

Saving Faces



HANA database

Upload-My-Data file specification

Version: 1.3

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The HANA Upload-My-Data project

Dendrite's Upload-My-Data system for the HANA project consists of data held in three related sets tables that need to be uploaded:

1. the **master** HANA tables
 - i. BaselineA
 - ii. Subprocedure
 - iv. Follow up
2. the **radiology** table-set
 - i. radiology BaselineA
 - ii. radiology Subprocedure
3. the **surgery** table-set
 - i. surgery BaselineA
 - ii. surgery Subprocedure
 - iii. surgery BaselineB

These have to be uploaded in three distinct phases: first the data for the master HANA data tables, followed by the radiology (RAD) and surgery (SURG) data. Entries in both the radiology and surgery BaselineA files must link back to a parent entry in the master BaselineA table. Each of the files contain several fields that are various kinds of row identifiers.:

IMPORTLINKID (mandatory)

This is the row ID for a record in the Baseline (BaselineA) of any set of tables, and it is absolutely required for referential integrity. Related Followup, Subprocedure (and BaselineB if present) tables also contain this IMPORTLINKID field, and this element is used to tie data in these tables back to the parent record in the BaselineA table. The IMPORTLINKID would normally contain the row ID of the record from the originating (source) database (*i.e.*, the key field).

IMPORTCHILDID (optional, but recommended)

This field exists only in Followup and Subprocedure tables. It would normally contain the row ID of the record from the Followup or Subprocedure tables of the originating (source) database. It is not used directly by the Upload-My-Data software, and so its inclusion is deemed optional, but it can be very useful when data validation issues are identified during the upload process, as it allows for a quick, simple, and definite way to identify an individual record in the original source database.

PARENTDBID (mandatory)

In HANA, the BaselineA records of the radiology and surgery table-sets are child tables of the master HANA BaselineA records, and each row of radiology and surgery data need to be linked to a row in the master HANAPATH BaselineA table. This is done by populating the PARENTDBID field with the value of the IMPORTLINKID field from the corresponding BaselineA record in the master HANAPATH table.

Glossary of terms and definitions

Field separator

The **Field Separator** is a character that is used to separate the values between fields. Any suitable character may be used, as long as it does not occur in any of the defined field values. The recommended field separator is a **TAB** character, although punctuation characters like a vertical bar or a caret may also be used. We recommend that files do not use a comma as a field separator as this can cause problems, such as when saving files into a text format from an Excel file.

Multi-choice separator

The **Multi-choice Separator** (MCS) is a character that is used to separate values within a multi-choice field, which may contain one or more coded values. This separator should be included in the first column of each row of every upload file. The separator may be a vertical bar, a semi-colon, a caret, *etc.* as long as it is a character that will not occur in any of the multi-choice codes for any field and is different from the field separator. We recommend that files do not use a comma as a field separator as this can cause problems, such as when saving files into a text format from an Excel file.

Layout specification version

The **Layout Specification Version** is the version of layout defined by this specification. For this specification the column should contain the value 1. This allows the Upload-My-Data utility to check that the data files being imported are interpreted using the correct definition set.

Submit Group code (SUBMITCODE)

The **Submit Group** code is an alpha code that is used to identify the group to which the data belong. The code will be provided to each user who is registered on the system by the Project / Dendrite administration team. Each record in the upload files must be tagged with a valid Submit Group code, otherwise the file will be rejected out-of-hand.

Demographic Identifier (DEMOGID)

DEMOGID is a value that uniquely identifies each patient within a batch of UMD files. Only one patient record is created for each DEMOGID. If there are multiple baseline records for a given patient, they must all have the same DEMOGID. This will typically be an integer value, such as a RowId from the source database's demographic data table. For systems with a patient demographic file the DEMOGID is also used to link Baseline records to the patient file.

IMPORTLINKID

The **IMPORTLINKID** is an integer value that is used to identify each operation record in the baseline upload file. It is also used to link the data in the baseline upload file to the other upload files in the set, since every record must ultimately belong to a parent baseline record. This can be any value, but typically is the RowId from the source database. This is a required field in all files.

IMPORTCHILDID

The **IMPORTCHILDID** is an integer value that is used to identify each record in Followup or Subprocedure upload files. It is used primarily as a way of linking the data in these files back to the original source database records. This can be any value, but typically is the RowId from the source database followup or subprocedure table. IMPORTCHILDID is optional, but should be included if possible as it greatly simplifies debugging where records need to be traced back to, and corrected in, the originating (source) database.

Importance

This can be one of the values: mandatory, desirable or optional.

1. **Mandatory** must be present in the record; any record with missing mandatory data will **not** be imported into the database.
2. **Desirable** deemed to be important for data analysis, but not a requisite for an entry in the merged registry.
3. **Optional** part of the minimum dataset, but neither mandatory nor desirable.

If mandatory or desirable is marked with an asterisk (*) it indicates that the importance is conditional; *i.e.*, it may only be mandatory / desirable if another question has been answered with a certain option (or options).

Database field types

Date

All date data must be in ODBC format: yyyy-mm-dd *e.g.*, 2012-04-23

Time

All time data must be in ODBC format: hh:nn:ss *e.g.*, 12:43:22

YearMonthDay

This is a special data type created to allow users to add a partially incomplete date data (where only the year is known, or only the year and month are known), but does not prevent recording an actual date if it is known. This is especially useful for events that occurred in the distant past and are gleaned from interviews with the patient; the date when the patient stopped smoking would be a good example of this kind of data. Often, these kinds of dates are known with less precision the more distantly they occurred. The data should be supplied in a yyyy-mm-dd; both the month and day can be set to "00" if unknown; the dd component must be set to "00" if the mm component is set to "00". Otherwise, standard date parameter rules apply.

SingleChoice

One code from the specified list.

TableSingleChoice

One code value. The code only, not description. The codes will be listed with the question unless there are a large number, when the codes will be listed in a separate table at the end of the document.

MultiChoice

One or more code values. The code(s) only, not descriptions. The codes will be listed with the question unless there are a large number, when the codes will be listed in a separate table at the end of the document. Multiple codes should be separated by your defined delimiter of choice (see [Multi-choice Separator on page 2](#)); *e.g.*, ,1;2;3.

Integer

A whole number such as 1 or 25 or 55 or 105, providing the constraints are not breached.

Floating point

Numeric values like 0.54 or 243.21, providing the constraints are not breached. Validation allows use of a comma as decimal point for compatibility with many European locales.

Database field types continued ...**String**

Any combination of characters excepting control characters. Only a single line of text is permitted; control characters such as carriage returns are not acceptable. The following control characters can be included by substituting the appropriate token(s) in the code:

1. Tab ASCII 9 [[TAB]]
2. Line feed ASCII 10 [[LF]]
3. Carriage return ASCII 13 [[CR]]

Other conditions / limitations for specific string fields are detailed on a field-by-field basis.

Fileset

When using the Upload-My-Data portal to submit data to the HANA database, the user must provide a set of 9 related files.

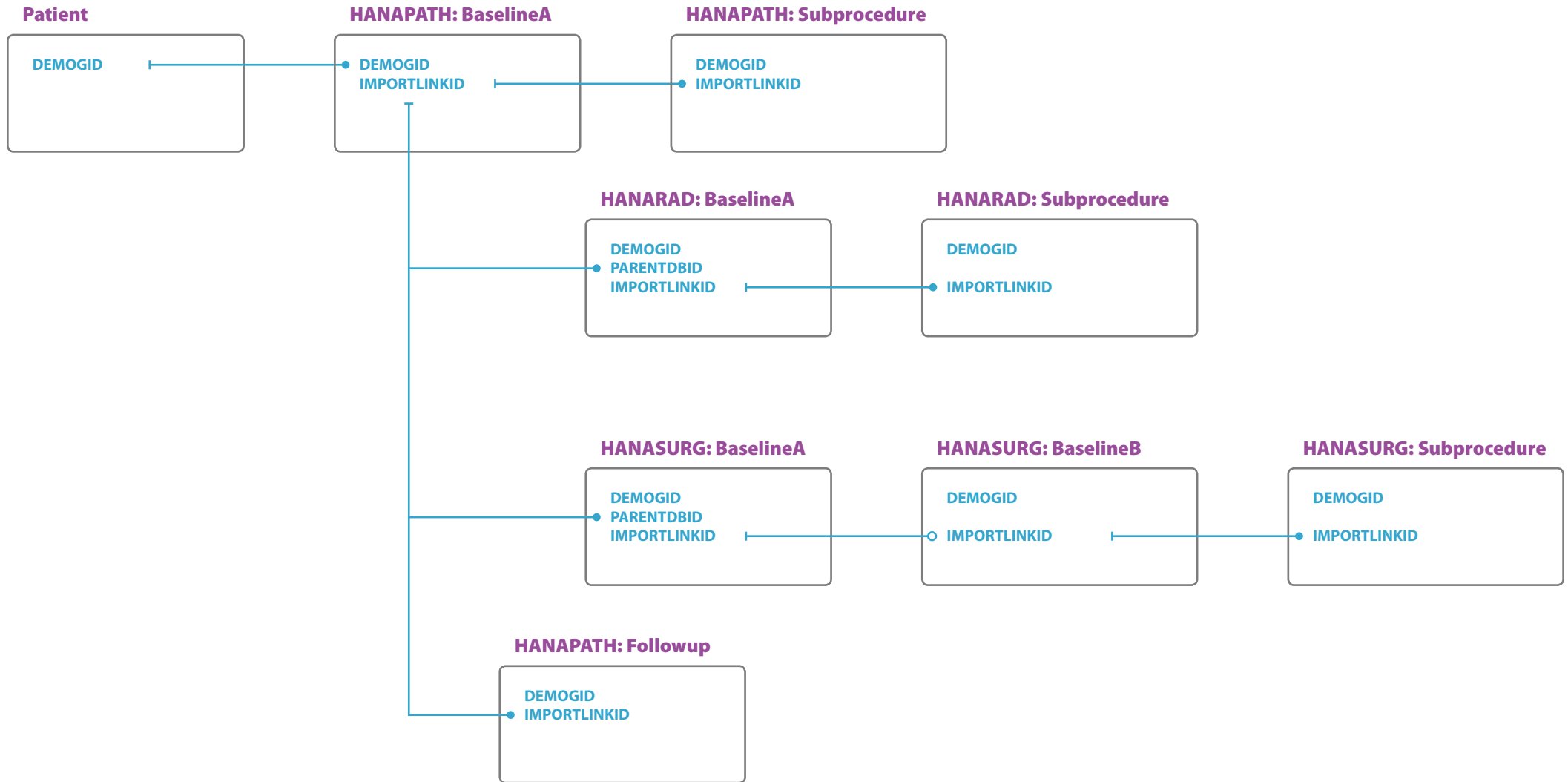
If the Submit Group code were SGC, then the files would be named:

- HANAPATH_SGC_Patient.txt
- HANAPATH_SGC_BaselineA.txt
- HANAPATH_SGC_Subprocedure.txt
- HANAPATH_SGC_Followup.txt
- HANARAD_SGC_BaselineA.txt
- HANARAD_SGC_Subprocedure.txt
- HANASURG_SGC_BaselineA.txt
- HANASURG_SGC_Subprocedure.txt
- HANASURG_SGC_BaselineB.txt

The relationship between the files is shown on the following page.

The remainder of this document provides the specification for the content of each file. The full set of 9 files must be loaded for each upload.

Schematic for the table-sets that comprise the HANA Upload-My-Data project



Key

—○— one-to-one relationship

—●— one-to-many relationship

HANA Upload-My-Data file specification change log

Changes moving from version 1.1 to 1.2

HANAPATH.Patient field changes

1. **GENDER**: options 1, 2, 8 and 9 reduced to 1, 2 and 3

HANAPATH.Patient fields added

2. **ETHNICITY**

HANAPATH.BaselineA field changes

3. **DATESYMPATOMSFIRSTNOTED** now appears in a different position in the sequence, but this does not have to be reflected in the field order of the files (order is not significant)

HANAPATH.BaselineA added fields

4. **HEIGHT**
5. **CANCERTXTYPEATTIMEOFCHEMOTHERAPY**
6. **CANCERTXTYPEATTIMEOFRADIOTHERAPY**

HANAPATH.BaselineA fields removed

7. **PPI**

HANAPATH.SubProcedure fields appear in a different position in the sequence

8. **TUMOURLATERALITYPATH** appears in a different position in the sequence, but this does not have to be reflected in the field order of the files (order is not significant).
9. **METASTATICSITeseENONIMAGING** appears in a different position in the sequence, but this does not have to be reflected in the field order of the files (order is not significant)

Fields have moved from HANAPATH.BaselineB to HANASURG.BaselineB

10. **PATIENTSTATUSATDISCHARGE**
11. **GENERALCAUSEOFDEATH**
12. **SPECIFICCAUSEOFDEATH**
13. **DISCHARGEDATE**
14. **DELAYEDDISCHARGE**
15. **DISCHARGEDESTINATION**
16. **NONCLINICALCAUSEOFDISCHARGEDELAY**

HANAPATH.Followup added fields

17. **DATEOFDEATH**
18. **BIOPSYRESULTRECURRENCEORNEWTUMOURINDICATOR**
19. **BIOPSYRESULTCOPIEDTOMDTCOORDINATOR**

HANASURG.BaselineA fields added

20. **DATEOFADMISSION**

Changes moving from version 1.2 to 1.3

1. Changes to the **HOS** table.
2. Changes to the **HOP** table.

Upload file

Patient

fields included:

Multichoice separator
Layout specification version
SubmitGroup Code
Patient identifier
NHS Number
Forename
Surname
Date Of Birth
Ethnic Origin
Gender

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Multichoice separator				
S	Mandatory			A character: you may define the single character you wish to use to separate values in multi-value fields.
Layout specification version				
SPECVERSION	Mandatory			String: use 1.2 for this version of the specification
SubmitGroup Code				
SUBMITCODE	Mandatory			String: a code used to identify the source of the data.
Patient identifier				
DEMOGID	Mandatory			String: can contain any value.
NHS Number				
NHSNUMBER	Mandatory			ShortString: maximum of 1,024 characters.
Forename				
FORENAME	Mandatory			ShortString: maximum of 1,024 characters.
Surname				
SURNAME	Mandatory			ShortString: maximum of 1,024 characters.
Date Of Birth				
DATEOFBIRTH	Mandatory			Date: ODBC date as yyyy-mm-dd.
Ethnic Origin				
ETHNICORIGIN	Mandatory			SingleChoice: the code only see table: EthnicOrigin
Gender				
GENDER	Mandatory			SingleChoice: the code only. 1 - Male 2 - Female 3 - Unknown

Upload file

HANAPATH: BaselineA

fields included:

Multichoice separator
Layout specification version
SubmitGroup Code
Patient identifier
Import link ID
Where was the patient seen
Date first seen by cancer specialist
Date of Referral
Postcode at referral
Source of referral
Referral priority
Height (m)
Weight at referral (kg)
Site of symptoms mentioned in the referral letter
Symptoms mentioned in the referral letter
Date symptoms first noted
Actual site of symptoms
Actual symptoms
Has the patient had previous head and neck cancer
Site of previous head and neck cancer
Date of previous cancer treatment
Where was the patient treated
Date of initial contact with the dietician
Dietician treating the patient
Where was the patient assessed by the dietician
Was the patient nutritionally assessed at a pre-treatment clinic by a dietician
Was BMI collected pre-treatment
What was the predominant method of nutritional support during treatment
What was the predominant tube type used during treatment
Was the patient reviewed by a specialist head and neck dietician post treatment in a rehabilitation clinic after single or combined modality treatment
Has the patient been compliant with dietetic advice for appropriate recording of BMI
Did the patient have a pre-treatment SaLT assessment
Where was the SaLT assesment done
Who did the speech and Language assessment
Site of mouth opening measurement
Max mouth opening pre-treatment
Date of SaLT pre-treatment assessment
Normalcy of diet pre-treatment
Laryngectomy proposed method of post operative communication
Did the patient have a post-treatment SaLT assessment
Date of post-treatment SaLT assessment
Normalcy of diet at three months
Laryngectomy communication method at three months
Normalcy of diet at twelve months
Laryngectomy communication method at twelve months
Did the CNS see the patient before treatment
Where was the nursing care provided
Date holistic needs assessment completed
Discharge summary sent within 6 working days of discharge from surgery
Discharge summary sent within 6 working days of discharge from chemotherapy
Discharge summary sent within 6 working days of discharge from radiotherapy
Consultant restorative dentist asked at MDT about restorative assessments
Restorative dentist who assessed the patient
Where was the patient assessed by the restorative dentist
Restorative dental assessment identified as necessary
Date of restorative dental assessment pre-cancer treatment
Chest X-ray prior to treatment
CT Chest prior to treatment
CT primary/neck prior to treatment
MRI Primary prior to treatment
PET CT scan prior to treatment

