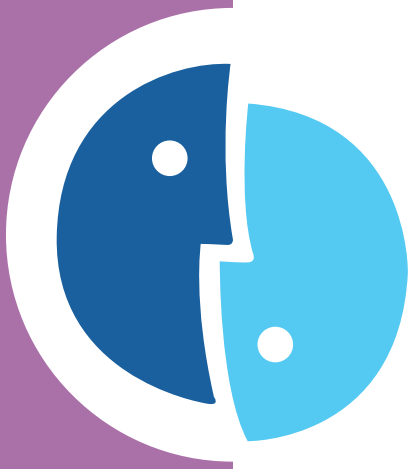
Saving Faces



HANA database

Database Dictionary

Version: 1.3 document dated 26 Sep 2016

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Table of contents

Table of contents

20 Restorative dental assessment

- 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

21 Radiology prior to 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
- Orthopantomogram prior to treatment
- Ultrasound prior to treatment

23 MDT summary

- 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

27 Radiotherapy

- 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

32 Chemotherapy

- 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

36 Palliative care

- Any palliative care
- Palliative care consultant
- Palliative care organisation
- Palliative care start date
- Nursing care organisation

Table of contents

Table of contents

37 Biopsy

- 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

49 Post-treatment evaluation

- Source of information
- Patient weight
- Site of mouth opening measurement
- Max mouth opening post-treatment

50 Follow up clinic measurements

- 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

57 Follow up results

- 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

60 Complications

- General complications

61 Patient mortality

- Patient status
- Date of death
- General cause of death
- Specific cause of death
- Location of death

63 Radiology image

- 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

65 Operation

- 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

69 Procedures performed

- Procedure
- Procedures for complications
- Operating surgeon
- Assistant surgeon

70 Short term outcomes

- Patient status at discharge
- General cause of death
- Specific cause of death
- Discharge date
- Delayed discharge
- Non clinical cause of discharge delay
- Discharge destination

Table of contents

Demographics

Question Title
Header Field Name
Value
Values Allowed
Importance
Max Value
Min

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 where the data comes from. For national datasets, use Country Code (See Note 1, below)

Patient Identifier
DEMOGID
Mandatory String: Can contain any value. Site can use to tie back to their own records. Only use for Dendrite system is to link (possible) multiple records for a single patient.

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 ShortString: maximum of 1,024 characters. see table: **EthnicOrigin**

Category: **COSD**

The ethnicity of a PERSON, as specified by the PERSON. The 16+1 ethnic data categories defined in the 2001 census is the national mandatory standard for the collection and analysis of ethnicity (the Office for National Statistics has developed a further breakdown of the group from that given, which may be used locally.)

Gender

GENDER

Mandatory SingleChoice: the code only.

1 - Male
2 - Female
3 - Unknown

Category: **COSD** **DAHNO**

Person's gender as self-declared (or inferred by observation for those unable to declare their person stated gender).

Patient details at referral

Where was the patient seen

WHEREPATIENTSEENCANCERSPECIALIST

Desirable SingleChoice: the code only. see table: **HOS**

Category: **COSD**

The organisation site code of the organisation acting as health Care Provider where the patient is first seen by an appropriate cancer specialist on the date first seen (cancer specialist).

Date first seen by cancer specialist

DATEFIRSTSEEN

Desirable Date: ODBC date as yyyy-mm-dd.

Category: **COSD**

This is the date that the patient is first seen by the appropriate specialist for cancer care within a Cancer Care Spell. This is the person or persons who are most able to progress the diagnosis of the primary tumour.

Date of Referral

DATEOFREFERRAL

Mandatory Date: ODBC date as yyyy-mm-dd.

Category: **DAHNO**

The date on which referral for head and neck cancer was made by GP, dental practitioner or other medical practitioner.

Postcode at referral

POSTCODEATREFERRAL

Mandatory ShortString: maximum of 1,024 characters.

Category: **COSD DAHNO**

Postcode of usual address (at diagnosis) is the postcode of usual address of the patient at the time of patient diagnosis.

Patient details at referral continued ...

Source of referral
SOURCEOFREFERRAL

Desirable SingleChoice: the code only.

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 a optometrist
16 - Referral from a 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

Category: **COSD** **DAHNO**

This identifies the source of referral of each Consultant Out-Patient Episode.

Referral priority
REFERRALPRIORITY

Desirable SingleChoice: the code only.

1 - Routine
2 - Urgent
3 - Two week wait

Category: **DAHNO**

The type of referral urgency.

