



**NSW Oncology Group
Head & Neck
Minimum Data Set Extension
Data Dictionary**

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1. Document Version Control

Version	Date Issued	Change Description
0.1	20/02/2007	1 st Draft - Developed by Ms Christine Erratt based on work by Head and Neck NSWOG.
0.2	12/04/2007	2 nd Draft – Revisions provided by Ms Sandra Farrugia, Dr Christopher Wratten and Dr Gary Morgan.
0.3	15/05/2007	3 rd Draft – Revisions provided by Ms Sandra Farrugia and Head & Neck NSWOG. Term Systemic Therapy, Planned Radiation Type changed to Radiation Therapy Intent & Radiation Therapy Received, Planned v Received, and Recurrence.

2. Introduction

Population-based cancer registries in each Australian state and jurisdiction provide comprehensive information on cancer incidence. By matching, verifying and registering each case, incidence of each cancer type can be mapped by area of residence, age, sex and country of birth. Death notifications (and cause of death) are also matched and provide the definitive mortality and survival rates for cancer in NSW.

To enhance this epidemiological information, *clinical cancer registries* are designed to add the dimensions of stage, treatment and quality of care, allowing analyses of patterns of cancer care against best-practice guidelines. The Institute is funding Area-based clinical cancer registries in six Area Health Services.

By describing cancer stage and actual surgical, radiation and chemotherapeutic interventions, Areas and tumour streams can monitor access and quality of care. However, specific quality of care indicators for each cancer type requires collection of a more specific subset of data items. For instance, for breast cancer the receptor status (oestrogen, progesterone and HER2), together with disease stage dictates the appropriate drug treatment options. Other data items will support better monitoring of supportive care or enhance the prognostic value of the core dataset.

The NSW Oncology Group (NSWOG) was established by the Cancer Institute NSW and comprises cancer specialist doctors and nurses, consumers and patients. The aim of NSWOG includes the identification of best practice care guidelines, and of the data needed to monitor and improve cancer outcomes in NSW. NSWOGs also promote sub specialised training and education for each type of cancer, and clinical trials.

The NSW Minimum Dataset for Clinical Cancer Registration is being collected in many public hospitals in NSW. The *core cancer dataset* describes cancer type, stage, treatment and quality of care for each cancer patient. Concurrently, NSW Oncology Group is working to identify succinct *dataset extensions* as statewide standards, to complement the core dataset with additional measures and indicators specific to tumour streams.

Specifically this data dictionary will have relevance to:

- Head & Neck Cancer Clinicians
- Clinical Cancer Registry Staff
- Analysts of Clinical Cancer Registry data

Only data elements specific to head and neck cancers are presented in this data dictionary. Additional data elements for all cancers are covered by the NSW Cancer Registry Data Dictionary and the NSW Clinical Cancer Data Dictionary.

The review of the data dictionary will be conducted after the collection has been piloted for a period of time so that the decisions concerning changes to the dataset can be based on feasibility, usability and experience. It is intended that this data dictionary defines the disease-specific dataset and will be used by a variety of NSW Clinical Cancer Registry stakeholders.

The Data Set Specification, Cancer (Clinical): National Health Data Dictionary Version 12 Supplement published by the Australian Institute of Health and Welfare (AIHW) and the NSW Clinical Cancer Data Collection for Outcomes and Quality Data Dictionary published by the NSW Health Department were both reviewed prior to producing this publication

This document was written by Ms Christine Erratt based on the work by Head & Neck NSW Oncology Group (NSWOG). Ms Sandra Farrugia and Dr Christopher Wratten, in particular, provided detailed support and review of some items.

3. Head & Neck Cancers

The table below shows the Primary Site of Cancer ICD10AM 5th Edition codes that trigger the reporting of Head & Neck Cancer Minimum Data Set.

