

# **CERTIFICATION EXAMINATION FOR CANCER REGISTRARS**

## **Handbook for Candidates**

### **SPRING 2010 TESTING PERIOD**

Application Deadline: January 31, 2010

Testing Begins: Saturday, March 6, 2010

Testing Through: Saturday, March 20, 2010

### **FALL 2010 TESTING PERIOD**

Application Deadline: July 31, 2010

Testing Begins: Saturday, September 11, 2010

Testing Through: Saturday, September 25, 2010



*Council on Certification*



**PROFESSIONAL TESTING CORPORATION**

1350 BROADWAY • 17th FLOOR

NEW YORK, NY 10018

(212) 356-0660

WWW.PTCNY.COM

## **NATIONAL CANCER REGISTRARS ASSOCIATION**

For NCRA Membership information, contact:

NCRA  
1340 Braddock Place, Suite #203  
Alexandria, VA 22314  
(703) 299-6640  
Fax (703) 299-6620  
**www.ncra-usa.org**

## **NCRA'S COUNCIL ON CERTIFICATION MISSION**

To create and maintain credentialing processes whereby the public can be assured that individuals certified by NCRA have met a level of competence required to provide accurate information for cancer surveillance and research activities.

NCRA's Council on Certification  
1340 Braddock Place, Suite #203  
Alexandria, VA 22314  
(703) 299-6640  
Fax (703) 299-6620  
**E-mail [ctrexam@ncra-usa.org](mailto:ctrexam@ncra-usa.org)**  
**www.ctrexam.org**

## **ROBERT HENDRICKSON MEMORIAL SCHOLARSHIP**

The Robert Hendrickson Memorial Scholarship was established in memory of Robert Hendrickson, President of ONCO, Inc. and a respected leader in the oncology data services field. It is in his honor that NCRA and ONCO have joined to establish a memorial scholarship to encourage and support those working to pursue a career in the cancer registry field.

Scholarship Application Deadlines:  
For March 2010: December 31, 2009  
For September 2010: June 30, 2010

For more information, visit [www.ncra-usa.org](http://www.ncra-usa.org)

## **DISCLAIMER**

NCRA's Council on Certification neither sponsors nor endorses review courses or prepared preparatory materials for the Certification Examination for Cancer Registrars. Check **www.ctrexam.org** for information that may be of use in preparing for the examination.

## Table of Contents

Introduction .....	2
Objectives of Certification.....	2
Nondiscrimination.....	2
CTR Eligibility Requirements.....	3
Cancer Registry Definition .....	4
Allied Health Fields with Eligibility Status.....	4
Allied Health Fields for Route B Eligibility .....	4
Allied Health Fields for Route C Eligibility .....	4
Eligibility Questions .....	5
Attainment of Certification.....	5
Duration of Certification.....	5
Recertification .....	5
Revocation of Certification.....	5
Application Procedure.....	5
Completion of Application.....	6
School/Training Program Codes.....	7
Fees.....	10
Refunds .....	10
Transfers.....	10
Changing Your Examination Appointment.....	10
Examination Administration.....	11
Online Tutorial and Sample Test .....	11
Scheduling Your Examination Appointment .....	11
Special Needs.....	11
International Candidates .....	12
Security/Rules for the Examination .....	12
Report of Results.....	13
Re-Examination.....	13
Confidentiality.....	13
Content Clarification .....	13
Content of Examination.....	14
Content Outline.....	14
Sample Examination Questions .....	18
Resources and References .....	19

## INTRODUCTION

The Certification Examination for Cancer Registrars is sponsored and offered solely by the National Cancer Registrars Association's (NCRA) Council on Certification. The Certification Examination for Cancer Registrars is administered for NCRA's Council on Certification by the Professional Testing Corporation (PTC), 1350 Broadway - 17th Floor, New York, New York 10018; (212) 356-0660, [www.ptcny.com](http://www.ptcny.com).

PTC is an independent testing company that performs professional assessment services for a variety of professional organizations. NCRA has contracted with PTC for support of NCRA's certification processes. The firm processes examination applications, provides psychometric guidance in examination development, examination handbook printing, examination administration and scoring, and provides statistical reports on the examination outcomes. PTC provides a stable base from which the voluntary NCRA Council on Certification can support certification processes.

Certification Examination items are the sole property of NCRA and will not be released, under any circumstances, to any individual or group.

## OBJECTIVES OF CERTIFICATION

The objectives of certification are to promote excellence in the Cancer Registry field by:

1. Recognizing formally those colleagues who meet all the requirements for certification by NCRA's Council on Certification through the usage of "CTR®," indicating a Certified Tumor Registrar.
2. Establishing the level of theory required for certification in Cancer Registry administration.
3. Measuring the requisite knowledge of cancer registrars for certification.
4. Encouraging professional growth and individual study by the Cancer Registrar.
5. Providing a standard of knowledge required for certification, thereby assisting the employer, public, and members of the allied health professions in the assessment of Cancer Registrars.

## NONDISCRIMINATION

NCRA, NCRA's Council on Certification and PTC do not discriminate on the basis of age, color, gender, race, disability, marital status, religion, or national origin. All persons submitting an application for the examination will be judged solely on published criteria. Candidates are not required to be a member of any organization to apply for CTR certification.

## CTR ELIGIBILITY REQUIREMENTS

1. Candidates must meet **ONE** of the following routes by the application deadline:

**Route A.** Experience: Successful completion of 160 hours of work practicum in a CTR-staffed Cancer Registry (may be part of a NCRA-approved program curriculum) **AND** Education: Successful completion of an NCRA Accredited Associate Degree Program **OR** successful completion of an NCRA Accredited Formal Education Program and successful completion of a minimum of an Associate's degree or equivalent (4 semesters/6 quarters).

See page 7 for a listing of NCRA Accredited Formal Education Programs.

**Route B.** Minimum one year full-time (12 months or 1,950 hours) or equivalent experience in the Cancer Registry field **AND** successful completion of a minimum of an Associate degree [or equivalent (4 semesters/6 quarters)] in an approved college level curriculum in a recognized allied health field as determined by NCRA's Council on Certification (see page 4).

**Route C.** Minimum one year full-time (12 months or 1,950 hours) or equivalent experience in the Cancer Registry field **AND** successful completion of a minimum of an Associate degree [or equivalent (4 semesters/6 quarters)] **AND** license or certification in a recognized allied health field as determined by NCRA's Council on Certification (see page 4).

