and may receive HIPAA training prior to your start. This HIPAA training will fulfill the requirement of your practicum. Maintain strict confidentiality of any and all information.
Confidentiality and HIPAA regulations are a very serious matter. It is very important that you maintain strict confidentiality of all information encountered. This includes cancer patient information, health record information and cancer center/facility operations. Under no documentation or information should be discussed or removed from the facility. Failure to abide by the confidentiality policies of the facility could result in termination of the clinical practice.

6. Discuss a schedule with your supervisor. If it is possible to attend cancer conferences, ensure that your schedule accommodates this.

7. Review and adhere to the NCRA Code of Ethics.

8. Report promptly every day. If you must be absent from work, it is IMPERATIVE to notify the clinical supervisor, as soon as possible. Absences should be avoided unless there is an illness or emergency. The Weekly Time Record is a tool to help keep track of your practicum hours (optional). When the time comes to apply for the CTR exam, your supervisor will be required to attest to the hours, by signing the experience section on the CTR exam application.

9. If possible, schedule a closing interview on the last day of your clinical with the CTR supervisor. Ask your supervisor for feedback on your performance. This will help you further prepare CTR exam. Discuss with the CTR supervisor the CTR exam application and the necessity of having them sign off on your clinical hours in the facility. A copy of the CTR Exam Application is available in the CTR Exam Candidate’s Handbook.

10. Promptly send separate thank you notes to your clinical supervisor and all associated staff members.

We are including some optional forms and letters to help organize your experience.
PROFESSIONAL PRACTICE/CLINICAL PRACTICUM
Clinical Site Fact Sheet

Student Name: 

Facility Name: 

Address: 

Supervisor: 
Credential: 

☐ I certify that I am an active CTR

Email: 
Phone: 

COC Approval Category: 
Last COC Survey: 

Annual Analytic Caseload: 

Registry’s Reference Date: 

Cancer Committee Frequency: 

Cancer Conference Frequency: 

Medical Records (Electronic/Paper): 

Cancer Registry Software System: 

How many full time employees (FTEs) are in the Cancer Registry? 

How many Cancer Registrars have the following specific credentials? 


NCRA Clinical Practicum Guide
Updated February 2019
[Sample letter of introduction for student to present to facility-Optional]

Dear __________;

This letter is to introduce ___, a student who has completed the coursework in the NCRA-accredited Formal Education Program in Cancer Registry Management at [..........................] college. This student is interested in utilizing your facility to obtain professional practice experience in all areas of cancer registry operations and management.

The professional practice experience is the hands-on application of the program coursework. The clinical practice will provide the student with experience in the technical aspects of cancer registry operations and compliment the knowledge gained during the academic portion of their education. The student must complete 160 hours in the clinical experience. During the clinical practice, students must be under the direct supervision of an active Certified Tumor Registrar (CTR).

This student has completed courses in anatomy and physiology, pathophysiology and pharmacology, medical terminology, computers in healthcare, cancer registry operations, cancer registry structure and management, cancer disease coding and staging, abstracting methods, oncology treatment and coding, and follow-up, data quality and utilization. This student is well prepared to obtain an entry-level position as a cancer registrar and may be a source for a qualified employee in this position following program completion.

By agreeing to accept this student for professional practice experience you are agreeing to:

A. Provide an opportunity for the student to complete all or part of the Clinical Practicum Activity requirements.
B. Provide an opportunity for the student to complete all or part of the abstracting requirement.
D. Complete, discuss and provide a copy of an evaluation to the student at the conclusion of the clinical practice.
F. Review and sign the Supervisor Verification section on the student’s CTR exam application.