C00.0	Malignant neoplasm of external upper lip
C00.1	Malignant neoplasm of external lower lip
C00.2	Malignant neoplasm of external lip, unspecified
C00.3	Malignant neoplasm of upper lip, inner aspect
C00.4	Malignant neoplasm of lower lip, inner aspect
C00.5	Malignant neoplasm of lip, unspecified, inner aspect
C00.6	Malignant neoplasm of commissure of lip
C00.8	Malignant neoplasm of overlapping lesion of lip
C00.9	Malignant neoplasm of lip, unspecified
C01	Malignant neoplasm of base of tongue
C02.0	Malignant neoplasm of dorsal surface of tongue
C02.1	Malignant neoplasm of border of tongue
C02.2	Malignant neoplasm of ventral surface of tongue
C02.3	Malignant neoplasm of anterior two-thirds of tongue, part unspecified
C02.4	Malignant neoplasm of lingual tonsil
C02.8	Malignant neoplasm of overlapping lesion of tongue
C02.9	Malignant neoplasm of tongue, unspecified
C03.0	Malignant neoplasm of upper gum
C03.1	Malignant neoplasm of lower gum
C03.9	Malignant neoplasm of gum, unspecified
C04.0	Malignant neoplasm of anterior floor of mouth
C04.1	Malignant neoplasm of lateral floor of mouth
C04.8	Overlapping lesion of floor of mouth
C04.9	Malignant neoplasm of floor of mouth, unspecified
C05.0	Malignant neoplasm of hard palate
C05.1	Malignant neoplasm of soft palate
C05.2	Malignant neoplasm of uvula
C05.8	Overlapping lesion of palate
C05.9	Malignant neoplasm of palate, unspecified
C06.0	Malignant neoplasm of cheek mucosa
C06.1	Malignant neoplasm of vestibule of mouth
C06.2	Malignant neoplasm of retromolar area
C06.8	Overlapping lesion of other and unspecified parts of mouth
C06.9	Malignant neoplasm of mouth, unspecified
C07	Malignant neoplasm of parotid gland
C08.0	Malignant neoplasm of submandibular gland
C08.1	Malignant neoplasm of sublingual gland
C08.8	Overlapping lesion of major salivary glands
C08.9	Malignant neoplasm of major salivary gland, unspecified
C09.0	Malignant neoplasm of tonsillar fossa
C09.1	Malignant neoplasm of tonsillar pillar (anterior)(posterior)
C09.8	Overlapping lesion of tonsil
C09.9	Malignant neoplasm of tonsil, unspecified
C10.0	Malignant neoplasm of vallecula
C10.1	Malignant neoplasm of anterior surface of epiglottis
C10.2	Malignant neoplasm of lateral wall of oropharynx

C10.3 Malignant neoplasm of posterior wall of oropharynx
 C10.4 Malignant neoplasm of branchial cleft
 C10.8 Overlapping lesion of oropharynx
 C10.9 Malignant neoplasm of oropharynx, unspecified
 C11.0 Malignant neoplasm of superior wall of nasopharynx
 C11.1 Malignant neoplasm of posterior wall of nasopharynx
 C11.2 Malignant neoplasm of lateral wall of nasopharynx
 C11.3 Malignant neoplasm of anterior wall of nasopharynx
 C11.8 Overlapping lesion of nasopharynx
 C11.9 Malignant neoplasm of nasopharynx, unspecified
 C12 Malignant neoplasm of pyriform sinus
 C13 Malignant neoplasm of hypopharynx
 C13.0 Malignant neoplasm of postcricoid region
 C13.1 Malignant neoplasm of aryepiglottic fold, hypopharyngeal aspect
 C13.2 Malignant neoplasm of posterior wall of hypopharynx
 C13.8 Overlapping lesion of hypopharynx
 C13.9 Malignant neoplasm of hypopharynx, unspecified
 C14.0 Malignant neoplasm of pharynx, unspecified
 C14.2 Malignant neoplasm of waldeyer ring
 C14.8 Overlapping lesion of lip, oral cavity and pharynx
 C30.0 Malignant neoplasm of nasal cavity
 C30.1 Malignant neoplasm of middle ear
 C31.0 Malignant neoplasm of maxillary sinus
 C31.1 Malignant neoplasm of ethmoidal sinus
 C31.2 Malignant neoplasm of frontal sinus
 C31.3 Malignant neoplasm of sphenoidal sinus
 C31.8 Overlapping lesion of accessory sinuses
 C31.9 Malignant neoplasm of accessory sinus, unspecified
 C32.0 Malignant neoplasm of glottis
 C32.1 Malignant neoplasm of supraglottis
 C32.2 Malignant neoplasm of subglottis
 C32.3 Malignant neoplasm of laryngeal cartilage
 C32.8 Overlapping lesion of larynx
 C32.9 Malignant neoplasm of larynx, unspecified
 C41.01 Malignant neoplasm of craniofacial bones
 C41.02 Malignant neoplasm of maxillofacial bones
 C41.1 Malignant neoplasm of mandible
 C49.0 Malignant neoplasm of connective and soft tissue of head, face and neck
 C73 Malignant neoplasm of thyroid gland
 C75.0 Malignant neoplasm of parathyroid gland
 C76.0 Malignant neoplasm of head, face and neck