**Route D.** Minimum one year full-time (12 months or 1,950 hours) or equivalent experience in the Cancer Registry field **AND** successful completion of a Master's level or higher college level curriculum in a recognized allied health field as determined by NCRA's Council on Certification.

2. The equivalency of full-time experience is 1,950 hours for one year. There is not a time limit in accumulating the necessary hours.
3. Candidates are required to complete an application for the Certification Examination for Cancer Registrars and submit the application, the appropriate fee and required documentation as described on the application.
4. A random selection of applications will be audited to verify work history and/or education completion.
5. Required experience and education must be met by the published application deadline.
6. Specific coursework must be completed (not audited) with a passing grade, and "college-level course" is defined as coursework eligible for college credit.
7. Reading the contents of this Handbook and NCRA's Code of Ethics [[www.ncra-usa.org/ethics](http://www.ncra-usa.org/ethics)] are mandatory.

## CANCER REGISTRY DEFINITION

For eligibility purposes, the Council on Certification-approved definition is: the cancer registry field consists of individuals working in or supervising a cancer registry and those individuals who work for organizations or companies that actively support cancer registration.

Cancer registration involves the collection, management and analysis of cancer incidence data for all of the following purposes:

- ◆ research,
- ◆ quality management/improvement,
- ◆ cancer program development,
- ◆ cancer prevention and surveillance,
- ◆ survival and outcome data,
- ◆ compliance with reporting standards,
- ◆ development of accreditation standards for cancer registration.

## ALLIED HEALTH FIELDS WITH ELIGIBILITY STATUS

NCRA's Council on Certification has approved the eligibility status of allied health fields specifically for Routes B, C, and D. **The most recent listing can be found under the Eligibility tab at [www.ctrexam.org](http://www.ctrexam.org).**

### ***PARTIAL LISTING: Allied Health Fields for Route B Eligibility***

- ◆ Applied Health Science
- ◆ Cardiovascular Technology
- ◆ Cytogenetic Technology
- ◆ Diagnostic Medical Sonography
- ◆ Health Information Management/Technology
- ◆ Healthcare Administration
- ◆ Histotechnology
- ◆ Medical Assistant
- ◆ Medical Physiology
- ◆ Medical Secretary
- ◆ Nursing
- ◆ Occupational Therapy
- ◆ Phlebotomy
- ◆ Physical Therapy
- ◆ Radiation Therapy/Oncology Technology
- ◆ Radiology Technology
- ◆ Surgical Technology

For the complete list of allied health fields for Route B eligibility, visit [www.ctrexam.org](http://www.ctrexam.org)

### ***PARTIAL LISTING: Allied Health Fields for Route C Eligibility***

- ◆ Biography Specimen Technician
- ◆ Certified Medical Assistant
- ◆ Diagnostic Medical Sonographer
- ◆ Laboratory Assistant
- ◆ Licensed Practical/Vocational Nurse
- ◆ Medical Lab Technician

- ◆ Physical Therapy Assistant
- ◆ Protocol Data Manager
- ◆ Registered Cardiovascular Technologist (RCVT)
- ◆ Registered Health Information Administrator (RHIA)
- ◆ Registered Health Information Technician (RHIT)
- ◆ Registered Nurse
- ◆ Surgical Technologist
- ◆ Ultrasound Technologist

For the complete list of allied health fields for Route C eligibility, visit [www.ctrexam.org](http://www.ctrexam.org)

## ELIGIBILITY QUESTIONS

If your degree or credential/license is not listed, the Council on Certification will review it and make a determination of approval. All new approvals will be added to the online listing. Please submit a written request to have the allied health field reviewed by the Council on Certification for approval at [www.ctrexam.org/eligibility](http://www.ctrexam.org/eligibility). Please allow a minimum of three months prior to the application deadline for the Council to review. For questions about eligibility contact PTC at (212) 356-0660, NCRA's Council on Certification (703) 299-6640, or [ctrexam@ncra-usa.org](mailto:ctrexam@ncra-usa.org).

## ATTAINMENT OF CERTIFICATION

Candidates who receive an official written notice that they have passed the examination will be entitled to use "CTR" after their name and will receive a certificate from NCRA's Council on Certification. **Candidates are not eligible to use the CTR credential until their official score is received.**

*"Certified Tumor Registrar Continuing Education Handbook: A Guide for Maintaining the CTR Credential"* is sent to new CTRs shortly after notification of successful completion of the certification examination.

## DURATION OF CERTIFICATION

Certification is valid for two (2) years.

## RECERTIFICATION

The NCRA's Council on Certification oversees the maintenance of the CTR credential. To retain credentialed status, the certified registrar currently must submit 20 continuing education hours to NCRA every two years and submit the applicable certification fee on an annual basis. The names of all passing candidates will be forwarded to the registry of Certified Tumor Registrars maintained by NCRA and may be reported in NCRA publications.

## REVOCATION OF CERTIFICATION

Certification will be revoked for falsification of an application, violation of examination procedure, or violation of NCRA's Code of Ethics. An appeal mechanism exists for challenging revocation of certification.

## APPLICATION PROCEDURE

Applications for the Certification Examination for Cancer Registrars are available from the Professional Testing Corporation, 1350 Broadway - 17th Floor, New York, New York 10018, (212) 356-0660, [www.ptcny.com](http://www.ptcny.com). PDF copies of the application are available online by visiting [www.ctrexam.org](http://www.ctrexam.org).

## COMPLETION OF APPLICATION

Complete ALL information requested on the application. Mark ONE response only unless otherwise indicated.

