

Basic data Neuro-oncology

Reg. No.	Not listed i	(Template certificate) i
Centre		
Location		
Contact		Date recorded i
		Date first certification i
		Indicator year 2022

Federal state / Country

Tumour documentation system	XML OncoBox i
	Not yet available

ICD-O-3 topography	ICD-O-3 morphology						Total	
	Benign (Code: ____/0)		Malignant (Code: ____/3)		Unclear behaviour (Code: ____/1)		Surgical primary cases	Non-surgical primary cases
	Surgical primary cases	Non-surgical primary cases	Surgical primary cases	Non-surgical primary cases	Surgical primary cases	Non-surgical primary cases		
C70								
C71								
C72								
C75								
Total							i	i

Operative expertise - number of biopsies (counting the procedures per calendar year)	
Operative expertise - number of resections (counting the procedures per calendar year)	

- 1) Primary case (according to CoR 1.2.1 as well as ICD-O topography code AND ICD-O morphology code from the list Primary case definition) + OPS code (according to CoR 5.2.3a)) in the calendar year
- 2) Biopsies with the OPS code (according to CoR 5.2.3b)) in the calendar year, independent of the primary case status.
- 3) Resections with the OPS code (according to CoR 5.2.3a)) in the calendar year, irrespective of the primary case status.

The Catalogue of Requirements is based on the TNM classification of malignant tumours, 8th edition 2017, ICD classification ICD-O-3.2 2021 (DIMDI) and the OPS classification OPS 2022 (DIMDI).

Processing remarks:

Some of the fields are inter-dependent. Each line should, therefore, be completely processed from left to right and continuously from top to bottom. Grey fields must be processed. The processing of the Excel template should be done with Microsoft Office 2010 or one of the later versions. Microsoft Office 2007 can be used with some constraints (e.g. information buttons are not displayed). Earlier versions of Microsoft Office 2007 are not suitable for processing the Excel template. All numbers and texts must be entered manually.

Indicator Sheet Neuro-oncology



Centre

Reg. No.

Date recorded

IN	CR/ GL	Indicator definition	Indicator target	Numerator	Population (= denominator)	Plausi unclear	Target value	Plausi unclear	Current value	Data Quality	Verification Centre		
											Reasons / Cause (min. 30 characters / max. 500 characters)	Action taken/planned (if reasons are plausible, no action is required)	
1a	1.2.1	Primary cases	See target value	Primary cases Definition in line with 1.2.1	---		≥ 100		Number	0	Incomplete		
1b		Patients with recurrence/progress	---	Patients with recurrence/progress	---		No target value		Number		Incomplete		
1c		Cerebral metastasis	Registration of patients with cerebral metastasis who were treated in the NOC in the indicator year	Patients with cerebral metastasis who were treated in the NOC (tumour-specific diagnostic and/or therapy)	---		No target value		Number		Incomplete		
2a	1.2.3	Interdisciplinary case reviews (tumour board)	Presentation of as many primary case patients as possible in the tumour board	Primary cases of the denominator (elective patients, pre-intervention, emergency patients, post-intervention) who were presented in the tumour board	Primary cases (= Indicator 1a)		≥ 95%		Numerator		Incomplete		
									Denominator	0			
									%	n.d.			
2b		Pretherapeutic tumour board	Preinterventional presentation of as many primary case patients as possible in the tumour board	Primary cases of the denominator that were presented in the tumour board before the intervention	Primary cases (= Indicator 1a)		< 50%	No target value	> 80%	Numerator		Incomplete	
										Denominator	0		
										%	n.d.		
3 optional indication		Psycho-oncological distress screening	Adequate rate of psycho-oncological distress screening	Patients of the denominator who received psycho-oncological distress screening	Primary cases (= Indicator 1a) and patients with recurrence / progress (= Indicator 1b)		≥ 65%		Numerator		Incomplete		
									Denominator	0			
									%	n.d.			
4		Counselling social services	Adequate rate of counselling by social services	Patients of the denominator who received counselling by social services in an inpatient or outpatient setting	Primary cases (= Indicator 1a) and patients with recurrence / progress (= Indicator 1b)		< 50%	No target value	Numerator		Incomplete		
									Denominator	0			
									%	n.d.			
5	1.7.4	Share study patients	Inclusion of as many patients as possible in studies	All patients (malignant and benign) who were included in a study with an ethical vote	Malignant primary cases		≥ 5%		Numerator		Incomplete		
									Denominator	0			
									%	n.d.			
6a	5.2.3a	Surgical primary cases	See target value	Surgical primary cases Definition in line with 5.2.3a	---		≥ 60		Number	0	Incomplete		
6b	5.2.3b	Biopsy	---	Biopsies Definition in line with 5.2.3b	---		No target value		Number		Incomplete		
6c	5.2.3 ab	Biopsy/resection ratio	Recording the ratio between biopsies and operations (definitions according to EB 5.2.3a/b) for primary cases	Biopsies (= Indicator 6b)	Operative primary cases (= Indicator 6a)		< 10%	No target value	> 25%	Numerator	0	Incomplete	
										Denominator	0		
										%	n.d.		