Height (m)
HEIGHT

Optional Floating point: enter a numeric value.

Category: **COSD**

Height of the patient in m to two decimal places

Weight at referral (kg)
WEIGHTATREFERRAL

Desirable Floating point: enter a numeric value.

Category: **COSD**

Weight of the patient, in kg

Symptoms

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

Category: **HANA**

Please record the site of the symptoms mentioned in the referral letter.

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

Category: HANA

Please record all the symptoms mentioned. This is a multiple-choice field.

Date symptoms first noted

DATESYMPTOMSFIRSTNOTED

Desirable * DayMonthYear: ODBC date as yyyy-mm-dd. Use yyyy-mm-00 where only year & month known; use yyyy-00-00 where only year is known

Category: **COSD**, **HANA**

Record the time when the symptoms were first noted related to this diagnosis as agreed between the consultant and the patient. Depending on the length of time this should normally include at least month and year. Day should also be included if known. If symptoms have been present for a long time then it may only be possible to record the year. This will normally be recorded by the consultant first seeing the patient in secondary care.

Symptoms continued ...

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

Category: **HANA**

Please record the actual site of the cancer.

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

Category: **HANA**

Please record the actual symptoms. This is a multiple-choice field.

Previous head & neck cancer

Has the patient had previous head and neck cancer
PREVIOUSHNCANCER

Desirable SingleChoice: the code only.

0 - No
1 - Yes
9 - Not known

Category: **HANA**

Please record whether the patient has had a previous head and neck cancer.

Site of previous head and neck cancer
SITEPREVIOUSHNCANCER

Desirable * MultiChoice: the code(s) only. see table: **HTS**

Category: **HANA**

Record sites of any previous head and neck cancers.

Date of previous cancer treatment
DATEOFPREVIOUSCANCERTX

Desirable * DayMonthYear: ODBC date as yyyy-mm-dd. Use yyyy-mm-00 where only year & month known; use yyyy-00-00 where only year is known

Category: **HANA**

Please record the date of treatment to the nearest month or year. If the patient had several previous cancers then just record the most recent date.

Where was the patient treated
WHERETREATEDFORPREVNHCANCER

Desirable * SingleChoice: the code only. see table: **HOS**

Category: **HANA**

The 5-digit code of the Trust, hospital or other organisation.

Dietetics

Date of initial contact with the dietician
DATEINITIALCONTACTDIETICIAN
Desirable Date: ODBC date as yyyy-mm-dd.
Category: **COSD** **DAHNO**
The date that the patient was first assessed by a dietitian.

Dietician treating the patient
DIETICIANTREATINGTHEPATIENT
Optional SingleChoice: the code only. see table: **HDT**
Category: **HANA**
Please enter name or registration number of the dietitian: Health and Care Professions Council.

Where was the patient assessed by the dietician
WHEREPATIENTASSESSEDBYDIETICIAN
Desirable SingleChoice: the code only. see table: **HOS**
Category: **DAHNO**
The code of the Trust, Hospital or other organisation where the nutritional care took place.

Was the patient nutritionally assessed at a pre-treatment clinic by a dietician
NUTRITIONALLYASSESSEDPRETREATMENTBYDIETICIAN
Optional SingleChoice: the code only.
0 - No
1 - Yes
Category: **HANA**
Please record whether the patient was seen by a specialist dietitian pre-treatment.

Was BMI collected pre-treatment
WASBMICOLLECTEDPRETREATMENT
Desirable SingleChoice: the code only.
0 - No
1 - Yes
Category: **HANA**
Record whether BMI was collected pre-treatment.

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
Category: **DAHNO**
In the period - 1 month prior to treatment to completion of treatment, what was the predominant method of nutritional support.

Dietetics continued ...

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

Category: **HANA**

Record whether the patient was seen post-treatment by dietician in a specialist clinic.

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

Category: **HANA**

This is a subjective opinion from the reviewing clinician about the compliance of the patient with dietetic advice.

Speech and language therapy

Did the patient have a pre-treatment SaLT assessment
PRETREATMENTSALTASSESSMENT
Desirable SingleChoice: the code only.
0 - No
1 - Yes
8 - N/a
Category: **HANA**
Please record whether the patient was seen by a speech and language therapist before treatment.

Where was the SaLT assesment done
WHERESALTASSESSMENTDONE
Desirable * SingleChoice: the code only. see table: **HOS**
Category: **DAHNO**
The 5-digit code of the Trust, hospital or other organisation where the SaLT care took place.