Upload file

HANAPATH: BaselineA continued...

fields included:

Orthopantomogram prior to treatment
Ultrasound prior to treatment
Where was the MDT meeting held
Date of first MDT meeting
Care plan discussed at MDT meeting before treatment
Date MDT care plan agreed
Planned cancer treatment type at MDT
Basis of diagnosis
Tumour T grade - Pre-treatment
Tumour N grade - Pre-treatment
Tumour M grade - Pre-treatment
Patient approached about clinical trial participation
Trial treatment type
Comorbidity index ACE 27
Performance status
Care plan intent
Reason for no cancer treatment
Where was the radiotherapy provided
Cancer treatment event type
Radiotherapy treatment modality
Radiotherapy Consultant
Cancer TX Type at Time of Radiotherapy
RT planned start date
Date of 1st fraction
Reason for delay
Radiotherapy treatment region
Brachytherapy Type
RT intent
RT technique
Total radiotherapy dose prescribed
RT prescribed number of fractions
RT actual total dose
RT actual number of fractions
RT beam type
Photon energy
Electron beam energy
Date of last fraction
RT regime completed as planned
Reasons for non completion
Acute radiotherapy toxicity complications
Where was the Chemotherapy provided
Cancer treatment event type
Chemotherapy Consultant
Cancer TX Type at Time of Chemotherapy
Treatment intent
Timing of chemotherapy
Chemotherapy regimen
Chemotherapy regimen start date
Chemotherapy treatment modality
Chemotherapy drug type
Chemotherapy drugs prescribed
Planned number of treatment cycles
CT regimen completed as planned
CT regimen modification
Reasons for regimen modification
Acute chemotherapy toxicity complications
Any palliative care
Palliative care consultant
Palliative care organisation
Palliative care start date
Nursing care organisation

Field title	Importance	Min value	Max value	Values allowed
Header field name				
Multichoice separator				
S	Mandatory			A character: you may define the single character you wish to use to separate values in multi-value fields.
Layout specification version				
SPECVERSION	Mandatory			String: use 1.2 for this version of the specification
SubmitGroup Code				
SUBMITCODE	Mandatory			String: a code used to identify the source of the data.
Patient identifier				
DEMOGID	Mandatory			String: can contain any value.
Import link ID				
IMPORTLINKID	Mandatory			Integer: enter a whole number.
Where was the patient seen				
WHEREPATIENTSEENCANCERSPECIALIST	Desirable			SingleChoice: the code only see table: HOS
Date first seen by cancer specialist				
DATEFIRSTSEEN	Desirable			Date: ODBC date as yyyy-mm-dd.

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Date of Referral				
DATEOFREFERRAL	Mandatory			Date: ODBC date as yyyy-mm-dd.
Postcode at referral				
POSTCODEATREFERRAL	Mandatory			ShortString: maximum of 1,024 characters.
Source of referral				
SOURCEOFREFERRAL	Desirable			<p>SingleChoice: the code only.</p> <ul style="list-style-type: none"> 1 - Following an emergency admission 2 - Following a domiciliary consultation 3 - Referral from a general medical practitioner 4 - Referral from an A&E department 5 - Referral from a consultant; other than in an A&E department 6 - Self referral 7 - Referral from a prosthetist 10 - Following an A&E attendance 11 - Initiated by the consultant responsible for the consultant out-patient episode 12 - Referral from a GP or Dentist with a Special Interest 13 - Referral from a specialist nurse 14 - Referral from an allied health professional 15 - Referral from an optometrist 16 - Referral from an orthoptist 17 - Referral from a national screening programme 92 - Referral from a general dental practitioner 93 - Referral from a community dental service 97 - Not initiated by the consultant responsible for the consultant out-patient episode
Referral priority				
REFERRALPRIORITY	Desirable			<p>SingleChoice: the code only.</p> <ul style="list-style-type: none"> 1 - Routine 2 - Urgent 3 - Two week wait

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Height (m)				
HEIGHT	Optional	0.5	2.2	Floating point: enter a numeric value.
Weight at referral (kg)				
WEIGHTATREFERRAL	Desirable	10	500	Floating point: enter a numeric value.
Site of symptoms mentioned in the referral letter				
SYMPTOMSSITEINLETTER	Desirable			MultiChoice: the code(s) only. 0 - Not mentioned 1 - Nose 2 - Sinus 3 - Oral cavity 4 - Pharynx 5 - Salivary gland 6 - Lip 7 - Larynx 8 - Thyroid 9 - Other
Symptoms mentioned in the referral letter				
SYMPTOMSINREFERRALLETTER	Optional			MultiChoice: the code(s) only. 1 - Stridor 2 - Hoarseness 3 - Persistent unilateral otalgia 4 - Persistent unresolved unilateral sore throat 5 - Persistent neck lump for more than three weeks 6 - Persistent oral swelling for greater than three weeks 7 - Ulceration of oral mucosa for more than three weeks 8 - Red/white patches on oral mucosa if pain or sudden bleeding 9 - Unexplained persistent parotid/submandibular swelling 10 - Unexplained tooth mobility for more than three weeks 11 - Solitary thyroid nodule increasing in size 99 - Other
Date symptoms first noted				
DATESYMPTOMSFIRSTNOTED	Desirable *			DayMonthYear: A possibly partially incomplete date in ODBC format.

Field title				
Header field name	Importance	Min value	Max value	Values allowed
				Unknown day or month is indicated by 00. e.g. 2016-19-00 or 2016-00-00
Actual site of symptoms				
ACTUALSYMPTOMSSITES	Desirable			MultiChoice: the code(s) only. 0 - None 1 - Nose 2 - Sinus 3 - Oral cavity 4 - Pharynx 5 - Salivary gland 6 - Lip 7 - Larynx 8 - Thyroid 9 - Other
Actual symptoms				
ACTUALSYMPTOMS	Desirable			MultiChoice: the code(s) only. 1 - Stridor 2 - Hoarseness 3 - Persistent unilateral otalgia 4 - Persistent unresolved unilateral sore throat 5 - Persistent neck lump for more than three weeks 6 - Persistent oral swelling for greater than three weeks 7 - Ulceration of oral mucosa for more than three weeks 8 - Red/white patches on oral mucosa if pain or sudden bleeding 9 - Unexplained persistent parotid/submandibular swelling 10 - Unexplained tooth mobility for more than three weeks 11 - Solitary thyroid nodule increasing in size 12 - Symptoms resolved unexpectedly 99 - Other

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Has the patient had previous head and neck cancer				
PREVIOUSHNCANCER	Desirable			SingleChoice: the code only. 0 - No 1 - Yes 9 - Not known
Site of previous head and neck cancer				
SITEPREVIOUSHNCANCER	Desirable *			MultiChoice: the code(s) only see table: HTS
Date of previous cancer treatment				
DATEOFPREVIOUSCANCERTX	Desirable *	1960		DayMonthYear: A possibly partially incomplete date in ODBC format. Unknown day or month is indicated by 00. e.g. 2016-19-00 or 2016-00-00
Where was the patient treated				
WHERETREATEDFORPREVNHNCANCER	Desirable *			SingleChoice: the code only see table: HOS
Date of initial contact with the dietician				
DATEINITIALCONTACTDIETICIAN	Desirable			Date: ODBC date as yyyy-mm-dd.
Dietician treating the patient				
DIETICIANTREATINGTHEPATIENT	Optional			SingleChoice: the code only see table: HDT
Where was the patient assessed by the dietician				
WHEREPATIENTASSESSSEDBYDIETICIAN	Desirable			SingleChoice: the code only see table: HOS
Was the patient nutritionally assessed at a pre-treatment clinic by a dietician				
NUTRITIONALLYASSESSSEDPRETREATMENTBYDIETICIAN	Optional			SingleChoice: the code only. 0 - No 1 - Yes
Was BMI collected pre-treatment				
WASBMICOLLECTEDPRETREATMENT	Desirable			SingleChoice: the code only. 0 - No 1 - Yes

Field title				
Header field name	Importance	Min value	Max value	Values allowed
What was the predominant method of nutritional support during treatment				
PREDOMINANTNUTRITIONALSUPPORTDURINGTREATMENT	Desirable			SingleChoice: the code only. 1 - Oral nutritional support 2 - Enteral feeding tube 3 - Parenteral nutrition 4 - Didn't require nutritional support 9 - Not known
What was the predominant tube type used during treatment				
PREDOMINANTTUBETYPEDURINGTREATMENT	Desirable *			SingleChoice: the code only. 1 - Nasogastric 2 - TEP/TOFT 3 - PEG 4 - RIG 5 - Surgical gastrostomy 6 - Jejunal (any) 7 - Peripheral intravenous feeding
Was the patient reviewed by a specialist head and neck dietician post treatment in a rehabilitation clinic after single or combined modality treatment				
REVIEWEDBYSPECIALISTHNDIETICIANPOSTTREATMENT	Desirable			SingleChoice: the code only. 0 - No 1 - Yes 8 - Not applicable
Has the patient been compliant with dietetic advice for appropriate recording of BMI				
COMPLIANTDIETETICADVICEBMI	Optional			SingleChoice: the code only. 0 - No 1 - Yes 8 - Not known
Did the patient have a pre-treatment SaLT assessment				
PRETREATMENTSALTASSESSMENT	Desirable			SingleChoice: the code only. 0 - No 1 - Yes 8 - N/a

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Where was the SaLT assesment done				
WHEREASALTASSESSMENTDONE	Desirable *			SingleChoice: the code only see table: HOS
Who did the speech and Language assessment				
WHODIDTHESPEECHANGLANGUAGEASSESSMENT	Desirable *			SingleChoice: the code only see table: HST
Site of mouth opening measurement				
INTERINCISALMEASUREMENTPRETX	Optional			SingleChoice: the code only. 0 - Not measured 1 - Upper central incisor to lower central incisor 2 - Upper incisor to lower gum 3 - Lower incisor to upper gum 4 - Upper gum to lower gum
Max mouth opening pre-treatment				
MAXINTERINCISALDISTANCEPRETREATMENT	Desirable *	0	100	Integer: enter a whole number.
Date of SaLT pre-treatment assessment				
DATEOFSAITPRETREATMENTASSESSMENT	Desirable *			Date: ODBC date as yyyy-mm-dd.
Normalcy of diet pre-treatment				
NORMALCYDIETPRE	Desirable *			SingleChoice: the code only. 1 - Full diet with no restrictions 2 - Full diet with liquid assistance 3 - All meats 4 - Carrots; celery (crunchy) 5 - Dry bread and crackers 6 - Soft; chewable foods 7 - Soft foods requiring no chewing 8 - Puree 9 - Warm liquids 10 - Cold liquids 11 - Non-oral

Field title	Importance	Min value	Max value	Values allowed
Laryngectomy proposed method of post operative communication				
LARYNGECTOMYPOSTOPERATIVECOMMUNICATION	Desirable *			SingleChoice: the code only. 0 - Not applicable 1 - Primary SVR professionally changed 2 - Primary SVR self changed 3 - Secondary SVR professionally changed 4 - Secondary SVR self changed 5 - Electrolarynx 6 - Oesophageal voice 7 - Mouthing 8 - Writing or AAC aid
Did the patient have a post-treatment SaLT assessment				
POSTTREATMENTSALTASSESSMENT	Optional			SingleChoice: the code only. 0 - No 1 - Yes 8 - N/a
Date of post-treatment SaLT assessment				
DATEPOSTTREATMENTSALTASSESSMENT	Desirable *			Date: ODBC date as yyyy-mm-dd.
Normalcy of diet at three months				
NORMALCYDIETTHREEMONTHS	Desirable *			SingleChoice: the code only. 1 - Full diet with no restrictions 2 - Full diet with liquid assistance 3 - All meats 4 - Carrots; celery (crunchy) 5 - Dry bread and crackers 6 - Soft; chewable foods 7 - Soft foods requiring no chewing 8 - Puree 9 - Warm liquids 10 - Cold liquids 11 - Non-oral

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Laryngectomy communication method at three months				
LARYNGECTOMYCOMMUNICATIONTHREEMONTHS	Desirable *			<p>SingleChoice: the code only.</p> <ul style="list-style-type: none"> 1 - Primary SVR professionally changed 2 - Primary SVR self changed 3 - Secondary SVR professionally changed 4 - Secondary SVR self changed 5 - Electrolarynx 6 - Oesophageal voice 7 - Mouthing 8 - Writing or AAC aid
Normalcy of diet at twelve months				
NORMALCYDIETTWELVEMONTHS	Desirable *			<p>SingleChoice: the code only.</p> <ul style="list-style-type: none"> 1 - Full diet with no restrictions 2 - Full diet with liquid assistance 3 - All meats 4 - Carrots; celery (crunchy) 5 - Dry bread and crackers 6 - Soft; chewable foods 7 - Soft foods requiring no chewing 8 - Puree 9 - Warm liquids 10 - Cold liquids 11 - Non-oral
Laryngectomy communication method at twelve months				
LARYNGECTOMYCOMMUNICATIONTWELVEMONTHS	Desirable *			<p>SingleChoice: the code only.</p> <ul style="list-style-type: none"> 1 - Primary SVR professionally changed 2 - Primary SVR self changed 3 - Secondary SVR professionally changed 4 - Secondary SVR self changed 5 - Electrolarynx 6 - Oesophageal voice 7 - Mouthing 8 - Writing or AAC aid

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Did the CNS see the patient before treatment				
DIDCNSSEEPATIENTBEFORETREATMENT	Desirable			SingleChoice: the code only. 0 - No - patient not seen at all by CNS but CNS informed of diagnosis 1 - No - patient not seen at all by CNS and CNS not informed of diagnosis 2 - Yes - CNS present when patient given diagnosis 3 - Yes - CNS not present when patient given diagnosis but saw patient during same consultant clinic session 4 - Yes - CNS not present during Consultant Clinic Session when patient given diagnosis but saw patient at other time 9 - Not known
Where was the nursing care provided				
WHEREWASTHENURSINGCAREPROVIDED	Optional			SingleChoice: the code only see table: HOS
Date holistic needs assessment completed				
DATECNSNEEDSASSESSMENTCOMPLETED	Optional			Date: ODBC date as yyyy-mm-dd.
Discharge summary sent within 6 working days of discharge from surgery				
DISCHARGESUMMARYSURGERY	Optional			SingleChoice: the code only. 0 - No 1 - Yes
Discharge summary sent within 6 working days of discharge from chemotherapy				
DISCHARGESUMMARYCHEMOTHERAPY	Optional			SingleChoice: the code only. 0 - No 1 - Yes
Discharge summary sent within 6 working days of discharge from radiotherapy				
DISCHARGESUMMARYRADIOTHERAPY	Optional			SingleChoice: the code only. 0 - No 1 - Yes