7a	5.2.11	Revision surgeries	Rate of post-operative revision surgeries as low as possible	Primary cases of the denominator with revision surgeries as a consequence of post-surgical complications within 30d of surgery	Surgical primary cases (= indicator 6a)		≤ 10%			Numerator		Incomplete		
										Denominator	0			
										%	n.d.			
7b		Clinically symptomatic secondary bleeding	Rate of clinically symptomatic secondary bleeding as low as possible	Primary cases of the denominator with clinically symptomatic secondary bleeding (= new onset or worsening of an existing neurological disorder)	Surgical primary cases (= indicator 6a)		≤ 10%			Numerator		Incomplete		
										Denominator	0			
										%	n.d.			
8		Post-surgical wound infections	Rate of post-surgical wound infections low as possible	Primary cases of the denominator with post-surgical meningitis confirmed by laboratory tests and/or a wound infection requiring surgical revision within 30d of surgery	Surgical primary cases (= indicator 6a)		≤ 10%			Numerator		Incomplete		
										Denominator	0			
										%	n.d.			
9		Symptom assessment via MIDOS or IPOS	As often as possible symptom assessment via MIDOS or IPOS for patients with brain tumours	Patients of the numerator with symptom assessment via MIDOS or IPOS	Primary cases and patients with recurrence / progression with ICD-O topography C71 and ICD-O morphology J3	< 60%	No target value			Numerator		Incomplete		
										Denominator				
										%	n.d.			

Data quality indicators

OK	Plausible	0,00% (0)	0,00% (0)	Processing quality 0,00% (0)
	Plausibility unclear	0,00% (0)		
Target value not met			0,00% (0)	
Erroneous	Incorrect	0,00% (0)	100,00% (15)	
	Incomplete	100,00% (15)		

Processing remarks:

The respective entry or change "number / numerator / denominator" (dotted fields) is only possible in the spreadsheet "Basic data", carry-over is automatic. The numerator is always a subset of the denominator (exception: Indicator 5 - Share study patients).

1) Plausibility unclear

In comparison to the other Centres, the indicator value given is an unusual value. The classification "plausibility unclear" does not automatically mean a negative assessment. The indicator value is to be checked for correctness because of its unusual character. In individual cases a positive indicator value, when viewed in detail, may also depict a negative care situation (e.g. surplus care). The result of this check is to be explained in more detail by the Centre in the Data Sheet "Reasons/Cause". Where appropriate, specific actions should be defined and carried out in line with the procedure "Failure to meet the target value".

2) Target value not met

The relevant indicators are to be analysed. The result is to be documented in the spreadsheet Data Sheet (DS). The document "Specifications Data Quality" contains more detailed information about this.

3) Incomplete

If any indicators have the status "incomplete", then they are either to be supplied at a later stage or a clear statement is to be made about the possibility of future presentation ("incomplete indicators" always constitute a potential deviation).

Note:

For reasons of easy readability, the term "patient" expressly covers all gender attributions (female, male, other).