

## **Application for Cancer Registry Surveillance Data Arkansas Department of Health**

A data request proposal must be submitted to the Arkansas Department of Health Science Advisory Committee, and the Arkansas State Board of Health for review and approval. The following will be considered in their review of the proposal:

### **Applicant Information**

- Date of Request
- Name of Requestor
- Title
- Organization
- Mailing Address
- Telephone Number
- Fax Number
- Email Address
- Contact Person (if different from Requestor)

### **Project Information**

- Provide a brief description of the proposed project.
- Will the data be used for a legitimate public purpose?
- Has an Institutional Review Board approved the study?
- Has the researcher provided documentation that the confidentiality of the data will be protected when in his or her possession, a list of persons having access to the data and a description of all safeguards to protect the data from unauthorized access?
- Has the researcher provided documentation that the data will not be re-released in either electronic files or paper copy?
- Are individual record data needed for the purposes of the study, or would aggregate data meet the researcher's needs?
- Does the researcher need the level of detail requested? For example, does the project really require date of birth, or would age suffice?
- If individual identifiers are not included in the data files, has the researcher agreed that identification of individuals will not be attempted?
- If applicable, has the researcher provided assurances that the data will not be linked with other data sets? Such linkages could easily identify individuals by name.
- Has the researcher provided assurances that no data will be published or released in any form if a particular individual is identifiable? This must include aggregate data with cell sizes so small that the identity of an individual could be determined.

- Are the data subject to HIPAA restrictions?
- Is the researcher willing to provide a report of findings at the completion of the study?
- Has the researcher given assurances that all data files will be returned to the office of origin or destroyed at the conclusion of the project?

### **Costs of Acquiring Data**

- Costs associated with de-identified case listings or data record linkages will be determined on a case-by-case basis. Please contact the Arkansas Central Cancer Registry for more information.

### **ACCR Data Dictionary**

- Data standards and data dictionary from the North American Association of Central Cancer Registries (NAACCR).

If you plan to publish any reports or scientific papers, the Arkansas Department of Health/Arkansas Central Cancer Registry must be cited and given credit for the data:

“The author(s) acknowledge that the data used in this report were provided by the Arkansas Department of Health, Arkansas Central Cancer Registry, 4815 W. Markham, Little Rock, AR 72205. The Arkansas Central Cancer Registry is fully funded by a grant from the National Program of Cancer Registries, Centers for Disease Control and Prevention (CDC).”

If any of the information specified above is not provided, your request may not be fulfilled. We will try to present the information to you by the fulfillment date requested; however, other factors may determine or hinder the completion of your request. We cannot guarantee that you will receive the information requested.

Please submit the request to:

Abby Holt, MPH, MLIS  
Director, Arkansas Central Cancer Registry  
Arkansas Department of Health  
4815 W. Markham Street, #7  
Little Rock, AR 72205  
[Abby.Holt@arkansas.gov](mailto:Abby.Holt@arkansas.gov)