

27.	Date of first Consultation	[]/[]/[] [dd/mm/yyyy]		
28.	Date of first Biopsy	[]/[]/[] [dd/mm/yyyy]		
29.	Date of first Diagnosis	[]/[]/[] [dd/mm/yyyy]		
30.	Country of Diagnosis	31. Country of first treatment		
32.	Initial Treatment (within first 6 months of diagnosis)	<input type="checkbox"/> Surgery <input type="checkbox"/> Radiotherapy <input type="checkbox"/> Chemotherapy <input type="checkbox"/> Immunotherapy <input type="checkbox"/> Hormonal Therapy <input type="checkbox"/> Cryotherapy <input type="checkbox"/> Laser Therapy <input type="checkbox"/> Palliative Therapy <input type="checkbox"/> Complementary <input type="checkbox"/> Treated Abroad If Other, Specify _____		
	Select all that apply			
33.	Date of last contact with Dr	[]/[]/[] [dd/mm/yyyy]		
34.	Status	<input type="checkbox"/> Alive <input type="checkbox"/> Deceased <input type="checkbox"/> Emigrated <input type="checkbox"/> ND * If patient is 'Deceased' please complete relevant Q's. If patient 'Alive', 'Emigrated' or 'ND' selected then proceed to Q. 38		
35.	Date of Death	[]/[]/[] [dd/mm/yyyy]	36. Cause of Death	<input type="checkbox"/> Dead of this cancer <input type="checkbox"/> Dead of other cause <input type="checkbox"/> ND
37.	Place of Death	<input type="checkbox"/> HSA <input type="checkbox"/> CTMH <input type="checkbox"/> Home <input type="checkbox"/> Convalescent/Nursing Home <input type="checkbox"/> Other <input type="checkbox"/> ND If Other, Specify _____		
Sources				
38.	Facility to contact	<input type="checkbox"/> Hospital <input type="checkbox"/> Private Physician <input type="checkbox"/> Laboratory <input type="checkbox"/> Death Registry <input type="checkbox"/> Other If Other, Specify _____ Select all that apply		
39.	Name of Facility			
	Name of Facility			
	Name of Facility			
	Name of Facility			
40.	Hospital/Clinic #	[] [] [] [] [] [] [] []	41. Autopsy #	[] [] [] [] [] [] [] []
42.	Path/Histo Lab #	[] [] [] [] [] [] [] []	43. Radiotherapy #	[] [] [] [] [] [] [] []
44.	Name of main Physician/Consultant			

ND = Not Documented

I give my consent to the Cayman Islands Cancer Registry (CICR) to review, extract, retain and utilize the data referenced in this document.

Date: []/[]/[] [dd/mm/yyyy] Contact Number(s): _____

Signature of Patient or Next of Kin (on behalf of Patient): _____

If Next of Kin, specify relationship to patient: _____

Notes:

- The information obtained by the CICR is to be used for the sole purpose of research, statistic and programme development.
- Any data utilized and released will be in aggregate format that cannot lead to the patients' identification.

Received: _____

Verifier: _____

Date: _____

Date: _____

CONFIDENTIAL

CAYMAN ISLANDS CANCER REGISTRY

“A cancer registry is critically important to the future of healthcare in the Cayman Islands.”

**Dr. Sook Yin
Board of Directors CICS**

How does this benefit me?

The benefits of a comprehensive national cancer registry are immeasurable, which is why the World Health Organization and the Pan-American Health Organization are strongly encouraging all nations to take necessary steps to ensure they have reliable cancer surveillance data. This data is used to develop cancer prevention programs and cancer management strategies for our community.

What information is available now?

Currently, there is very little information available regarding cancer trends in the Cayman Islands. We do not know how many people are diagnosed every year, which cancers are most common, or whether there are environmental factors which may be contributing to cancer incidence.

Who recommended this?

The data collected by our national registry is based on recommendations set forth by the World Health Organization, and all data is stored in a database designed by the WHO.

Do other countries support a cancer registry?

There are hundreds of cancer registries worldwide. Many of these (including some registries in the United States, the United Kingdom, Australia, and the Caribbean) have already implemented automatic physician reporting to their cancer registries. This provides them with the most accurate cancer surveillance data possible.

Is the Information anonymous?

All information included in the cancer registry is anonymized before being entered into the registry database. Names are not included in the registry database.

Can a member of the public access this information?

The public **does not** have access to the registry database under any circumstances. Access is restricted only to the cancer registrar.

Why is this information needed?

Cancer registries have proven to be key components of a knowledge management system for cancer. They contribute to scientific research into causes and cancer management. Registries also provide evidence for policymaking and the monitoring of programme implementation.

For more information, or to find out how to register, please call The Cancer Registrar at (345) 244-2560 or e-mail Amanda.nicholson@hsa.ky.