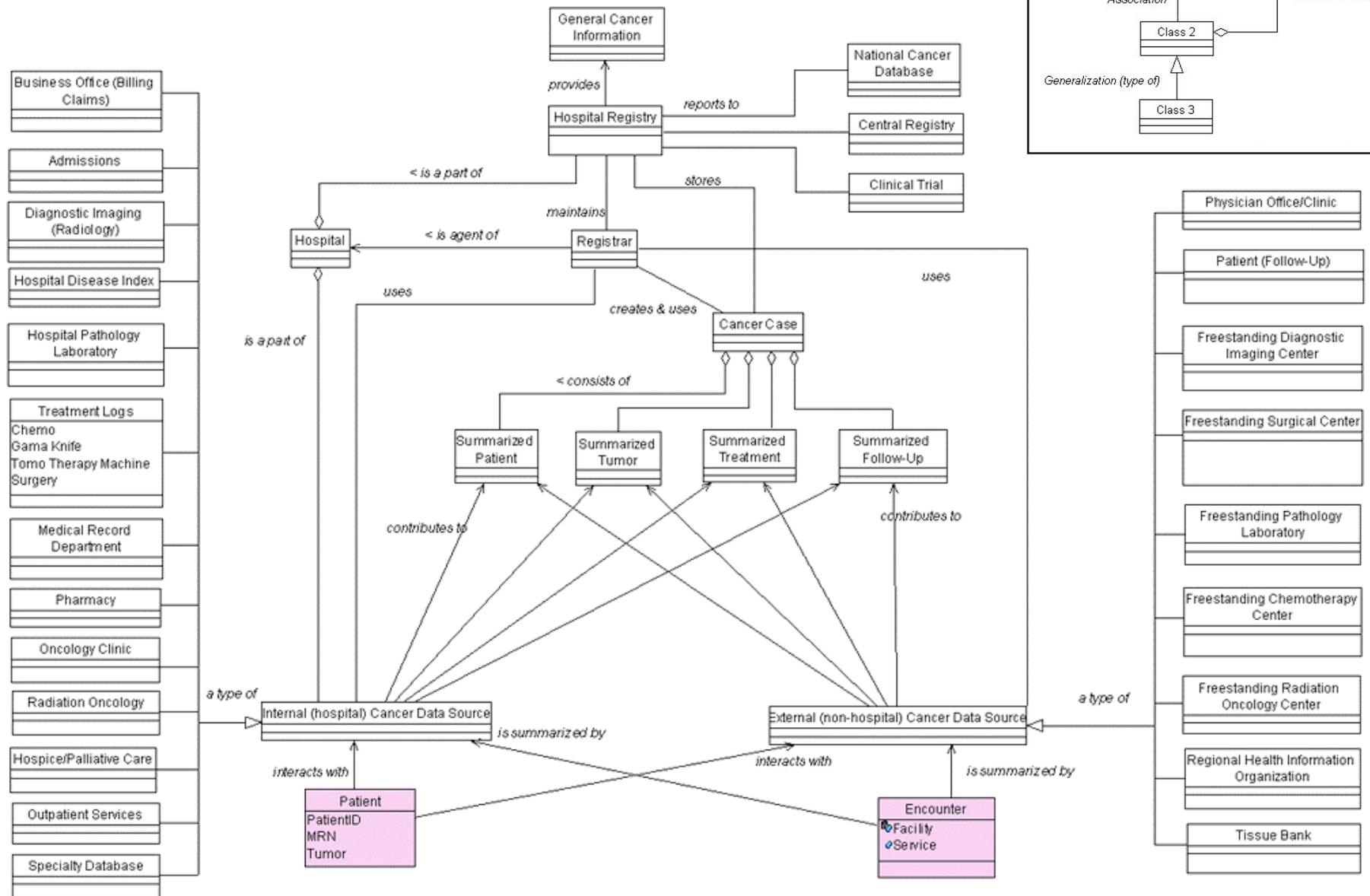
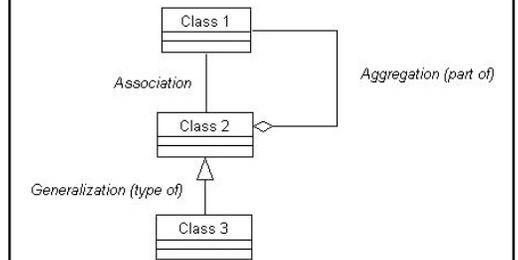


# NPCR-AERRO Hospital Domain Diagram

The NPCR-AERRO Hospital Domain Diagram shows the interactions between the entities involved in hospital cancer registry functions. It shows the formation of a cancer abstract from the time individual event reports are generated at different data sources to the time the cancer abstract is stored in the hospital cancer registry and made available to institutions and national programs for research.

## Legend



- The patient (who is described by Patient ID, Medical Record Number, and tumor) interacts with internal (hospital) and external (non-hospital) cancer data sources.
- Internal and external cancer data sources summarize the encounter (which is described by facility and service).
- Internal and external cancer data sources contribute to summarized patient, tumor, treatment, and follow-up data. These data make up the cancer case.
- Components of the individual records (summarized patient, tumor, treatment, and follow-up data and encounter facility and service) contribute to the internal cancer data source, which is a part of the hospital.
- The registrar creates the cancer case and uses it to maintain the hospital registry, which is a part of the hospital.
- The hospital registry provides general cancer information and reports to the National Cancer Data Base, the central registry, and clinical trials.
- The hospital registry stores the cancer case.
- The registrar, who is an agent of the hospital, uses the internal and external cancer data sources.

**Internal (hospital) cancer data sources** include the hospital's business office (billing claims); admissions department; diagnostic imaging (radiology) department; the hospital disease index; the hospital's pathology laboratory; treatment logs for chemotherapy, gamma knife, tomotherapy machines, and surgery; medical record department; pharmacy; oncology clinic; radiation oncology department; hospice/palliative care; outpatient services; and specialty database data.

**External (non-hospital) cancer data sources** include physician offices or clinics, the patient, freestanding diagnostic imaging centers, freestanding surgical centers, freestanding pathology laboratories, freestanding chemotherapy centers, freestanding radiation oncology centers, regional health information organizations, and tissue banks.