4. Abbreviations

3D	Three Dimensional
AIHW	Australian Institute of Health and Welfare
CINSW	Cancer Institute New South Wales
Gy	Gray
HDD	Health Data Dictionary
ICD-10	International Statistical Classification and Related Health Problems, Tenth Revision
ICRP	International Council for Radiation Protection
IORT	Intraoperative radiation therapy
IMRT	Intensity modulated radiation treatment
MDS	Minimum data set
n/a	Not applicable
NHDD	National Health Data Dictionary
NSWOG	New South Wales Oncology Group

5. Data Dictionary Format Guide

Each data item is described in terms of its defining characteristics and its physical representation. In addition to this, certain administrative information is provided to inform users of the sources and the currency of the version of the individual item. The components included under these section headings are based on the NHDD standard, as described below:

Heading	Description
Defining Attributes	
Definition	A statement that expresses the essential nature of a data element and its differentiation from all other data elements.
Coverage	A description of the circumstances under which the data item should be collected and reported.
Guide for Use	
Data Domain	The set of possible values for the data item. This may take the form of a code set, or a description of the possible values. Domain values are only specified where size of the code set is small enough to be reasonably reproduced in the document. In other instances the domain may be indicated by reference to a source document.
Domain Definitions	The definitions of each domain category within the classification, where such definitions are warranted – that is more information that the domain descriptor is required to fully understand what is captured with the domain value.
Clarifying Points	These are comments designed to assist in further defining aspects of the data domain.
Collection Methods	This provides important comments concerning the actual capture of data for the particular data element.
Screen Prompts	This is suggested terminology to use in computer applications.
Validation Rules	These are included to assist in reducing input error. Where validation rules are known to exist, they have been included to assist with the programming.
Justification	The reason for collecting this data element.
Representation	
Data Element Type	<p>There are four types of data elements, and this describes which of the element is. Definitions of each type are provided below.</p> <p><i>Data Concept</i> - a concept which can be represented in the form of a data element, described independently of any particular representation. For example, hospital 'admission' is a process, which does not have any particular representation of its own, except through data elements such as 'Date of Admission', 'mode of admission' etc.</p> <p><i>Data Element</i> – a unit of data for which the definition, identification, representation and permissible values are specified by means of a set of attributes.</p>

Heading	Description
	<p><i>Derived Data Element</i> – a data element whose values are derived by calculation from the values of other data elements. For example the data element 'length of stay' is derived by calculating the number of days from the 'Date of Admission' to the 'Date of Separation' less the number of 'total leave days'.</p> <p><i>Composite Data Element</i> – a data element whose values represent the grouping of the values of other data elements in a specified order.</p>
Data Type	The type of symbol or character, or other designation used to represent the data element. For example numeric, alphanumeric, alphabetic or integer.
Form	Describes whether the valid values for the data item take the form of a code set, free text. If the form is described as "Code" the relevant code set or sets will be specified in the Domain section.
Minimum Size	The minimum number of characters allowable to represent the data element.
Maximum Size	The maximum number of characters allowable to represent the data element.
Layout	A generic example of what the data element should look like in the unit record. For example, dates should be represented in the format of DDMMYYYY where DD represents, the day, MM represents the month, and YYYY represents the four-digit numeric for the year. "N" is used to represent numeric values and "A" is used to represent alphabetic and alphanumeric values (the Data Type indicates whether it is alphabetic or alphanumeric).
Administrative Information	
Version	This is the version number of the individual data element as it exists in the New South Wales Health Data Dictionary only. The version number may differ from the version number of the NSW HDD publication, as data elements may be revised independently of the periodic review of the document.
Effective Date	The date from which this version of the data element is to be used for reporting.
References	
Related Elements	Data elements that have some direct relationship with the data element being described.
References	Documents listed here have been used as references when designing the specified item. The item as it is presented in the NSW HDD is not necessarily identical to the item in the source document. The name of the organisation(s) that developed the source document(s) or provided advice on the data item.

