

Definitions

(Access to QOOL Dashboard is based on MDT membership in QOOL. Data will only be displayed for a MDT that a user is a member of).

1 year surgical survival trend

Average trend of patients alive 0-365 days from date of first surgery.

Age

Patient's age at diagnosis.

At diagnosis (no surgery) Systemic therapy or radiotherapy which has been started and completed 0-9 months from date of diagnosis.

Breast cancer

In situ or invasive neoplasms.

Breast conservation surgery (BCS)

Cancer patients of all ages with who underwent one of the following procedures: Excision of lesion of breast and/or re-excision of lesion.

Cancer Type

Cancer type groupings according to ICD-10-AM The international statistical classification of disease and related health problems, tenth revisions, Australian modification Tenth Edition July 2017.

Comorbidity

A clinical condition that has the potential to significantly affect a cancer patient's prognosis.

Comorbidity is derived from hospital admissions data following the Quan algorithm¹ for classifying ICD-10 coded conditions, modified to exclude metastasis, which is represented by a separate and distinct metastasis dimension.

Comorbidity is limited to conditions coded in any admission episode between 12 months before and 12 months after the date of cancer diagnosis.

Benign tumours are not considered comorbidities.

Co-morbidity list:

Cerebrovascular accident

Diabetes

Chronic obstructive pulmonary disease

Ischemic heart disease/Cardiovascular disease

Chronic renal failure

Crude rate

All rates are crude and do not take into account differences in the demographics of the populations being compared (eg. age, gender differences).

Data quality

An overall view of how well the minimum data set is collected in QOOL. This data forms the basis for further analysis such as surgical indicators (see minimum data set).

Data quality eligibility

Patient's having disease as 'other', CNS benign tumours, unknown primary (only for generic profile, melanoma, lung, CNS) are excluded from the Data quality analysis.

Data quality trend

Represent fluctuations in data quality over a period of time.

Date of presentation

Date patient was presented at the MDT.

Definitive surgery

Mastectomy within 12 months of the first procedure. If mastectomy was not recorded then the last record of either excision of lesion of breast or re-excision of lesion site within 12 months of the first procedure was selected.

Hospital and health service of residence (HHS)

Geographic area defined by a collection of Statistical Local Areas (SLA). It is the patient's most recent recorded residence. For public hospitals and health service facilities it is synonymous with a group of Queensland Health facilities and staff responsible for providing and delivering health resources and services to an area which may consist of one or more residential areas. Unknown residence include addresses reported as overseas, unknown or not fixed.

Index surgery

The first breast cancer surgery procedure performed closest to surgery date within 12 months of surgery.

Indigenous

A measure of whether a person identifies as being of Aboriginal or Torres Strait Islander origin.

Mastectomy

Includes residents of all ages who underwent one of the following procedures: total mastectomy (unilateral), total mastectomy (bilateral), subcutaneous mastectomy (unilateral), subcutaneous mastectomy (bilateral).

Median age

The age that divides a population into two halves: one older than the median, the other younger than the median.

Minimum Dataset

Consists of:

ECOG – (Eastern Cooperative Oncology Group) measures ability to perform activities of daily living on a scale from 0-5

Comorbidity - see above

Diagnosis – based on ICD10AM primary site

Date and diagnosis basis –

1. date of histology of primary tumour
2. date of histology of metastasis
3. date of histology (unknown if primary or metastasis)
4. date of cytology or haematology
5. date of specific tumour markers (biochemical or immunological)
6. date of exploratory surgery
7. date of clinical investigations
8. date of clinical only
9. date of autopsy with histology
10. date on death certificate
11. other

Morphology - based on ICD10AM morphology

Stage – see below

Recommended treatment plan - patients who have a treatment plan following presentation at MDT

Mortality

In-hospital mortality

The percentage of patients that die in hospital following their surgery.

30 day mortality

The percentage of patients that die within 30 days following their surgery.

90 day mortality

The percentage of patients that die within 90 days following their surgery.

365 day mortality

The percentage of patients that die within 365 days following their surgery.

MDT

Multidisciplinary Team – a team of clinicians (medical, nursing, radiology, pathology, allied health) who discuss cancer patients to ensure all available treatment options are considered.

MDT activity

The number of patients presented to a MDT. This includes initial presentations and re-presentations.

