I. The central cancer registry is required to adopt and use standardized, CDC-recommended data transmission formats for the electronic exchange of cancer data (see CDC NPCR Electronic Reporting and Data Exchange Guidance). Registries will promote the use of the CDC-recommended formats by reporting sources that transmit data electronically to the registry. The CDC-recommended data exchange formats include

A. Hospital reporting: The NAACCR record layout version specified in the year-appropriate Standards for Cancer Registries Volume II: Data Standards and Data Dictionary.

B. Anatomic pathology laboratory reports: NAACCR Standards for Cancer Registries Volume V: Pathology Laboratory Electronic Reporting (version 2.2 or higher). This exchange format will be used for reporting pathology and prognostic factor data for narrative reports and College of American Pathologists (CAP) Cancer Checklist reports.


II. Every year, increase the percentage of hospitals reporting electronically to the central cancer registry to meet the standard of having all hospitals reporting electronically by the end of the 5-year project period.

III. Every year, increase the percentage of non-hospital facilities reporting electronically to the central cancer registry to meet the standard of having at least 80% of these facilities reporting electronically by the end of the five-year project period.

IV. The central cancer registry uses a secure Internet-based, FTP, https, or encrypted e-mail mechanism to receive electronic data from reporting sources.

The central cancer registry has a plan to implement a mechanism for receiving and processing data from EMRs and EHRs over the five-year project period.