**CANDIDATE INFORMATION:** Starting at the top of the application, print your name, address, daytime phone number, and email address in the appropriate boxes. **NOTE: *The name you enter on your Application must match exactly the name listed on your government-issued photo I.D. such as driver's license or passport.***

**TESTING PERIOD:** Darken the circle corresponding to the testing period for which you are applying.

**BACKGROUND INFORMATION:** All questions must be answered. Answer only one response unless otherwise indicated.

### A. PERCENT OF TIME CURRENTLY SPENT IN CANCER

#### REGISTRY WORK:

- 1 - Less than 25%
- 2 - 25%-50%
- 3 - 51%-75%
- 4 - More than 75%

### B. LENGTH OF EXPERIENCE IN CANCER REGISTRY WORK:

- 1 - Less than 1 year
- 2 - 1-2 years
- 3 - 3-5 years
- 4 - 6-10 years
- 5 - More than 10 years

### C. PRIMARY PLACE OF EMPLOYMENT:

- 1 - Hospital Registry
- 2 - Academic Institution
- 3 - Private Industry
- 4 - Professional Organization
- 5 - Central/State Registry
- 6 - Federal Registry
- 7 - Student
- 8 - Other

### D. NUMBER OF CASES ACCESSIONED ANNUALLY AT YOUR INSTITUTION:

- 1 - Under 300
- 2 - 301 - 500
- 3 - 501 - 700
- 4 - 701 - 1000
- 5 - Over 1000
- 6 - Not Applicable (e.g. Central Registries, Private Sector)

**E. EDUCATIONAL BACKGROUND IN CANCER REGISTRY:**

- 1 - On-the-Job
- 2 - Short Term Training Program
- 3 - Associate Degree
- 4 - Bachelor's Degree
- 5 - Other

**F. SCHOOL/ TRAINING PROGRAM CODE**

From the appropriate code list below, complete the information requested. You **MUST** indicate a School Program if you are applying through Eligibility Route A. If you are not applying through Route A but have attended one of the training programs (code 201-299), enter this information in the space provided. Be sure to enter the code number and name of the program, its location, and the year you completed the program. **Note: Only School Programs (code numbers 101-199) may be used to meet Eligibility requirements for Route A.**

<u>SCHOOL</u>	<u>CODE NUMBER</u>
<b>American Health Information Management Association (AHIMA)</b>	<b>116</b>
<b>Davidson County Community College</b> Lexington, NC	<b>120</b>
<b>Ogeechee Technical College</b> Statesboro, GA	<b>117</b>
<b>Owens Community College</b> Toledo, OH	<b>121</b>
<b>Santa Barbara City College</b> Santa Barbara, CA	<b>108</b>
<b>San Jacinto College North</b> Houston, TX	<b>113</b>
<b>Scott Community College</b> Bettendorf, IA	<b>119</b>

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**Note: Training Programs (code numbers 201-299) may NOT be used to meet eligibility requirements for Route B.**

<u>TRAINING PROGRAM</u>	<u>CODE NUMBER</u>
<b>Emory University</b> Atlanta, GA	<b>205</b>
<b>SEER Principles of Oncology for Cancer Registry Professionals</b> Rockville, MD	<b>202</b>
<b>USC's Cancer Registrar Training Program</b> Los Angeles, CA	<b>203</b>
<b>NCRA's CTR Exam Workshop</b> (CD or on-site)	<b>206</b>
<b>State Association Training Workshop</b>	<b>207</b>
<b>NCRA's Exam Online Prep Product</b>	<b>208</b>
<b>Other</b>	<b>299</b>

**G. HIGHEST ACADEMIC LEVEL:**

- 1 - High School Diploma
- 2 - Some College
- 3 - Associate Degree
- 4 - Bachelor's Degree
- 5 - Master's Degree
- 6 - Doctorate
- 7 - Other

**H. PROFESSIONAL BACKGROUND PRIOR TO ENTRY INTO CANCER REGISTRY:**

- 1 - Medical Records (RHIA, RHIT, CCS, other)
- 2 - Protocol Data Management
- 3 - Nursing
- 4 - Radiation
- 5 - Education
- 6 - Public Health
- 7 - Hospital Administration
- 8 - Other

**I. HAVE YOU TAKEN THIS EXAMINATION BEFORE?**

- 1 - No
- 2 - Yes (If yes, indicate month, year, and under what name the examination was taken).

**J. ARE YOU A MEMBER OF NCRA?**

- 1 - No
- 2 - Yes (If yes, provide NCRA membership number).  
(Membership in NCRA is not required)

**EXAMINATION ELIGIBILITY ROUTE:** Select the **ONE** eligibility route that qualifies you to sit for this examination and complete all the requested information. This section **MUST** be completed. Enclose any required documentation with, but do not staple to, the completed application.

**Route A.** Experience: Successful completion of 160 hours of work practicum in a CTR-staffed Cancer Registry (may be part of an NCRA-approved program curriculum) **AND** Education: Successful completion of an NCRA Accredited Associate Degree Program **OR** successful completion of an NCRA Accredited Formal Education Program and successful completion of a minimum of an Associate's degree or equivalent (4 semesters/6 quarters). **A copy of appropriate transcripts must accompany the application.** If the 160 hours of clinical experience are not clearly documented on your transcript, you **must** complete the registry experience information and obtain the signature of your supervisor, manager, or human resources director.

**Route B.** Minimum one year full-time (12 months or 1,950 hours) or equivalent experience in the Cancer Registry field **AND** successful completion of a minimum of an Associate degree [or equivalent (4 semesters/6 quarters)] in an approved college level curriculum in a recognized allied health field as determined by NCRA's Council on Certification. **A copy of appropriate transcripts must accompany the application.** You must also complete the registry experience information and obtain the signature of your supervisor, manager, or human resources director.

**Route C.** Minimum one year full-time (12 months or 1,950 hours) or equivalent experience in the Cancer Registry field **AND** successful completion of a minimum of an Associate degree [or equivalent (4 semesters/6 quarters)] **AND** license or certification in a recognized allied health field as determined by NCRA's Council on Certification. **A copy of current credential or license must accompany the application.** You must also complete the registry experience information and obtain the signature of your supervisor, manager, or human resources director.

**Route D.** Minimum one year full-time (12 months or 1,950 hours) or equivalent experience in the Cancer Registry field **AND** successful completion of a Master's level or higher college level curriculum in a recognized allied health field as determined by NCRA's Council on Certification. **A copy of appropriate transcripts must accompany the application.** You must also complete the registry experience information and obtain the signature of your supervisor, manager, or human resources director.

**REGISTRY EXPERIENCE:** Provide the name, city and state, and dates (month/year start and end) for all institutions where qualifying registry experience was obtained. Indicate the general types of duties performed, such as abstracting, follow up, quality review management. If applying through Route A, you must complete this section if the required 160 hours of experience is not clearly indicated on the transcript. **Required experience must be completed by the published application deadline date.**

**ELIGIBILITY VERIFICATION:** This section MAY be completed by the applicant's supervisor, manager, or human resources director who has knowledge of the applicant's registry experience. Letters from human resource departments documenting experience may be submitted in lieu of completing this portion of the application. Letters must be submitted with the application. This documentation is required for all applicants through Routes B, C, and D. Applicants through Route A must obtain verification if the required 160 hours of work experience are not clearly indicated on the transcript.

