

Chapter 16: Follow-up

The term follow-up refers to the process whereby a registry continues to monitor the status of a patient's health at periodic intervals. Data fields concerning patient vital status, date of last contact, treatment, and recurrence are updated to maintain accurate surveillance information.

Follow-up data are obtained through active and passive methods. Active follow-up refers to the process of identifying patients whose follow-up information is out of date and contacting someone who can provide more recent information. This may involve contacting the patient, a physician, family member, or other informant. SEER*DMS provides mechanisms for facilitating active follow-up as discussed in the *Active Follow-up (AFUP)* sections of this chapter.

Active follow-up procedures can be very time and cost-intensive. Effective passive follow-up processes can significantly reduce the time and effort required to obtain current follow-up information for patients. Passive follow-up refers to the process of updating follow-up information during the linkage of data, including patient data submitted by reporting facilities as well as non-medical data provided by other organizations. Non-medical data are imported as supplemental records and include department of motor vehicle, CMS/HCFA, voter registration, and other data available to the registry. The types of supplemental data that are loaded vary by registry.

SEER*DMS facilitates active follow-up by identifying patients requiring more recent follow-up information and allowing you to organize patients into groups based on methods of contact. The SEER*DMS active follow-up module also allows you to track the success rate of active follow-up processes.

In this chapter, you'll learn about

- Passive Follow-up:
 - Overview of Passive Follow-up
 - Overview of the Consolidate FUP Task
 - Resolving Discrepancies in Follow-up Data
 - Saving & Exiting the Consolidate FUP Task
- Active Follow-up
 - Overview of Active Follow-up
 - Identifying Patients for Active Follow-up
 - Searching or Filtering the AFUP List
 - Data Shown in the AFUP Manager
 - Assigning Patients to a Communication Group
 - Active Follow-up Reports
 - Updating Follow-up Data
 - Updating Follow-up Data for a Batch of Patient Sets
 - Modifying AFUP Status for a Batch of Patient Sets

Overview of Passive Follow-up

Passive follow-up processes are embedded directly into the SEER*DMS workflow. Automated tasks update follow-up fields when a record is a definite match to a patient set based on deterministic algorithms. These tasks are described below.

Rapid Follow-up Task. Rapid Follow-up is an automatic task in the main branch of the workflow. This task is designed to update a patient's follow-up information based on data in a newly loaded record without waiting for the record's manual consolidation task to be completed. If the matching

algorithm for Rapid FUP can identify a single patient set that is a definite match to the record, the patient set's data are updated via auto-consolidation processes. The algorithms related to the Rapid FUP task are described below:

- **Matching Algorithm.** *Rapid Follow-up Linkage* is the matching algorithm that determines whether the incoming record matches a patient set. Rapid FUP will only proceed if the record is a perfect match to one and only one patient set. The record types processed in Rapid FUP and your registry's matching criteria are documented in the Matching help page. (Select *Help > Matching* and expand the *Rapid Follow-up Linkage* section to view your registry's algorithm and the record types processed by the Rapid FUP task.)
- **Auto-consolidation of data via Rapid Follow-up.** The fields updated via the Rapid FUP task vary by record type and registry. These typically include vital status, date of last contact, last follow-up hospital, last follow-up physician, follow-up source, and other fields related to vital status and last contact. To view the fields updated via Rapid FUP in your registry select *Help > Auto-cons.* Select a record type in the drop-down menu, enter *rapid-fup* in the search box, and click *Filter*. Click the field name to view the logic to auto-consolidate the field into the patient set. Note: the logic for a field may differ across record types.

Auto-consolidation – Supplemental and Non-reportable Death Certificate Data. Records that are used for passive follow-up are routed through a special branch of the workflow to minimize manual tasks. These include supplemental records, non-reportable death certificates, and other records used for follow-up only data. The records are matched against patient sets in the database; they are not matched against other unlinked records. If SEER*DMS cannot complete the auto-match, a manual Supplemental Match Task is created. A record cannot be auto-matched if it matches more than one patient set perfectly (the computer cannot choose between two perfect matches); or the record matches a patient set with a "possible" score. To reduce manual processing, many registries do not allow "possible" scores for passive follow-up data.