Who did the speech and Language assessment
WHODIDTHESPEECHANDLANGUAGEASSESSMENT
Desirable * SingleChoice: the code only. see table: **HST**
Category: **HANA**
Enter name or registration number of the speech and language therapist: Health and Care Professions Council.

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
Category: **HANA**
Please select one option from the drop down list dependant on the state of the patient's presence or absence of front teeth.

Max mouth opening pre-treatment
MAXINTERINCISALDISTANCEPRETREATMENT
Desirable * Integer: enter a whole number.
Category: **HANA**
Please record the patient's maximal mouth opening in mm between the upper and lower jaw at the front according to your choice in the drop-down list above.

Date of SaLT pre-treatment assessment
DATEOFSALTPRETREATMENTASSESSMENT
Desirable * Date: ODBC date as yyyy-mm-dd.
Category: **DAHNO**
The first assessment of communication and swallowing function and provision of patient information related to predicted post-treatment communication and swallowing outcomes.

Speech and language therapy continued ...

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

Category: **DAHNO**

Record the ability of the patient to manage diet textures prior to treatment. National Cancer Dataset description.

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

Category: **COSD DAHNO**

The patient's proposed method of communication following laryngectomy. Only applicable to head and neck cancer prior to laryngectomy.

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.

Category: **COSD**

Record the date of contact where assessment swallowing occurs following completion of treatment. Whilst ideally data is entered at each contact after completion of treatment, key point of recording is at 6 months post cancer care plan agreed date.

Speech and language therapy continued ...

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
Category: DAHNO
Record the ability of the patient to manage diet textures following completion of treatment.

Laryngectomy communication method at three months
LARYNGECTOMYCOMMUNICATIONTHREEMONTHS
Desirable * SingleChoice: the code only.
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
Category: DAHNO
The patient's primary method of communication at 3 month post-operative contact.

Normalcy of diet at twelve months
NORMALCYDIETTWELVEMONTHS
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
Category: DAHNO
Record the ability of the patient to manage diet textures following completion of treatment.

Speech and language therapy continued ...

Laryngectomy communication method at twelve months
LARYNGECTOMYCOMMUNICATIONTWELVEMONTHS

Desirable * SingleChoice: the code only.

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

Category: **DAHNO**

The patient's primary method of communication at 12 month post-operative contact.

Nursing care

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

Category: **COSD**

Record if and when the patient saw an appropriate site specific clinical nurse specialist.

Where was the nursing care provided
WHEREWASTHENURSINGCAREPROVIDED

Optional SingleChoice: the code only. see table: **HOS**

Category: **DAHNO**

The 5-digit code of the Trust, hospital or other organisation where the clinical nurse specialist care / contact took place.

Date holistic needs assessment completed
DATECNSNEEDSASSESSMENTCOMPLETED

Optional Date: ODBC date as yyyy-mm-dd.

Category: **COSD**

The date a holistic needs assessment is completed.

Discharge summary sent within 6 working days of discharge from surgery
DISCHARGESUMMARYSURGERY

Optional SingleChoice: the code only.

0 - No
1 - Yes

Category: **HANA**

Please record whether a discharge summary was sent from hospital to the patient's GP within six working days of hospital discharge after surgery.

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

Restorative dental assessment

Consultant restorative dentist asked at MDT about restorative assessments
CONSDENTISTASKEDATMDT

Optional SingleChoice: the code only.

0 - No
1 - Yes
8 - Not present at MDT

Category: **HANA**

Only answer yes if the answer is positive for a dentist of consultant grade.

Restorative dentist who assessed the patient
RESTORATIVEDENTISTWHOASSESSEDPATIENT

Optional SingleChoice: the code only. see table: **GDC**

Category: **HANA**

Enter GDC number of the restorative dentist.

Where was the patient assessed by the restorative dentist
WHEREPATIENTASSESSEDBYDENTIST

Optional SingleChoice: the code only. see table: **HOS**

Category: **HANA**

The 5-digit code of the Trust, hospital or other organisation where the restorative dentist care / contact took place.

Restorative dental assessment identified as necessary
DENTALASSESSMENTNECESSARY

Optional SingleChoice: the code only.

0 - No
1 - Yes

Category: **HANA**

Please record whether the decision at the MDT was that the patient should have a dental assessment. In most patients this should be the case.

Date of restorative dental assessment pre-cancer treatment
DATEOFRESTORATIVEDENTALASSESSMENT

Desirable Date: ODBC date as yyyy-mm-dd.