In addition, a list of recommended assignments (and definitions) has been provided to the student. This list provides a guideline that would allow the student to become more knowledgeable of the cancer registry and various cancer registry activities. However, the final decision as to the required assignments and what the student is allowed to copy and take with them is at the discretion of the clinical supervisor. Ideally, the clinical experience should start with a general orientation to the facility and cancer center.
This student has been informed that the facility may require that the student provide proof of immunizations, liability insurance, background checks, drug tests, etc. The student has been advised of privacy and confidentiality strictures regarding health information. The student understands that they may have to complete HIPAA training and may be required to sign a confidentiality statement prior to the start of the clinical practice.

Accepting a student from an NCRA-accredited Formal Education Program should be viewed as an arrangement between your organization and the student. NCRA assumes no responsibility for the student's actions; however, NCRA does appreciate your willingness to advance the professional skills of this student and contribute to the profession through mentoring.

Thank you for your consideration.
Confidentiality Statement and Affiliation Agreement for Professional Practice

I, ________________________________, understand that gaining access to patient records in order to collect data, analyze, and abstract information and assign clinical codes for my own professional practice purposes is a serious matter. As a student cancer registry professional allowed to view records from the facility ________________________________, I agree to fully respect the rules of confidentiality for both the patient and the healthcare provider. No information will be shared with anyone outside your organization from this experience, including any acknowledgment of the presence of a patient or his/her record in your facility.

Student Signature ________________________________

Facility Representative Signature ________________________________

Both parties should sign this form and each should retain a copy.
PROFESSIONAL PRACTICE/CLINICAL PRACTICUM

Weekly Time Record

Name of Student: ____________________________

Name of Facility: ____________________________

You will need to have this form printed and signed by the clinical supervisor (one per week).

<table>
<thead>
<tr>
<th>Date</th>
<th>Hours Worked</th>
<th>Total Hours</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>From</td>
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</table>

WEEKLY TIME RECORD

HOURS WORKED:

This is a correct record of the time worked this week.

_________________________________________  ______________________
Student Signature                        Date

Required Abstracting Assignments:

1. A minimum of 30 abstracts must be completed, this includes: ICD-O-3 Coding, Staging (AJCC TNM, SEER Summary), and Treatment. 84 of the 160 hours must be spent on data collection and coding. A minimum of 30 abstracts must be completed even if more than 160 hours are needed in order to complete them.
PROFESSIONAL PRACTICE/CLINICAL PRACTICUM

2. Review the facility’s list of required data items to be collected.

3. Complete at least two abstracts for each of the following primary sites. Other sites may also be abstracted in order to meet the 30 abstract minimum.
   Head and Neck
   Colon
   Other Digestive Tract
   Lung
   Melanoma
   Other Musculoskeletal System
   Breast
   Gynecological
   Genitourinary
   Lymphoma
   Leukemia
   Brain
   Unknown/Ill-defined Sites

4. Entering the case into the cancer registry software is preferred, but if not possible, a worksheet may be used.

5. Abstracts should have at least a 90% accuracy rate (or higher as specified by the supervisor) and should be above 95% by the end of the clinical.
CLINICAL PRACTICUM

Recommended Assignments for the Hospital Registry Clinical:

The following is a list of recommended assignments that could be completed during the clinical experience. Other assignments may be assigned by the clinical supervisor. All copies and summaries must be typed and clearly labeled. All summaries and copies should be shared and discussed with the clinical supervisor.

1. If possible, obtain copies of the following organizational charts: All positions (including job titles) in the Cancer Registry; All departments in the Cancer Center, including the Cancer Registry; The reporting structure of the Cancer Registry: to whom does the Registry report?

2. Research information on the salary range for cancer registry positions in different parts of the country (Indeed.com, etc).

3. Attend the following meetings held during the clinical. If possible, assist in preparing for the meetings. Obtain a copy of the agenda, meeting schedule and attendee requirements (by title).
   - Cancer Committee (should attend at least one)
   - Cancer Conference (should attend at least one)

4. Review each section of the facility Cancer Registry Policy and Procedure Manual. Discuss, with your CTR supervisor, any areas that were unclear and any areas that needed updating. Obtain copies of the following:
   - Manual's table of contents
   - Reportable and non-reportable lists
   - Eligibility requirements including central cancer registry and reportable-by-agreement.