**EDUCATION VERIFICATION:** It is the candidate's responsibility to prove education eligibility and to submit a copy of appropriate transcripts during the application process. NCRA's Council on Certification reserves the right to verify information supplied by, or on behalf of, a candidate.

**OPTIONAL INFORMATION:** The information requested relating to race, age and gender is optional. It is requested to assist in complying with equal opportunity guidelines and will be used only in statistical summaries. Such information will in no way affect your test results.

**CANDIDATE SIGNATURE:** When you have completed all required information on the application, sign and date the application in the space provided at the bottom of page 2.

**For a list of Frequently Asked Questions or to view a CTR Exam Flowchart to determine eligibility, visit [www.ctrexam.org](http://www.ctrexam.org).**

**Mail the application with the required documentation and the appropriate fee (see FEES below) in time to be postmarked by the application deadline to:**

NCRA Certification Examination  
Professional Testing Corporation  
1350 Broadway - 17th Floor  
New York, New York 10018

**Applications must be postmarked by the application deadline (see front cover).** Applications received with postmarks after the application deadline will be returned unprocessed to the candidate.

## FEES

1. Application for the Certification Examination for Cancer Registrars:

Current NCRA Members ( <b>will be verified</b> ).....	\$240.00
All Other Candidates .....	\$350.00
Transfer Fee, NCRA Members .....	\$180.00
Transfer Fee, Nonmembers.....	\$260.00

2. NCRA Membership Fees should not be included with this exam application, but rather be paid directly to NCRA.

**DO NOT SEND CASH. MAKE CHECK OR MONEY ORDER PAYABLE TO:**

**NCRA Certification Examination**

NOTE: For checks returned by your bank, there will be an additional administrative fee of \$25.

### **Credit Card Payment**

Visa, MasterCard, and American Express are also accepted. Please complete the credit card payment form.

## REFUNDS

Fees paid by applicants who are not eligible to take the examination will be fully refunded.

## TRANSFERS

Candidates unable to take the examination as scheduled may request a transfer to the next testing period. The transfer request must be made up to 30 days after the originally scheduled testing date and submitted with the rescheduling fee of \$180 for NCRA members/\$260 for nonmembers.

If candidates are unable to attend the examination on the date for which they registered and elect not to reschedule to the next testing window, the application will be closed and all fees will be forfeited.

\*The rescheduling fee is based on cost, and is not punitive in nature. The rescheduling fee must be paid at the time the request for rescheduling is submitted.

Both the request and the fee must be received within 30 days after the original examination date for the transfer to be granted.

Written request should be sent to:

**NCRA Certification Examination  
Professional Testing Corporation  
1350 Broadway-17<sup>th</sup> Floor  
New York, NY 10018**

## CHANGING YOUR EXAMINATION APPOINTMENT

If you need to cancel your examination appointment or reschedule to a different date within your scheduled two-week testing period, you must contact PSI at (800) 211-2754 no later than noon, Eastern Standard Time, of the second business day PRIOR to your scheduled appointment.

## EXAMINATION ADMINISTRATION

The Certification Examination for Cancer Registrars is administered during an established two-week testing period on a daily basis, Monday through Saturday, excluding holidays, at computer-based testing facilities managed by PSI. PSI has several hundred testing sites in the United States, as well as Canada. Scheduling is done on a first-come, first-serve basis. To find a testing center near you visit: [www.ptcny.com/cbt/sites.htm](http://www.ptcny.com/cbt/sites.htm) or call PSI at (800) 211-2754. **Please note: Hours and days of availability vary at different centers.** You will not be able to schedule your examination appointment until you have received an Eligibility Notice from PTC.

### TESTING SOFTWARE DEMO

A Testing Software Demo Test can be viewed online.

Go to <http://www.ptcny.com/cbt/demo.htm>

This Testing Software Demo can give you an idea about the features of the testing software.

## SCHEDULING YOUR EXAMINATION APPOINTMENT

Once your application has been received and processed, and your eligibility verified, you will be mailed an Eligibility Notice within 5 (five) weeks prior to the beginning of the testing window. **The Eligibility Notice plus current government issued photo identification must be presented in order to gain admission to the testing center.** A candidate not receiving an Eligibility Notice or other correspondence at least 3 (three) weeks before the beginning of the two-week testing period should contact the Professional Testing Corporation by telephone at (212) 356-0660.

The Eligibility Notice will indicate where to call to schedule your examination appointment as well as the dates in which testing is available. Appointment times are first-come, first-serve, so schedule your appointment as soon as you receive your Eligibility Notice in order to maximize your chance of testing at your preferred location and on your preferred date.

## SPECIAL NEEDS

Special testing arrangements will be made for individuals with special needs. Submit the Application, Examination Fee, and a completed and signed Request for Special Accommodations Form, available from [www.ptcny.com](http://www.ptcny.com) or by calling PTC at (212) 356-0660. Requests for special testing for individuals with special needs must be received at least EIGHT weeks before the testing period begins.

## INTERNATIONAL CANDIDATES

International candidates applying with credentials or education from a non-US country will need to have translated transcripts reviewed by NCRA's Council on Certification for exam eligibility.

Candidates can request a paper-and-pencil exam to be administered if a computer testing center is not available in your location. A special test center fee of \$125 is required for this request.

## SECURITY/RULES FOR THE EXAMINATION

Any candidate who gives or receives assistance from another candidate during the examination will be reported to NCRA's Council on Certification. NCRA's Council on Certification and Professional Testing Corporation reserve the right to cancel or withhold any test scores if, in their opinion, there is adequate reason to question their validity.