If a record is a match to a single patient set, data fields in the patient set are updated based on registry-defined algorithms. The fields would include but would not be limited to date of last contact, vital status, and follow-up source (refer to your registry's auto-consolidation rules for more information). An entry is made in the patient set's audit log documenting that the record was linked and any modifications made to data fields. If automatic updates cannot be completed due to a discrepancy between the record and patient set data, a registrar will be able to review the data and resolve the discrepancy in a manual Consolidate FUP task.

Overview of the Consolidate FUP Task

In most registry configurations, records that follow the passive follow-up route through the workflow include Supplemental, Death Notice, Health Index, non-reportable Death Certificate, and Follow-up Only records. In this branch of the workflow, a Consolidate Follow-Up (FUP) task is created when a record cannot be auto-consolidated into a matching patient set. This occurs when data on the incoming record conflict with data in the matching patient set. For example, a Consolidate FUP task will be created if a supplemental record indicates that a patient was alive on a given date, but the patient set data indicate that the patient had died prior to that date. Refer to the *Overview of Passive Follow-up* section of this chapter for a more complete description of the tasks leading to a Consolidate FUP task.

In the Consolidate FUP task, the issues that prevented auto-consolidation are reported on the Alerts tab. A message is displayed for each conflict between the value of a field on the incoming record and the value of the patient set field. In the first example below, the date of death on a non-reportable death certificate differs from the value in the patient set (the date of death is stored in the date of last contact field when vital status = 4).

Alerts **1** | Text | Edits | Comments

Review Auto-consolidation Issues (1)

Key	Message
REC-3005307813, Import Type: Death Certificate, Auto-cons Rules: Death Certificate	
DOLC	DOLC Conflict (VS is 'dead' in both record and pat set, but DOLC differs).

In the example below, there is a conflict in the date of birth (DOB).

Alerts **1** | Text | Edits | Comments

Review Auto-consolidation Issues (1)

Key	Message
REC-100000422585, Import Type: CMS/HCFA, Auto-cons Rules: Supplemental (HCFA)	
DOB	Date of Birth differs in record and patient set.

This registry's configuration requires a review for a DOB conflict when a CMS record updates date of last contact. The type of conflicts that cause auto-consolidation failures vary by registry. Auto-consolidation rules are documented on the Auto-Cons page of the Help system. An example is shown below. A manual task is created when a failure is generated by the auto-consolidation task.

Supplemental (HCFA) | Keywords | Filter | Clear | Show All

Birth Date Year, Birth Date Month, Birth Date Day auto-cons

Only if record value is not unknown. If patient value is unknown, record value is used. If patient value is known and does not correspond to record value, a failure is added if DOLC was updated.

To complete a Consolidate FUP task, you must perform the following steps:

1. **Confirm that the data are for the same person.** Data should not be consolidated until it is determined that the data to be combined are for the same person. Use the Demo Info tool to confirm the match, as described in the *Resolving Discrepancies in Follow-up Data* section of this chapter.
2. **Resolve discrepancies between the patient set and record data.** Switch to the Source Data View in the patient set editor. In this mode, compare differences between the record and the patient set. Modify the patient set values, if appropriate. See the *Resolving Discrepancies in Follow-up Data* section of this chapter for instructions.
3. **Review and Resolve Edit Errors.** SEER*DMS gives you the option of resolving some or all edit errors during the consolidation task, or saving the consolidated patient set and allowing the errors to be resolved in a Resolve Patient Set Errors task.
4. **Save the Patient Set and Exit the Consolidate FUP Task.** Once you have resolved the conflicts between the follow-up data and the patient set, you may save the patient set and allow it to move forward to the next task in the workflow.

