

Accrual Data Elements with CTRP-Accepted Values for Complete Trials - Include v4.5

Accrual Data Element	Definition	Required /Conditional		Accepted Values
		Subject	Partial Subject	
Study Subject ID	Enter the unique Patient ID as per the lead organization or the study site where the subject is registered.	R	R	Any numeric or alphanumeric value
Study Subject Birth Date (MM/YYYY)	Enter the subject's month and year of birth in the format MM/YYYY .	R		Accrual application format: MM/YYYY REST Services format: YYYY-MM-DD Batch Upload format: YYYYMM
Study Subject Gender	Select the subject's biological sex. If biological sex information is not available, select Unknown .	R		Male Female Unspecified Undifferentiated Unknown
Study Subject Race	Select one or more values for race. To select multiple races, select one race, and then press and hold the CTRL/CMD key as you select the other(s).	R		American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander Not Reported Unknown White
Study Subject Ethnicity	Select a value for ethnicity.	R		Hispanic or Latino Not Hispanic or Latino Not Reported Unknown
Study Subject Country	Select the study subject's country of residence.	R		
Study Subject Zip Code	Enter the study subject's zip code.	C	C	Required if the Study Subject Country is the US, US territories and outlying islands. Must be in a 5 digit or 9 digit (DDDDD-DDDD) format
Registration Date	Enter the date that the subject was registered on the study.	R	R	User Interface format: MM/DD/YYYY REST format: YYYY-MM-DD Batch Upload format: YYYYMMDD
Disease	Click Look Up , and follow the instructions in Selecting Diseases for Study Subject Records .	R		Partial Subject: Disease is <u>not required</u> . ICD-0-3: If disease is reported, both Site Name and Site Code are required. Study Subject: Disease Code is required for all studies, even Prevention studies. ICD-0-3: Site Name and Site Code are required.
Site (for ICD-O-3 Disease Codes)	Click Look Up , and follow the instructions in Selecting Sites for Study Subject Records Using ICD-O-3 Codes . Site Code information is available at: https://seer.cancer.gov/icd-o-3/	C		Partial Subject: Disease is <u>not required</u> . ICD-0-3: If disease is reported, both Site Name and Site Code are required. Study Subject: Disease Code is required for all studies, even Prevention studies. ICD-0-3: Site Name and Site Code are required.
Participating Site	Select the appropriate site from the drop-down list.	R	R	

Study Subject method of payment	Select the appropriate payment method.			Private Insurance Medicare Medicare and Private Insurance Medicaid Medicaid and Medicare Military or Veterans Sponsored, NOS Military Sponsored (Including CHAMPUS & TRICARE) Veterans Sponsored Self-Pay (No Insurance) No Means of Payment (No Insurance) Managed Care State Supplemental Health Insurance Other Unknown
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