



PUNJAB CANCER REGISTRY
DATA COLLECTION FORM

HISTOLOGY NO. _____ HISTOLOGY DATE: ____/____/____

CENTER I.D. NO. _____	PATIENT I.D NUMBER: _____
← (To be allocated by †PCR Central Office) →	

PATIENT'S NAME _____
FIRST MIDDLE LAST

SEX: MALE FEMALE NEUTER (MUKHANNAS) FATHER'S NAME _____

BIRTH DATE _____ AGE _____

N.I.C. NUMBER (FOR CHILDREN ≤ 18 YEARS, ID OF MOTHER/FATHER)

PERMANENT ADDRESS (HOUSE AND STREET NO.) _____

CITY/TOWN _____ POSTAL CODE _____

HOME/CELL TELEPHONE WITH AREA CODE _____

↓ARE YOU A RESIDENT OF (Please tick one): LAHORE SHEIKHUPURA KASUR
NANKANA SAHIB FAISALABAD GUJRANWALA HAFIZABAD OTHER

کیا آپ لاہور، قصور، شیخوپورہ، نکانہ صاحب، فیصل آباد، گوجرانوالہ، حافظ آباد یا کسی اور ضلع کے رہائشی ہیں؟

DURATION OF STAY IN THE ABOVE MENTIONED DISTRICT (months/years): _____

↓HAVE YOU COME TO THE ABOVE-MENTIONED DISTRICT FOR TREATMENT/DIAGNOSIS ONLY?
(YES/NO)

کیا آپ اوپر لکھے گئے ضلع میں تشخیص یا علاج کے لئے آئے ہیں؟

Procedure/surgery done at (hospital).....
Name of surgeon.....
Cytology/histopathology done at (lab.)

PRIMARY SITE/TYPE _____ DATE OF DIAGNOSIS _____

SITE OF BIOPSY _____ MORPHOLOGY/DIAGNOSIS _____

LATERALITY (where applicable) _____ METASTATIC _____ (YES/NO) BEHAVIOR _____

GRADE _____ STAGE (when available) _____

*MOST VALID BASIS OF DIAGNOSIS _____

*0: Death Certificate Only; 1: Clinical; 2: Clinical investigation; 4: Specific tumor markers; 5: Cytology; 6: Histology of a metastasis; 7: Histology of primary tumor; and 9: Unknown.

FOR †PCR CENTRAL OFFICE USE ONLY	
STATUS AT LAST FOLLOW-UP _____	
DATE OF DEATH _____	PLACE OF DEATH _____

†PCR is an acronym for the 'Punjab Cancer Registry'.