Category: **COSD**

The date of the first dental assessment by a dentally qualified practitioner, which contributes to preparation for treatment.

Radiology prior to treatment

Chest X-ray prior to treatment

CHESTXPRIORTOTREATMENT

Optional SingleChoice: the code only.

0 - No
1 - Yes
8 - Not applicable
9 - Not known

Category: **DAHNO**

Confirms by answering yes that as part of diagnostic pathway a chest X ray was undertaken and that this was on a date prior to the first treatment start date. If not performed or performed after or on date first treatment record as no.

CT Chest prior to treatment

CTCHESTPRIORTOTREATMENT

Desirable SingleChoice: the code only.

0 - No
1 - Yes
8 - Not applicable
9 - Not known

Category: **DAHNO**

Confirms by answering yes that as part of diagnostic pathway a CT chest was undertaken and that this was on a date prior to the first treatment start date. If not performed or performed after or on date first treatment record as no.

CT primary/neck prior to treatment

CTPRIMARYNECKPRIORTOTREATMENT

Desirable SingleChoice: the code only.

0 - No
1 - Yes
8 - Not applicable
9 - Not known

Category: **DAHNO**

Confirms by answering yes that as part of diagnostic pathway a CT of primary / neck was undertaken and that this was on a date prior to the first treatment start date. If not performed or performed after or on date first treatment record as no.

MRI Primary prior to treatment

MRIPRIMARYPRIORTOTREATMENT

Desirable SingleChoice: the code only.

0 - No
1 - Yes
8 - Not applicable
9 - Not known

Category: **DAHNO**

Confirms by answering yes that as part of diagnostic pathway a MRI was undertaken and that this was on a date prior to the first treatment start date. If not performed or performed after or on date first treatment record as no.

Radiology prior to treatment continued ...

PET CT scan prior to treatment

PETCTSCANPRIORTOTREATMENT

Desirable SingleChoice: the code only.

0 - No
1 - Yes
8 - Not applicable
9 - Not known

Category: **DAHNO**

Confirms by answering yes that as part of diagnostic pathway a PET-CT scan was undertaken and that this was on a date prior to the first treatment start date. If not performed or performed after or on date first treatment record as no.

Orthopantomogram prior to treatment

ORTHOPANTOMOGRAMPRIORTOTREATMENT

Desirable SingleChoice: the code only.

0 - No
1 - Yes
8 - Not applicable
9 - Not known

Category: **DAHNO**

Confirms by answering yes that as part of diagnostic pathway an OPG was undertaken and that this was on a date prior to the first treatment start date. If not performed or performed after or on date first treatment record as no.

Ultrasound prior to treatment

ULTRASOUNDPRIORTOTREATMENT

Desirable SingleChoice: the code only.

0 - No
1 - Yes
8 - Not applicable
9 - Not known

Category: **DAHNO**

Confirms by answering yes that as part of diagnostic pathway an ultrasound (including ultrasound guided FNA) was undertaken and that this was on a date prior to the first treatment start date. If not performed or performed after or on date first treatment record as no.

MDT summary

Where was the MDT meeting held
WHEREWASTHEMDTMEETINGHELD

Optional SingleChoice: the code only. see table: **HOS**

Category: **DAHNO**

The 5-digit code of the Trust, hospital or other organisation where the meeting took place

Date of first MDT meeting
DATEOFFIRSTMDTMEETING

Optional Date: ODBC date as yyyy-mm-dd.

Category: **COSD DAHNO**

The date on which the PATIENT's Cancer Care Plan was discussed at a Multidisciplinary Team Meeting and a treatment planning decision was made.

Care plan discussed at MDT meeting before treatment
CAREPLANDISCUSSEDATMDTMEETING

Optional SingleChoice: the code only.

0 - No
1 - Yes

Category: **COSD DAHNO**

An indication of whether the patient's care plan was discussed at a Multidisciplinary Team Meeting.

Date MDT care plan agreed
DATEMDTCAREPLANAGREED

Optional Date: ODBC date as yyyy-mm-dd.

Category: **COSD DAHNO**

The date on which the patient's Cancer Care Plan was discussed at a Multidisciplinary Team Meeting and a treatment planning decision was made.

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

Category: **COSD DAHNO**

This is the clinically proposed treatment, usually agreed at a Multi-Disciplinary Team Meeting, and may not be the same as the treatment which is subsequently agreed with the patient. More than one planned treatment type may be recorded and these may either be alternative or sequential treatments.

MDT summary continued ...

