

EWC DETEC Breast Cancer (BCA) Screening Cycle Worksheet NPI

Recipient	ID#		9A													DOB	_ / _ / _
	Name	_____															
	Mother's Maiden Name	_____															

High Risk for Breast Cancer <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Assessed\Unknown																								
CBE	Recipient reported Symptoms <input type="checkbox"/> Unknown <input type="checkbox"/> No <input type="checkbox"/> Yes						Current CBE Result: <input type="checkbox"/> Not Done <input type="checkbox"/> Current result, from non-EWC PCP <input type="checkbox"/> Normal/Benign <input type="checkbox"/> Abn						Date Current CBE _ / _ / _											
	Mammogram	Reason Current Mam <input type="checkbox"/> Screening <input type="checkbox"/> Dx Referral - Init. Mam Not Paid by EWC* <input type="checkbox"/> Init. Mam w/ Symptoms CBE or Prev Mam Abn <input type="checkbox"/> Mam Not Done												Date Breast Dx Referral* _ / _ / _										
Current Mam Result <input type="checkbox"/> NEG (B1) <input type="checkbox"/> Benign (B2) <input type="checkbox"/> Kn Mal (B6) <input type="radio"/> Prob. Benign (B3) <input type="radio"/> Unsatisfactory <input type="checkbox"/> Susp Abn (B4) <input type="checkbox"/> Suggest Mal (B5)												Incomplete, <input type="checkbox"/> More imaging / Film compare (B0)						Date Current Mam _ / _ / _						
Scrn MRI	Current Scrn MRI Result <input type="checkbox"/> Not Done <input type="checkbox"/> NEG (C1) <input type="checkbox"/> Benign (C2) <input type="checkbox"/> Kn Mal (C6) <input type="radio"/> Prob. Benign (C3) <input type="checkbox"/> Susp Abn (C4) <input type="checkbox"/> Suggest Mal (C5)												Incomplete, <input type="checkbox"/> More imaging / Film compare (C0)						Date Current Scrn MRI _ / _ / _					
	Add. Proc. Follow-up <input type="checkbox"/> Routine <input type="radio"/> Short-term <input type="checkbox"/> Immediate <i>Also, if CBE Norm or Not done. End of Cycle</i>						<i>Also use if CBE is Abnormal, Recipient must start Dx Proc within 60 days of Scrn</i>																	
Imaging	Type <i>May enter more than one</i> <input type="checkbox"/> Additional Mam Views <input type="checkbox"/> Ultrasound <input type="checkbox"/> Film Comparison <input type="checkbox"/> MRI, diagnostic												Date Image Proc 1* _ / _ / _						Date Image Proc 2 _ / _ / _					
	Final Outcome <input type="checkbox"/> NEG (B1) <input type="checkbox"/> Benign (B2) <input type="radio"/> Prob Benign (B3) <input type="radio"/> Unsatisfactory <input type="checkbox"/> Susp Abn (B4) <input type="checkbox"/> Suggest Mal (B5)												Date Final _ / _ / _											
Dx Procedure	Type <input type="checkbox"/> Repeat Breast Exam (CBE) <input type="checkbox"/> Surgical Consultation <input type="checkbox"/> Biopsy / Lumpectomy <input type="checkbox"/> Fine Needle / Cyst Aspiration												Date Dx Proc 1* _ / _ / _						Date Dx Proc 2 _ / _ / _					
	Other Procedure (<i>Proc not covered by EWC. Must provide final Dx. Select from DETEC drop-down menu.</i>) <input type="checkbox"/> Skin Biopsy [∞] <input type="checkbox"/> Other Medical Consult <input type="checkbox"/> Other Proc, Specify: _____ <small>NO NOTES OR REDUNDANT TEXT. USE DROP-DOWN LIST.</small>												Date Other Proc _ / _ / _											
W/U Status	<input type="checkbox"/> Work-up Completed <input type="checkbox"/> Work-up Refused <input type="checkbox"/> Lost-to-Follow-up <input type="checkbox"/> Died before work-up completed												Date W/U Status _ / _ / _											
	Final Dx <input type="checkbox"/> No BCA – benign, resume annual screening <input type="checkbox"/> No BCA – benign, with Short-Term F/U <input type="checkbox"/> Lobular Carcinoma, In Situ (LCIS) <i>End of Cycle</i>												<input checked="" type="checkbox"/> Ductal Carcinoma, In Situ (DCIS) <input checked="" type="checkbox"/> Invasive BCA, Ductal/Lobular Carcinoma <i>Tx must start within 60 days of Dx</i>						Date Final Dx _ / _ / _					
Tx	<input checked="" type="checkbox"/> Tx Status <input type="checkbox"/> Tx started <input type="checkbox"/> Lost-to-Follow-up <input type="checkbox"/> Refused <input type="checkbox"/> Not Needed <input type="checkbox"/> Died before Tx <input type="checkbox"/> Patient enrolled in BCCTP (check only if completed BCCTP enrollment process)												Date Tx Status _ / _ / _											

EWC DETEC Instructions for Breast Cancer (BCA) Screening Cycle Worksheet

Avoid Common Data Errors

1. If **High Risk for Breast Cancer = Yes**

- You have the option to perform screening (Scrn) Mam and/or MRI.
 - SCRN MRI:** If not done, **MUST** select “**Not Done**” from drop down list.

2. **CBE:** If not done, **MUST** select “**Not Done**” from drop down list.

3. ***Dates:** If a Proc done, must add date. Ensure all dates are in appropriate chronological order.



4. **Dates are Same, if final Imaging or Dx Proc:** Date W/U Status = Date Final Dx

5. **Date Dx Referral* = Date of the 1st EWC procedure (CBE or Diagnostic Procedure).**

- If **Reason Current Mam** is for CBE only or Other Imaging for Dx W/U, therefore an Initial Mam Not Done, enter **Date of Dx Referral**.
- If **Reason Current Mam** initial mam referenced in current cycle was Not Paid by EWC, enter **Date of Dx Referral**.

6. **Proc & Results:** Always select Proc & Results from DETEC dropdown list.

7. **Timeliness of Care Guidelines:**

SCRN ⇒ Dx < 60 days Results/Referral < 14 days	Dx of BCA ⇒ Tx start < 60 days.
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8. **If Tx Required:** BCCTP enrollment process requires application to Medi-Cal.
Date of Tx Status - provide Tx start date (e.g., date of surgery) not date of referral for Tx.

Follow-up	Expected Return	Cycle Outcome
Routine (R)	2 yr.	End of Cycle!
Short-term (ST)	At discretion of provider	End of Cycle! When returns, start new cycle.
Immediate (Imm)	< 60 days	Cycle continues, Dx Proc needed
Lost-to-Follow-up <i>2 phone calls & returned Certified Letter</i>	Never	End of Cycle!
Refused Care <i>Incl. New health insurer or provider, or moved</i>	Perhaps	If Recipient returns within 45 days, reopen prev cycle, otherwise start new cycle.

Key

Abn = Abnormal	Dx = Diagnosis / Diagnostic	Mam = Mammogram	SCRN = Screening
B = Bi-rad	F/U = Follow-up	MRI = Magnetic Resonance Imaging	Susp = Suspicious
BCA = Breast Cancer	ID# = EWC Recipient Identification No.	Prob = Probable	Tx = Treatment
BCCTP = DHCS, Breast and Cervical Cancer Treatment Program	Init = Initial	Proc = Procedure	W/U = Work-up
C = Category (similar to bi-rad)	Kn = Known		
	Mal = Malignancy		