Radiation Therapy Intent

Defining Attributes

Definition: The type of radiation planned in the initial treatment of the cancer.

Coverage: This item should be reported for:

All head & neck cancers

Guide for Use

Data Domain:

Code	Description
0	Nil
1	Definitive
2	Palliative
9	Unknown

Domain Definitions:

Code	Definition
0	Nil: There is no intent of radiation therapy treatment for the patient.
1	Definitive: The radiation therapy is received for a curative intent.
2	Palliative: The radiation therapy is received for symptom control only. Other benefits of the treatment are considered secondary contributions to the patient's quality of life.
9	Unknown: The intention of radiation therapy was not stated or unknown.

Clarifying Points: To select the intention of radiation therapy for the patient.

Collection Methods: This information should be sought from the patient's medical record, referral letter or attending medical clinician.

Validation Rules: Must = 0, 1, 2 or 9

Justification: This information is collected for the purpose of:

- Surgical Treatment
- Radiation therapy and systemic therapy agent treatment
- Analyses of radiation treatment intent and received radiation treatment

Representation

Data Element Type: Data Element

Data Type: Alpha-numeric

Form: Code

Minimum Size: 1

Maximum Size: 1

Layout: N

Administrative Information

Version: 1

Effective date: 1 July 2007

Changes:

Related Information

Related Data:

- Radiation and Surgery Therapy Sequence
- Radiation Beam Type
- Planned Radiation Treatment Dose
- Planned Radiation Fractions

References: Australian Institute of Health and Welfare (2004), *Data Set Specification Cancer (Clinical) National Health Data Dictionary version 12 Supplement*, Canberra: AIHW.

Developed by the NSW Head & Neck Oncology Group (NSWOG Head & Neck). July 2007.

NEW DATA ITEM

Radiation and Surgery Therapy Sequence

Defining Attributes

Definition: When the patient received the radiation therapy treatment in relation to surgery.

Coverage: This item should be reported for:

All head & neck cancers

Guide for Use

Data Domain:

Code	Description
0	No radiation – only surgery
1	No surgery – only radiation
2	Pre-operative radiation (Neo-adjuvant radiotherapy)
3	Post-operative radiation (Adjuvant radiotherapy)
4	Intraoperative
9	Unknown

Domain Definitions:

Code	Definition
0	No Radiation: there is any intent of radiation therapy treatment for the patient.
1	No surgery: only radiation
2	Pre-operative radiation (Neo-adjuvant radiotherapy)
3	Post-operative radiation (Adjuvant radiotherapy)

4	Intraoperative: external radiation therapy during surgery
9	Unknown: It is not known whether the patient had received any radiation therapy treatment OR not known whether the patient received radiation therapy pre-operatively or post-operatively.

Clarifying Points: To select the sequence of treatment that was received by the patient. Intraoperative radiation therapy (IORT) is usually used for melanoma's or abdominal cancers.

Collection Methods: This information should be sought from the patient's medical record or attending medical clinician.

Validation Rules: Must = 0, 1, 2, 3, 4 or 9

Justification: This information is collected for the purpose of:

- Survival and treatment analyses

Representation

Data Element Type: Data Element
Data Type: Alpha-numeric
Form: Code
Minimum Size: 1
Maximum Size: 1
Layout: N

Administrative Information

Version: 1
Effective date: 1 July 2007
Changes:

Related Information

Related Data:

- Radiation Therapy Intent
- Received Radiation Treatment Dose
- Received Radiation Fractions

References:

Australian Institute of Health and Welfare (2004), *Data Set Specification Cancer (Clinical) National Health Data Dictionary version 12 Supplement*, Canberra: AIHW.

Developed by the NSW Head & Neck Oncology Group (NSWOG Head & Neck). July 2007.

NEW DATA ITEM

Radiation Beam Type

Defining Attributes

Definition: The type of radiation beam used in initial treatment of the cancer.