1. No electronic devices, including cellular phones, pagers, cameras, voice recording devices, Blackberries, Bluetooth devices, iPod and other MP3 players, etc. may be operative during the examination.
2. No questions concerning content of the examination may be asked during the testing period. The candidate should carefully read the directions that are provided on screen at the beginning of the examination session.
3. Candidates **MUST** bring the following references to use in Part II of the examination.
  - a) **AJCC Cancer Staging Manual, 6th Edition**
  - b) **International Classification of Diseases for Oncology, 3<sup>rd</sup> Edition (ICD-O-3)**
  - c) **Collaborative Staging Manual and Coding Instructions, version 01.04.00**
  - d) **Multiple Primary & Histology Coding Rules (2007)**

The Collaborative Staging Manual is intended to be placed in a 3 ring binder. This would be considered "bound". Please bring the CS Manual in a 3 ring binder with a cover page properly identifying the reference. The other references – AJCC Cancer Staging Manual, 6th Edition and International Classification of Disease for Oncology, 3rd Edition (ICD-O-3) should be bound volumes without other added or loose materials, except for errata sheets provided by the authors, editors, or publishers. Organizational tabs/dividers are allowed for all open book references.

For ordering information, check the Council's website [www.ctrexam.org](http://www.ctrexam.org).

4. No books (other than those indicated above), papers, or other reference materials may be taken into the examination.
5. Hand-held, battery or solar operated, non-printing calculators may be used during the examination.
6. No test materials, documents, or memoranda of any sort are to be taken from the examination room.
7. No questions from the examination should be shared with anyone else.
8. Any questions or comments concerning testing administration should be submitted in writing to the Professional Testing Corporation within the week following the test date.

Any individual who violates the security of the examination will not have the examination processed and may be permanently banned from sitting for any NCRA certification. Additionally, certification will be revoked for falsification of an application or violation of examination procedures. There is an established appeal mechanism for any candidate whose certification has been revoked.

## REPORT OF RESULTS

At the end of the examination, candidates will receive a printout that confirms their completion of the examination. Candidates will receive an unofficial test results report prior to leaving the testing center. **Candidates are not eligible to use the CTR credential until their official score is received.** Candidates will be notified in writing by PTC within six weeks of the close of the testing period whether they have officially passed or failed the examination. Scores on the major areas of the examination and on the total examination will also be reported. International candidates should expect their test results within eight weeks of the close of the testing period.

Candidates who question their official exam scores and wish to have their exam double-checked must make the request within 30 calendar days from when the date test results are postmarked. Requests should be made to PTC. Any other exam appeals must be received within 60 calendar days after the last date of examination testing window. Appeals should be sent to NCRA's Council on Certification.

## RE-EXAMINATION

The Certification Examination for Cancer Registrars may be taken only once during each testing window. The examination may be repeated as often as desired, upon filing of a new application and fee, provided candidates meet current eligibility requirements.

## CONFIDENTIALITY

1. The Professional Testing Corporation - NCRA Testing Office will release an individual's test scores only to that individual.
2. Individual scores will NOT be sent to employers, schools, or other individuals or organizations under any circumstances.
3. Any questions concerning test results should be referred to the Professional Testing Corporation - NCRA Testing Office.

## CONTENT CLARIFICATION

Errata published in 2010 will not be tested exam content. Only errata published prior to 2010 will be tested.

The examination content excludes any clarifications posted in the SEER SINQ and Commission on Cancer's Inquiry and Response system.

## CONTENT OF EXAMINATION

1. The 250 multiple choice question exam is a total of 4.5 hours; 3 hours maximum is allotted for the first part--the closed book section. After completing the first 200 items (closed book), candidates will indicate they are completely finished with this part since they will NOT be able to go back to the first 200 items after the break. There will be a mandatory break in between closed book and open book sections to allow for the introduction of the needed reference materials. Any extra time from the closed book section may be carried over to the open book section, which is a minimum of 1.5 hours.
2. Questions for the examination are obtained from individuals with expertise in the Cancer Registry field and are reviewed for construction, accuracy, and appropriateness by NCRA's Council on Certification and the Professional Testing Corporation.
3. General concepts on the 2007 *Multiple Primary and Histology Coding Rules* will be tested in both the open-book and closed-book parts of the exam.
4. NCRA's Council on Certification neither sponsors nor endorses review courses for the Certification Examination for Cancer Registrars.
5. The content covered in the examination is described in the Content Outline starting below.
6. The Certification Examination for Cancer Registrars will be weighted in approximately the following manner:

I. Registry Organization and Operations .....	25%
II. Concepts of Abstracting, Coding, and Follow-up.....	35%
III. Data Analysis and Interpretation .....	20%
IV. Application of Coding and Staging Principles.....	20%
Closed Book = I, II, and III .....	80%
Open Book = IV.....	20%
7. **The candidate must receive a passing score on the total examination in order to be certified.**

# CONTENT OUTLINE

## I. REGISTRY ORGANIZATION AND OPERATIONS

- A. Types of cancer registries
  - 1. Facility
    - a. Hospital
    - b. Network
    - c. Free-standing
    - d. Military
    - e. Veterans Administration
    - f. Other types of facility registries
  - 2. Central registry
    - a. Types
      - i) Population-based
      - ii) Non-population based
    - b. National
      - i) Department of Defense (DOD)
      - ii) National Cancer Data Base (NCDB)
      - iii) National Program on Cancer Registration (NPCR)
      - iv) National Cancer Institute (NCI) Surveillance, Epidemiology, and End Results (SEER) program
    - c. International (IACR)
  - 3. Specialty
    - a. Site-specific
    - b. Pediatric
    - c. Research
  - 4. Other health registries
- B. Standard setting/registry organizations
  - 1. American Joint Committee on Cancer (AJCC)
  - 2. Centers for Disease Control (CDC/NPCR)
  - 3. Commission on Cancer (COC)
  - 4. International Agency for Research on Cancer (IARC/IACR)
  - 5. National Cancer Institute's Surveillance, Epidemiology, and End Results Program (SEER)
  - 6. North American Association of Central Cancer Registries (NAACCR)
- C. Cancer program
  - 1. Cancer registry management
    - a. Database management
    - b. Policy and procedure manual
    - c. Reference date
    - d. Budgets
    - e. Productivity standards
    - f. Position descriptions
  - 2. Cancer conferences
  - 3. Community outreach
  - 4. Research
    - a. Clinical trials
      - i) Phases
      - ii) Types of trials
    - b. Institutional review board (IRB)
- D. Legal and ethical issues
  - 1. Legal aspects
    - a. Confidentiality
    - b. Release of cancer registry data
    - c. Personnel policies and procedures
    - d. Data security
    - e. Data transmissions
  - 2. Ethical aspects