Field title	Importance	Min value	Max value	Values allowed
Consultant restorative dentist asked at MDT about restorative assessments				
CONSDENTISTASKEDATMDT	Optional			SingleChoice: the code only. 0 - No 1 - Yes 8 - Not present at MDT
Restorative dentist who assessed the patient				
RESTORATIVEDENTISTWHOASSESSDPATIENT	Optional			SingleChoice: the code only see table: GDC
Where was the patient assessed by the restorative dentist				
WHEREPATIENTASSESSDPATIENT	Optional			SingleChoice: the code only see table: HOS
Restorative dental assessment identified as necessary				
DENTALASSESSMENTNECESSARY	Optional			SingleChoice: the code only. 0 - No 1 - Yes
Date of restorative dental assessment pre-cancer treatment				
DATEOFRESTORATIVEDENTALASSESSMENT	Desirable			Date: ODBC date as yyyy-mm-dd.
Chest X-ray prior to treatment				
CHESTXPRIORTOTREATMENT	Optional			SingleChoice: the code only. 0 - No 1 - Yes 8 - Not applicable 9 - Not known
CT Chest prior to treatment				
CTCHESTPRIORTOTREATMENT	Desirable			SingleChoice: the code only. 0 - No 1 - Yes 8 - Not applicable 9 - Not known

Field title				
Header field name	Importance	Min value	Max value	Values allowed
CT primary/neck prior to treatment				
CTPRIMARYNECKPRIORTOTREATMENT	Desirable			SingleChoice: the code only. 0 - No 1 - Yes 8 - Not applicable 9 - Not known
MRI Primary prior to treatment				
MRIPRIMARYPRIORTOTREATMENT	Desirable			SingleChoice: the code only. 0 - No 1 - Yes 8 - Not applicable 9 - Not known
PET CT scan prior to treatment				
PETCTSCANPRIORTOTREATMENT	Desirable			SingleChoice: the code only. 0 - No 1 - Yes 8 - Not applicable 9 - Not known
Orthopantomogram prior to treatment				
ORTHOPANTOMOGRAMPRIORTOTREATMENT	Desirable			SingleChoice: the code only. 0 - No 1 - Yes 8 - Not applicable 9 - Not known
Ultrasound prior to treatment				
ULTRASOUNDPRIORTOTREATMENT	Desirable			SingleChoice: the code only. 0 - No 1 - Yes 8 - Not applicable 9 - Not known

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Where was the MDT meeting held				
WEREWASTHEMDTMEETINGHELD	Optional			SingleChoice: the code only see table: HOS
Date of first MDT meeting				
DATEOFFIRSTMDTMEETING	Optional			Date: ODBC date as yyyy-mm-dd.
Care plan discussed at MDT meeting before treatment				
CAREPLANDISCUSEDATMDTMEETING	Optional			SingleChoice: the code only. 0 - No 1 - Yes
Date MDT care plan agreed				
DATEMDTCAREPLANAGREED	Optional			Date: ODBC date as yyyy-mm-dd.
Planned cancer treatment type at MDT				
PLANNEDCANCERTREATMENTTYPEATMDT	Desirable			MultiChoice: the code(s) only. 1 - Surgery 2 - Teletherapy 3 - Chemotherapy 4 - Hormone therapy 5 - Specialist palliative care 6 - Brachytherapy 7 - Biological Therapy 10 - Other active treatment 11 - No active treatment 12 - Biphosphonates 13 - Anti cancer drug - other 14 - Radiotherapy - other 99 - Not known

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Basis of diagnosis				
BASISOFDIAGNOSIS	Optional			SingleChoice: the code only. 1 - Death certificate 2 - Clinical 3 - Clinical investigation 4 - Specific tumour markers 5 - Cytology 6 - Histology from metastasis 7 - Histology from primary tumour 9 - Unknown
Tumour T grade - Pre-treatment				
TUMOURTGRADEMDT	Desirable			SingleChoice: the code only see table: HTT
Tumour N grade - Pre-treatment				
TUMOURNGRADEMDT	Desirable			SingleChoice: the code only see table: HTN
Tumour M grade - Pre-treatment				
TUMOURMGRADEMDT	Desirable			SingleChoice: the code only see table: HTM
Patient approached about clinical trial participation				
PATIENTAPPROACHEDABOUTCLINICALTRIALPARTICIPATION	Optional			SingleChoice: the code only. 0 - Patient eligible; NOT approached by clinician to participate 1 - Patient eligible; declined trial 2 - Patient eligible; consented to and entered trial
Trial treatment type				
TRIALTREATMENTTYPE	Optional			SingleChoice: the code only. 1 - Surgery 2 - Chemotherapy 3 - Hormone therapy 4 - Immunotherapy 5 - Radiotherapy 6 - Combination treatment 8 - Other

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Comorbidity index ACE 27				
COMORBIDITYINDEXACE27	Optional			SingleChoice: the code only. 0 - None 1 - Mild 2 - Moderate 3 - Severe 9 - Unknown
Performance status				
PERFORMANCESTATUS	Optional			SingleChoice: the code only. 0 - Able to carry out all normal activity without restriction 1 - Restricted in physically strenuous activity 2 - Able to walk and capable of all self care 3 - Capable of only limited self care 4 - Completely disabled 9 - Not recorded
Care plan intent				
CAREPLANINTENTMDT	Optional			SingleChoice: the code only. 0 - No active treatment 1 - Curative 2 - Non curative 9 - Not known
Reason for no cancer treatment				
REASONFORNOCANCERTREATMENT	Optional			SingleChoice: the code only. 0 - Monitoring only 1 - Patient treatment declined 2 - Unfit: Poor performance status 3 - Unfit: Significant co-morbidity 4 - Unfit: Advanced stage cancer 5 - Unknown primary site 6 - Died before treatment 7 - No active treatment available 8 - Other 9 - Not known

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Where was the radiotherapy provided				
WEREWASTHERADIOOTHERAPYPROVIDED	Desirable			SingleChoice: the code only see table: HOS
Cancer treatment event type				
CANCERTREATMENTEVENTTYPERRADIOOTHERAPY	Desirable			SingleChoice: the code only. <ul style="list-style-type: none"> 1 - First definitive treatment for a new primary cancer 2 - Second or subsequent treatment for a new primary cancer 3 - Treatment for a local recurrence of a primary cancer 4 - Treatment for a regional recurrence of cancer 5 - Treatment for a distant recurrence of cancer (metastatic disease) 6 - Treatment for multiple recurrence of cancer (local and / or regional and / or distant) 7 - First treatment for metastatic disease following an unknown primary 8 - Second or subsequent treatment for metastatic disease following an unknown primary 9 - Treatment for relapse of primary cancer (second or subsequent) 10 - Treatment for progression of primary cancer (second or subsequent)
Radiotherapy treatment modality				
RADIOOTHERAPYTREATMENTMODALITY	Optional			MultiChoice: the code(s) only. <ul style="list-style-type: none"> 4 - Chemoradiotherapy 5 - Teletherapy 6 - Brachytherapy 13 - Proton Therapy 19 - Radioisotope therapy 22 - Radiosurgery
Radiotherapy Consultant				
RADIOOTHERAPYCONSULTANT	Optional			SingleChoice: the code only see table: HRT

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Cancer TX Type at Time of Radiotherapy				
CANCERTXTYPEATTIMEOFRADIOOTHERAPY	Optional			SingleChoice: the code only. 0 - No active treatment 1 - Surgery 2 - Teletherapy 3 - Chemotherapy 4 - Hormone therapy 5 - Specialist palliative care 6 - Brachytherapy 7 - Biological Therapy 8 - Biphosphonates 9 - Anti cancer drug - other 99 - Not known
RT planned start date				
RTPLANNEDSTARTDATE	Optional			Date: ODBC date as yyyy-mm-dd.
Date of 1st fraction				
DATEOF1STFRACTION	Mandatory			Date: ODBC date as yyyy-mm-dd.
Reason for delay				
REASONFORDELAYRADIOOTHERAPY	Optional			SingleChoice: the code only. 1 - Surgical causes 2 - Dental preparation not complete 3 - Insufficient machines available 4 - Insufficient radiographers available 5 - Planning delay secondary to Oncologist shortage 9 - Other

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Radiotherapy treatment region				
RADIOTHERAPYTREATMENTREGION	Desirable			MultiChoice: the code(s) only. 1 - Primary 2 - Primary & Regional Nodes 3 - Regional Nodes 4 - Metastasis 5 - Non-anatomically specific primary site 6 - Prophylactic (to non-primary site)
Brachytherapy Type				
BRACHYTHERAPYTYPE	Optional			SingleChoice: the code only. 1 - Interstitial 2 - Intra-cavity 3 - Unsealed source 9 - Not otherwise specified
RT intent				
RTINTENT	Desirable			SingleChoice: the code only. 1 - Curative 2 - Diagnostic 4 - Palliative 9 - Not known
RT technique				
RTTECHNIQUE	Desirable			SingleChoice: the code only. 0 - None 1 - Virtual simulation 2 - 3D conformal 3 - IMRT 4 - VMAT 5 - Brachytherapy 6 - Radio isotope 9 - Other
Total radiotherapy dose prescribed				
RTPRESCRIBEDTOTALDOSE	Desirable			Floating point: enter a numeric value.

Field title				
Header field name	Importance	Min value	Max value	Values allowed
RT prescribed number of fractions				
RTPRESCRIBEDNUMBEROFFRACTIONS	Desirable			Integer: enter a whole number.
RT actual total dose				
RTACTUALTOTALDOSE	Desirable			Floating point: enter a numeric value.
RT actual number of fractions				
RTACTUALNUMBEROFFRACTIONS	Desirable			Integer: enter a whole number.
RT beam type				
RTBEAMTYPE	Optional			SingleChoice: the code only. 1 - Photon 2 - Electron 3 - Proton
Photon energy				
PHOTONENERGY	Optional			SingleChoice: the code only. 1 - Equal to or < 160kV (Superficial) 2 - Orthovoltage 3 - Megavoltage 4 - > 160kV and < 6MV 5 - Equal to or > 6MV
Electron beam energy				
ELECTRONBEAMENERGY	Optional			SingleChoice: the code only. 1 - Less than 12 MeV 2 - Equal to or greater than 12 MeV
Date of last fraction				
DATEOFLASTFRACTION	Desirable			Date: ODBC date as yyyy-mm-dd.
RT regime completed as planned				
RTREGIMECOMPLETEDASPLANNED	Optional			SingleChoice: the code only. 0 - No 1 - Yes

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Reasons for non completion				
REASONSFORNONCOMPLETION	Optional			MultiChoice: the code(s) only. 1 - Toxicity 2 - Technical or organisational problems 3 - Patient choice 4 - Patient death 9 - Other
Acute radiotherapy toxicity complications				
ACUTERADIOTHERAPYTOXICITYCOMPLICATIONS	Optional			MultiChoice: the code(s) only. 1 - Mucositis 2 - Skin sores 3 - Pain 4 - Dysphagia 9 - Other
Where was the Chemotherapy provided				
WEREWASTHECHEMOTHERAPYPROVIDED	Desirable			SingleChoice: the code only see table: HOS
Cancer treatment event type				
CANCERTREATMENTEVENTTYPECHEMOTHERAPY	Desirable			SingleChoice: the code only. 1 - First definitive treatment for a new primary cancer 2 - Second or subsequent treatment for a new primary cancer 3 - Treatment for a local recurrence of a primary cancer 4 - Treatment for a regional recurrence of cancer 5 - Treatment for a distant recurrence of cancer (metastatic disease) 6 - Treatment for multiple recurrence of cancer (local and / or regional and / or distant) 7 - First treatment for metastatic disease following an unknown primary 8 - Second or subsequent treatment for metastatic disease following an unknown primary 9 - Treatment for relapse of primary cancer (second or subsequent) 10 - Treatment for progression of primary cancer (second or subsequent)

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Chemotherapy Consultant				
CHEMOTHERAPYCONSULTANT	Desirable			SingleChoice: the code only see table: HGX
Cancer TX Type at Time of Chemotherapy				
CANCERTXTYPEATTIMEOFCHEMOTHERAPY	Optional			SingleChoice: the code only. 0 - No active treatment 1 - Surgery 2 - Teletherapy 3 - Chemotherapy 4 - Hormone therapy 5 - Specialist palliative care 6 - Brachytherapy 7 - Biological Therapy 8 - Biphosphonates 9 - Anti cancer drug - other 10 - Radiotherapy - other 19 - Other active treatment 99 - Not known
Treatment intent				
TREATMENTINTENTCHEMO	Desirable			SingleChoice: the code only. 1 - Curative 2 - Diagnostic 3 - Staging 4 - Palliative 9 - Not known
Timing of chemotherapy				
TIMINGOFCHEMOTHERAPY	Desirable			SingleChoice: the code only. 1 - Neoadjuvant 2 - Induction 3 - Synchronous
Chemotherapy regimen				
CTREGIMEN	Desirable			SingleChoice: the code only see table: HGX

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Chemotherapy regimen start date				
CTREGIMENSTARTDATE	Mandatory			Date: ODBC date as yyyy-mm-dd.
Chemotherapy treatment modality				
CHEMOTHERAPYTREATMENTMODALITY	Optional			MultiChoice: the code(s) only. 2 - Cytotoxic chemotherapy 3 - Hormone therapy 8 - Active monitoring 14 - Anti-cancer drug regimen 15 - Immunotherapy 21 - Biological therapies
Chemotherapy drug type				
CHEMOTHERAPYDRUGTYPE	Desirable			SingleChoice: the code only. 1 - Chemotherapy 2 - Hormone / endocrine therapy 3 - Immunotherapy 9 - Other
Chemotherapy drugs prescribed				
CHEMOTHERAPYDRUGSPRESCRIBED	Optional			MultiChoice: the code(s) only. 1 - Cisplatin 2 - 5FU 3 - Methotrexate 4 - Bleomycin 5 - Antibodies - EGFR 6 - Antibodies - VEGFR 7 - Antibodies - Other 8 - Antibiotics 9 - Taxane derivatives 10 - Hormones 99 - Other
Planned number of treatment cycles				
PLANNEDNUMBEROFTREATMENTCYCLES	Desirable	0	99	Integer: enter a whole number.