5. Review the documentation related to the last CoC survey. Discuss the survey experience including successes, obstacles, and areas needing improvement with your CTR supervisor.

6. If possible, obtain copies of letters used by the registry, including follow-up and further treatment letters.

7. Review a copy of the most recent annual report for the cancer program.

8. Review the Release of Information policy. If possible, assist in the running of reports in the cancer registry software. Discuss reports, along with a summary of your findings with your CTR supervisor.
NCRA Formal Education
Programs in Cancer Registry Management
Clinical Hours Report

Student: ________________________________________________

School: ______________________________ Date: ________________

To be completed by clinical supervisor

Facility: ________________________________________________

Address: ________________________________________________

City, State, Zip

Supervisor: ______________________________________________

☐ I certify that I am a Certified Tumor Registrar (CTR) in good standing.

CTR Number: ____________________________________________
(can be obtained from NCRA 703/299-6640)

Type of Facility: __________________________________________

Have you previously supervised a student before? ________________

NCRA Clinical Practicum Guide
Updated February 2019
<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>HRS</th>
</tr>
</thead>
</table>
| **DOMAIN I: CASEFINDING**  
A. Review source documents for potentially reportable cases to enter into a suspense file.  
B. Determine single versus multiple primaries. | 9   |
| **DOMAIN II:**  
ABSTRACTING/CODING – STAGING  
A. Patient Identification:  
   1. Verify and enter demographic information at diagnosis.  
   2. Identify primary payor.  
   3. Collect information on comorbidities.  
   4. Assign accession and sequence numbers.  
B. Cancer Identification:  
   1. Analyze medical record source documents to code primary cancer characteristics (e.g., primary site, histology)  
   2. Analyze medical record source documents to interpret and code facility-specific information (e.g., date of first contact, class of case, and managing physician).  
   3. Record pertinent information from source documents in text format to support all coded data items.  
   4. Clarify conflicting, ambiguous, or incomplete documentation.  
C. Staging:  
   1. Determine the stage of primary cancer.  
      a. TNM  
      b. Summary Stage  
      c. Specialty staging  
      d. Other Staging:  
   2. Code other stage related elements  
      a. Site-specific factors  
      b. Mets at diagnosis | 45  |
| ABSTRACTING/CODING – TREATMENT  
D. Treatment:  
   1. Use standard of care treatment guidelines to identify expected care.  
   3. Determine first course of treatment vs. subsequent treatment. | 15  |
<table>
<thead>
<tr>
<th><strong>ABSTRACTING/CODING – CASE VALIDATION &amp; FINALIZATION</strong></th>
<th>12</th>
</tr>
</thead>
<tbody>
<tr>
<td>E. Case Validation and Finalization:</td>
<td></td>
</tr>
<tr>
<td>1. Interpret and resolve single-field, inter-field and inter-record edit errors.</td>
<td></td>
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<tr>
<td>2. Update or correct cases as necessary from a quality control review e.g., internal or external review, including central registry.</td>
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</table>