The Consolidate FUP task is performed in the patient set editor. For additional information about the features of the editor, see *Chapter 11: The Patient Set Editor*.

Resolving Discrepancies in Follow-up Data

Requires system permissions: *consolidate_fup* and (*pat_edit_demographics* or *pat_edit*)

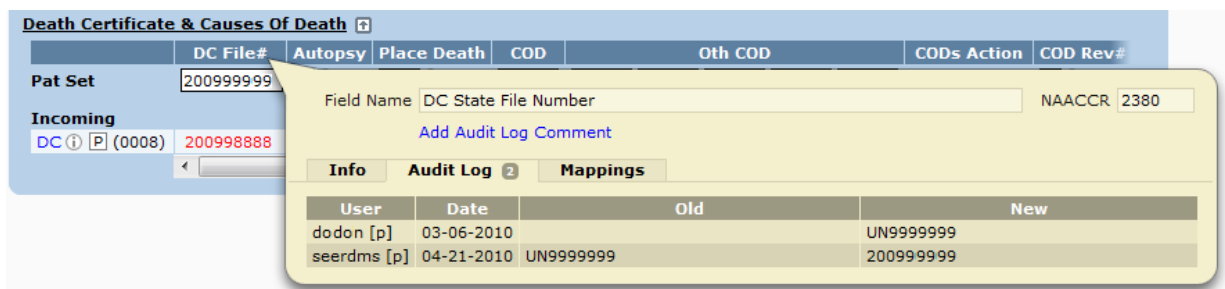
1. Open a Consolidate FUP task (instructions for opening worklist tasks are provided in *Chapter 4: Using the Worklist*).
2. The Demographic Information will be displayed when you open the Consolidate FUP task. Use the popup to verify the patient match.
 - a. Data from the Incoming Record are displayed in the top section. A field will be highlighted in red if its value differs from the values in the Patient Set fields. Medical Record Number will be highlighted in red if its value differs from Medical Record Number on other records for the same facility.
 - b. Consolidated patient set data fields are displayed in bold in the first row of the Patient Set section. These are followed by values from the records that are linked to the patient set.
 - c. Review all discrepancies in the data fields and confirm that the incoming record matches the patient set.
 - i. If the incoming record is for the same patient, click **Accept**.
 - ii. If the record does not pertain to the same patient, click **Reject**. The Consolidate FUP task will be canceled. The incoming record will be retained in the database as an unlinked record; it can be rematched at a later time. The patient set will be unchanged.
3. Review the Auto-consolidation Issues displayed on the Alerts tab.
4. While viewing the **Demographics** page of the patient set, click **View Source Data**. The options that you will use will vary depending on the nature of the data issue.
 - a. Differences are shown in a red font. Review the differences between the incoming record and the patient set. Data from other records are displayed as a reference. The current values in the patient set may be based on data in those linked records.
 - b. Take note of the types of records that are linked to the patient set. Do you need to review discrepancies by record type? If you are consolidating data for a death certificate and there is another death certificate linked to the patient set, for example, change the record option to select all death certificate records. This will allow you to compare the data on each death certificate and select the appropriate value for the patient set.



- c. In some patient sets, there will be a large number of linked records. Change the record option to All Incoming Records. You may also want to limit the display to Differences Only. This will allow you to focus on the issues that prevented SEER*DMS from auto-consolidating the incoming record.



- d. To see the history of changes for a field, click the field's label and review the Audit Log. If you need to see other changes made at the same time, click AL in the left navigation and review the patient set's full audit log.



e. If you want to update a Patient Set field, you can modify the field directly or click one of the record values to copy it into the patient set field.

f. Click **View Consolidated**.