Field title				
Header field name	Importance	Min value	Max value	Values allowed
CT regimen completed as planned				
CTREGIMENCOMPLETEDASPLANNED	Optional			SingleChoice: the code only. 0 - No 1 - Yes
CT regimen modification				
CTREGIMENMODIFICATION	Optional			MultiChoice: the code(s) only. 1 - Dose reduction 2 - Time delay 3 - Stopped early
Reasons for regimen modification				
REASONSFORREGIMENMODIFICATIONCHEMOTHERAPY	Desirable *			MultiChoice: the code(s) only. 1 - Chemotherapy toxicity interfering with radiotherapy 2 - Toxicity 3 - Patient died 4 - Progressive disease during chemotherapy 5 - Technical or organizational problems 6 - Patient choice 9 - Other
Acute chemotherapy toxicity complications				
ACUTECHEMOTHERAPYTOXICITYCOMPLICATIONS	Optional			MultiChoice: the code(s) only. 0 - None 1 - Severe skin reaction 2 - Vomiting 3 - Renal impairment 4 - Hearing loss 5 - Bone marrow failure 6 - Neutropenic sepsis 9 - Other
Any palliative care				
ANYPALLIATIVECARE	Desirable			SingleChoice: the code only. 0 - No 1 - Yes

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Palliative care consultant				
PALLIATIVECARECONSULTANT	Optional			SingleChoice: the code only see table: HPC
Palliative care organisation				
PALLIATIVECAREORGANISATION	Desirable *			SingleChoice: the code only see table: HOS
Palliative care start date				
PALLIATIVECARESTARTDATE	Mandatory *			Date: ODBC date as yyyy-mm-dd.
Nursing care organisation				
NURSINGCAREORGANISATION	Desirable *			SingleChoice: the code only see table: HOS

Upload file

HANAPATH: Subprocedure

fields included:

Multichoice separator
Layout specification version
SubmitGroup Code
Patient identifier
Import link ID
Import Child ID
Who ordered biopsy
Where was the biosy taken / resection done
Biopsy sample collection date
Date sample received in path
Where is the pathologist based
Pathologist
Specimen Nature
Pathology investigation type
Has HPV status testing been done
HPV test
Tumour site
Date of pathology report
Tumour laterality
Morphology SNOMED from biopsy
Metastasis found on imaging
Metastasis confirmed histologically
Date of clinically agreed diagnosis
Service report identifier
Sample collection date
Date sample received in path
Who ordered the definitive biopsy or did resection
Where was the definitive biopsy/resection taken
Pathologist
Where is the pathologist based
Specimen Nature
Definitive Morphology SNOMED
Definitive Primary site
Tumour laterality (Path)
Pathology investigation type
Perineural invasion
Size of lesion - Length
Maximum depth of invasion
Metastatic site seen on imaging
Vascular or lymph invasion
Differentiation grade
Excision margin
Synchronous tumour
Site of synchronous tumour
Number of nodes examined
Number of nodes positive
Neck dissection laterality
Positive nodes laterality
Largest metastasis left neck
Largest metastasis right neck
Extracapsular spread
Bone invasion
Cartilage invasion
Histologic grade (Salivary)
Macroscopic extraglandular extension
Tumour T grade - pathological
Tumour N grade - pathological
Tumour M grade - pathological
Was pathology done after neoadjuvant Rx
Tumour T grade - MDT Post Op
Tumour N grade - MDT Post Op
Tumour M grade - MDT Post Op
Version of UICC used for staging
Was resective pathology discussed at MDT
Tumour stage - Pre treatment
Tumour stage - Final

Field title	Importance	Min value	Max value	Values allowed
Header field name				
Multichoice separator				
S	Mandatory			A character: you may define the single character you wish to use to separate values in multi-value fields.
Layout specification version				
SPECVERSION	Mandatory			String: use 1.2 for this version of the specification
SubmitGroup Code				
SUBMITCODE	Mandatory			String: a code used to identify the source of the data.
Patient identifier				
DEMOGID	Mandatory			String: can contain any value.
Import link ID				
IMPORTLINKID	Mandatory			Integer: enter a whole number.
Import Child ID				
IMPORTCHILDID	Optional			Integer: enter a whole number.
Who ordered biopsy				
WHOORDEREDBIOPSY	Desirable			SingleChoice: the code only see table: GMC
Where was the biosy taken / resection done				
WHEREWASTHEBIOSYTAKENRESECTIONDONE	Desirable			SingleChoice: the code only see table: HOS
Biopsy sample collection date				
BIOPYSAMPLECOLLECTIONDATE	Desirable			Date: ODBC date as yyyy-mm-dd.
Date sample received in path				
DATESAMPLERECEIVEDINPATH	Desirable			Date: ODBC date as yyyy-mm-dd.
Where is the pathologist based				
WHEREISTHEPATHOLOGISTBASED	Desirable			SingleChoice: the code only see table: HOS
Pathologist				
PATHOLOGIST	Desirable			SingleChoice: the code only see table: HPA

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Specimen Nature				
SPECIMENNATUREBIOPSY	Optional			MultiChoice: the code(s) only. 1 - Primary tumour 2 - Further excision of primary tumour 3 - Regional lymph nodes 4 - Metastatic site other than regional lymph nodes 9 - Not known
Pathology investigation type				
PATHOLOGYINVESTIGATIONTYPEBIOPSY	Optional			SingleChoice: the code only. 1 - Cytology 2 - Biopsy 6 - Further excision 7 - Curettage 8 - Shave biopsy 9 - Punch biopsy 10 - Incisional biopsy 19 - Uncertain / other
Has HPV status testing been done				
HASHPVSTATUSTESTINGBEENDONE	Optional			SingleChoice: the code only. 0 - Not done 1 - Done - negative result 2 - Done - positive result 9 - Not applicable
HPV test				
HPVTEST	Optional			SingleChoice: the code only. 1 - PCR only 2 - PCR + P16 3 - P16 alone 4 - P16 + DNA ish 5 - RNA ish
Tumour site				
TUMOURSITE	Optional			SingleChoice: the code only see table: HTS

Field title	Importance	Min value	Max value	Values allowed
Date of pathology report				
DATEOFPATHOLOGYREPORT	Desirable			Date: ODBC date as yyyy-mm-dd.
Tumour laterality				
TUMOURLATERALITY	Desirable			SingleChoice: the code only. 1 - Left 2 - Right 3 - Midline 4 - Bilateral 8 - Not applicable 9 - Not known
Morphology SNOMED from biopsy				
MORPHOLOGYSNOMEDFROMBIOPSY	Desirable			SingleChoice: the code only see table: HSM
Metastasis found on imaging				
METASTASISFOUNDONIMAGING	Desirable			SingleChoice: the code only. 0 - No 1 - Yes
Metastasis confirmed histologically				
METASTASISCONFIRMEDHISTOLOGICALLY	Desirable *			SingleChoice: the code only. 0 - No 1 - Yes
Date of clinically agreed diagnosis				
DATEOFCLINICALLYAGREEDIAGNOSIS	Mandatory			Date: ODBC date as yyyy-mm-dd.
Service report identifier				
SERVICEREPORTIDENTIFIER	Desirable			ShortString: maximum of 1,024 characters.
Sample collection date				
SAMPLECOLLECTIONDATEDEFINITIVE	Optional			Date: ODBC date as yyyy-mm-dd.
Date sample received in path				
DATEDEFINITIVESAMPLERECEIVEDINPATH	Optional			Date: ODBC date as yyyy-mm-dd.

Field title	Importance	Min value	Max value	Values allowed
Who ordered the definitive biopsy or did resection				
WHOORDEREDDEFINITIVEBIOPSYORRESECTION	Optional			SingleChoice: the code only see table: GMC
Where was the definitive biopsy/resection taken				
WHEREWASDEFINITIVEBIOPSYRESECTIONTAKEN	Optional			SingleChoice: the code only see table: HOS
Pathologist				
PATHOLOGISTDEFINITIVE	Optional			SingleChoice: the code only see table: HPA
Where is the pathologist based				
WHEREISDEFINITIVEPATHOLOGISTBASED	Optional			SingleChoice: the code only see table: HOS
Specimen Nature				
SPECIMENNATURE	Optional			MultiChoice: the code(s) only. 1 - Primary tumour 2 - Further excision of primary tumour 3 - Regional lymph nodes 4 - Metastatic site other than regional lymph nodes 9 - Not known
Definitive Morphology SNOMED				
MORPHOLOGYSNOMEDDEFINITIVE	Desirable			SingleChoice: the code only see table: HSM
Definitive Primary site				
DEFINITIVEPRIMARYSITE	Desirable			MultiChoice: the code(s) only see table: HTS
Tumour laterality (Path)				
TUMOURLATERALITYPATH	Desirable			SingleChoice: the code only. 1 - Left 2 - Right 3 - Midline 4 - Bilateral 8 - Not applicable 9 - Not known

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Pathology investigation type				
PATHOLOGYINVESTIGATIONTYPE	Optional			SingleChoice: the code only. 2 - Biopsy 3 - Excision 4 - Partial excision 5 - Radical excision 6 - Further excision 7 - Curettage 19 - Uncertain / other
Perineural invasion				
PERINEURALINVASION	Optional			SingleChoice: the code only. 0 - No 1 - Yes 8 - Not completed
Size of lesion - Length				
SIZEOFLESIONLENGTH	Desirable			Integer: enter a whole number.
Maximum depth of invasion				
MAXIMUMDEPTHOFINVASION	Desirable			Integer: enter a whole number.
Metastatic site seen on imaging				
METASTATICSITSEENONIMAGING	Optional			MultiChoice: the code(s) only. 2 - Brain 3 - Liver 4 - Lung 7 - Unknown metastatic sites 8 - Skin 9 - Distant lymph nodes 10 - Bone excluding bone marrow 11 - Bone marrow 99 - Other metastatic sites

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Vascular or lymph invasion				
VASCULARORLYMPHINVASION	Optional			SingleChoice: the code only. 0 - Neither 2 - Vascular invasion only 3 - Lymphatic invasion only 4 - lymphatic and vascular invasion present 97 - Uncertain whether vascular / lymphatic invasion is present or not 98 - Cannot be assessed 99 - Not Known
Differentiation grade				
DIFFERENTIATIONGRADE	Desirable			SingleChoice: the code only. 0 - Grade of differentiation is not appropriate or cannot be assessed 1 - Well differentiated 2 - Moderately differentiated 3 - Poorly differentiated 4 - Undifferentiated / anaplastic
Excision margin				
EXCISIONMARGIN	Desirable			SingleChoice: the code only. 1 - Excision margins are clear (distance from margin not stated) 2 - Excision margins are clear (tumour >5mm from the margin) 3 - Excision margins are clear (tumour >1mm but less than or equal to 5mm from the margin) 4 - Tumour is less than or equal to 1mm from excision margin, but does not reach margin 5 - Tumour reaches excision margin 6 - Uncertain
Synchronous tumour				
SYNCHRONOUSTUMOUR	Desirable			SingleChoice: the code only. 0 - No 1 - Yes 2 - Not known

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Site of synchronous tumour				
SITEOFSYNCHRONOUSTUMOUR	Optional			SingleChoice: the code only. 1 - Head & Neck 2 - Breast 3 - CNS 4 - Colorectal 5 - Gynaecology 6 - Haematology 7 - Lung 8 - Sarcoma 9 - Skin 10 - Upper Gi 11 - Urology 99 - Other
Number of nodes examined				
NUMBEROFNODESEXAMINED	Desirable	0		Integer: enter a whole number.
Number of nodes positive				
NUMBEROFNODESPOSITIVE	Desirable	0		Integer: enter a whole number.
Neck dissection laterality				
NECKDISSECTIONLATERALITY	Desirable			SingleChoice: the code only. 1 - Left 2 - Right 3 - Bilateral 4 - Not performed 9 - Not applicable
Positive nodes laterality				
POSITIVENODESLATERALITY	Desirable			SingleChoice: the code only. 1 - Left 2 - Right 3 - Bilateral 4 - Not performed

Field title	Importance	Min value	Max value	Values allowed
Largest metastasis left neck				
LARGESTMETASTASISLEFTNECK	Desirable			Integer: enter a whole number.
Largest metastasis right neck				
LARGESTMETASTASISRIGHTNECK	Desirable			Integer: enter a whole number.
Extracapsular spread				
EXTRACAPSULARSPREAD	Desirable *			SingleChoice: the code only. 1 - Present 2 - Absent 9 - Not assessable
Bone invasion				
BONEINVASION	Optional			SingleChoice: the code only. 1 - Present 2 - Absent 8 - Not applicable 9 - Not assessed
Cartilage invasion				
CARTILAGEINVASION	Optional			SingleChoice: the code only. 1 - Present 2 - Absent 8 - Not applicable 9 - Not assessed
Histologic grade (Salivary)				
HISTOLOGICGRADESALIVARY	Desirable			SingleChoice: the code only. 0 - Not assessed 1 - Low 2 - High 9 - Not applicable

Field title	Importance	Min value	Max value	Values allowed
Macroscopic extraglandular extension				
MACROSCOPICEXTRAGLANDULAREXTENSION	Desirable			SingleChoice: the code only. 0 - Absent 1 - Present
Tumour T grade - pathological				
TUMOURTGRADEPATHOLOGICAL	Desirable			SingleChoice: the code only see table: HTT
Tumour N grade - pathological				
TUMOURNGRADEPATHOLOGICAL	Desirable			SingleChoice: the code only see table: HTN
Tumour M grade - pathological				
TUMOURMGRADEPATHOLOGICAL	Desirable			SingleChoice: the code only see table: HTM
Was pathology done after neoadjuvant Rx				
WASPATHOLOGYAFTERNEOADJUVANTRX	Optional			SingleChoice: the code only. 0 - No 1 - Yes 9 - Not known
Tumour T grade - MDT Post Op				
TUMOURTGRADEMDTPOSTOP	Desirable			SingleChoice: the code only see table: HTT
Tumour N grade - MDT Post Op				
TUMOURNGRADEMDTPOSTOP	Desirable *			SingleChoice: the code only see table: HTN
Tumour M grade - MDT Post Op				
TUMOURMGRADEMDTPOSTOP	Desirable			SingleChoice: the code only see table: HTM
Version of UICC used for staging				
VERSIONOFUICCUSEDFORSTAGING	Optional			SingleChoice: the code only. 1 - UICC ver 6 2 - UICC ver 7

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Was resective pathology discussed at MDT				
WASRESECTIVEPATHOLOGYDISCUSSEDATMDT	Desirable			SingleChoice: the code only. 0 - No 1 - Yes 9 - Not known
Tumour stage - Pre treatment				
TUMOURSTAGEPRETREATMENT	Optional			SingleChoice: the code only. 1 - Stage I 2 - Stage II 3 - Stage III 4 - Stage IV-A 5 - Stage IV-B 6 - Stage IV-C
Tumour stage - Final				
TUMOURSTAGEFINAL	Optional			SingleChoice: the code only. 1 - Stage I 2 - Stage II 3 - Stage III 4 - Stage IV-A 5 - Stage IV-B 6 - Stage IV-C

Upload file

HANAPATH: Followup

fields included:

Multichoice separator
Layout specification version
SubmitGroup Code
Patient identifier
Import link ID
Import Child ID
Date of assessment
Source of information
Patient weight
Site of mouth opening measurement
Max mouth opening post-treatment
Where was the follow up
Suspected recurrence
Site of suspected head and neck recurrence
Side of suspected recurrence
Suspected new tumour
Site of suspected new tumour
Head & Neck site of suspected new tumour
Side of suspected new tumour
Complications
Acute radiotherapy toxicity complications
Late radiotherapy toxicity complications
Acute chemotherapy toxicity complications
Late chemotherapy toxicity complications
Late surgical complications
Other complications
Investigations ordered - Imaging nature
Investigations ordered - Imaging site
Investigations ordered - Pathology nature
Investigations ordered - Pathology site
Planned weeks to next appointment
Date of clinician letter
Letter copied to MDT co-ordinator
Date of radiology report for head & neck tumour
Radiology report copied to MDT co-ordinator
Date of pathology report for head and neck tumour
Pathology report copied to MDT co-ordinator
Biopsy result (recurrence or new tumour indicator)
Biopsy result copied to MDT co-ordinator
Date of MDT discussion
Date new tumour clinically agreed
Date of recurrence clinically agreed
Primary tumour status
Node status
Metastatic status
General complications
Patient status
Date of death
General cause of death
Specific cause of death
Location of death

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Multichoice separator				
S	Mandatory			A character: you may define the single character you wish to use to separate values in multi-value fields.
Layout specification version				
SPECVERSION	Mandatory			String: use 1.2 for this version of the specification
SubmitGroup Code				
SUBMITCODE	Mandatory			String: a code used to identify the source of the data.
Patient identifier				
DEMOGID	Mandatory			String: can contain any value.
Import link ID				
IMPORTLINKID	Mandatory			Integer: enter a whole number.
Import Child ID				
IMPORTCHILDID	Optional			Integer: enter a whole number.
Date of assessment				
DATEOFFOLLOWUP	Mandatory			Date: ODBC date as yyyy-mm-dd.
Source of information				
SOURCEOFINFORMATION	Optional			MultiChoice: the code(s) only. 1 - SaLT 2 - Dietetics 3 - CNS 4 - Dental 5 - Radiology 6 - MDT 7 - Surgery 8 - Radiotherapy 9 - Chemotherapy
Patient weight				
WEIGHT	Desirable	10	500	Floating point: enter a numeric value.