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

Category: **COSD** **DAHNO**

This is the method used to confirm the cancer.

Tumour T grade - Pre-treatment
TUMOURTGRADEMDT

Desirable SingleChoice: the code only. see table: **HTT**

Category: **COSD** **DAHNO**

This is the UICC code which classifies the size and extent of the primary tumour before treatment.

Tumour N grade - Pre-treatment
TUMOURNGRADEMDT

Desirable SingleChoice: the code only. see table: **HTN**

Category: **COSD** **DAHNO**

This is the UICC code which classifies the absence or presence and extent of regional lymph node metastases before treatment.

Tumour M grade - Pre-treatment
TUMOURMGRADEMDT

Desirable SingleChoice: the code only. see table: **HTM**

Category: **COSD** **DAHNO**

This is the UICC code which classifies the absence or presence of distant metastases pre-treatment.

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

Category: **HANA**

Only complete this field if the patient is eligible for a clinical trial. If so, report if they were approached and their response.

MDT summary continued ...

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

Category: **COSD**

The type of treatment covered by a cancer clinical trial.

Comorbidity index ACE 27
COMORBIDITYINDEXACE27

Optional SingleChoice: the code only.

0 - None
1 - Mild
2 - Moderate
3 - Severe
9 - Unknown

Category: **COSD DAHNO**

Overall comorbidity score is defined according to the highest ranked single ailment, except in the case where two or more Grade 2 ailments occur in different organ systems. In this situation, the overall comorbidity score should be designated Grade 3.

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

Category: **COSD DAHNO**

A World Health Organisation classification indicating a person's status relating to activity / disability.

Care plan intent
CAREPLANINTENTMDT

Optional SingleChoice: the code only.

0 - No active treatment
1 - Curative
2 - Non curative
9 - Not known

Category: **COSD DAHNO**

The intention of a Cancer Care Plan developed within a Cancer Care Spell.

MDT summary continued ...

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

Category: **COSD**

The main reason why no active cancer treatment is specified within a Cancer Care Plan.

Radiotherapy

Where was the radiotherapy provided
WHEREWASTHERADIOTHERAPYPROVIDED

Desirable SingleChoice: the code only. see table: **HOS**

Category: **COSD DAHNO**

Site code (of provider cancer treatment start date) is the organisation site code of the organisation where the treatment start date for cancer is recorded.

Cancer treatment event type
CANCERTREATMENTEVENTTYPERADIOTHERAPY

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)

Category: **COSD**

The stage of treatment reached during a cancer patient pathway for primary, recurrent or metastatic cancer.

Radiotherapy treatment modality
RADIOTHERAPYTREATMENTMODALITY

Optional MultiChoice: the code(s) only.

4 - Chemoradiotherapy
5 - Teletherapy
6 - Brachytherapy
13 - Proton Therapy
19 - Radioisotope therapy
22 - Radiosurgery

Category: **COSD**

The type of treatment or care which was delivered in a cancer treatment period.

Radiotherapy Consultant
RADIOTHERAPYCONSULTANT

Optional SingleChoice: the code only. see table: **HRT**

Category: **COSD**

The Consultant code of the consultant responsible for the treatment of the patient.

Radiotherapy continued ...

Cancer TX Type at Time of Radiotherapy

CANCERTXTYPEATTIMEOFRADIOTHERAPY

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.

Category: **HANA**

This is the date that the clinical oncologist intends to start radiotherapy treatment. This date should ideally be presented to and recorded at the MDT meeting when the date of the MDT care plan was agreed.

Date of 1st fraction

DATEOF1STFRACTION

Mandatory Date: ODBC date as yyyy-mm-dd.

Category: **COSD** **DAHNO**

This is the start date of the first, second or subsequent cancer treatment given to a patient who is receiving care for a cancer condition.

Reason for delay

REASONFORDELAYRADIOTHERAPY

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

Category: **HANA**

If there is a difference of more than five working days between the planned start date and the date of the first fraction the main reason for this should be recorded.

Radiotherapy continued ...

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)

Category: **DAHNO**

The extent of sites extending from the primary to which the radiotherapy was administered e.g., primary, primary & nodes, etc. the region to be treated with radiotherapy.

Brachytherapy Type
BRACHYTHERAPYTYPE

Optional SingleChoice: the code only.

1 - Interstitial
2 - Intra-cavity
3 - Unsealed source
9 - Not otherwise specified

Category: **COSD**

The type of brachytherapy treatment course being used.