5. Review and resolve edit errors, as dictated by registry policy. SEER*DMS gives you the option of resolving edit errors during the consolidation task, or saving the consolidated patient set and allowing the errors to be resolved in a Resolve Patient Set Errors task.
6. When you are ready to save your changes, follow the instructions in the *Saving and Exiting the Consolidate FUP Task* section of this chapter.

Saving & Exiting the Consolidate FUP Task

When saving your changes and exiting the task, you should enter any relevant comments regarding changes made during the task. The comment box at the top can be used to add general comments pertaining to the task. Comments can also be added for specific data fields. The comments will be displayed in the patient set's audit log.

To save your changes and exit the Consolidate FUP Task:

1. Click **Save**.
2. Enter comments to document your changes.
3. Click **Save & Exit**. If there are edit errors in the patient set, it will be forwarded to a Resolve Patient Set Errors task. If there are no errors, the patient set will complete the workflow and will be accessible via the Patient Lookup, but not the worklist.

Overview of Active Follow-up

The following summarizes the steps involved in using SEER*DMS to manage the registry's active follow-up processes. These steps are explained in greater detail in subsequent sections of this chapter.

1. **Execute the system task to identify patients for active follow-up.** This task uses a registry-specific algorithm to determine which patients require active follow-up. The criteria are based on vital status, date of last contact, and whether the patient's follow-up status is monitored by the registry. If a patient set meets the task's criteria, the patient set's AFUP status will be set to open and the patient set will be added to the list of patients requiring follow-up on the SEER*DMS AFUP Manager page.
2. **Review the list of patients in the AFUP Manager. Close the AFUP for selected patients, as appropriate.** In some registries, the system task's criteria include patients who are not routinely followed by the registry. For example, it may be registry policy that patients who only have non-reportable cancers are not followed on a regular basis. These may be flagged as requiring active follow-up because there are times when they are actively followed. If this is not one of those times, use the filters in the AFUP Manager to select those patients and close their AFUPs.

- 3. Group Patient Sets based on the method of communication that will be used to obtain follow-up information.** In this step, you will assign a Communication ID to each group of patients who fall into the same communication category. The communication category determines the type of letter, form, or listing that will be used to obtain follow-up information. As an example, you may assign a specific Communication ID to patients who will be followed via physician letters; or you may assign a Communication ID to patients who will be followed via a particular site-specific form. The Communication IDs will be used by external reports that generate the letters and forms; these are implemented via external reports to give the registry complete control over the number, type, and content of the follow-up reports.
- 4. Generate reports, letters, and listings based on the communication IDs assigned in step 3.** Typically, the external reports will be designed to accept a Communication ID as a parameter. Execute each external report using the appropriate Communication ID.
- 5. Wait for a response to letters sent to physicians, facilities, patients, and informants.** As you wait, be aware that a patient's follow-up status may be closed if data received at the registry updates follow-up fields. A patient's AFUP status will automatically be set to closed if the patient's vital status is changed from alive to dead; or the date of last contact is set to a date that is more recent than the AFUP DOLC Cutoff used in step 1.
- 6. Indicate whether a response was received and enter all data received.** Update the patient data based on information received and indicate whether the communication was successful. In order to refine the registry's communication strategies, you should track both successful and unsuccessful or inappropriate communication methods.

Identifying Patients for Active Follow-up

Requires system permission: *view_management_tasks*

The Identify Patients for AFUP system task uses a registry-specific algorithm to determine whether a patient requires active follow-up. These criteria are typically based on vital status, date of last contact, and whether the patient's follow-up status is monitored by the registry (e.g., non-reportable cases may not be followed by some registries). Documentation for your registry's algorithm is displayed when you open the system task.

If a patient set meets the task's criteria, the patient set's AFUP status will be set to open and the patient set will be added to the list of patients requiring follow-up on the SEER*DMS AFUP Manager page. You may use the AFUP Manager to facilitate and track communications to the patients, their physicians or other contacts. The AFUP Manager also enables you to enter follow-up data as it is received (see the *Using the AFUP Manager* section of this chapter). An AFUP is closed when the patient's vital status and date of last contact indicate that the need has been fulfilled. This may occur when data are changed via data processed in passive follow-up processes or data received as a result of active follow-up procedures.