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Site of mouth opening measurement				
INTERINCISALMEASUREMENTPOSTTX	Optional			SingleChoice: the code only. 0 - Not measured 1 - Upper central incisor to lower central incisor 2 - Upper incisor to lower gum 3 - Lower incisor to upper gum 4 - Upper gum to lower gum
Max mouth opening post-treatment				
MAXINTERINCISALDISTANCEPOSTTREATMENT	Desirable	0	100	Integer: enter a whole number.
Where was the follow up				
WHEREWASTHEFOLLOWUP	Desirable			SingleChoice: the code only see table: HOS
Suspected recurrence				
SUSPECTEDRECURRENCE	Optional			SingleChoice: the code only. 0 - No 1 - Yes
Site of suspected head and neck recurrence				
SITEOFSUSPECTEDHNRECURRENCE	Optional			SingleChoice: the code only see table: HTS
Side of suspected recurrence				
SIDEOFSUSPECTEDRECURRENCE	Optional			SingleChoice: the code only. 1 - Left 2 - Right 3 - Midline 4 - Bilateral 8 - Not applicable 9 - Not known
Suspected new tumour				
SUSPECTEDNEWTUMOUR	Desirable			SingleChoice: the code only. 0 - No 1 - Yes

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Site of suspected new tumour				
SITEOFSUSPECTEDNEWTUMOUR	Optional			SingleChoice: the code only. 1 - Head & Neck 2 - Breast 3 - CNS 4 - Colorectal 5 - Gynaecology 6 - Haematology 7 - Lung 8 - Sarcoma 9 - Skin 10 - Upper Gi 11 - Urology 99 - Other
Head & Neck site of suspected new tumour				
HEADNECKSITEOFSUSPECTEDNEWTUMOUR	Optional			SingleChoice: the code only see table: HTS
Side of suspected new tumour				
SIDEOFSUSPECTEDNEWTUMOUR	Optional			SingleChoice: the code only. 1 - Left 2 - Right 3 - Midline 4 - Bilateral 8 - Not applicable 9 - Not known

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Complications				
COMPLICATIONS	Optional			MultiChoice: the code(s) only. 0 - None 1 - General complications 2 - Acute toxicity complications of radiotherapy 3 - Late toxicity complications of radiotherapy 4 - Acute toxicity complications of chemotherapy 5 - Late toxicity complications of chemotherapy 6 - Late surgical complications 9 - Other complications
Acute radiotherapy toxicity complications				
ACUTETOXICITYRADIOTHERAPY	Optional			MultiChoice: the code(s) only. 1 - Mucositis 2 - Skin sores 3 - Pain 4 - Dysphagia 9 - Other

Field title	Importance	Min value	Max value	Values allowed
Late radiotherapy toxicity complications				
LATERADIOTHERAPYCOMPLICATIONS	Desirable *			MultiChoice: the code(s) only. 1 - Xerostomia 2 - Cartilage necrosis 3 - Osteoradionecrosis 4 - Fibrosis 5 - Severe skin damage 6 - Swallowing difficulty for solids 7 - Swallowing difficulty for liquids 8 - Visual problems 9 - Spinal cord or bone damage 10 - Cranial bone problems 11 - Cerebral cortical problems 12 - Carotid artery narrowing + cv effects 13 - Limited mouth opening 14 - Carotid blow out 15 - Gum and teeth problems 99 - Other
Acute chemotherapy toxicity complications				
ACUTECHEMOTHERAPYTOXICITYCOMPLICATIONS	Optional			MultiChoice: the code(s) only. 1 - Severe skin reaction 2 - Vomiting 3 - Renal impairment 4 - Hearing loss 5 - Bone marrow failure 6 - Neutropenic sepsis 9 - Other

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Late chemotherapy toxicity complications				
LATECHEMOTHERAPYTOXICITYCOMPLICATIONS	Desirable *			MultiChoice: the code(s) only. 1 - Severe skin reaction 2 - Vomiting 3 - Renal impairment 4 - Hearing loss 5 - Peripheral neuropathy 6 - Difficulty with balance 99 - Other

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Late surgical complications				
LATESURGICALCOMPLICATIONS	Optional			MultiChoice: the code(s) only. 1 - Asymmetrical appearance 2 - Disfigurement 3 - Facial defect 4 - Poor Speech 5 - Swallowing difficulty 6 - Aspiration 7 - Anaesthesia dolorosa of neck 8 - Anaesthesia dolorosa of face 9 - Persistent Chyle leak 10 - Numbness of lip 11 - Facial nerve weakness 12 - Oro-nasal fistula 13 - Oro-cutaneous fistula 14 - Pharyngo-cutaneous fistula 15 - Neck stiffness 16 - Shoulder weakness 17 - Hearing problems 18 - Visual problems 19 - Donor site problems: Weakness 20 - Donor site problems: Numbness 21 - Donor site problems: Limited movement 22 - Donor site problems: Lymphoedema 23 - Donor site problems: Lymphocoele 24 - Donor site problems: Scarring 25 - Donor site problems: Asymmetry 99 - Donor site problems: Other
Other complications				
OTHERCOMPLICATIONS	Optional			ShortString: maximum of 1,024 characters.

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Investigations ordered - Imaging nature				
INVESTIGATIONSORDEREDIMAGINGNATURE	Desirable			MultiChoice: the code(s) only. 1 - PET/CT 2 - MRI 3 - CT 4 - US 9 - Other
Investigations ordered - Imaging site				
INVESTIGATIONSORDEREDIMAGINGSITE	Desirable			MultiChoice: the code(s) only. 1 - Head 2 - Neck 3 - Chest 4 - Back 5 - Abdomen 6 - Trunk 7 - Arm 8 - Leg 9 - Brain 10 - Spine 99 - Other
Investigations ordered - Pathology nature				
INVESTIGATIONSORDEREDPATHOLOGYNATURE	Desirable			MultiChoice: the code(s) only. 1 - Biopsy 2 - FNAC 3 - Image guided biopsy 9 - Other
Investigations ordered - Pathology site				
INVESTIGATIONSORDEREDPATHOLOGYSITE	Desirable			MultiChoice: the code(s) only. 1 - Head and Neck 2 - Liver 3 - Lung 4 - Spine 99 - Other

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Planned weeks to next appointment				
PLANNEDWEEKSTONEXTAPPOINTMENT	Optional	0		Integer: enter a whole number.
Date of clinician letter				
DATEOFCLINICIANLETTER	Optional			Date: ODBC date as yyyy-mm-dd.
Letter copied to MDT co-ordinator				
LETTERCOPIEDTOMDTCOORDINATOR	Optional			SingleChoice: the code only. 0 - No 1 - Yes
Date of radiology report for head & neck tumour				
DATEOFRADIOLOGYREPORTFORHEADNECKTUMOUR	Desirable			Date: ODBC date as yyyy-mm-dd.
Radiology report copied to MDT co-ordinator				
RADIOLOGYREPORTCOPIEDTOMDTCOORDINATOR	Desirable			SingleChoice: the code only. 0 - No 1 - Yes
Date of pathology report for head and neck tumour				
DATEPATHOLOGYREPORTHNTUMOUR	Desirable			Date: ODBC date as yyyy-mm-dd.
Pathology report copied to MDT co-ordinator				
PATHOLOGYREPORTCOPIEDTOMDTCOORDINATOR	Desirable			SingleChoice: the code only. 0 - No 1 - Yes
Biopsy result (recurrence or new tumour indicator)				
BIOPSYRESULTRECURRENCEORNEWTUMOURINDICATOR	Desirable			SingleChoice: the code only. 0 - No 1 - Yes 2 - N/A 9 - Not known

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Biopsy result copied to MDT co-ordinator				
BIOPSYRESULTCOPIEDTOMDTCOORDINATOR	Desirable			SingleChoice: the code only. 0 - No 1 - Yes
Date of MDT discussion				
DATEOFMDTDISCUSSIONRECURRENCE	Desirable			Date: ODBC date as yyyy-mm-dd.
Date new tumour clinically agreed				
DATENEWTUMOURCLINICALLYAGREED	Optional			Date: ODBC date as yyyy-mm-dd.
Date of recurrence clinically agreed				
DATEOFRECURRENCECLINICALLYAGREED	Optional			Date: ODBC date as yyyy-mm-dd.
Primary tumour status				
PRIMARYTUMOURSTATUS	Desirable			SingleChoice: the code only. 1 - Residual primary tumour 2 - No evidence of primary tumour 3 - Recurrent primary tumour 8 - Not assessed 9 - Uncertain
Node status				
NODESTATUS	Desirable			SingleChoice: the code only. 1 - Residual regional nodal metastases 2 - No evidence of regional nodal metastases 3 - New regional nodal metastases 8 - Not assessed 9 - Uncertain

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Metastatic status				
METASTATICSTATUS	Desirable			SingleChoice: the code only. 1 - Residual distant metastases 2 - No evidence of distant metastases 3 - New distant metastases 8 - Not assessed 9 - Uncertain
General complications				
GENERALCOMPLICATIONS	Optional			MultiChoice: the code(s) only. 1 - Gastrostomy problems 2 - Tracheostomy problems
Patient status				
PATIENTSTATUS	Desirable			SingleChoice: the code only. 0 - Alive 1 - Dead
Date of death				
DATEOFDEATH	Mandatory *			Date: ODBC date as yyyy-mm-dd.
General cause of death				
GENERALCAUSEOFDEATH	Optional			SingleChoice: the code only. 1 - Treatment related 2 - Disease related 3 - Not treatment or disease related

Field title	Importance	Min value	Max value	Values allowed
Specific cause of death				
SPECIFICCAUSEOFDEATH	Optional			<p>SingleChoice: the code only.</p> <ul style="list-style-type: none"> 1 - Recurrent tumour 2 - Haemorrhage 3 - Tracheostomy blocked 4 - Airway obstruction 5 - Cerebrovascular accident 6 - Myocardial infarction 7 - Cardiac arrest 8 - Pneumonia 9 - Pneumothorax 10 - Collapsed lung 11 - Pulmonary embolus 12 - Septicaemia 13 - Bone marrow failure 14 - Peptic ulcer 15 - Gastrostomy complications 16 - MRSA related 17 - Clostridium Difficile related 18 - Other hospital acquired problem 19 - Renal failure 20 - Swallowing problems 21 - Aspiration pneumonia 22 - Radiation necrosis 23 - Carotid blow out 99 - Other

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Location of death				
LOCATIONOFDEATH	Optional			SingleChoice: the code only. 10 - Hospital 20 - Private residence 21 - Patient's own home 22 - Other private residence 30 - Hospice 40 - Carehome 41 - Care home with nursing 42 - Care home without nursing 50 - Other

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HANARAD: BaselineA

fields included:

Multichoice separator
Layout specification version
SubmitGroup Code
Patient identifier
Import link ID
Parent DB ID
Date of referral

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Multichoice separator				
S	Mandatory			A character: you may define the single character you wish to use to separate values in multi-value fields.
Layout specification version				
SPECVERSION	Mandatory			String: use 1.2 for this version of the specification
SubmitGroup Code				
SUBMITCODE	Mandatory			String: a code used to identify the source of the data.
Patient identifier				
DEMOGID	Mandatory			String: can contain any value.
Import link ID				
IMPORTLINKID	Mandatory			Integer: enter a whole number.
Parent DB ID				
PARENTDBID	Mandatory			Integer: enter a whole number.
Date of referral				
DATEOFREFERRAL	Mandatory			Date: ODBC date as yyyy-mm-dd.

Upload file

HANARAD: Subprocedure

fields included:

Multichoice separator
Layout specification version
SubmitGroup Code
Patient identifier
Import link ID
Import Child ID
Date of imaging
Imaging modality
Anatomical site
Anatomical side
Where was the imaging done
Maximum diameter of lesion
Radiologist
Imaging report
Metastasis found on imaging
Metastatic site
Metastasis confirmed histologically

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Multichoice separator				
S	Mandatory			A character: you may define the single character you wish to use to separate values in multi-value fields.
Layout specification version				
SPECVERSION	Mandatory			String: use 1.2 for this version of the specification
SubmitGroup Code				
SUBMITCODE	Mandatory			String: a code used to identify the source of the data.
Patient identifier				
DEMOGID	Mandatory			String: can contain any value.
Import link ID				
IMPORTLINKID	Mandatory			Integer: enter a whole number.
Import Child ID				
IMPORTCHILDID		Optional		Integer: enter a whole number.
Date of imaging				
DATEOFIMAGING	Mandatory			Date: ODBC date as yyyy-mm-dd.
Imaging modality				
IMAGINGMODALITY	Desirable			SingleChoice: the code only. 1 - Standard radiography 2 - CT scan 3 - MRI scan 4 - PET scan 5 - Ultrasound scan 6 - Nuclear medicine imaging 7 - Angiography 8 - Barium 9 - Interventional radiography 19 - Other

Field title	Importance	Min value	Max value	Values allowed
Header field name				
Anatomical site				
ANATOMICALSITE	Desirable			MultiChoice: the code(s) only see table: HAS
Anatomical side				
ANATOMICALSIDE	Desirable			SingleChoice: the code only. 1 - Left 2 - Right 3 - Midline 4 - Bilateral 8 - Not applicable 9 - Not known
Where was the imaging done				
WEREWASTHEIMAGINGDONE	Desirable			SingleChoice: the code only see table: HOS
Maximum diameter of lesion				
MAXIMUMLESIONDIAMETER	Desirable			Integer: enter a whole number.
Radiologist				
RADIOLOGIST	Optional			SingleChoice: the code only see table: HRD
Imaging report				
IMAGINGREPORT	Optional			String data (max 150000 chars)
Metastasis found on imaging				
METASTASISFOUNDONIMAGING	Optional			SingleChoice: the code only. 0 - No 1 - Yes

Field title	Importance	Min value	Max value	Values allowed
Metastatic site				
Header field name				
Metastatic site				
METASTATICSITE	Optional			MultiChoice: the code(s) only. 2 - Brain 3 - Liver 4 - Lung 7 - Unknown sites 8 - Skin 9 - Distant lymph nodes 10 - Bone (excluding bone marrow) 11 - Bone marrow 99 - Other metastatic site
Metastasis confirmed histologically				
METASTASISCONFIRMEDHISTOLOGICALLY	Optional			SingleChoice: the code only. 0 - No 1 - Yes

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HANASURG: BaselineA

fields included:

Multichoice separator
Layout specification version
SubmitGroup Code
Patient identifier
Import link ID
Parent DB ID
Record owner
Where was the surgery performed
Consultant with overall responsibility for the operation
Main specialty of consultant
Planned operation date
Date of admission
Date of operation
Operation type
Variance between planned and actual procedure date
Reason for discrepancy between planned date and procedure date
Cancer treatment type
Cancer treatment event type
Cancer treatment intent surgery
Cancer treatment modality at the time of surgery
Complications of surgery during hospital stay
Did any of these complications need further surgical treatment under GA during hospital stay

Field title	Importance	Min value	Max value	Values allowed
Header field name				
Multichoice separator				
S	Mandatory			A character: you may define the single character you wish to use to separate values in multi-value fields.
Layout specification version				
SPECVERSION	Mandatory			String: use 1.2 for this version of the specification
SubmitGroup Code				
SUBMITCODE	Mandatory			String: a code used to identify the source of the data.
Patient identifier				
DEMOGID	Mandatory			String: can contain any value.
Import link ID				
IMPORTLINKID	Mandatory			Integer: enter a whole number.
Parent DB ID				
PARENTDBID	Mandatory			Integer: enter a whole number.
Record owner				
RECORDOWNER	Optional			Integer: enter a whole number.
Where was the surgery performed				
WEREWASTHESURGERYPERFORMED	Desirable			SingleChoice: the code only see table: HOS
Consultant with overall responsibility for the operation				
CONSULTANTWITHOVERALLRESPONSIBILITYFORTHEPROCEDURE	Optional			SingleChoice: the code only see table: GMC
Main specialty of consultant				
MAINSPECIALTYOFCONSULTANT	Optional			SingleChoice: the code only. 0 - Unknown 1 - Oral and maxillofacial surgery 2 - Ear nose and throat surgery 3 - Plastic and reconstructive surgery 4 - General surgery 9 - Other