- E. Privacy and security
  - 1. Current drivers
  - 2. Identifying confidential information
  - 3. Individual right of control
  - 4. Security
- F. Quality control of cancer registry data
  - 1. General concepts
  - 2. Quality control methods
    - a. Visual review of abstracts
    - b. Edit checks
    - c. Reabstracting studies
    - d. Case finding studies
    - e. Recoding studies
    - f. Statistical analysis
- G. Commission on Cancer standards for approval
- H. Healthcare delivery systems
  - 1. Insurance
  - 2. Federal and state agencies
  - 3. Reimbursement methods
- I. Central cancer registry
  - 1. Administration and operations
    - a. Legislation and governance
    - b. Case finding procedures unique to central cancer registries
    - c. Consolidation of multiple source records
    - d. Record linkage and matching: probabilistic, deterministic
    - e. Monitoring completeness and timeliness of data
  - 2. Data sets
  - 3. Computerization unique to central registries
    - a. Geocoding
    - b. Record linkage
    - c. Death clearance and follow-back
    - d. Other central cancer registry activities

## II. CONCEPTS OF ABSTRACTING, CODING, AND FOLLOW-UP

- A. Anatomy and physiology
  - 1. Derivation of cells and tissues
  - 2. Tissues, body systems, and neoplasms
    - a. Tissues
    - b. Body systems
      - i) Integumentary
      - ii) Lymphatic and hematopoietic
      - iii) Cardiovascular
      - iv) Respiratory
      - v) Digestive
      - vi) Urinary
      - vii) Reproductive
      - viii) Endocrine
      - ix) Special senses
      - x) Nervous system
      - xi) Musculoskeletal
    - c. Characteristics of cancer
    - d. Body locations and position
- B. Case finding and case ascertainment principles
  - 1. Reportable list/agreement
  - 2. Case finding methods
    - a. Active/rapid case ascertainment
    - b. Passive/death clearance
    - c. Combinations of a. and b.
  - 3. Case finding sources
- C. Abstract principles and coding
  - 1. Demographics

2. Disease identification
  - a. Reportable case identification
  - b. General guidelines
3. Diagnosis
4. Extent of disease
  - a. Staging systems
  - b. General guidelines
5. Treatment
  - a. Types
  - b. General guidelines
6. Outcomes (follow-up) principles
  - a. Purposes
  - b. Methodology
  - c. Policy and procedures
  - d. General guidelines

### **III. DATA ANALYSIS AND INTERPRETATION**

- A. Statistics and methodology
  1. Statistics concepts and terminology
  2. Statistical techniques
  3. Study design
  4. Epidemiology
- B. Report preparation
  1. Data selection and query
  2. Data presentation and interpretation
- C. Data utilization
- D. Performance improvement studies

### **IV. APPLICATION OF CODING AND STAGING PRINCIPLES**

- A. Disease identification
  1. Lip, oral cavity, and pharynx
  2. Digestive organs and peritoneum
  3. Respiratory system and intrathoracic organs
  4. Hematopoietic and reticuloendothelial systems
  5. Bones, joints, and articular cartilage
  6. Connective, subcutaneous, and other soft tissues
  7. Skin
  8. Breast
  9. Genitourinary organs
  10. Eye and lacrimal gland
  11. Nervous system
  12. Endocrine glands
  13. Lymph nodes
  14. Other
- B. Extent of disease
  1. Lip, oral cavity, and pharynx
  2. Digestive organs and peritoneum
  3. Respiratory system and intrathoracic organs
  4. Hematopoietic and reticuloendothelial systems
  5. Bones, joints, and articular cartilage
  6. Connective, subcutaneous, and other soft tissues
  7. Skin
  8. Breast
  9. Genitourinary organs
  10. Eye and lacrimal gland
  11. Nervous system
  12. Endocrine glands
  13. Lymph nodes
  14. Other

## SAMPLE EXAMINATION QUESTIONS

1. What is the study of numbers which represents counts and/or measurements called?
  - A. Statistics
  - B. Probability
  - C. Correlation
  - D. Epidemiology
  
- \*2. A surgical pathology report is as follows: Sigmoid colon, moderately differentiated adenocarcinoma with invasion through the muscularis and extension into subserosal fat. 0/14 lymph nodes involved with cancer. CEA elevated. All other work-up was negative for cancer.
  - 2a. CS Extension code
    - A. 30
    - B. 40
    - C. 45
    - D. 50
  
  - 2b. CS Lymph Nodes code
    - A. 00
    - B. 99
    - C. 10
    - D. 80
  
  - 2c. CS Mets at Diagnosis code
    - A. 50
    - B. 99
    - C. 10
    - D. 00
  
  - 2d. CS Site-Specific Factor 1 code
    - A. 000
    - B. 010
    - C. 020
    - D. 030
  
  - 2e. CS Tumor Size/Extension Evaluation code
    - A. 0
    - B. 1
    - C. 2
    - D. 3
  
3. Which of the following is a malignant cancer of the smooth muscle?
  - A. Adenocarcinoma
  - B. Leiomyosarcoma
  - C. Teratocarcinoma
  - D. Rhabdomyosarcoma
  
4. The cervical lymph nodes are located in the
  - A. neck.
  - B. groin.
  - C. pelvis.
  - D. armpit.

### CORRECT ANSWERS TO SAMPLE QUESTIONS

1.A, 2a.B, 2b.A, 2c.D, 2d.B, 2e.D, 3.B, 4.A

\*Represents the open-book portion of the examination.

## RESOURCES AND REFERENCES

The NCRA's Council on Certification has prepared the following suggested reference list to assist in preparing for the Certification Examination for Cancer Registrars. These references include information of significance to the field of cancer registry. Inclusion of references on this list does not constitute an endorsement by the Council of specific literature which, if used, would guarantee candidates successful passing of the certification examination, nor is it suggested that the Examination is necessarily based on these references. Any additional references will be posted on the Council's website at [www.ctrexam.org](http://www.ctrexam.org).

### STANDARD REGISTRY REFERENCES

American Cancer Society. *Clinical Oncology*, 2001. Raymond E. Lenhard, Jr., MD, Robert T. Osteen, MD, Ted Gansler, MD. ISBN: 0-944235-15-8.

American College of Surgeons, Commission on Cancer. *Cancer Program Standards 2009, Revised Edition*.  
<http://www.facs.org/cancer/coc/programstandards.html>  
(Download)

American College of Surgeons, Commission on Cancer. *Facility Oncology Registry Data Standards (FORDS): Revised for 2009*.  
<http://www.facs.org/cancer/coc/fordsmanual.html>  
(Download)

\**American Joint Commission on Cancer's Cancer Registry Staging Manual*, Sixth Edition, Springer Verlag, 2002. ISBN: 0387952713.

