

NAACCR Webinar Recordings

The Missouri Cancer Registry and Research Center (MCR-ARC) is pleased to provide access to recorded versions of these webinars at no cost to registrars who abstract cases reported directly to MCR.

To view :

1. Request access to recorded versions of the NAACCR Webinars series by completing and returning the last page of this form to MCR-ARC.

Please note that in order for MCR-ARC to release access information, a signature is required and a list of all participants from your facility. The form can be faxed or emailed to MCR-ARC, attention Shari Ackerman at 573-884-9655.

2. Once we have received your form you will be given a password to access the MCR-ARC website containing the link to the NAACCR Webinar. Please note that you are free to distribute to others at your facility, but not to anyone outside of the state of Missouri.

The link will give you access to the recorded webinar, quizzes, case scenarios and questions and answers submitted during the webinar.

3. In order to receive your CE certificate, NAACCR requires you to complete a quiz. The link to the quiz will be provided during the webinar.

You will need a computer, an internet connection, and speakers or headphones. You may need a projector depending on the number of persons viewing the webinar. Please keep in mind that each session is three hours long, but the recorded version can be stopped at any point, allowing the webinar to be viewed at your convenience. Breaks can also be scheduled, or the recording can be stopped to discuss important points.

After successfully completing the quiz a CE certificate will popup that you can print. You must watch the webinar in order to receive the certificate password which is an answer to one of the quiz questions. You cannot receive the certificate if you do not complete the quiz.

Thank you for your interest in the webinar recordings — we hope you find them to be educationally rewarding as well as enjoyable.

NAACCR Cancer Registry and Surveillance Webinars

MCR-ARC Request Form

Requester Information

Name: _____

Participants: _____

Institution: _____

Address: _____

Phone: _____ E-mail: _____

Signature: _____

Date: _____

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Completed requests for webinars should be sent to:

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