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Planned operation date				
PLANNEDPROCEDUREDATE	Optional			Date: ODBC date as yyyy-mm-dd.
Date of admission				
DATEOFADMISSION	Optional			Date: ODBC date as yyyy-mm-dd.
Date of operation				
DATEOFOPERATION	Mandatory			Date: ODBC date as yyyy-mm-dd.
Operation type				
OPERATIONTYPE	Optional			MultiChoice: the code(s) only. 1 - Resection 2 - Reconstruction 3 - Revision 4 - Surgery for treatment complication 9 - Other
Variance between planned and actual procedure date				
VARIANCEBETWEENPLANNEDANDACTUALPROCEDUREDATE	Optional			Integer: enter a whole number.
Reason for discrepancy between planned date and procedure date				
REASONFORDISCREPANCYBETWEENPLANNEDDATEANDPROCEDURE	Optional			SingleChoice: the code only. 1 - Not applicable 2 - Patient unfit 3 - Patient refused treatment 4 - Lack of theatre time 5 - Equipment failure 6 - Equipment not available 7 - Staff sickness 8 - Bed shortage day of surgery 9 - Bed shortage day of admission 10 - No ITU/HDU bed available 11 - ITU/HDU bed available but no nurses to staff it 12 - Adverse weather conditions 99 - Other

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Cancer treatment type				
CANCERTREATMENTTYPESURGERY	Desirable			MultiChoice: the code(s) only. 1 - Surgery 2 - Teletherapy 3 - Chemotherapy 4 - Hormone therapy 5 - Specialist palliative care 6 - Brachytherapy 7 - Biological therapy 10 - Other active treatment 11 - No active treatment 12 - Biphosphonates 13 - Anti-cancer drug - Other 14 - Radiotherapy - Other 99 - Not known
Cancer treatment event type				
CANCERTREATMENTEVENTTYPE	Desirable			SingleChoice: the code only. 1 - First definitive treatment for a new primary cancer 2 - Second or subsequent treatment for a new primary cancer 3 - Treatment for a local recurrence of a primary cancer 4 - Treatment for a regional recurrence of cancer 5 - Treatment for a distant recurrence of cancer (metastatic disease) 6 - Treatment for multiple recurrence of cancer (local and / or regional and / or distant) 7 - First treatment for metastatic disease following an unknown primary 8 - Second or subsequent treatment for metastatic disease following an unknown primary 9 - Treatment for relapse of primary cancer (second or subsequent) 10 - Treatment for progression of primary cancer (second or subsequent)

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Cancer treatment intent surgery				
CANCERTREATMENTINTENTSURGERY	Desirable			SingleChoice: the code only. 1 - Curative 2 - Diagnostic 3 - Staging 4 - Palliative 9 - Not known
Cancer treatment modality at the time of surgery				
CANCERTREATMENTMODALITY	Desirable			MultiChoice: the code(s) only. 1 - Surgery 10 - RFA 11 - HIFU 12 - Cryotherapy 16 - Light therapy 17 - Hyperbaric oxygen therapy 19 - Laser treatment

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Complications of surgery during hospital stay				
COMPLICATIONSOFSURGERYDURINGHOSPITALSTAY	Desirable			MultiChoice: the code(s) only. 0 - None 1 - Haemorrhage 2 - Tracheostomy blocked 3 - Airway obstruction 4 - Cerebrovascular accident 5 - Myocardial infarction 6 - Cardiac arrest 7 - Alcohol withdrawal - DTs 8 - Pneumonia 9 - Pneumothorax 10 - Collapsed lung 11 - Pulmonary embolus 12 - DVT 13 - Wound infection - donor site 14 - Wound infection - resection site 15 - Wound breakdown 16 - Chyle leak 17 - Haematoma 18 - Seroma 19 - Oro-cutaneous fistula 20 - Pharyngocutaneous fistula 21 - Failure to clear tumour 22 - Reconstruction failure 23 - New reconstruction necessary 24 - Feeding problems 25 - Peptic ulcer 26 - Gastrostomy complications 27 - MRSA related complication 28 - C. Difficile related complication 29 - Other hospital acquired problem 30 - Urinary tract infection 31 - Septicaemia 99 - Other

Field title				
Header field name	Importance	Min value	Max value	Values allowed

Did any of these complications need further surgical treatment under GA during hospital stay

DIDANYOFTHESECOMPLICATIONSNEEDFURTHERSURGICALTREAT	Desirable *			SingleChoice: the code only. 0 - No 1 - Yes
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HANASURG: Subprocedure

fields included:

Multichoice separator
Layout specification version
SubmitGroup Code
Patient identifier
Import link ID
Import Child ID
Procedure
Procedures for complications
Operating surgeon
Assistant surgeon

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Multichoice separator				
S	Mandatory			A character: you may define the single character you wish to use to separate values in multi-value fields.
Layout specification version				
SPECVERSION	Mandatory			String: use 1.2 for this version of the specification
SubmitGroup Code				
SUBMITCODE	Mandatory			String: a code used to identify the source of the data.
Patient identifier				
DEMOGID	Mandatory			String: can contain any value.
Import link ID				
IMPORTLINKID	Mandatory			Integer: enter a whole number.
Import Child ID				
IMPORTCHILDID		Optional		Integer: enter a whole number.
Procedure				
PRIMARYPROCEDURE	Desirable			SingleChoice: the code only see table: HOP
Procedures for complications				
PROCEDURESFORCOMPLICATIONS	Desirable			MultiChoice: the code(s) only. 0 - None 1 - Evacuation of haematoma 2 - Drainage of infection 3 - Wound closure 4 - Surgery for gastrostomy complications 9 - Other procedure for complication
Operating surgeon				
OPERATINGSURGEON	Desirable			SingleChoice: the code only see table: GMC
Assistant surgeon				
ASSISTANTSURGEON		Optional		SingleChoice: the code only see table: GMC

Upload file

HANASURG: BaselineB

fields included:

Multichoice separator
Layout specification version
SubmitGroup Code
Patient identifier
Import link ID
Patient status at discharge
General cause of death
Specific cause of death
Discharge date
Delayed discharge
Non clinical cause of discharge delay
Discharge destination

Field title	Importance	Min value	Max value	Values allowed
Header field name				
Multichoice separator				
S	Mandatory			A character: you may define the single character you wish to use to separate values in multi-value fields.
Layout specification version				
SPECVERSION	Mandatory			String: use 1.2 for this version of the specification
SubmitGroup Code				
SUBMITCODE	Mandatory			String: a code used to identify the source of the data.
Patient identifier				
DEMOGID	Mandatory			String: can contain any value.
Import link ID				
IMPORTLINKID	Mandatory			Integer: enter a whole number.
Patient status at discharge				
PATIENTSTATUSATDISCHARGE	Desirable			SingleChoice: the code only. 0 - Alive 1 - Deceased
General cause of death				
GENERALCAUSEOFDEATH	Optional			SingleChoice: the code only. 1 - Treatment related 2 - Disease related 3 - Not treatment or disease related

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Specific cause of death				
SPECIFICCAUSEOFDEATH	Optional			SingleChoice: the code only. 1 - Recurrent tumour 2 - Haemorrhage 3 - Tracheostomy blocked 4 - Airway obstruction 5 - Cerebrovascular accident 6 - Myocardial infarction 7 - Cardiac arrest 8 - Pneumonia 9 - Pneumothorax 10 - Collapsed lung 11 - Pulmonary embolus 12 - Septicaemia 13 - Bone marrow failure 14 - Peptic ulcer 15 - Gastrostomy complications 16 - MRSA related 17 - Clostridium Difficile related 18 - Other hospital acquired problem 19 - Renal failure 20 - Swallowing problems 21 - Aspiration pneumonia 22 - Radiation necrosis 23 - Carotid blow out 99 - Other
Discharge date				
DISCHARGEDATE	Desirable			Date: ODBC date as yyyy-mm-dd.
Delayed discharge				
DELAYEDDISCHARGE	Optional			SingleChoice: the code only. 0 - No 1 - Yes

Field title				
Header field name	Importance	Min value	Max value	Values allowed
Non clinical cause of discharge delay				
NONCLINICALCAUSEOFDISCHARGEDELAY	Optional			MultiChoice: the code(s) only. 1 - Normal home not available 2 - Not fit to return to normal home 3 - No family support available 4 - No supportive friends or neighbours available 5 - Lack of community Speech and Language Therapist 6 - Lack of community dietetic support 7 - Lack of community tracheostomy competence 8 - Delay in completing continuing health care forms 9 - No social service support available / ready 10 - No places in respite care available / ready 11 - No hospice places available 99 - Other
Discharge destination				
DISCHARGEDESTINATION	Optional			SingleChoice: the code only. 19 - Usual place of residence 29 - Temporary place of residence 30 - Repatriation from high security psychiatric accommodation in an NHS Hospital Provider 51 - NHS - Ward for general patient or the younger physically disabled 52 - NHS - ward for maternity patients or neonates 53 - NHS - ward for patients who are mentally ill or have learning disabilities 54 - NHS - care home 65 - LA residential accommodation i.e. where care is provided 79 - Patient died 85 - Non-NHS run care home 87 - Non-NHS run hospital 88 - Non-NHS run hospice 98 - Not applicable 99 - Not known

Reference

Tables

tables included:

- HOS
- HTS
- HTT
- HTN
- HTM
- HCR
- HSM
- EthnicOrigin
- HAS
- HOP

HOS

5M121	Birmingham Dental Hospital	7A5B1	Royal Glamorgan Hospital, South Wales
5N4AT	BMI Thornbury Hospital, Sheffield	7A5B3	Prince Charles Hospital, Merthyr Tydfil
7A122	Mynydd Isa Health Clinic, Mold	7A5BK	Pontypridd & District Hospital
7A125	Pen-Y-Cae Community Centre Clinic, Wrexham	7A601	Royal Gwent Hospital, Newport
7A14K	Llwyn View Clinic, Dolgellau	7A6AM	Nevill Hall Hospital, Abergavenny
7A14W	Bromfield Medical Centre, Mold	7A7EH	Bronllys Hospital, Brecon
7A1A1	Glan Clwyd Hospital, Rhyl	NT205	Nuffield Health Brighton Hospital
7A1A2	Abergele Hospital, Conwy	NT316	Spire Harpenden Hospital
7A1A4	Wrexham Maelor Hospital	NT332	Spire Leeds Hospital
7A1A5	Royal Alexandra Hospital, Brighton	NVC15	Pinehill Hospital, Hitchin, Hertfordshire
7A1A7	Chirk Community Hospital	R1F01	St Mary's Hospital, Isle of Wight
7A1A8	Colwyn Bay Community Hospital	R1G01	Paignton Hospital
7A1A9	Denbigh Community Hospital	R1G02	Brixham Hospital
7A1AD	Mold Community Hospital	R1G09	Ashburton and Buckfastleigh Hospital, Newton Abbot
7A1AF	Ruthin Community Hospital	R1G10	Dartmouth Hospital
7A1AU	Ysbyty Gwynedd, Bangor	R1G11	Dawlish Hospital
7A1AV	Llandudno General Hospital	R1G12	Newton Abbot Hospital
7A1AX	Bryn Beryl Hospital, Pwllheli	R1G13	Teignmouth Hospital
7A1AZ	Ffestiniog Memorial Hospital	R1G14	Totnes Hospital
7A1D4	Penley Hospital, Wrexham	R1G54	Bovey Tracey Hospital, Torbay
7A1DC	Ysbyty Penrhos Stanley, Holyhead	R1G55	South Hams Hospital, Kingsbridge
7A1DD	Cefni Hospital, Llangefni	R1G56	Tavistock Hospital
7A1DG	Eryri Hospital, Caernarfon	R1H07	Barts and the London Dental Hospital
7A1F7	South Clwyd Intensive Rehabilitation Unit, Wrexham	R1H12	The Royal London Hospital
7A1FC	Tan-Y-Castell Rehabilitation Unit, Ruthin	R1H13	Mile End Hospital, London
7A1GE	Bryn-Y-Neuadd Hospital, Llanfairfechan	R1HK2	Chingford Hospital
7A1HD	North Wales Cancer Treatment Centre, Rhyl	R1HKH	Whipps Cross University Hospital, London
7A1JQ	Pwllheli Day Hospital	R1HKJ	Wanstead Hospital, London
7A2AG	Glangwili General Hospital, Camarthen	R1HM0	St Bartholomew's Hospital, London
7A2AJ	Bronglais General Hospital, Aberystwyth	R1HNH	Newham General Hospital, London
7A2AL	Prince Philip Hospital, Llanelli	R1K01	Northwick Park Hospital, Harrow
7A2BL	Withybush General Hospital, Haverfordwest	R1K04	Ealing Hospital, London
7A3B7	Princess of Wales Hospital, Bridgend	RA201	Royal Surrey County Hospital, Guildford
7A3C4	Singleton Hospital, Swansea	RA301	Weston General Hospital, Weston-super-Mare
7A3C7	Morrison Hospital, Swansea	RA430	Yeovil District Hospital
7A3CJ	Neath Port Talbot Hospital	RA701	Bristol Royal Infirmary
7A4BV	University Hospital of Wales, Cardiff	RA703	Bristol Homeopathic Hospital

HOS continued ...

RA707	St Michael's Hospital, Bristol	RE9GA	South Tyneside District Hospital, South Shields
RA708	Bristol Eye Hospital	REF12	Royal Cornwall Hospital, Truro
RA710	Bristol Haematology & Oncology Centre	REM21	Aintree University Hospital, Liverpool
RA901	Torbay Hospital, Torquay	REN20	Clatterbridge Hospital, Wirral
RAE01	Bradford Royal Infirmary	RF4QH	Queen's Hospital, Romford
RAJ01	Southend University Hospital, Westcliff-on-Sea	RFFAA	Barnsley Hospital
RAL26	Barnet General Hospital, London	RFRPA	Rotherham General Hospital
RAL26	Barnet General Hospital, London	RFSDA	Chesterfield Royal Infirmary
RALC7	Chase Farm Hospital, London	RFW01	West Middlesex University Hospital, Isleworth
RAPNM	North Middlesex Hospital, Enfield	RGN80	Peterborough City Hospital
RAS01	Hillingdon Hospital, Uxbridge	RGP75	James Paget Hospital, Great Yarmouth
RAX01	Kingston Hospital, London	RGQ02	Ipswich Hospital
RBA11	Musgrove Park Hospital, Taunton	RGR50	West Suffolk Hospital, Bury St Edmunds
RBD01	Dorset County Hospital, Dorchester	RGT01	Addenbrooke's Hospital, Cambridge
RBK02	Manor Hospital, Walsall	RH801	Royal Devon & Exeter Hospital
RBL14	Arrowe Park Hospital, Wirral	RH884	Nuffield Health Exeter Hospital
RBN01	Whiston Hospital, Prescot	RHM01	Southampton General Hospital
RBN02	St Helens Hospital	RHM12	Princess Anne Hospital, Southampton
RBT20	Leighton Hospital, Crewe	RHQCC	Charles Clifford Dental Hospital, Sheffield
RBV01	Christie Hospital, Manchester	RHQHH	Royal Hallamshire Hospital, Sheffield
RBZ12	North Devon District Hospital, Barnstaple	RHQNG	Northern General Hospital, Sheffield
RC112	Bedford Hospital	RHQWP	Weston Park Hospital, Sheffield
RC971	Luton & Dunstable Hospital	RHU03	Queen Alexandra Hospital, Portsmouth
RCB55	York Hospital	RHW01	Royal Berkshire Hospital, Reading
RCBCA	Scarborough General Hospital	RJ100	Guy's Hospital, London
RCD01	Harrogate District Hospital	RJ122	St Thomas's Hospital, London
RCF22	Airedale General Hospital, Keighley	RJ133	Queen Mary's Hospital, Sidcup
RCUEF	Sheffield Children's Hospital	RJ224	University Hospital Lewisham
RCX70	Queen Elizabeth Hospital, Kings Lynn	RJ253	Princess Royal University Hospital, Orpington
RD130	Royal United Hospital, Bath	RJ611	Croydon University Hospital
RD300	Poole General Hospital	RJ701	St George's Hospital, London
RD816	Milton Keynes General Hospital	RJD01	County Hospital Stafford
RDDH0	Basildon University Hospital	RJE01	Royal Stoke University Hospital, Stoke-on-Trent
RDEE4	Colchester General Hospital	RJF02	Queen's Hospital, Burton-upon-Trent
RDU01	Frimley Park Hospital	RJL30	Diana, Princess of Wales Hospital, Grimsby
RDU50	Wexham Park Hospital, Slough	RJL31	Goole & District Hospital
RDZ20	Royal Bournemouth General Hospital	RJL32	Scunthorpe General Hospital

HOS continued ...