To designate Patient Sets for active follow-up:

1. Select System > Tasks.
2. Click the **Identify Patients for AFUP** link.
3. Enter a date in DOLC Cutoff that defines whether a patient set requires active follow-up. A patient set will be considered if the patient set's value for vital status is alive and the date of last contact is prior to this date.
4. Click Recalculate to view the number of patient sets that meet the criteria. If the number of patients sets is unacceptably high based on registry policy, adjust the DOLC Cutoff and recalculate.

5. You may enter text related to this task in the **Comment** field. The comment from the last execution of the task is stored in the database (utility_history table).
6. Click **Start**. SEER*DMS will create an AFUP Need for each patient set which matches the registry's active follow-up criteria. Once the task completes, the follow-up staff may use the AFUP Manager to initiate follow-up procedures for these patients.

AFUP Manager – Data Columns and Filters

Requires system permission: *afup_manager*

A Patient Set is listed in the Active Follow-up (AFUP) Manager if its AFUP Status was set to *Open* during the execution of the Identify Patients for AFUP system task. Please verify that the system task was executed with the appropriate options prior to using the AFUP Manager. To access the AFUP Manager, select Manage -> Active Follow-up.

The following data columns are shown in the AFUP Manager:

- **Patient Set ID** – The ID of each Patient Set identified for active follow-up.
- **DNC** – Do Not Contact flag. The coded values are displayed in the table. Hover over a value to view the text definition for a value. Use the Do Not Contact filter to assign patient sets to different groups for processing. You will exclude patient sets from some processes because of the value of the Do Not Contact Flag or Reason.
- **DNC Rsn** – Do Not Contact Reason. The coded values are shown in the table. Hover over a value to view the text definition for a value.
- **Last Name** – The patient's last name.
- **First Name** – The patient's first name.
- **DOLC** – The current value of date of last contact in the patient set. The date of last contact filter allows you to search on DOLC month, day, and year separately. In some registries, active follow-up tasks are performed on batches of patient sets grouped by month of last contact.
- **FU Hosp** – The facility defined as the Last Follow-up Hospital in the patient set. Use the Last FUP Hospital filter to search by a specific facility or to search for patient sets with an unknown follow-up hospital.
- **FU Phys** – The person defined as the Last Follow-up Physician in the patient set. The Last FUP Physician filter can be used to search for specific values of this field.
- **Cutoff DT** – The DOLC Cutoff date specified in the *Identify Patients for AFUP* system task. If a patient set met the criteria in multiple executions of the task, the value shown is the DOLC Cutoff specified in the most recent execution of the task.
- **Created DT** – The date that the Identify Patients for AFUP system task was executed. If a patient set met the criteria in multiple executions of the task, the most recent value will be shown.
- **Latest Comm** – The most recent communication group to which this patient set was assigned. Click the Communication ID to view or enter data received in response to the communication.

You may filter the list by any fields shown in the data columns. The fields listed below are available as filters, but not shown in AFUP Manager data columns.

- **Comm ID** – To search for a patient set who was assigned to a particular communication group, enter the Communication ID into the Comm ID(s) filter. A patient set may be included in multiple communication groups. The most recent is displayed in the Latest Comm data column. The Comm ID filter searches all communication groups to which the patient set was assigned.