Coverage: This item should be reported for:

All head & neck cancers

Guide for Use

Data Domain:

Code	Description
0	No radiotherapy treatment was given
1 2 3	External Beam Radiation <ul style="list-style-type: none"> • Conventional • IMRT • 3D Conformal
4	Brachytherapy (radioactive implants)
5	Unsealed Radioisotopes
9	Unknown

Domain Definitions:

Code	Definition
0	None: No radiation treatment was administered.
1	Conventional: a traditional radiotherapy technique using opposed electron and photon fields, including: standard opposed fields, parallel opposed fields, single field radiation and other conventional therapies including 4-field box technique

2	IMRT: Intensity modulated radiation treatment (an external beam technique).
3	3D conformal: an external beam technique using multiple, fixed portals shaped to conform to a defined target area.
4	Brachytherapy: Insertion of radioactive sources into or in proximity to the tumour.
5	Unsealed Radioisotopes:
9	Unknown: radiotherapy treatment was given but method not stated.

Clarifying Points:

Both terms, Radiotherapy or Radiation Treatment is appropriate.

If codes 1-5 or 9 are used, the amount of radiation received should also be collected.

Most external beam radiotherapy is delivered on an outpatient basis. Code 4, Brachytherapy (radioactive implants), is likely to be listed as a procedure for admitted patients.

Collection Methods:

This information should be sought from the patient's medical record or attending medical clinician.

Validation Rules:

Must = 0,1,2,3, 4, 5 or 9.

Justification:

This information is collected for the purpose of:

- survival analysis adjusted by stage at diagnosis and distribution of cancer cases by type and stage.
- Analysis of outcome by treatment type.

Representation

Data Element Type:	Data Element
Data Type:	Alpha-numeric
Form:	Code
Minimum Size:	1
Maximum Size:	1
Layout:	N

Administrative Information

Version: 1
Effective date: 1 July 2007
Changes:

Related Information

Related Data:

- Radiation Therapy Intent
- Planned Radiation Treatment Dose
- Received Radiation Treatment Dose
- Planned Radiation Fractions
- Received Radiation Fractions

References: Commission on Cancer (1998), *Standards of the Commission on Cancer Registry Operations and Data Standards (ROADS)*, Volume II.

Australian Institute of Health and Welfare (2004), *Data Set Specification Cancer (Clinical) National Health Data Dictionary version 12 Supplement*, Canberra: AIHW.

Developed by the NSW Head & Neck Oncology Group (NSWOG Head & Neck). July 2007.

NEW DATA ITEM

Planned Radiation Treatment Dose

Defining Attributes

Definition: The planned treatment dose of radiation to be delivered at initial treatment measured in Gray (Gy).

Coverage: This item should be reported for:

All head & neck cancers

Guide for Use

Data Domain:

Unit of measurement /code (Gy)	Description (Gray)
0000	No radiation treatment was planned
9998	Not applicable (eg, radioisotopes)
9999	Unknown

Domain Definitions:

Unit of measurement /code (Gy)	Definition
NNNN	No radiation treatment was planned
NNNN	Unknown: Radiation treatment was planned but the dose is unknown.

Clarifying Points:

NOTE: This does not refer to the delivered dose but to what was planned.

The ICRU50 reference dose should be recorded for photon therapy if available, otherwise a description of the planned dose at the centre of the planning target volume. The ICRU58 should be recorded for brachytherapy. The International Council for Radiation Protection (ICRP) recommends recording doses at the axis point where applicable (opposed fields, four field box, wedged pairs and so on). For maximum consistency in this field the IRCP recommendations should be followed whenever possible.

As a guide, a typical received radiation dose is up to 80 Grays per course. Doses that vary significantly from this should be investigated as to the accuracy of the data.

For multiple sites within the same course of radiation, record the highest radiation dose. Do NOT add the radiation doses together.

Collection Methods:

This information should be sought from the patient's medical record or attending medical clinician.

Validation Rules: Must be a valid number

Justification: This information is collected for the purpose of:

- Evaluate treatment methods by analysing received radiation treatment dose with planned radiation treatment dose.

Representation

Data Element Type: Data Element

Data Type: Numeric

Form: Code

Minimum Size: 2

Maximum Size: 4

Layout: NNNN

Administrative Information

Version: 1

Effective date: 1 July 2007

Changes:

Related Information

Related Data:

- Radiation Therapy Intent
- Radiation Beam Type
- Received Radiation Treatment Dose
- Planned Radiation Fractions
- Received Radiation Fractions

References:

Commission on Cancer (2004), *Facility Oncology Data Standards (FORDS)*: (Revised 2004).

Australian Institute of Health and Welfare (2004), *Data Set Specification Cancer (Clinical) National Health Data Dictionary version 12 Supplement*, Canberra: AIHW.