RJN71	Macclesfield District General Hospital	RR802	Leeds Dental Hospital
RJR05	Countess of Chester Hospital	RR807	Wharfedale Hospital, Otley
RJZ01	King's College Hospital, London	RR813	St James's University Hospital, Leeds
RK5BC	Kings Mill Hospital, Sutton-in-Ashfield	RRF02	Royal Albert Edward Infirmary, Wigan
RK5HP	Newark Hospital	RRF53	Wrightington Hospital, Wigan
RK950	Derriford Hospital, Plymouth	RRF54	Thomas Linacre Outpatient Centre, Wigan
RKB01	University Hospital, Coventry	RRK02	Queen Elizabeth Hospital, Birmingham
RL403	New Cross Hospital, Wolverhampton	RRV03	University College Hospital, London
RLNGL	Sunderland Royal Hospital	RTD01	Freeman Hospital, Newcastle
RM102	Norfolk & Norwich University Hospital	RTD02	Royal Victoria Infirmary, Newcastle
RM201	Withington Hospital, Manchester	RTD06	Northern Centre for Cancer Care, Newcastle upon Tyne
RM202	Wythenshawe Hospital, Manchester	RTE01	Cheltenham General Hospital
RM301	Salford Royal Hospital	RTE03	Gloucestershire Royal Hospital
RMC01	Royal Bolton Hospital	RTE23	Cirencester Hospital
RMP01	Tameside General Hospital, Ashton-under-Lyne	RTE61	Nuffield Health Cheltenham Hospital
RN325	Great Western Hospital, Swindon	RTFED	Wansbeck General Hospital, Ashington
RN506	Basingstoke & North Hampshire Hospital, Basingstoke	RTGFA	London Road Community Hospital, Derby
RNA01	Russells Hall Hospital, Dudley	RTGFG	Royal Derby Hospital
RNJM0	St Bartholomew's Hospital, London	RTH02	Churchill Hospital, Oxford
RNLAY	Cumberland Infirmary, Carlisle	RTH08	John Radcliffe Hospital, Oxford
RNLBX	West Cumberland Hospital, Whitehaven	RTK01	St Peter's Hospital, Chertsey
RNQ51	Kettering General Hospital	RTK02	Ashford Hospital
RNS01	Northampton General Hospital	RTP02	Crawley Hospital
RNZ02	Salisbury District Hospital	RTP04	East Surrey Hospital, Redhill
RP5DR	Doncaster Royal Infirmary	RTRAT	James Cook University Hospital, Middlesbrough
RPA02	Medway Maritime Hospital, Gillingham	RTX02	Royal Lancaster Hospital
RPA44	Spire Alexandra Hospital, Chatham	RTXBU	Furness General, Barrow-in-Furness
RPC04	Queen Victoria Hospital, East Grinstead	RTXBW	Westmorland General Hospital, Kendal
RPY01	Royal Marsden Hospital, London	RVJ01	Southmead Hospital, Bristol
RQ617	Royal Liverpool University Hospital	RVJ20	Frenchay Hospital, Bristol
RQ8L0	Broomfield Hospital, Chelmsford	RVR05	St Helier Hospital, Carshalton
RQFH5	Velindre Hospital, Cardiff	RVR06	Sutton Hospital
RQQ31	Hinchingbrooke Hospital	RVR50	Epsom Hospital
RQWG0	Princess Alexandra Hospital, Harlow	RVV01	William Harvey Hospital, Ashford
RQXM1	Homerton Hospital, London	RVV02	Buckland Hospital, Dover
RR101	Birmingham Heartlands Hospital	RVV03	Royal Victoria Hospital, Folkstone
RR801	Leeds General Infirmary	RVV09	Queen Elizabeth The Queen Mother Hospital, Margate

HOS continued ...

RVKC	Kent & Canterbury Hospital, Canterbury	RXK02	City Hospital, Birmingham
RVY01	Southport & Formby District General Hospital	RXL01	Blackpool Victoria Hospital
RW3MR	Manchester Royal Infirmary	RXL43	Blackburn Royal Infirmary
RW3TR	Trafford General Hospital, Manchester	RXN02	Royal Preston Hospital
RW601	Fairfield General Hospital, Bury	RXPDA	Darlington Memorial Hospital
RW602	North Manchester General Hospital	RXR10	Burnley General Hospital
RW603	Royal Oldham Hospital	RXR20	Royal Blackburn Hospital
RW604	Rochdale Infirmary	RXWAS	Royal Shrewsbury Hospital
RWA01	Hull Royal Infirmary	RYJ01	St Mary's Hospital, London
RWA16	Castle Hill Hospital, Cottingham	RYJ02	Charing Cross Hospital, London
RWDDA	Lincoln County Hospital	RYJ03	Hammersmith Hospital, London
RWDLA	Pilgrim Hospital, Boston	RYR16	St Richard's Hospital, Chichester
RWDLP	Grantham and District Hospital	RYR18	Worthing Hospital
RWEAA	Leicester Royal Infirmary		
RWF03	Maidstone Hospital		
RWFTW	Tunbridge Wells Hospital		
RWG02	Watford General Hospital		
RWH01	Lister Hospital, Stevenage		
RWH04	Mount Vernon Cancer Centre, Northwood		
RWH20	Queen Elizabeth II Hospital, Welwyn Garden City		
RWH23	Hertford County Hospital		
RWJ09	Stepping Hill Hospital, Stockport		
RWP01	Alexandra Hospital, Redditch		
RWP31	Kidderminster Hospital		
RWP50	Worcestershire Royal Infirmary		
RWWWH	Warrington Hospital		
RWY01	Huddersfield Royal Infirmary, Lindley		
RWY02	Calderdale Royal Hospital		
RX1CC	Nottingham City Hospital		
RX1RA	Queen's Medical Centre, Nottingham		
RX471	Hexham General Hospital		
RXC01	Conquest Hospital, St Leonards-on-Sea		
RXC02	Eastbourne District General Hospital		
RXF5M	Pinderfields Hospital, Wakefield		
RXH01	Royal Sussex County Hospital, Brighton		
RXH09	Princess Royal Hospital, Haywards Heath		
RXK01	Sandwell District Hospital, West Bromwich		

HTS

C00	Malignant neoplasm of lip	C062	Malignant neoplasm of retromolar area
C000	Malignant neoplasm of external upper lip	C068	Malignant neoplasm, overlap les of oth & unsp part of mouth
C001	Malignant neoplasm of external lower lip	C069	Malignant neoplasm of part of mouth, unspecified
C002	Malignant neoplasm of external lip, unspecified	C07X	Malignant neoplasm of parotid gland
C003	Malignant neoplasm of upper lip, inner aspect	C08	Maligt neoplasm of oth and unsp major saliv glands
C004	Malignant neoplasm of lower lip, inner aspect	C080	Malignant neoplasm of submandibular gland
C005	Malignant neoplasm of lip, unspecified, inner aspect	C081	Malignant neoplasm of sublingual gland
C006	Malignant neoplasm of commissure of lip	C088	Malignant neoplasm, overlapping lesion of major saliv gland
C008	Malignant neoplasm of overlapping lesion of lip	C089	Malignant neoplasm of major salivary gland, unspecified
C009	Malignant neoplasm of lip, unspecified	C09	Malignant neoplasm of tonsil
C01X	Malignant neoplasm of base of tongue	C090	Malignant neoplasm tonsillar fossa
C02	Malignant neoplasm of other and unspecified parts of tongue	C091	Malig neo of tonsillar pillar (anterior)(posterior)
C020	Malignant neoplasm of dorsal surface tongue	C098	Malignant neoplasm of overlapping lesion of tonsil
C021	Malignant neoplasm of border of tongue	C099	Malignant neoplasm of tonsil unspecified
C022	Malignant neoplasm of ventral surface of tongue	C10	Malignant neoplasm of oropharynx
C023	Malignant neo of anterior two-thirds of tongue, part uns	C100	Malignant neoplasm of vallecula
C024	Malignant neoplasm of lingual tonsil	C101	Malignant neoplasm of anterior surface of epiglottis
C028	Malignant neoplasm of overlapping lesion of tongue	C102	Malignant neoplasm of lateral wall of oropharynx
C029	Malignant neoplasm of tongue, unspecified	C103	Malignant neoplasm of posterior wall of oropharynx
C03	Malignant neoplasm of gum	C104	Malignant neoplasm of branchial cleft
C030	Malignant neoplasm of upper gum	C108	Malignant neoplasm overlapping lesion of oropharynx
C031	Malignant neoplasm of lower gum	C109	Malignant neoplasm of oropharynx unspecified
C039	Malignant neoplasm of gum unspecified	C11	Malignant neoplasm of nasopharynx
C04	Malignant neoplasm of floor of mouth	C110	Malignant neoplasm of superior wall of nasopharynx
C040	Malignant neoplasm of floor of anterior floor of mouth	C111	Malignant neoplasm of posterior wall of nasopharynx
C041	Malignant neoplasm of lateral floor of mouth	C112	Malignant neoplasm of lateral wall of nasopharynx
C048	Malignant neoplasm, overlapping lesion of floor of mouth	C113	Malignant neoplasm of anterior wall of nasopharynx
C049	Malignant neoplasm of floor of mouth, floor of mouth, unsp	C118	Malignant neoplasm overlapping lesion of nasopharynx
C05	Malignant neoplasm of palate	C119	Malignant neoplasm of nasopharynx unspecified
C050	Malignant neoplasm of hard palate	C12X	Malignant neoplasm of pyriform sinus
C051	Malignant neoplasm of soft palate	C13	Malignant neoplasm of hypopharynx
C052	Malignant neoplasm of uvula	C130	Malignant neoplasm of hypopharynx, postcricoid region
C058	Malignant neoplasm, overlapping lesion of palate	C131	Malig neoplasm aryepiglottic fold, hypopharyngeal aspect
C059	Malignant neoplasm of palate, unspecified	C132	Malignant neoplasm posterior wall of hypopharynx
C06	Malignant neoplasm of other and unspecified parts of mouth	C138	Malignant neoplasm overlapping lesion of hypopharynx
C060	Malignant neoplasm cheek mucosa	C139	Malignant neoplasm of hypopharynx unspecified
C061	Malignant neoplasm of vestibule of mouth	C14	Mal neo oth ill-def sites lip/oral cavity/pharynx

HTS continued ...

C140	Malignant neoplasm of pharynx, unsp	C433	Malignant melanoma of other and unspecified parts of face
C142	Malignant neoplasm of Waldeyer's ring	C434	Malignant melanoma of scalp and neck
C148	Malig neo, overlapping lesion of lip, oral cavity & pharynx	C440	Other malignant neoplasms of skin of lip
C30	Malignant neoplasm of nasal cavity and middle ear	C441	Other malignant neoplasms of skin of eyelid, incl canthus
C300	Malignant neoplasm of nasal cavity	C442	Oth malignant neoplasms of skin of ear & ext auricular canal
C301	Malignant neoplasm of middle ear	C443	Oth malignant neoplasm of skin of oth & unsp parts of face
C31	Malignant neoplasm of accessory sinuses	C444	Other malignant neoplasms of skin of scalp and neck
C310	Malignant neoplasm of maxillary sinus	C76	Malignant neoplasm of other and ill-defined sites
C311	Malignant neoplasm of ethmoidal sinus	C760	Malignant neoplasm of head, face & neck
C312	Malignant neoplasm of frontal sinus	C77	Secondary and unspecified malignant neoplasm of lymph nodes
C313	Malignant neoplasm of sphenoidal sinus	C770	Sec & uns malig neoplasm of lymph nodes of head, face & neck
C318	Malignant neoplasm, overlapping lesion accessory sinuses	C780	Secondary malignant neoplasm of lung
C319	Malignant neoplasm of accessory sinus, unsp	C79	Secondary malignant neoplasm of other and unspecified sites
C32	Malignant neoplasm of larynx	C792	Secondary malignant neoplasm of skin
C320	Malignant neoplasm of glottis	C793	Secondary malignant neoplasm of brain & cerebral meninges
C320A	Vocal cords, true	C794	Secondary malignant neoplasm of oth & unsp parts nervous sys
C320B	Anterior commissure	C795	Secondary malignant neoplasm of bone and bone marrow
C320C	Posterior commissure	C800	Malignant neoplasm, primary site unknown, so stated
C321	Malignant neoplasm of supraglottis	C809	Malignant neoplasm, primary site unspecified
C321A	Suprahyoid epiglottis (tip, laryngeal surface)	D00	Carcinoma in situ of oral cavity, oesophagus and stomach
C321B	Aryepiglottic fold, laryngeal aspect	D000	Carcinoma in situ of lip, oral cavity and pharynx
C321C	Arytenoid	D02	Carcinoma in situ of middle ear and respiratory system
C321D	Infrahyoid epiglottis	D020	Carcinoma in situ larynx
C321E	False cords	D37	Neoplasm uncert or unkn behaviour oral cav and diges organs
C322	Malignant neoplasm of subglottis	D370	Neoplasm uncert / unkn behav lip, oral cavity and pharynx
C323	Malignant neoplasm of laryngeal cartilage	D38	Neo uncert or unkn behav middle ear/resp/intrathor organ
C323A	Arytenoid cartilage	D380	Neoplasm uncert / unkn behav larynx
C323B	Cricoid cartilage	D446	Neoplasm uncert / unkn behav carotid body
C323C	Thyroid cartilage		
C328	Malignant neoplasm, overlapping lesion of larynx		
C329	Malignant neoplasm of larynx, unspecified		
C410	Malignant neoplasm of bones of skull and face		
C411	Malignant neoplasm of mandible		
C43	Malignant melanoma of skin		
C430	Malignant melanoma of lip		
C431	Malignant melanoma of eyelid, including canthus		
C432	Malignant melanoma of ear and ext auricular canal		

HTT							
T1	T1	T2	T2	T4A	T4a		
T1A	T1a	T3	T3	T4B	T4b		
T1B	T1b	T4	T4	TX	Tx		
HTN							
N0	N0	N2A	N2A	N2C	N2C	NX	NX
N1	N1	N2B	N2B	N3	N3		
HTM							
M0	M0	M1	M1	MX	MX		
HCR							
0	None	1	Chemoradiotherapy	2	Chemotherapy alone		
HSM							
D5F0315	Pleomorphic adenoma of parotid gland	M80723	Non-keratinizing squamous carcinoma - large cell				
M09503	No microscopic confirmation - clinically malignant tumour (cancer)	M80743	Spindle cell squamous cell carcinoma				
M09506	No microscopic confirmation - clinically metastatic tumour	M80753	Adenoid squamous carcinoma				
M73050	Oncocytic metaplasia	M80903	Basal cell carcinoma				
M80003	Neoplasm - malignant	M80943	Basosquamous carcinoma				
M80050	Clear cell tumour - NOS	M81233	Basaloid carcinoma				
M80102	Carcinoma in situ	M81403	Adenocarcinoma				
M80103	Carcinoma	M81406	Adenocarcinoma - metastatic				
M80106	Carcinoma - metastatic	M81473	Basal cell adenocarcinoma				
M80203	Carcinoma - undifferentiated	M82003	Adenoid cystic carcinoma				
M80213	Carcinoma - anaplastic	M82473	Merkel cell carcinoma				
M80323	Spindle cell carcinoma	M82903	Oxyphilic adenocarcinoma/Oncocytoma				
M80333	Pseudosarcomatous carcinoma	M84013	Apocrine adenocarcinoma				
M80413	Small cell carcinoma	M84103	Sebaceous adenocarcinoma				
M80513	Verrucous carcinoma	M84203	Ceruminous adenocarcinoma				
M80702	Squamous cell carcinoma in situ	M84303	Mucoepidermoid carcinoma				
M80703	Squamous cell carcinoma	M84803	Mucinous Adenocarcinoma				
M80706	Squamous cell carcinoma - metastatic						
M80713	Keratinizing squamous carcinoma						

HSM continued ...