- **Open Communication** - If you wish to exclude AFUPs that are already assigned to a processing group, set the Open Communication filter to No Open Communications. A communication is assigned when an AFUP is 'sent', therefore, use this to filter to create a list of AFUPs that have not been sent.
- **Date of Last Contact** – The date of last contact field in the patient set.
- The following filters are based on CTC fields. A patient set will be included in the filtered list if there is at least one CTC that matches all of the criteria defined by these filters. You may specify ranges of values for the site, histology, age at dx, and year of dx filters.
 - **Reportability** – Use this filter to search for patient sets with a CTC that is reportable to SEER or local agencies.
 - **Site**
 - **Histology**
 - **Behavior**
 - **Age at DX**
 - **Year of DX**
- **Region** - Use the Region filter to search for AFUPs based on the patient set's value for region. This filter is only displayed if your registry supports multiple regions.
- **Admitting Facility** – Use this filter to limit the list to patient sets with an admission to a particular facility.

Assigning Patient Sets to a Communication Group

Requires system permission: *afup_manager*

To assign a Communication ID to a set of Patient Sets:

1. Select **Manage > Active Follow-up**.
2. Enter search criteria in the filters or select a saved search to select patient sets that you will assign to a single Communication Group. Select patient sets that will be included in the same mailing or list. Instructions for using filters are provided in *Chapter 3: Using SEER*DMS*. It is strongly recommended that you save standard filter settings for managing Active Follow-up. One saved filter for each type of communication group should be created.
3. Select the Patient Sets:
 - a. To select all Patient Sets on all pages of the filtered AFUP Manager, select **Actions -> Send**.
 - b. To manually select Patient Sets on the current page, use one of the following methods:
 - i. Check the box to the left of each AFUP ID. You can only select Patient Sets on the same page with this method.
 - ii. To select all Patient Sets displayed on the current page, check the box on the top left of the page, adjacent to the **AFUP ID** column heading. If you would like to exclude a Patient Set, click the checkbox to de-select it.
 - iii. Select **Actions -> Send**.
4. Provide the information that your external report requires to generate the mailing, forms, or listing to obtain follow-up data for the selected patients.
 - a. Use the **Communication Type** field to set the *RECIPIENT_TYPE* field in the communication table. Consult the documentation for your report to determine which value should be used. For example:

- i. If the report generates a mailing addressed to a single facility or physician, set **Communication Type** to *Facility/Physician*. Enter a value for physician, facility, or both.
 - ii. If the report uses physician or facility information stored in the Patient Sets but requires a default value for either field, set **Communication Type** to *Facility/Physician*. Enter a value for physician, facility, or both. The report would use this information if the field(s) were missing for a patient.
 - iii. If the report generates a mailing addressed to the patients or only uses data within each Patient Set, select *Patient Communication*.
- b. Enter a unique **Report ID** that identifies the external report for this communication. (The current version of SEER*DMS does not support internal AFUP reports.)
5. Click **OK**.
6. SEER*DMS will create a new communication entry. The new Communication ID will be displayed at the top of the screen and an AFUP Report Request will be sent to you via email. Use the information in the email to generate the external report or forward the report request to the appropriate person at your registry.

Active Follow-up Reports

Registry staff must create external reports that generate mailings, forms, and listings related to the registry's active follow-up procedures. Each report should accept a Communication ID as a parameter. The Communication ID defines the cohort of patients for the report and provides other information such as recipient type, facility (if applicable), and physician (if applicable). Samples of SQL and detailed descriptions of the database tables and fields relevant to AFUP reports are provided on the SEER*DMS portal. The samples include queries that select demographic patient set fields as well as queries that select CTC-level data fields.





Updating Follow-up Data

Requires system permission: *pat_edit* or *pat_edit_demographics* or *afup_manager*

A patient's AFUP status will automatically be set to *closed* if the patient's vital status is changed from alive to dead; or the date of last contact is set to a date that is more recent than the AFUP DOLC Cutoff. The AFUP status will be modified whether the patient's data were updated via ad hoc editing, during a manual worklist task, in an automated passive follow-up task, or via tools specifically designed for active follow-up. Instructions for modifying data via ad hoc editing and worklist tasks are provided in other chapters of this manual. The following describes methods for updating follow-up data using AFUP features. These tools provide a convenient method to update the fields and track the effectiveness of registry active follow-up procedures.