MDT activity trend

Trends in the number of patients presented to a MDT over time. This includes initial presentations and re-presentations

My MDT

The MDT's that a QOOL user is a member of or has special access to view.

MDT date

The date the MDT was held.

MDT name

The name given to the MDT by the facility where the MDT is held.

Neoadjuvant radiation therapy

Radiation therapy prior to surgery

Patients

Number of people presented at the MDT for discussion. People are counted once unless they are presented with 2 different cancers, then counted twice.

Presentations

Number of times people are presented at the MDT for discussion, in the timeframe selected.

QOOL

A web-based system developed by QCCAT to support MDT meetings and record critical clinical data about the patients being reviewed at the meeting. Data is extracted from QOOL to form the basis of this dashboard.

Radiation therapy

Cancer patients who received radiation therapy.

Radiotherapy graph

- **At diagnosis** – radiotherapy started and finished within 0-9mth of diagnosis
- **pre surgery** - radiotherapy administered prior to surgery
- **0 -9 months post surgery** - radiotherapy which has started and finished within 0-9mths of surgery
- **Other** – radiotherapy which has started or finished 9 -12mths of the diagnosis or surgical date

Remoteness

The relative remoteness of residence at time of diagnosis, derived from the Australian Standard Geographical Classification (ASGC). In this report, remoteness is classified into three groups based on the original ASGC grouping.

ASGC classifications	Modified ASGC classification	Rurality classification
Major City	Metropolitan	Urban
Inner Regional	Regional	
Outer Regional		
Remote	Rural and Remote	Rural
Very Remote		

An exception to this grouping is the metropolitan area of Townsville (originally classified as Rural). Townsville has been classified as Metropolitan because of the availability of tertiary level cancer services.

Representations

Count of patients presented to MDT more than once. This is calculated by number of patients presented / number of times patients are presented.

Sentinel lymph node biopsy (SLNB)

Removal and examination of the sentinel node(s) (the first lymph node(s) to which cancer cells are likely to spread from a primary tumour).

Sex

Refers to the biological and physiological characteristics that define men and women.

Socio economic status

Socioeconomic status is based on the 2016 Socio-Economic Indexes for Areas (SEIFA), a census-based measure of social and economic well-being developed by the Australian Bureau of Statistics (ABS) and aggregated at the level of Statistical Areas Level 2 (SA2).

The ABS uses SEIFA scores to rank regions into ten groups or deciles numbered one to ten, with one being the most disadvantaged and ten being the most affluent group.

This ranking is useful at the national level, but the number of people in each decile often becomes too small for meaningful comparisons when applied to a subset of the population.

For this reason, this document further aggregates SEIFA deciles into 3 socioeconomic groups.

SEIFA Group	Decile	Percentage of population (approximate)
Affluent	1-2	20%
Middle	3-8	60%
Disadvantaged	9-10	20%

Stage

Staging is a way of describing the size of a cancer and how far it has spread to aid the clinician in the planning of treatment and to give some indication of prognosis for survival.

There are different staging classifications depending on the type of cancer.

Surgery group – breast

Breast surgeries which are considered for the breast indicators report. They are excision of lesions, mastectomy, re-excision of lesion and sentinel lymph node biopsy. (See below – Breast cancer surgeries).

Surgery group - colorectal

Major colorectal surgeries which are considered for the colorectal indicators report. They are abdominalperineal resection, anterior resection, colectomy, hartmanns, and total proctoclectomy. (See below - Colorectal major resection surgery procedures). The first major resection is considered if a patient has had more than one resection.

Systemic therapy

Cancer patients who received one of the following or a combination of, chemotherapy, hormonal therapy, and targeted therapy.

Systemic therapy graph

- **At diagnosis** – systemic therapy started and finished within 0-9mth of diagnosis
- **pre surgery** - systemic therapy administered prior to surgery
- **0 -9 months post surgery** - systemic therapy which has started and finished within 0-9mths of surgery
- **Other** – systemic therapy which has started or finished 9+mths of the diagnosis or surgical date

TNM

Tumour – the extent of the primary tumour

Lymph Nodes – The absence or presence and extent of regional lymph node metastasis

Metastasis – the absence or presence of distant metastasis

Stage range – 0 – IV

Breast Indicators

Surgery procedures (ICD-AM-10) identified as breast cancer surgeries:

Excision of lesion	
3153600	Complete excision of lesion without guidewire
3150000	Complete excision of lesion with guidewire
Mastectomy	
3151800	Total mastectomy (unilateral)
3151801	Total mastectomy (bilateral)
3152400	Subcutaneous mastectomy (unilateral)
3152401	Subcutaneous mastectomy (bilateral)
Re-Excision of lesion site	
3151500	Re-excision of lesion site
Sentinel lymph node biopsy	
3030000	Excision of sentinel lymph node(s) in level I, II or III of axilla

Surgical breast indicator calculations

Indicator	Definition
Days from diagnosis to surgery \leq 45 days	Diagnosis to index surgery in \leq 45 days or less / Number of patients who had index breast cancer surgery *neoadjuvant patients excluded
Definitive breast conservation surgery (BCS)	Definitive BCS / Number of patients who had breast cancer surgery
Definitive mastectomy	Definitive mastectomy / Number of patients who had breast cancer surgery
Index mastectomy for T1 tumour	Index mastectomy for T1 tumour (T1a, T1b, T1c) / Number of patients who had T1 tumours

Re-excision of lesion after index breast conservation surgery (BCS)	Re-excision of lesion after index BCS / Number of patients who had index BCS
Conversion of index breast conservation surgery (BCS) to mastectomy	Definitive mastectomy - index mastectomy / Number of patients who had index BCS
Time from index (BCS) to definitive surgery \leq 21 days	Index BCS to definitive surgery in 21 days or less / Number of patients who had breast surgery for invasive breast cancer
Sentinel lymph node biopsy (SLNB) on T1 tumour with index breast conservation surgery (BCS)	SLNB on T1 (T1a, T1b, T1c) tumour with index BCS / Number of patients who had index BCS with T1 tumour
Radiation therapy following definitive BCS	Number of patients who received radiation therapy / Number of patients who had definitive BCS
Aged < 70yrs with positive axillary lymph nodes receiving systemic therapy	Had systemic therapy / Patients aged < 70yrs with positive axillary lymph nodes

Colorectal Indicators

Surgery procedures (ICD-AM-10) identified as colorectal cancer surgeries:

Colorectal	
Colectomy	
A. Resection of colon without stoma with anastomosis	
30566-00	Resection of small intestine with anastomosis
32003-00	Limited excision of large intestine with anastomosis
32003-01	Right hemicolectomy with anastomosis
32005-01	Extended right hemicolectomy with anastomosis
32006-00	Left hemicolectomy with anastomosis
32005-00	Subtotal colectomy with anastomosis
32012-00	Total colectomy with anastomosis
B. Resection of colon with stoma	
30565-00	Resection of small intestine with formation of stoma
32000-00	Limited excision of large intestine with formation of stoma
32000-01	Right hemicolectomy with formation of stoma
32004-01	Extended right hemicolectomy with formation of stoma
32006-01	Left hemicolectomy with formation of stoma
32004-00	Subtotal colectomy with formation of stoma
32009-00	Total colectomy with ileostomy
Abdominalperineal Resection	
D. AP Resection (with stoma)	
32039-00	Abdominoperineal proctectomy
Total Proctocolectomy	
E. Total proctocolectomy without stoma	
32051-00	Total proctocolectomy with ileo-anal anastomosis
F. Total proctocolectomy with stoma	
32015-00	Total proctocolectomy with ileostomy
32051-01	Total proctocolectomy with ileo-anal anastomosis and formation of temporary ileostomy
Anterior Resection	

G. Anterior Resection

32024-00	High anterior resection of rectum
32025-00	Low anterior resection of rectum
32026-00	Ultra low anterior resection of rectum
32028-00	Ultra low anterior resection of rectum with hand sutured coloanal anastomosis
92208-00	Anterior resection of rectum, level unspecified

Hartmanns
I. Hartmanns with stoma

32030-00	Rectosigmoidectomy with formation of stoma
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Stoma
J. Stoma