M85003	Invasive Ductal Carcinoma NST	M89900	Mesenchymoma - benign
M85253	Polymorphous low grade adenocarcinoma	M89901	Mesenchymoma
M85501	Acinar cell tumour	M89903	Mesenchymoma - malignant
M85503	Acinar cell carcinoma	M92203	Chondrosarcoma
M85603	Adenosquamous carcinoma	M92603	Ewings sarcoma
M85623	Epithelial-myoepithelial carcinoma	M92703	Odontogenic tumour - malignant
M85753	Metaplastic Carcinoma	M92903	Ameloblastic odontosarcoma
M87203	Malignant melanoma	M93103	Ameloblastoma - malignant
M88003	Sarcoma	M93303	Ameloblastic fibrosarcoma
M88103	Fibrosarcoma	M95003	Neuroblastoma
M88900	Leiomyoma	M95233	Esthesioneuroepithelioma
M88903	Leiomyosarcoma	M95603	Neurilemmoma - malignant
M89003	Rhabdomyosarcoma	M95803	Granular cell tumour - malignant
M89103	Embryonal rhabdomyosarcoma	M95913	Non-Hodgkin lymphoma
M89400	Pleomorphic adenoma	M97313	Plasmacytoma
M89413	Carcinoma in pleomorphic adenoma		

EthnicOrigin

-
- 1 (White) British
 - 2 (White) Irish
 - 3 Any other White background
 - 4 White and Black Caribbean
 - 5 White and Black African
 - 6 White and Asian
 - 7 Any other mixed background
 - 8 Indian
 - 9 Pakistani
 - 10 Bangladeshi
 - 11 Any other Asian background
 - 12 Caribbean
 - 13 African
 - 14 Any other Black background
 - 15 Chinese
 - 16 Any other ethnic group
 - 17 Not stated
 - 99 Not known

HAS

1	Head	7	Arm
2	Neck	8	Leg
3	Chest	9	Brain
4	Back	10	Spine
5	Abdomen	19	Other
6	Trunk		

HOP

1	Excision Vermilion Border of Lip & Advancement Mucosa Lip:F011	29	Excision of lesion of bone of face:V073
2	Unspecified Partial Excision of Lip:F019	30	Internal fixation of maxilla NEC:V112
3	Excision of Lesion of Lip:F021	31	Removal of fixation from bone of face:V115
4	Destruction of Lip:F022	32	Unspecified Fixation of bone of face:V119
5	Full Dental Clearance:F101	33	Other specified other operations on bone of faceFrom Bone Group:V138
6	Extraction of Multiple Teeth:F104	34	Hemimandibulectomy:V141
7	Other specified Partial Excision of Lip:F018	35	Extensive excision of mandible:V142
8	Unspecified Simple Extraction of Tooth:F108	36	Partial excision of mandible:marginal mandibulectomy:V143
9	Excision of Gingiva:F201	37	Excision of lesion of mandible:V144
10	Excision of Lesion of Gingiva:F202	38	Unspecified Excision of mandible:V149
11	Gingivoplasty:F204	39	Internal fixation of mandible NEC:V172
12	Suture of Gingiva:F205	40	Other specified op mandible:V198
13	Other Specified Op on Gingiva:F208	50	Pharyngolaryngectomy :E191 E291
14	Total Glossectomy:F221	51	Partial Pharyngectomy:oropharyngectomy:E192
15	Partial Glossectomy:F222	52	Laser Resection of Tongue:F23.1 Y081
16	Excision of Lesion of Tongue:F231	53	Laser Resection of Soft palate:F28.1 Y081
17	Excision of Lesion of Palate:F281	54	Partial Pharyngectomy:E192
18	Palatotomy - Total:F328 Y051	55	Open Trans-oral laser resection of oropharynx:E231 Y082
19	Palatotomy - Partial :F328 Y052	56	Other Open Operations on Pharynx:E238
20	Excision of Lesion of Floor of Mouth:F381	57	Other Specified Other Operations on Pharynx:E278
21	Excision of Lesion of Mouth:F382	58	Bilateral Dissection Tonsillectomy:F341
22	Excision of lesion of buccal mucosa:F382	59	Bilateral Laser Tonsillectomy:F343 Y08.1
23	Extirpation of Lesion of Other Part of Mouth:F382	60	Bilateral Tonsilectomy:F344
24	Other Specified Other Operations on Mouth:F428	61	Excision of Remnant of Tonsil:F345
25	Unspecified Excision of maxilla:V069	62	Excision of Lingual Tonsil:F346
26	Extensive excision of bone of face:V071	63	Other op - Excision of tonsil:F348
27	Excisionof maxilla - medial maxillectomy:V06.1	64	Tonsilectomy:F349
28	Partial excision of bone of face NEC:V072		

HOP continued ...

65	Destruction of Tonsil:F361	118	Microlaryngoscopy - laser removal lesion:E341 Y082
66	Unspecified Other Op Tonsil :F369	119	Microtherapeutic endoscopic Extirpation of lesion of larynx with laser:E341 Y082
70	Trans-oral laser resection of hypharynx:E192 Y081	120	Microlaryngoscopy - cold removal lesion:E342
71	Resection of hypopharynx:Partial Pharyngectomy:E192	121	Arytenoid Resecton:Endoscopic Arytenoidectomy:E351
72	Open Excision of Lesion of Pharynx:E231	130	Total Oesophagectomy and Anastomosis of Pharynx to Stomach:G021
73	Other Open Operations on Pharynx:E238	131	Unspecified Total Excision of Oesophagus:G029
74	Laser Hypohparynx:E242 Y082	132	Partial Oesophagectomy and Interposition of Microvascular to Jejunum:G032
75	Resection of Hypopharynx:E242	133	Partial Excision of Oesophagus:G039
76	Other Specified Therapeutic Endoscopic Op on Pharynx:E248	140	Total Parotidectomy:F441
77	Other Specified Operations on Pharynx:E278	141	Partial Parotidectomy;preservation of nerve:F442
78	Creation of Pharyngostome:E278 Y022	142	Excision of Submandibular Gland:F444
90	Total Pharyngectomy:Excl. Laryngectomy:E191	143	Excision of Sublingual Gland:F445
91	Partial Pharyngectomy:Excl. Laryngectomy:E192	150	Total Thyroidectomy:B081
92	Open Excision of Lesion of Pharynx:E231	151	Hemithyroidectomy:B083
93	Other Open Operations on Pharynx:E238	152	Lobectomy of Thyroid Gland:B084
94	Endoscopic extirpation of lesion of Nasopharynx:E241	153	Isthmectomy of Thyroid Gland:B085
95	Endoscopic Micro Laser Extirpation of lesion of Larynx:E242 Y081	154	Excision of Parathyroid Gland:B149
96	Other Specified Therapeutic Endoscopic Op on Pharynx:E248	155	Unspecified Excision of Parathyroid Gland:B149
97	Other Specified Operations on Pharynx:E278	156	Oral delivery of radiotherapy for thyroid ablation:655
100	Microtherapeutic Endoscopic Resection of Lesion of Larynx:E342	160	Other Specified Operations on Pharynx:E278
101	Total Laryngo-pharyngectomy:E191 E291	161	Cricopharyngeal Myotomy:E281
102	Total Pharyngectomy:Excl. Laryngectomy:E191	162	Te Punction + Speech Prothesis:E414
103	Partial Pharyngectomy:Excl. Laryngectomy:E192	163	Permanent Tracheostomy:E421
104	Laryngo-pharyngectomy primary closure:E191 E291 S411	164	Temporary Tracheostomy:E423
105	Endoscopic Extirpation of Lesion of Pharynx:E242	170	External frontoethmoidectomy:E141
106	Total Laryngectomy:E291	171	Intranasal Ethmoidectomy:E142 Y76.2
107	Partial Horizontal laryngectomy:E292	172	External Ethmoidectomy:E143
108	Partial Vertical Laryngectomy :E293	173	Transantral Ethmoidectomy:E144
109	Partial laryngectomy :E294	174	Medial Maxillectomy:V061
110	Epiglottis Resection:Partial Open Laryngectomy:E294	175	Other Specified Excision of Maxilla:V068
111	Aryepiglottic fold resection:Partial Open Laryngectomy:E294	176	Maxillectomy Retaining Orbit:V061
112	False cord Resection:Partial Open Laryngectomy:E294	177	Maxillectomy including orbital Exenteration:V061 C011
113	Larngofissure and cordectomy:E295	178	Maxillectomy plus facial skin:V061 S065
114	Laryngofissure & Chordectomy of Vocal Chord:E295	179	Maxillectomy orbital exenteration and facial skin:V061 C011 S065
115	Laryngectomy NEC:E296	190	Total rhinectomy:E011
116	Excision of Lesion of Larynx using Thyrotomy Approach:E301		
117	External Artyenoidectomy:open:E331		

HOP continued ...

191	Total Excision of Nose:E011	302	Latissimus Dorsi Myocutaneous:S173 Y613
192	Other Op - Excision of Nose:E018	303	Pectoralis Major Myocutaneous:S171 Y612
193	Unspecified Excision of Nose :E019	304	Trapezius:S173 Y611
194	Extirpation of lesion of internal nose:E082	310	Axial or pedicled local flap of skin to head or neck:S271
195	Lateral Rhinotomy into Nasal Sinus:E174	311	Forehead Flap:S251 Y571
200	Exenteration of orbital contents:C011	312	Local myocutaneous or muscle flap to head or neck:S243
201	Enucleation of Eyeball:C012	313	Nasolabial Flap:S271 Z474
202	Excision of Lesion of Eyelid:C121	314	Other specified local myocutaneous or muscle flap:S248
210	Total Excision of External Ear:D011	315	Other specified Mucosal flap:S288
211	Partial Excision of External Ear:D012	316	Random pattern local flap of skin to head and neck:S273
212	Other Op - Excision of External Ear:D018	317	Submental Island Flap:S251
213	Excision of Lesion of External Ear:D021	318	Temporalis Flap:S171 Y641
214	Extirpation of Lesion of External Auditory Canal:D081	319	Temporoparietal:S253 Y591
215	Partial Excision of Organ:Y052	320	Tongue Flap:S281
220	Excision of Lesion of Skin of Head or Neck:S065	330	Fibula:Composite:S173 Y596 Y666 L981
230	Anterior skull base including orbit resection - total excision:C088 Y051	331	Iliac Crest Composite:S173 Y663 L981
231	Anterior skull base including orbit resection - partial excision:C088 Y052	332	Lateral Arm:S183 Y594 Y668 L981
232	Anterior skull base including frontal bone resection:V058 Y052	333	Mouth Using Free Flap:F391
233	Anterior skull base including sphenoid resection:V058 Y052	334	Radial Forearm:S183 Y592 Y664 L981
234	Anterior skull base including clivus resection:V058 Y052	335	Reconstruction of Mandible:V191
235	Anterior skull base including infra temporal fossa resection:V058 Y052	336	Reconstruction of Maxilla:V131 Z644
236	Anterior skull base including temporal bone resection:V058 Y052	337	Scapula:S173 Y573 Y668 Z685 L981
237	Anterior skull base including cribriform plate resection:V058 Y052	338	Scapula Tip with Thoracodorsal Artery:S173 Y631 Y668 L981
238	Lateral Inferior temporal bone resection:V058 Y052	350	Anterolateral thigh :S173 Y555 Y628 L981
239	Lateral temporal bone resection:V058 Y052	351	Lateral Arm:S183 Y594 L981
240	Total temporal bone resection (Petrousectomy:V058 Y051	352	Latissimus Dorsi :S173 Y631 Y613 L981
241	Infra temporal fossa excision:V058 Y052	353	Lower Limb Perforator :S183 Y596 L981
242	Cranial bone resection:V058 Y059	354	Mouth Using Free Flap:F391
243	Extended partial temporal bone resection:V058 Z633	355	Radial Forearm:S183 Y592 L981
244	Excision of Lesion of Cervical Vertebra:V431	356	Rectus Abdominus:S173 Y615 L981
250	Microvascular free tissue transfer of flap of muscle:T761	357	Repair of pharynx other specified:E218
251	Total Excision of Organ:Y051	358	Serratus Anterior:Y632 L981
252	Laparotomy Approach NEC:Y502	370	Gastric:G488 L981
253	Muscle of anterior abdominal wall:Z603	371	Jejunum:Y698 G638 G588 L981
300	Deltopectoral:S181 Y574	372	Mouth Using Free Flap:F391
301	Gastric Pull UP:G021	373	Omentum:T368 L981
		380	Harvest of other unspecified nerve:Y548

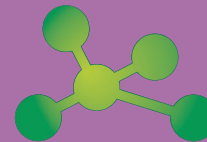
HOP continued ...

- 381 Harvest of sural nerve:Y541
- 390 Harvest of bone from cranium:Y661
- 391 Harvest of Bone from Iliac Crest:Y663
- 392 Harvest of Bone from Rib:Y662
- 393 Other Op:Y668
- 400 Composite autograft of skin to Head or Neck:S363
- 401 Full thickness autograft of skin to head and neck:S361
- 402 Mouth - Other:mucosal graft:F398
- 403 Mouth Using Graft:F392
- 404 Split autograft of skin to head or neck :S353
- 410 Direct Closure:S411
- 411 Laser Resection:Y081
- 412 Prosthesis Dental:Obturation:F632
- 420 Neck Dissection Radical:T85.1
- 421 Neck Dissection Modified:T85.1A
- 422 Modified Type I Accessory Preserved:T851Ai|T851Ai
- 423 Modified Type Ii Accessory + IJV Kept:T851AII
- 424 Modified Type Iii Sternomastoid, IJV + Accessory Kept:T851AIII
- 425 Selective Neck Dissection (SND):T851B
- 426 Selective Neck Dissection Level 1 (Suprahyoid):T851BI
- 427 Selective Neck Dissection Level 1-3 (Supra Omohyoid):T851BII
- 428 Selective Neck Dissection Level 1-4 (Anterolateral):T851BIII
- 429 Selective Neck Dissection Level 2-4 (Lateral):T851BIV
- 430 Selective Neck Dissection Level 5 (Posterior):T851BV
- 431 Selective Neck Dissection Level 2-5 (Posterolateral):T851BVI
- 432 Selective Neck Dissection Level 6 (Central Compartment):T851BVII
- 433 Selective Neck Dissection Level 7 (Superior Mediastinum):T851BVIII
- 434 Excision or biopsy of cervical lymph node:T872
- 435 Neck Dissection - Other:T859
- 436 Neck Node Sampling:T861



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