



New Hampshire State Cancer Registry

UPDATE /June 2015

Physician and Non-Hospital Reporting

The New Hampshire State Cancer Registry is continuing to contact non-hospital providers to insure that all reportable cancers are sent to the registry in accordance with New Hampshire law.

As mentioned in our prior newsletters, we began our efforts last year with an initial mailing to Dermatology/Urology/Gastroenterology Practices, Radiation Oncology Centers, and Reference Laboratories, followed by phone calls to gather demographic information and reporting preferences. Additionally, we've contacted Ambulatory Surgery Centers, Nursing Homes and Hospice Facilities.

We performed audits at some of larger practices and have converted some to electronic WebPlus® reporting. Our audits are intended to educate and assist existing reporters with the reporting process. As always, we would be happy to answer any questions you may have. If you would like us to audit your reporting process, please contact us to schedule (603) 653-6624.

As a reminder, you may report via our [Cancer Report Form](#) with an attached **Pathology Report**. Please visit our website for the most current [Cancer Report Form](#) (<http://geiselmed.dartmouth.edu/nhscr/>). If you wish to submit electronically, we will provide access (login and password) to the WebPlus® site. We would like to have new cases reported as soon as possible and within 45 days of diagnosis and/or treatment.

Some providers have formal agreements with their Reference Laboratories, who do the reporting for them. If you have a formal written agreement with your Reference or Pathology Laboratory, please let us know.

New Hampshire DHHS recently released a tool that allows for statistical review of cancer data by site (Breast/Melanoma/Colorectal). You can access **WISDOM** at <http://wisdom.dhhs.nh.gov/wisdom/>.

Thank you for your assistance in helping to assure that we are capturing necessary information that contributes to research & epidemiology relating to cancer diagnosis, treatment, outcomes and survival.