RT intent
RTINTENT

Desirable SingleChoice: the code only.

1 - Curative
2 - Diagnostic
4 - Palliative
9 - Not known

Category: **COSD**

The original intention of the cancer treatment provided during a Cancer Care Spell. The intent of the delivered beam radiation.

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

Category: **HANA**

This is the planning and method of radiotherapy delivery.

Radiotherapy continued ...

Total radiotherapy dose prescribed
RTPRESCRIBEDTOTALDOSE
Desirable Floating point: enter a numeric value.
Category: **HANA**
The total prescribed absorbed radiation dose, measured in Grays, given to the ICRU Reference Point for the whole prescription.

RT prescribed number of fractions
RTPRESCRIBEDNUMBEROFFRACTIONS
Desirable Integer: enter a whole number.
Category: **HANA**
The prescribed number of Fractions or hyperfractionation of a radiotherapy prescription.

RT actual total dose
RTACTUALTOTALDOSE
Desirable Floating point: enter a numeric value.
Category: **HANA**
The total delivered absorbed radiation dose, measured in Grays, given to the ICRU reference point for the whole prescription.

RT actual number of fractions
RTACTUALNUMBEROFFRACTIONS
Desirable Integer: enter a whole number.
Category: **HANA**
The total number of fractions or hyperfraction delivered as part of a radiotherapy prescription.

RT beam type
RTBEAMTYPE
Optional SingleChoice: the code only.
1 - Photon
2 - Electron
3 - Proton
Category: **HANA**
The prescribed type of beam for a Teletherapy Treatment/ Exposure

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
Category: **HANA**
The prescribed energy of a radiotherapy exposure, in Megavolts (MV).

Radiotherapy continued ...

Electron beam energy
ELECTRONBEAMENERGY

Optional SingleChoice: the code only.

1 - Less than 12 MeV
2 - Equal to or greater than 12 MeV

Category: **HANA**

The prescribed energy of a radiotherapy exposure, in Megavolts (MV).

Date of last fraction
DATEOFLASTFRACTION

Desirable Date: ODBC date as yyyy-mm-dd.

Category: **HANA**

This is the date that the last fraction of radiotherapy was delivered and the course of radiotherapy finished.

RT regime completed as planned
RTREGIMECOMPLETEDASPLANNED

Optional SingleChoice: the code only.

0 - No
1 - Yes

Category: **HANA**

Was the radiotherapy completed as planned? This does not include delays in starting but records whether there was a difference between the total dose and number of fractions planned and delivered.

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

Category: **HANA**

Select the most relevant reasons for the radiotherapy regime being altered.

Acute radiotherapy toxicity complications
ACUTERADIOTHERAPYTOXICITYCOMPLICATIONS

Optional MultiChoice: the code(s) only.

1 - Mucositis
2 - Skin sores
3 - Pain
4 - Dysphagia
9 - Other

Category: **HANA**

Only select one or more of these options if the patient has grade 3/4 toxicity or requires hospital admission.

Chemotherapy

Where was the Chemotherapy provided

WHEREWASTHECHEMOTHERAPYPROVIDED

Desirable SingleChoice: the code only. see table: **HOS**

Category: **COSD DAHNO**

Site code (of provider cancer treatment start date) is the organisation site code of the organisation where the treatment start date for cancer is recorded.

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)

Category: **COSD**

The stage of treatment reached during a Cancer PATIENT PATHWAY for primary, recurrent or metastatic cancer.

Chemotherapy Consultant

CHEMOTHERAPYCONSULTANT

Desirable SingleChoice: the code only. see table: **HCX**

Category: **COSD**

The Consultant code of the consultant responsible for the treatment of the patient.

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

Chemotherapy continued ...

Treatment intent
TREATMENTINTENTCHEMO
Desirable SingleChoice: the code only.
1 - Curative
2 - Diagnostic
3 - Staging
4 - Palliative
9 - Not known
Category: **COSD** DAHNO
The original intention of the cancer treatment provided during a Cancer Care Spell.

Timing of chemotherapy
TIMINGOFCHEMOTHERAPY
Desirable SingleChoice: the code only.
1 - Neoadjuvant
2 - Induction
3 - Synchronous
Category: **HANA**
Please select one of the three options to record the relationship between chemotherapy and other definitive treatments for head and neck cancer

Chemotherapy regimen
CTREGIMEN
Desirable SingleChoice: the code only. see table: **HCR**
Category: **HANA**
Select one option from list

Chemotherapy regimen start date
CTREGIMENSTARTDATE
Mandatory Date: ODBC date as yyyy-mm-dd.
Category: **COSD** DAHNO
This is the start date of the first, second or subsequent cancer treatment given to a patient who is receiving care for a cancer condition. This is the first administration date of the first cycle of a regimen.