<table>
<thead>
<tr>
<th><strong>DOMAIN III:</strong> FOLLOW-UP</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Obtain follow-up information from physicians, patients, and/or other sources.</td>
<td></td>
</tr>
<tr>
<td>B. Enter follow-up information, such as: vital status, cancer status, date of last contact, first recurrence, progression of disease, and subsequent treatment.</td>
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<tr>
<td>C. Determine the need to submit additional information to central registries for previously reported patients.</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th><strong>DOMAIN IV:</strong> DATA QUALITY ASSURANCE</th>
<th>12</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Develop and maintain the quality control plan.</td>
<td></td>
</tr>
<tr>
<td>B. Analyze the use of unknown and NOS data values.</td>
<td></td>
</tr>
<tr>
<td>C. Respond to inquiries from central registries</td>
<td></td>
</tr>
<tr>
<td>D. Conduct casefinding audits to assess completeness of case reporting.</td>
<td></td>
</tr>
<tr>
<td>E. Conduct re-abstracting audits to assess accuracy of data.</td>
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<tr>
<td>F. Perform visual review of text fields to assess accuracy of coded data</td>
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<tr>
<td>G. Review edit reports from external sources (e.g., NCDB, central registries) to improve the quality of facility data.</td>
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<tr>
<td>H. Identify education and training needs based on results of quality reviews.</td>
<td></td>
</tr>
<tr>
<td>I. Communicate results of quality assurance activities to appropriate entities.</td>
<td></td>
</tr>
<tr>
<td>J. Participate in quality studies conducted by standard setters (e.g., reliability studies).</td>
<td></td>
</tr>
<tr>
<td>K. Conduct follow-back activities.</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th><strong>DOMAIN V:</strong> ANALYSIS AND DATA USAGE</th>
<th>12</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Recommend data selection criteria for study requests.</td>
<td></td>
</tr>
<tr>
<td>B. Provide data for the evaluation of treatment, patient outcomes, and quality of life.</td>
<td></td>
</tr>
<tr>
<td>C. Prepare reports to document research results and satisfy requests for data.</td>
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<tr>
<td>D. Process data requests according to privacy standards and institutional policy.</td>
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</tr>
<tr>
<td>E. Provide information to support strategic planning, education, research, and marketing.</td>
<td></td>
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<tr>
<td>F. Monitor program adherence to evidence-based clinical practice guidelines.</td>
<td></td>
</tr>
<tr>
<td>G. Use benchmarking techniques to identify areas for improvement.</td>
<td></td>
</tr>
<tr>
<td>H. Generate data to identify the need for screening, prevention, or educational programs.</td>
<td></td>
</tr>
<tr>
<td>I. Conduct statistical analyses.</td>
<td></td>
</tr>
<tr>
<td>J. Maintain data request log.</td>
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</table>
## DOMAIN VI: REGISTRY ORGANIZATION AND OPERATIONS

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>A.</td>
<td>Maintain knowledge of current trends, standards, and developments in oncology, cancer registry, and cancer program management.</td>
</tr>
<tr>
<td>B.</td>
<td>Establish liaisons with peer professionals and organizations and encourage their utilization of data derived from the registry.</td>
</tr>
<tr>
<td>C.</td>
<td>Ensure program compliance with state/provincial and national registry rules, regulations and standards.</td>
</tr>
<tr>
<td>D.</td>
<td>Prepare and submit data to a central cancer registry.</td>
</tr>
<tr>
<td>E.</td>
<td>Process registry software upgrades or data conversions.</td>
</tr>
<tr>
<td>F.</td>
<td>Comply with applicable laws, regulations and policies regarding confidentiality, release of information, use of medical records, and research.</td>
</tr>
<tr>
<td>G.</td>
<td>Maintain up-to-date policies and procedures.</td>
</tr>
<tr>
<td>H.</td>
<td>Participate in the development of outcomes analyses and annual reports for dissemination.</td>
</tr>
<tr>
<td>I.</td>
<td>Define staff roles and responsibilities.</td>
</tr>
<tr>
<td>J.</td>
<td>Establish staff productivity and quality metrics.</td>
</tr>
<tr>
<td>K.</td>
<td>Manage work assignments to meet project goals.</td>
</tr>
<tr>
<td>L.</td>
<td>Provide training, education, and development to staff and peers.</td>
</tr>
<tr>
<td>M.</td>
<td>Monitor staff for compliance with applicable policies and procedures.</td>
</tr>
<tr>
<td>N.</td>
<td>Define and document operational requirements.</td>
</tr>
<tr>
<td>O.</td>
<td>Share information for reportable cases with other cancer registrars within the institutional confidentiality guidelines.</td>
</tr>
</tbody>
</table>