Cancer Registry Management Principles and Practice – Second Edition (2004). Hutchinson, C., Menck, H., Burch, M., and Gottschalk, R. Kendall/Hunt Publishing Co. ISBN# 0-7575-0192-3  
<http://www.kendallhunt.com>

Central Cancer Registries: Design, Management, and Use. 2<sup>nd</sup> Edition (2007). Menck, H.; Deapen D.; Phillips J.L.; Tucker T. Kendall/Hunt Publishing Co. ISBN# 978-0-7575-3120-0.  
[http://www.kendallhunt.com/ncra\\_ccr](http://www.kendallhunt.com/ncra_ccr)

\*Collaborative Staging Task Force of the American Joint Committee on Cancer. *Collaborative Staging Manual and Coding Instructions*. Version 01.04.00. Jointly published by American Joint Committee on Cancer (Chicago, IL) and U.S. Department of Health and Human Services (Bethesda, MD), 2004. NIH Publication Number 04-5496.  
<http://www.cancerstaging.org/cstage/manuals.html>

Dorland, W.A., *Dorland's Illustrated Medical Dictionary*, 31<sup>st</sup> Edition. W. B. Saunders, 2007. ISBN: 141602364X.

Gookin, D. *PCs for Dummies, 11<sup>th</sup> Edition*. For Dummies Publisher, 2007. ISBN: 0470137282.

Multiple Primary and Histology Coding Rules (2007). Johnson CH, Peace S, Adamo P, Fritz A, Percy-Laurry A, Edwards BK. National Cancer Institute, SEER Program. Bethesda, MD 2007.  
[http://www.ncra-usa.org/i4a/ams/amsstore/category.cfm?category\\_id=7](http://www.ncra-usa.org/i4a/ams/amsstore/category.cfm?category_id=7)

National Cancer Institute, Surveillance, Epidemiology and End Results Reporting. *Self-Instructional Manual for Cancer Registrars*, Book 1, 2, 3, 4, 5, 7, NIH Publications.  
<http://seer.cancer.gov> (Order SEER Publications link)

National Cancer Institute, Surveillance, Epidemiology and End Results Reporting. *SEER\*Rx-Interactive Antineoplastic Drugs Database*.  
<http://seer.cancer.gov/tools/seerrx>

\*World Health Organization. *International Classification of Diseases for Oncology*, 3rd Edition (ICD-O-3), WHO, 2000. ISBN: 9241545348

Young, JL Jr, Roffers SD, Ries LAG, Fritz AG, Hurlbut AA (eds). *Surveillance, Epidemiology and End Results Reporting SEER Summary Staging Manual – 2000: Codes and Coding Instructions*. National Cancer Institute, NIH Pub. No. 01-4969, Bethesda, MD, 2001.  
<http://seer.cancer.gov> (Order SEER Publications link)

\*Indicates books needed for open-book portion of examination.

## **ADDITIONAL RESOURCES**

Basic textbooks in human anatomy and physiology, biostatistics, and epidemiology.

Centers for Disease Control and Prevention. *Data collection of primary central nervous system tumors. National Program of Cancer Registries Training Materials*. Atlanta, GA: Department of Health and Human Services, Center for Disease Control and Prevention, 2004.  
<http://www.cdc.gov/cancer/npcr/training/>

Clemente, C. *Gray's Anatomy of the Human Body* (30<sup>th</sup> Edition). Lippincott Williams & Wilkins. ISBN: 978-0812106442.

National Cancer Institute. *Abstracting and Coding Guide for the Hematopoietic Diseases*, NIH Publications, 2002.  
[No. T-007] Pub. No. 02-5146.  
<http://seer.cancer.gov> (Order SEER Publications link)

National Cancer Institute, Surveillance, Epidemiology and End Results Reporting. *SEER Program Coding and Staging Manual 2007 with 2008 Revisions*. NIH Publication Number 04-5581  
<http://seer.cancer.gov/tools/codingmanuals/> (Download)

North American Association of Central Cancer Registries. *NAACCR's Registry Operations Guidelines and Standards*.  
<http://www.naacccr.org/> (Download)

North American Association of Central Cancer Registries. *NAACCR's Data Standards for Cancer Registries*. Volume II & III.  
<http://www.naacccr.org>

## **ERRATA**

The 2010 exams are finalized the year before the exams are offered. Therefore errata published in 2010 will not be tested exam content. Only errata published prior to 2010 will be tested. PTC10073

# Application for Certification Examination for Cancer Registrars



Council on Certification

Please read the directions in the Handbook for Candidates carefully before completing this Application.

**MARKING INSTRUCTIONS:** This form will be scanned by computer, so please make your marks heavy and dark, filling the circles completely. Please print uppercase letters and avoid contact with the edge of the box. See example provided. →

A	B	C	D	E	F	1	2	3	4	5	6
---	---	---	---	---	---	---	---	---	---	---	---

## Candidate Information

Mr. First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_  
 Mrs. \_\_\_\_\_  
 Ms. \_\_\_\_\_  
 Dr. \_\_\_\_\_

Last Name \_\_\_\_\_ Suffix (Jr., Sr., etc.) \_\_\_\_\_

Number and Street \_\_\_\_\_ Apartment Number \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Country \_\_\_\_\_

Daytime Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Email Address \_\_\_\_\_

## Background Information

Darken only one choice for each question unless otherwise directed.

- A. PERCENT OF TIME CURRENTLY SPENT IN CANCER REGISTRY WORK:**
- Less than 25%       51% to 75%  
 25% to 50%       More than 75%
- B. EXPERIENCE IN CANCER REGISTRY WORK:**
- Less than 1 year       6 to 10 years  
 1 to 2 years       More than 10 years  
 3 to 5 years
- C. PRIMARY PLACE OF EMPLOYMENT:**  
(Darken only one response.)
- Hospital Registry  
 Academic Institution  
 Private Industry  
 Professional Organization  
 Central/State Registry  
 Federal Registry  
 Student  
 Other
- D. NUMBER OF CASES ACCESSIONED ANNUALLY AT YOUR INSTITUTION:**
- Under 300       701 to 1000  
 301 to 500       Over 1000  
 501 to 700       Not Applicable  
 (e.g. Central Registries, Private Sector)

### E. EDUCATIONAL BACKGROUND IN CANCER REGISTRY:

- On-the-Job  
 Short Term Training Program  
 Associate Degree  
 Bachelor's Degree  
 Other

### F. SCHOOL/TRAINING PROGRAM CODE:

See School/Training Program Code List on Page 7 in Handbook and enter code in the boxes provided. If not applying under Route A, provide Training Code(s) if applicable.