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
Category: **COSD**
Type of drug therapy e.g. chemotherapy, immunotherapy (not drug regimen)

Chemotherapy continued ...

Chemotherapy drug type

CHEMOTHERAPYDRUGTYPE

Desirable SingleChoice: the code only.

1 - Chemotherapy
2 - Hormone / endocrine therapy
3 - Immunotherapy
9 - Other

Category: **DAHNO**

Type of drug therapy e.g. chemotherapy, immunotherapy (not drug regimen)

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 - Texane derivatives
10 - Hormones
99 - Other

Category: **HANA**

Please select one or more drugs that were prescribed from the drop-down list.

Planned number of treatment cycles

PLANNEDNUMBEROFTREATMENTCYCLES

Desirable Integer: enter a whole number.

Category: **HANA**

The number of cycles specified in the prescription. This may be the number of cycles in the standard regimen or be modified by the prescriber.

CT regimen completed as planned

CTREGIMENCOMPLETEDASPLANNED

Optional SingleChoice: the code only.

0 - No
1 - Yes

Category: **HANA**

Was the chemotherapy completed as planned? Please record yes if any aspect of chemotherapy planning was altered including, number of courses, drugs used etc.

Chemotherapy continued ...

CT regimen modification

CTREGIMENMODIFICATION

Optional MultiChoice: the code(s) only.

1 - Dose reduction
2 - Time delay
3 - Stopped early

Category: **HANA**

Select one or more options

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

Category: **HANA**

Select one or more options why the chemotherapy regime planned for the patient was altered.

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

Category: **HANA**

Only select one or more of these options if the patient has grade 3/4 toxicity or requires hospital admission.

Palliative care

Any palliative care
ANYPALLIATIVECARE

Desirable SingleChoice: the code only.

0 - No

1 - Yes

Category: **COSD**

Record whether the patient was seen by a palliative care specialist. This would be a member of the specialist palliative care team led by a consultant in palliative medicine for a recurrence of cancer.

Palliative care consultant
PALLIATIVECARECONSULTANT

Optional SingleChoice: the code only. see table: **HPC**

Category: **HANA**

The GMC code of the consultant responsible for the treatment of the patient.

Palliative care organisation
PALLIATIVECAREORGANISATION

Desirable * SingleChoice: the code only. see table: **HOS**

Category: **DAHNO**

The 5-digit code of the Trust, hospital or other organisation where the decision was made for palliative care.

Palliative care start date
PALLIATIVECARESTARTDATE

Mandatory * Date: ODBC date as yyyy-mm-dd.

Category: **DAHNO**

The date of the first treatment / support from Specialist Palliative Care.

Nursing care organisation
NURSINGCAREORGANISATION

Desirable * SingleChoice: the code only. see table: **HOS**

Category: **DAHNO**

The 5-digit code of the Trust, hospital or other organisation where the clinical nurse specialist care / contact took place.

Biopsy

Who ordered biopsy
WHOORDEREDBIOPSY

Desirable SingleChoice: the code only. see table: **GMC**

Category: **COSD**

The code of the care professional who requests the pathology test. This is not required if the request comes from a general medical practitioner.

Where was the biosy taken / resection done
WHEREWASTHEBIOSYTAKENRESECTIONDONE

Desirable SingleChoice: the code only. see table: **HOS**

Category: **COSD**

Site code (of pathology test request) is the organisation site code of the organisation at which the care professional who requested the diagnostic test request for suspected cancer is based.

Biopsy sample collection date
BIOPSYSAMPLECOLLECTIONDATE

Desirable Date: ODBC date as yyyy-mm-dd.

Category: **COSD**

The date that a Sample collection takes place or the start of a period for sample collection.

Date sample received in path
DATESAMPLERECEIVEDINPATH

Desirable Date: ODBC date as yyyy-mm-dd.

Category: **COSD**

Date of receipt of a sample by a laboratory.

Where is the pathologist based
WHEREISTHEPATHOLOGISTBASED

Desirable SingleChoice: the code only. see table: **HOS**

Category: **COSD**

This is the Organisation code of the organisation at which the authorising pathologist is based

Pathologist
PATHOLOGIST

Desirable SingleChoice: the code only. see table: **HPA**

Category: **COSD**

Consultant code of the Pathologist who authorises the pathology report.