To update patient follow-up data:

1. If you are entering information for a number of patients and the information was received in response to a particular Communication, please refer to the *Updating Follow-up Information for a Batch of Patient Sets* section of this chapter. In batch mode, you will be able to update date of last contact and vital status for a number of patients. If you need to modify other fields or are entering information that is unrelated to a communication, continue with step 2.
2. You may access the Active Follow-up page for a patient set via the Patient Set Editor or the AFUP Manager:
 - a. To access the Active Follow-up page of a Patient Set via the Patient Set editor:



- i. Open the patient set by entering the Patient Set ID in the Lookup box on the SEER*DMS toolbar (or you may use any of the search features described in *Chapter 20: Searching for Records and Patients*).
 - ii. Select **Active Follow-up** from the patient set menu. The status of the most recent AFUP is listed at the top. A history of the communications used to obtain follow-up information is displayed in the Communication History section of the page.
 - iii. If the patient set's AFUP status is open and you wish to view or modify AFUP information, click **Edit**.
 - b. To access the Active Follow-up page via the AFUP Manager:
 - i. Use the filters to find the Patient Set.
 - ii. Click the link in the **AFUP ID** column for the Patient Set.
3. If you are entering information received as the result of a specific communication effort:
 - a. Select the communication's ID in the **COM-ID** drop-down list. Fields related to that communication will automatically be set in the Follow-up Info section of the page.
 - b. Set the **Status** of the communication to *Success*. The manager of follow-up will use this information to evaluate the effectiveness of the registry's active follow-up procedures.
 - c. **Date Received** will automatically be to today's date. You may override this value if the data arrived at the registry on a previous date. Click the Calendar icon  to modify the date, if necessary.
 - d. You may enter a comment related to the communication, if you wish.
4. Changes that you save on this form will be used to update fields in the Patient Set, as described below. You may update the following fields:
 - a. **DOLC** – The Patient Set's current value for date of last contact is shown. You may enter a more recent date. If you enter a date that is earlier than the current value, the Patient Set's field will not be changed.
 - b. **VS** – The Patient Set's current value for vital status is shown. If your follow-up information indicates a change in vital status, enter the new value. A change will be made in the Patient Set if the date of last contact is the same or later than the current date in the Patient Set.
 - c. **Follow-up Source Central** – To specify the source of the follow-up data, enter the appropriate value in the **FUP Src Cntl** field. You may either enter a code or use the  to select a code.
 - d. **Do Not Contact** – If your information indicates a new value for the Do Not Contact field, you may enter it here.
 - e. **FU Phys** – If your information indicates a new follow-up physician, you may enter the physician's ID or use the  lookup to select an ID.
 - f. **FU Hosp** – If your information indicates a new follow-up hospital, you may enter its facility ID or use the  lookup to select an ID.
5. Click **OK**. Changes to fields on the AFUP form will only be accepted if the date of last contact is the same or later than the current value in the Patient Set.

Updating Follow-up Data for a Batch of Patient Sets

Requires system permission: *afup_manager* and (*pat_edit* or *pat_edit_demographics*)

If you receive a response to a Communication that includes data for multiple patients, you may use the AFUP Manager to open the Communication Response page and enter data for a batch of patient sets. This feature provides a convenient method to update the date of last contact and vital status in a batch data entry mode. It also allows you to indicate whether the communication was successful for each patient or if it failed to yield information for one or more patients. If you wish to enter additional data for a patient, you may prefer to update a single patient's data on a screen that provides more fields. See the *Updating Follow-up Data* section of this chapter for instructions.