Developed by the NSW Head & Neck Oncology Group (NSWOG Head & Neck). July 2007.

NEW DATA ITEM

Received Radiation Treatment Dose

Defining Attributes

Definition: The received treatment dose of radiation delivered at initial treatment measured in Gray (Gy).

Coverage: This item should be reported for:

All head & neck cancers

Guide for Use

Data Domain:

Unit of measurement /code (Gy)	Description (Gray)
0000	No radiation treatment was administered
9998	Not applicable (eg, radioisotopes)
9999	Unknown

Domain Definitions:

Unit of measurement /code (Gy)	Definition
NNNN	No radiation treatment was administered
NNNN	Unknown: Radiation treatment was planned but the dose is unknown.

Clarifying Points:

NOTE: This refers to the delivered dose.

The ICRU50 reference dose should be recorded for photon therapy if available, otherwise a description of the received dose at the centre of the planning target volume. The ICRU58 should be recorded for brachytherapy. The International Council for Radiation Protection (ICRP) recommends recording doses at the axis point where applicable (opposed fields, four field box, wedged pairs and so on). For maximum consistency in this field the ICRP recommendations should be followed whenever possible.

As a guide, a typical received radiation dose is up to 80 Grays per course. Doses that vary significantly from this should be investigated as to the accuracy of the data.

For multiple sites within the same course of radiation, record the highest radiation dose. Do NOT add the radiation doses together.

Collection Methods:

This information should be sought from the patient's medical record or attending medical clinician.

Validation Rules: Must be a valid number

Justification: This information is collected for the purpose of:

- Evaluate treatment methods by analysing received radiation treatment dose with planned radiation treatment dose.

Representation

Data Element Type: Data Element

Data Type: Numeric

Form: Code

Minimum Size: 2

Maximum Size: 4

Layout: NNNN

Administrative Information

Version: 1

Effective date: 1 July 2007

Changes:

Related Information

- Related Data:**
- Radiation Therapy Intent
 - Radiation Beam Type
 - Planned Radiation Treatment Dose
 - Planned Radiation Fractions
 - Received Radiation Fractions

References: Commission on Cancer (2004), *Facility Oncology Data Standards (FORDS)*: (Revised 2004).

Australian Institute of Health and Welfare (2004), *Data Set Specification Cancer (Clinical) National Health Data Dictionary version 12 Supplement*, Canberra: AIHW.

Developed by the NSW Head & Neck Oncology Group (NSWOG Head & Neck). July 2007.

NEW DATA ITEM

Planned Radiation Fractions

Defining Attributes

Definition: Number of radiation treatment fractions planned to be delivered in the initial course of radiation.

Coverage: This item should be reported for:

All head & neck cancers

Guide for Use

Data Domain:

Code	Description
00	No radiotherapy treatment planned
01	One radiation fraction treatment was planned
...	Number of treatment fractions planned
98	Not applicable
99	Unknown

Domain Definitions:

Code	Definition
00	No radiation treatment was planned
01	One radiation fraction treatment was planned
...	Number of treatment fractions planned. The total number of radiation treatment fractions planned.
98	Not applicable
99	Unknown: It is not known whether radiation treatment was planned and the number of fractions planned is not known.

Clarifying Points: Note that the radiation fractions recorded should include any boost.

Collection Methods: This information should be sought from the patient's medical record or attending medical clinician.

Validation Rules: Must be a valid number in the range 00-99.

Justification: This information is collected for the purpose of:

- Evaluate treatment methods by analysing received radiation fractions with planned radiation fractions.

Representation

Data Element Type: Data Element

Data Type: Alpha-numeric

Form: Code

Minimum Size: 2

Maximum Size: 2

Layout: NN

Administrative Information

Version: 1

Effective date: 1 July 2007

Changes:

Related Information

Related Data:

- Radiation Therapy Intent
- Radiation Beam Type
- Planned Radiation Treatment Dose
- Received Radiation Treatment Dose
- Received Radiation Fractions

References:

Commission on Cancer (2004), *Facility Oncology Data Standards (FORDS)*: (Revised 2004).

Australian Institute of Health and Welfare (2004), *Data Set Specification Cancer (Clinical) National Health Data Dictionary version 12 Supplement*, Canberra: AIHW.