Code	Year Completed
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

### G. HIGHEST ACADEMIC LEVEL:

- High School Diploma  
 Some College  
 Associate Degree  
 Bachelor's Degree  
 Master's Degree  
 Doctorate  
 Other

## Testing Period 2010

- March  
 September

### H. PROFESSIONAL BACKGROUND PRIOR TO ENTRY INTO CANCER REGISTRY:

- Medical Records (RHIA, RHIT, CCS, other)  
 Protocol Data Management  
 Nursing  
 Radiation  
 Education  
 Public Health  
 Hospital Administration  
 Other

### I. HAVE YOU TAKEN THIS EXAMINATION BEFORE?

- No       Yes

If yes, indicate month, year, and name under which the examination was taken.

Date (month/year): \_\_\_\_\_

Name: \_\_\_\_\_

### J. ARE YOU A MEMBER OF NCRA?

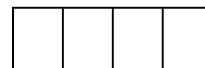
- No       Yes

Membership No.

NOTE: Membership in NCRA is not required.

(Complete Page 2)

64503



# Application for Certification Examination for Cancer Registrars



Council on Certification

## Examination Eligibility Route (Darken only one response.)

**ROUTE A:** Experience: Successful completion of 160 hours of work practicum in a CTR-staffed Cancer Registry (may be part of a NCRA-approved program curriculum) Education: Successful completion of an NCRA Accredited Associate Degree Program OR successful completion of an NCRA Accredited Formal Education Program and successful completion of a minimum of an Associate's degree or equivalent (4 semesters/6 quarters). **A copy of appropriate transcripts must accompany the Application.** If the 160 hours of work experience is **not** clearly indicated on your transcript, you **must** complete the registry experience information and obtain the signature of your supervisor.

Institution \_\_\_\_\_ City/State \_\_\_\_\_ Date Completed \_\_\_\_\_

**ROUTE B:** Minimum one year full-time (12 months or 1,950 hours) or equivalent experience in the Cancer Registry field **AND** successful completion of a minimum of an Associate degree [or equivalent (4 semesters/6 quarters)] in an approved college level curriculum in a recognized allied health field as determined by NCRA's Council on Certification. **A copy of appropriate transcripts must accompany the Application.** You must complete the registry experience section below.

Institution \_\_\_\_\_ City/State \_\_\_\_\_ Field of Study \_\_\_\_\_ Date Completed \_\_\_\_\_

**ROUTE C:** Minimum one year full-time (12 months or 1,950 hours) or equivalent experience in the Cancer Registry field **AND** successful completion of a minimum of an Associate degree [or equivalent (4 semesters/6 quarters)] **AND** license or certification in a recognized allied health field as determined by NCRA's Council on Certification. **A copy of current credential or license must accompany the Application, as well as a copy of appropriate transcripts.** You must complete the registry experience section below.

Health Field \_\_\_\_\_ Credential and Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

**ROUTE D:** Minimum one year full-time (12 months or 1,950 hours) or equivalent experience in the Cancer Registry field **AND** successful completion of a Master's level or higher college level curriculum in a recognized allied health field as determined by NCRA's Council on Certification. **A copy of appropriate transcripts must accompany the Application.** You must complete the registry experience section below.

Institution \_\_\_\_\_ City/State \_\_\_\_\_ Field of Study \_\_\_\_\_ Date Completed \_\_\_\_\_

## Registry Experience

There is not a time limit in accumulating the necessary experience or hours.

Institution	City and State	General Duties	Start/End Dates Month/Year

## Supervisor Verification

To be completed by applicant's supervisor or Human Resources Director who has knowledge of the applicant's registry experience.

By my signature below, I verify that to the best of my knowledge the above-named applicant's listed experience is accurate, correct, and complete, plus meets the eligibility route selected above. If the candidate is a registry student via Eligibility Route 2, I verify that he/she has completed a minimum of 160 hours of work experience in a CTR-staffed registry.

Print Name \_\_\_\_\_ Title \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Signature/Date \_\_\_\_\_ Email \_\_\_\_\_

## Optional Information

**Note:** Information related to race, age, and gender is optional and is requested only to assist in complying with general guidelines pertaining to equal opportunity. Such data will be used only in statistical summaries and in no way will affect your test results.

**Race:**  African American  Native American  Asian  White  Hispanic  Other

**Age Range:**  Under 25  25 to 29  30 to 39  40 to 49  50 to 59  60+

**Gender:**  Male  Female

OFFICE USE ONLY

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6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9
0	0	0	0

**COMPLETE ENTIRE APPLICATION BEFORE SIGNING BELOW.**

## Candidate Signature (Required)

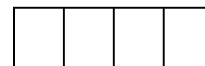
I have read the Handbook for Candidates and NCRA's Code of Ethics and understand that I am responsible for knowing their contents. I certify that the information given in this Application is in accordance with Handbook instructions and is accurate, correct, and complete. I understand NCRA may verify my provided experience and education.

**CANDIDATE SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Payment Information** Type: **Money Order/Check/#** \_\_\_\_\_  
**Total Amount:** \$ \_\_\_\_\_  Visa  MasterCard  American Express

**SEND COMPLETED APPLICATION & PAYMENT TO:**

NCRA, PROFESSIONAL TESTING CORPORATION, 1350 BROADWAY, 17th FLOOR, NEW YORK, NY 10018  
 WWW.PTCNY.COM (212) 356-0660 ALL RIGHTS RESERVED PTC10088



64503



## CREDIT CARD PAYMENT FORM

*If you want to charge your application fee on your credit card complete this form and return it with your application.*

Name (as it appears on your card): \_\_\_\_\_

Address (as it appears on your statement): \_\_\_\_\_

Examination for which you are applying: \_\_\_\_\_

Charge my credit card for the total fee of: \$\_\_\_\_\_

Card type:     Visa     MasterCard     American Express

Card Number: |\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_