### Total: 15

## DOMAIN VII: CANCER PROGRAM ACCREDITATION

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>A.</td>
<td>Collaborate with committees (e.g., cancer committee, breast program leadership) to plan and schedule committee activities.</td>
</tr>
<tr>
<td>B.</td>
<td>Coordinate and participate in committee meetings.</td>
</tr>
<tr>
<td>C.</td>
<td>Prepare data and reports for presentation at committee meetings.</td>
</tr>
<tr>
<td>D.</td>
<td>Document cancer program activities in committee meeting minutes.</td>
</tr>
<tr>
<td>E.</td>
<td>Maintain supporting documentation necessary for accreditation.</td>
</tr>
<tr>
<td>F.</td>
<td>Participate in accreditation survey site visits.</td>
</tr>
<tr>
<td>G.</td>
<td>Coordinate resolution of deficiencies identified during accreditation surveys.</td>
</tr>
<tr>
<td>H.</td>
<td>Participate in the application, approval, and evaluation processes for maintaining continuing education credits for cancer conferences (i.e., tumor boards).</td>
</tr>
<tr>
<td>I.</td>
<td>Coordinate cancer conference activities.</td>
</tr>
<tr>
<td>J.</td>
<td>Document cancer conference activities.</td>
</tr>
<tr>
<td>K.</td>
<td>Facilitate discussion of NCCN guidelines, prognostic indicators, and options for clinical trial participation.</td>
</tr>
</tbody>
</table>

### Total: 160
Students must complete a minimum of 30 abstracts. This is required regardless of whether the student uses all the hours in the practicum or not. If extra time is needed to complete 30 abstracts, the time is not to be deducted from the hours accumulated. Sites to be emphasized in abstracts are lung, breast, colon, prostate, bladder, and the site(s) most common to the facility in which the student is practicing. Students may complete up to 15 abstracts at the SEER*Educate website, under the supervision of an Independent Clinical Advisor (ICA)/CTR Mentor.

In addition, students may complete the nine hours of casefinding activity on the SEER*Educate website under the supervision of an Independent Clinical Advisor (ICA). Students may complete the NCRA online HIPAA course for Cancer Registrars course to fulfill partial credit in Domain VI. (See your ICA).

Students who do not complete the full 160 hour clinical rotation will not receive their degree or certificate of completion and will not be eligible to sit for the Certified Tumor Registrars Examination. Students must provide a time sheet to document clinical activities that is signed by the clinical supervisor and the clinical supervisor will sign off on the CTR exam application in the ‘Experience Verification’ section.

Did the student complete a minimum of 30 abstracts? Yes_____No_____

_________________________  ______________________
Clinical Supervisor Signature  Date

CTR #: _____________________  □ I certify that I am an active CTR.
PROFESSIONAL PRACTICE/CLINICAL PRACTICUM

Evaluation of the Student
(Optional, to be shared with student)

The following student evaluation and assessment information document may be used as the basis for feedback to the student by a sponsoring facility. The student may elect to use this document as a job reference document for future employment.

1. Did the student seem to understand and correctly apply ICD-O coding conventions and principles for diagnoses?

   If not, what were the concerns or suggestions for correcting deficiencies?

2. Did the student seem to understand and correctly apply case finding conventions and principles for procedure reporting?

3. Was the student’s knowledge of data collection methods what you expected for an entry level professional?
If not, what were the concerns or suggestions for correcting deficiencies?

4. Did the student appear to be committed to the profession, conducting him or herself in a professional manner while in your facility?

If not, what were the concerns or suggestions for correcting deficiencies?

5. What suggestions would you give this student for enhancing success as a cancer registry management professional?

Date ________________
Supervisor Signature____________________________________

Date_______________
Student Signature____________________________________