Utilizing Registry Plus™ Web Plus as a Gateway to Electronic Reporting: Improving Efficiencies at the New Jersey State Cancer Registry

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Background

The New Jersey State Cancer Registry (NJSCR) is a population-based registry that began collecting data on all cancer cases diagnosed in New Jersey on October 1, 1978. The NJSCR is the state-designated repository for statewide cancer surveillance data for New Jersey, serving an estimated 8.9 million people. The NJSCR receives over 200,000 individual cancer reports per year, including electronic transmissions and paper reports, from hospitals, independent labs, radiation treatment centers, ambulatory surgical centers, as well as private physician offices. Registry Plus™ Web Plus (“Web Plus”) is a web-based application developed by the Centers for Disease Control and Prevention designed to collect cancer data in a secure manner. This electronic method of submission may significantly reduce the amount of paper management required by the registry and the security risks associated with paper-based reports.

Methods

Eligible facilities not currently submitting electronic pathology reports in HL7 format were identified based on their volume of cancer cases and contacted through phone, mail, or email. Facilities which contacted the NJSCR to express interest in reporting electronically were also invited to participate in Web Plus. In early 2015, a mass mailing was sent to 238 ambulatory care facilities with information on reporting to NJSCR via Web Plus. Facilities were asked to register online through the NJSCR website: http://nj.gov/health/ces/nonhospitalrpt.shtml. A unique username and password was generated for each registered facility. Each facility was then identified and matched with a user profile in Web Plus. Each user was given a “Facility Abstractor” role, conforming to the Rutgers Cancer Institute of New Jersey (RCINJ) access control and security guidelines. NJSCR staff trained new users from each participating facility and were consulted for content-specific questions. The Web Plus form templates were tailored for radiation treatment facilities by NJSCR. Data was exported monthly from the Web Plus database at RCINJ for integration into the NJSCR database, SEER*DMS.

Results

To date, 129 users associated with 75 facilities have registered for Web Plus. Since our first monthly export in April of 2014, a total of 4,526 cancer cases were reported via Web Plus.

Conclusions

Web Plus can be used to enhance reporting from non-hospital and non-E-path facilities and improve data flow and efficiencies. NJSCR staff provide ongoing support and training for new and existing Web Plus users.