30375-29	Temporary ileostomy
30375-01	Other enterostomy

Surgical colorectal indicator calculations

Indicator	Definition
Days from diagnosis to surgery ≤ 30 days	Diagnosis to first major resection in ≤ 30 days / Number of patients who had colorectal cancer major resection *neoadjuvant patients excluded
In-hospital mortality	Death in hospital following colorectal cancer major resection / Number of patients who had colorectal cancer major resection
30 day mortality	Death ≤ 30 days from date of colorectal cancer major resection / Number of patients who had colorectal cancer major resection
90 day mortality	Death ≤ 90 days from date of colorectal cancer major resection / Number of patients who had colorectal cancer major resection
1 year surgical survival	Patients alive 0-365 days from date of colorectal cancer major resection / Number of patients who had colorectal cancer major resection
2 year surgical survival	Patients alive 0-730 days from date of colorectal cancer major resection / Number of patients who had colorectal cancer major resection
Stage 3 adjuvant systemic therapy	Patients who had adjuvant systemic therapy within 365 days after major resection / Patients with stage 3 colorectal cancer
Neoadjuvant radiation	Patients who received neoadjuvant radiation therapy from diagnosis to surgery / Number of colorectal cancer major resections

Lung Indicators

Surgery procedures (ICD-AM-10) identified as lung cancer surgeries:

90169 – 00	Endoscopic wedge resection of lung
38440 – 01	Radical wedge resection of lung
38438 – 00	Segmental wedge resection of lung

38440 – 00	Wedge resection of lung
38438 – 01	Lobectomy of lung
38441 – 00	Radical lobectomy
38438 – 02	Pneumonectomy
38441 - 01	Radical pneumonectomy

Surgical lung indicator calculations

Indicator	Definition
Days from diagnosis to surgery ≤ 30 days	Diagnosis to first major resection in ≤ 30 days / Number of patients who had lung cancer major resection *neoadjuvant patients excluded
In-hospital mortality	Death in hospital following lung cancer major resection / Number of patients who had lung cancer major resection
30 day mortality	Death ≤ 30 days from date of lung cancer major resection / Number of patients who had lung cancer major resection
90 day mortality	Death ≤ 90 days from date of lung cancer major resection / Number of patients who had lung cancer major resection
1 year surgical survival	Patients alive 0-365 days from date of lung cancer major resection / Number of patients who had lung cancer major resection
2 year surgical survival	Patients alive 0-730 days from date of lung cancer major resection / Number of patients who had lung cancer major resection

Youth Cancer

Surgery procedures (ICD-AM-10) identified, in addition to the above breast, colorectal and lung procedures:

Bladder

Excision

36840-03	Endo. destruction of a single bladder lesion ≤ 2 cm or tissue of bladder
36845-06	Endoscopic destruction of a single lesion of bladder > 2 cm in diameter
36845-07	Endoscopic destruction of multiple lesions of bladder
36840-02	Endo. resection of a single bladder lesion ≤ 2cm or tissue of bladder
36845-04	Endoscopic resection of a single lesion of bladder > 2 cm in diameter
36845-05	Endoscopic resection of multiple lesions of bladder

Segmental Cystectomy

37000-00	Laparoscopic partial excision of bladder
37000-01	Partial excision of bladder

Radical Cystectomy

37014-00	Total excision of bladder
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Gastrectomy

30518-00	Partial distal gastrectomy with gastroduodenal anastomosis
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30518-01	Partial distal gastrectomy with gastrojejunal anastomosis
30518-02	Partial proximal gastrectomy with oesophago-gastric anastomosis
30521-00	Total gastrectomy
30523-00	Subtotal gastrectomy
30524-00	Radical gastrectomy
Oesophagectomy	
30535-00	Oesophagectomy by abdominal and transthoracic mobilisation, with thoracic oesophagogastric anastomosis
30536-00	Oesophagectomy by abdominal and transthoracic mobilisation, with cervical oesophagogastric anastomosis
30536-01	Oesophagectomy by abdominal and transthoracic mobilisation, with cervical oesophagostomy
30541-00	Trans-hiatal oesophagectomy by abdominal and cervical mobilisation, with oesophagogastric anastomosis
30541-01	Trans-hiatal oesophagectomy by abdominal and cervical mobilisation, with oesophagojejunal anastomosis
30545-00	Oesophagectomy by abdominal and thoracic mobilisation with thoracic anastomosis, large intestine interposition and anastomosis
30545-01	Oesophagectomy by abdominal and thoracic mobilisation with thoracic anastomosis using Roux-en-Y reconstruction
30550-00	Oesophagectomy by abdominal and thoracic mobilisation with cervical anastomosis, large intestine interposition and anastomosis
30550-01	Oesophagectomy by abdominal and thoracic mobilisation with cervical anastomosis using Roux-en-Y reconstruction