Developed by the NSW Head & Neck Oncology Group (NSWOG Head & Neck). July 2007.

NEW DATA ITEM

Received Radiation Fractions

Defining Attributes

Definition: Number of radiation treatment fractions delivered in the initial course of radiation.

Coverage: This item should be reported for:

All head & neck cancers

Guide for Use

Data Domain:

Code	Description
00	No radiotherapy treatment administered
01	One treatment fraction was administered
...	Number of treatment fractions administered
98	Not applicable
99	Unknown

Domain Definitions:

Code	Definition
00	No radiation treatment was administered
01	One radiation treatment fraction was received.
...	Number of treatment fractions administered. The total number of radiation treatment fractions administered.
98	Not applicable
99	Unknown: It is not known whether radiation treatment was administered and the number of fractions administered is not known.

Clarifying Points: Note that the radiation fractions recorded should include any boost.

Collection Methods: This information should be sought from the patient's medical record or attending medical clinician.

Validation Rules: Must be a valid number in the range 00-99.

Justification: This information is collected for the purpose of:

- Evaluate treatment methods by analysing received radiation fractions with planned radiation fractions.

Representation

Data Element Type: Data Element

Data Type: Alpha-numeric

Form: Code

Minimum Size: 2

Maximum Size: 2

Layout: NN

Administrative Information

Version: 1

Effective date: 1 July 2007

Changes:

Related Information

Related Data:

- Radiation Therapy Intent
- Radiation Beam Type
- Planned Radiation Treatment Dose
- Received Radiation Treatment Dose
- Planned Radiation Fractions

References: Commission on Cancer (2004), *Facility Oncology Data Standards (FORDS)*: (Revised 2004).

Australian Institute of Health and Welfare (2004), *Data Set Specification Cancer (Clinical) National Health Data Dictionary version 12 Supplement*, Canberra: AIHW.

Developed by the NSW Head & Neck Oncology Group (NSWOG Head & Neck). July 2007.

NEW DATA ITEM

Radiation and Systemic Therapy Sequence

Defining Attributes

Definition: The sequence of systemic therapy for the patient in relation to definitive therapy (surgery or radiation).

Coverage: This item should be reported for:

All head & neck cancers

Guide for Use

Data Domain:

Code	Description
0	No systemic therapy administered
1	Systemic therapy and no other definitive therapy
2	Systemic therapy immediately preceding the definitive therapy (radiation or surgery) Neo-adjuvant systemic therapy
3	Systemic therapy following the definitive therapy (radiation or surgery) Adjuvant systemic therapy
4	Concurrent systemic therapy and radiotherapy
9	Unknown

Domain Definitions:

Code	Definition
0	No systemic therapy treatment is administered to the patient.
1	Systemic therapy only and no other definitive therapy
2	Systemic therapy immediately preceding the definitive therapy (radiation or surgery) Neo-adjuvant systemic therapy

3	Systemic therapy following the definitive therapy (radiation or surgery) Adjuvant systemic therapy
4	Concurrent systemic therapy/radiotherapy: The patient received systemic therapy and radiotherapy concurrently.
9	Unknown: It is not known whether the patient had systemic therapy treatment planned OR systemic therapy was planned but type was not stated.

Clarifying Points: n/a

Collection Methods: This information should be sought from the patient's medical record or attending medical clinician.

Validation Rules: Must = 0, 1, 2, 3, 4 or 9

Justification: This information is collected for the purpose of:

- Survival and treatment analyses
- Analysis of outcome by treatment type and sequence

Representation

Data Element Type: Data Element

Data Type: Alpha-numeric

Form: Code

Minimum Size: 1

Maximum Size: 1

Layout: N

Administrative Information

Version: 1

Effective date: 1 July 2007

Changes:

Related Information

- Related Data:**
- Radiation Therapy Intent
 - Received Radiation Therapy Dose
 - Received Radiation Fractions

References:

Developed by the NSW Head & Neck Oncology Group (NSWOG Head & Neck). July 2007.

NEW DATA ITEM

Resection Margins

Defining Attributes

Definition: The overall completeness of the resection of the tumour.