To update the follow-up data for a batch of Patient Sets:

1. Select **Manage > Active Follow-up**.
2. Use the **Comm ID** filter to search for the communication.
3. Click the ID in the **Latest Comm** data column. SEER*DMS will list all Patient Sets associated with the communication. The following patient identifiers are shown: Patient Set ID, Social Security Number, and patient name. These are followed by entry fields for date of last contact, vital status, and the communication status (success or failure), and the date that the follow-up data were received.
4. Enter information related to the communication:
 - a. **Received Dt** is automatically set to today's date. You may override this value if the data arrived at the registry on a previous date. Click the Calendar icon  to modify the date, if necessary.
 - b. Enter a value in the **FUP Src Central** field. You may either enter a code or use the  lookup to select a code.
5. If there are 20 or fewer, all Patient Sets will be listed. If there are more than 20, a search box will allow you to search for each Patient Set. You may search by Patient Set ID, Social Security Number, or patient name. Once you enter three or more characters in the search box, the system will begin to display matches. Continue typing until the appropriate Patient Set is displayed. Once the Patient Set is highlighted, you may click or press Enter to add it to the data entry form.
6. Enter data for each Patient Set. Changes that you save on this form will be used to update the Patient Set data fields, as described below. The fields for a patient will be disabled if their AFUP status was set to *Closed* during editing or via automated passive follow-up tasks; they will also be disabled if the status of this communication was modified for the patient. The patients are listed in alphabetical order. Find the correct patient in the list based on patient name, Patient Set ID, Social Security Number. You may update the following fields:
 - a. **DOLC** – The Patient Set's current value for date of last contact is shown. You may enter a more recent date. If you enter a date that is earlier than the current value, the Patient Set's field will not be changed. This form will not allow you to enter a value that is earlier than the current value.
 - b. **VS** – The current value for vital status is shown. If your follow-up information indicates a change in vital status, enter the new value. A change will be made in the Patient Set if the date of last contact is the same or later than the current date in the Patient Set.
 - c. **Status** – If this communication successfully yielded information related to this patient, set Status to *Success*. This information will be used by a manager to evaluate the effectiveness of follow-up procedures.

- d. **Received Dt** will automatically be to today's date for all patients whose data are updated.
7. Save your changes:
 - a. If you would like to continue editing after saving, click the **Save** button at the bottom of the Review Changes page.
 - b. If you would like to exit the page, click **Save & Exit**.

Modifying AFUP Status for a Batch of Patient Sets

Requires system permission: *afup_manager*

You may set the AFUP statuses of a batch of patient sets to *closed*. You may want to use this feature to clear the AFUP Manager prior to running the system task to identify patients for the next round of active follow-up. In some registries, the system task's criteria include patients who are not routinely followed by the registry. For example, it may be registry policy that patients who only have non-reportable cancers are not followed on a regular basis. These may be flagged as requiring active follow-up because there are times when they are actively followed. If this is not one of those times, follow the instructions below to select those patients and close their AFUPs.

To set AFUP status to closed for a set of Patient Sets:

1. Select **Manage > Active Follow-up**.
2. Enter search criteria in the filters to limit the list as needed.
3. Select the Patient Sets:
 - a. To select all Patient Sets on all pages of the filtered AFUP Manager, select **Actions -> Modify**.
 - b. To select Patient Sets on the current page, use one of the following methods:
 - i. To select specific Patient Sets, check the box to the left of each AFUP ID. You can only select Patient Sets on the same page with this method.
 - ii. To select all Patient Sets displayed on the current page, check the box on the top left of the page, adjacent to the **AFUP ID** column heading. If you would like to exclude a Patient Set, click the checkbox to de-select it.
 - iii. Select **Actions -> Modify**.
4. The number of Patient Sets will be displayed at the top of the page. Select the Action to be applied to these Patient Sets:
 - a. If you wish to clear these Patient Sets from the AFUP Manager, select *Close AFUP & Communications*. The Patient Sets' AFUP status flag will be set to *closed* and all unresolved AFUP communications for these Patient Sets will be failed.
 - b. If you want to fail all unresolved communications for these Patient Sets, select *Close Communications Only*.
5. Click **OK**.