CAYMAN ISLANDS CANCER REGISTRY

CAYMAN ISLANDS HEALTH SERVICES AUTHORITY

P.O. Box 915, Grand Cayman KY1-1103, Cayman Islands

SELF-REPORTING FORM

1.	REGISTRY NO.	TO LILI	BE FILLED BY THE CICR				P	LEASE PRINT	CLEARLY	
			Persi	onal Infor	nelior	i z z				
2.	Surname(s)				1					
3.	First name		· · · · · · · · · · · · · · · · · · ·	iddle name(s))					
5.	Maiden name		6. Ni	ckname(s)						
7.	Date of Birth					je				
9.	Country of Birth		10.	Sex 1	☐ Male	₂ □ Female	99□ ND			
11.	Resident	1□ Yes 2□ No 99□ ND 12. Year of last immigration to Cayman L L L I								
13.	Caymanian	₁□ Yes ₂□ No	99□ ND	If No,	/ Nationality					
14.	Address	Current Address		166	J ND	Address at	Diagnosis	₉₈ □ Same as Co	urrent 99 NO	
		House/Apt Name/No.		House/Apt Name/No.						
		Street Name District		Street Name						
		Island		District						
		Post Box # Post	al Codo kyl	111	1 1	Island		ا المري		
		Length of Residence: Y						code KYLLI - L		
	Marital Status	1□ Never Married		onus come ☐ Legally N			-	Month	<u>s</u>	
15.		₄□ Divorced	_	∃ Widowed			99□ ND	my copulatou		
16.	Ethnic Origin	₁□ Black	₂□ White	3□ I	Hispan	ic 4	☐ Asian	₅ □ Mixe	d	
10.		98□ Other 99□ ND If Mixed or Other, Specify								
17.	Religion	₁ □ Christian ₂ [□ Hindu	₃□ Musli	m	₄□ Rast	afarian	₅□ Non-dend	minational	
		₀ □ None ₉₈	☐ Other	99□ ND		If Other,	Specify			
18.	Driver's licence #		19. Parents co		Mothe	r	F	ather		
20.	Usual Occupation		21. Usual Industry				ime in ndustry Yea	ars Mor	ths L	
	Potential Contributing Factors	₁ □ History of Smoking	ohol Consumption ₃□ Exposure to asbestos							
23.		₄□ Sedentary lifestyle	liet		6□ Ex	oosure to pestici	des			
		₇ □ Genetics/Family History If Other, Specif								
24.	If Yes to Genetic/Family history as a Potential contributing	₁□ Father ☐	уре:			₂ □ Mother	Туре:			
		₃ □ Brother 1		₄□ Sister Type:						
		₅ □ Uncle Type:				₆ □ Aunt Type:				
1	factor, Select all that apply	₇ □ Grandfather Type:				₈ □ Grandmother Type:				
	and Specify	g□ Son Type:				10□ Daughter Type:				
	Cancer	99□ ND						**************************************		
- I	Tumour information, Treatments and Outcome									
25.	Site of Primary									
26.	Method of First detection	□ Clinical presentation (with symptoms)				₂□ Screening examination: Type				
***************************************		₃□ Incidental finding: Test/Procedure				₄□ Incidental finding at autopsy				
		98□ Other, Specify				99□ ND Select all that apply				

Cayman Islands Cancer Registry 2010-11 CICR Case Reporting Form - Patient

27.	Date of first	[dd/mm/yyyy]											
	Consultation	<u> </u>	/			dd/mm/yyyy]							
28.	Date of first Biopsy												
29.	Date of first Diagnosis	[dd/mm/yyyy]											
30.	Country of Diagnosis	31. Country of first treatment											
	Initial Treatment (within first 6	₁ □ Surgery ₂ □ Radiotherapy				py ₃ □ (₃□ Chemotherapy			₄□ Immunotherapy			
32.	months of diagnosis)	5□Hormonal Therapy 6□ Cryotherapy 7□ Laser Therapy							₈ □ Palliative Therapy				
	Select all that apply	₉ □ Complem											
33.	Date of last contact with Dr	[dd/mm/yyyy]											
34.	Status	₁ □ Alive		2□ □	Deceased	3□ [Emigrated		99	ND			
04.		* 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	<u></u> /_		[dd/	/mm/yyyy]	36. Cause of Death	₁□ Dead of thi		☐ Dead		ę	99□ ND	
37.	Place of Death	₁□ HSA		2□ CTM	iH	₃□ Hor	₃□ Home			₄□ Convalescent/Nursing Home			
37.		₉₈ □ Other	er ₉₉ □ ND If Other, Specify										
11,5					Sou	rces				, 14			
38.	Facility to contact	₁□ Hospital	epital ₂□ Private Physician ₃□ Laboratory				₄□ Death Registry						
50.		₉₈ □ Other		If Other,	Specif	у			s	elect a	II tha	t apply	
39.	39. Name of Facility												
	Name of Facility												
	Name of Facility												
	Name of Facility						2. ***						
40.	Hospital/Clinic#					41. Autopsy #	<u></u>						
42.	Path/Histo Lab#					43. Radiother	ару#						
44.	Name of main Physician/Consulta	nt							•	•			
ND	= Not Documented			***************************************									
La	ve my consent to	the Cayma	n lelande	e Cancai	r Roniel	ry (CICR) to re	wiew extract	rotair	n and i	utilize	the	data	
	erenced in this do		ii isiana.	3 Carico	ricgiot		view, chiladi,	Totali	i ana	11115ZC	· ti iO	data	
										,			
Date:													
Signature of Patient or Next of Kin (on behalf of Patient):													
	lf Next of Kin, spe	ecify relation	iship to p	oatient: _									
			÷										
	Notes: 1. The information obtained by the CICR is to be used for the sole purpose of research, statistic and programme development.									mont			
						sole purpose of re hat cannot lead to				ia uev	σιομπ	nont.	
Rec	eived:	<u> </u>	١	/erifier:		···							
Date) ;	Date: CONFIDE								ENTIAL			



"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.