Coverage: This item should be reported for:

All head & neck cancers

Guide for Use

Data Domain:

Code	Description
0	R0 – complete resection
1	R1 – microscopic residual
2	R2 – macroscopic residual
9	RX – unknown

Domain Definitions:

Code	Definition
0	R0: Complete resection of the tumour. The resection margins are clear.
1	R1: Microscopic residual. There is microscopic involvement of the resection margins.
2	R2: Macroscopic residual. There is macroscopic involvement of the resection margins.
9	RX: Unknown. It is not known what the resection margin is or whether a resection has been performed.

Clarifying Points:

This information is required to adequately stage the cancer. To be determined by pathologist using clinical information provided by the surgeon and by histopathological assessment.

Collection Methods: This information should be sought from the patient's medical record or pathology report.

Validation Rules: Must = 0, 1, 2 or 9

Justification: This information is collected for the purpose of:

- survival analysis adjusted by stage at diagnosis and distribution of cancer cases by type and stage.
- analysis of outcome by treatment type

Representation

Data Element Type: Data Element

Data Type: Alpha-numeric

Form: Code

Minimum Size: 1

Maximum Size: 1

Layout: N

Administrative Information

Version: 1

Effective date: 1 July 2007

Changes:

Related Information

Related Data: n/a

References: Greene, F.L et al., eds. (2002), *AJCC Cancer Staging Manual* (6th ed.), Springer: New York.

Date of Diagnosis of First Recurrence

Defining Attributes

Definition: The date a medical clinician confirms the diagnosis of a recurrent or metastatic cancer of the same histology or clinically diagnosed.

Coverage: This item should be reported for:

All head & neck cancers

Guide for Use

Data Domain:

Code	Description
DD	Day of month (use leading zeros for 1 to 9 e.g. "01", "02")
MM	Month of the year (use leading zeros for 1 to 9 e.g. "01", "02")
YYYY	Year (use 4 digit format e.g. "2005", "2006")

Domain Definitions: ddmmyyyy

Clarifying Points: The term "recurrence" defines the return, reappearance or metastasis of cancer (of the same histology) after a disease free period.

Collection Methods: This information should be sought from the patient's medical record or attending medical clinician.

Validation Rules: This field must be:
- greater than the Date of diagnosis of cancer

Justification: This information is collected for the purpose of:

- Determining the time interval from diagnosis to recurrence, from treatment to recurrence and from recurrence to death.

Representation

Data Element Type: Data Element

Data Type: Numeric

Form: Code

Minimum Size: 8

Maximum Size: 8

Layout: DDMMYYYY

Administrative Information

Version: 1
Effective date: 1 July 2007
Changes:

Related Information

Related Data:

- Site of First Recurrence

References: Australian Institute of Health and Welfare (2004), *Data Set Specification Cancer (Clinical) National Health Data Dictionary version 12 Supplement*, Canberra: AIHW.

Site of First Recurrence

Defining Attributes

Definition: The term recurrence refers to the return or reappearance of the primary cancer after a disease-free intermission or remission. The cancer may recur in more than one site (eg. Both regional and distant metastases).

Coverage: This item should be reported for:

All head & neck cancers

Guide for Use

Data Domain:

Code	Description
0	None
1	Local
2	Regional
3	Both local and regional
4	Distant
5	Distant and either local or regional
6	Local, regional and distant
7	Patient was never disease-free
8	Recurred but site unknown
9	Unknown if recurred

Domain Definitions:

Code	Definition
0	None: patient is disease free
1	Local:
2	Regional:
3	Both local and regional:
4	Distant:
5	Distant and either local or regional:
6	Local, regional and distant:
7	Patient was never disease-free:
8	Recurred but site unknown:
9	Unknown if recurred:

Clarifying Points:

The site of the first recurrence following the initial diagnosis should be recorded.

Collection Methods:

This information should be sought from the patient's medical record, pathology report or attending medical clinician.

Validation Rules:

Must = 0, 1, 2, 3, 4, 5, 6, 7, 8 or 9

Justification:

This information is collected for the purpose of:

- Survival and treatment analyses
- Analysis of outcome by treatment type

Representation

Data Element Type: Data Element

Data Type: Alpha-numeric

Form: Code
Minimum Size: 1
Maximum Size: 1
Layout: N

Administrative Information

Version: 1
Effective date: 1 July 2007
Changes:

Related Information

Related Data:

- Date of Diagnosis of First Recurrence

References: Australian Institute of Health and Welfare (2004), *Data Set Specification Cancer (Clinical) National Health Data Dictionary version 12 Supplement*, Canberra: AIHW.