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

Category: **COSD**

The nature of the specimen taken during a clinical investigation.

Biopsy continued ...

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

Category: **COSD**

The type of pathology investigation carried out.

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

Category: **DAHNO**

For oropharyngeal cases only, has a HPV diagnostic test been undertaken.

HPV test
HPVTEST

Optional SingleChoice: the code only.

1 - PCR only
2 - PCR + P16
3 - P16 alone
4 - P16 + DNA ish
5 - RNA ish

Category: **HANA**

The type of HPV test used.

Tumour site
TUMOURSITE

Optional SingleChoice: the code only. see table: **HTS**

Category: **COSD DAHNO**

Primary diagnosis (ICD Pathological) is the primary diagnosis based on the evidence from a pathological examination.

Date of pathology report
DATEOFPATHOLOGYREPORT

Desirable Date: ODBC date as yyyy-mm-dd.

Category: **COSD DAHNO**

The date on which an investigation was concluded e.g., the date the result was authorised.

Biopsy continued ...

Tumour laterality
TUMOURLATERALITY

Desirable SingleChoice: the code only.

1 - Left
2 - Right
3 - Midline
4 - Bilateral
8 - Not applicable
9 - Not known

Category: **COSD** **DAHNO**

Tumour laterality identifies the side of the body for a tumour relating to paired organs within a patient based on the evidence from a pathological examination.

Morphology SNOMED from biopsy
MORPHOLOGYSNOMEDFROMBIOPSY

Desirable SingleChoice: the code only. see table: **HSM**

Category: **COSD**

For linkage purposes morphology (SNOMED).

Metastasis found on imaging
METASTASISFOUNDONIMAGING

Desirable SingleChoice: the code only.

0 - No
1 - Yes

Category: **HANA**

Record whether a metastasis was found on imaging.

Metastasis confirmed histologically
METASTASISCONFIRMEDHISTOLOGICALLY

Desirable * SingleChoice: the code only.

0 - No
1 - Yes

Category: **HANA**

Record whether the metastasis was confirmed histologically

Date of clinically agreed diagnosis
DATEOFCLINICALLYAGREEDDIAGNOSIS

Mandatory Date: ODBC date as yyyy-mm-dd.

Category: **COSD**

For linkage purposes Date of diagnosis (clinically agreed).

Definitive pathology

Service report identifier
SERVICEREPORTIDENTIFIER

Desirable ShortString: maximum of 1,024 characters.

Category: **COSD**

A unique identifier of a service report.

Sample collection date
SAMPLECOLLECTIONDATEDEFINITIVE

Optional Date: ODBC date as yyyy-mm-dd.

Category: **COSD**

The date that a SAMPLE collection takes place or the start of a period for SAMPLE collection.

Date sample received in path
DATEDEFINITIVESAMPLERECEIVEDINPATH

Optional Date: ODBC date as yyyy-mm-dd.

Category: **COSD**

Date of receipt of a sample by a laboratory.

Who ordered the definitive biopsy or did resection
WHOORDEREDDEFINITIVEBIOPSYORRESECTION

Optional SingleChoice: the code only. see table: **GMC**

Category: **COSD**

The code of the care professional who requests the pathology test. This is not required if the request comes from a general medical practitioner.

Where was the definitive biopsy/resection taken
WHEREWASDEFINITIVEBIOPSYRESECTIONTAKEN

Optional SingleChoice: the code only. see table: **HOS**

Category: **COSD**

Site code (of pathology test request) is the organisation site code of the organisation at which the care professional who requested the diagnostic test request for suspected cancer is based.

Pathologist
PATHOLOGISTDEFINITIVE

Optional SingleChoice: the code only. see table: **HPA**

Category: **COSD**

Consultant code of the Pathologist who authorises the pathology report.

Where is the pathologist based
WHEREISDEFINITIVEPATHOLOGISTBASED

Optional SingleChoice: the code only. see table: **HOS**

Category: **COSD**

This is the organisation code of the organisation at which the authorising pathologist is based.

Definitive pathology continued ...

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

Category: **COSD**

The nature of the specimen taken during a clinical investigation.

Definitive Morphology SNOMED
MORPHOLOGYSNOMEDDEFINITIVE

Desirable SingleChoice: the code only. see table: **HSM**

Category: **COSD**

For linkage purposes morphology (SNOMED).

Definitive Primary site
DEFINITIVEPRIMARYSITE

Desirable MultiChoice: the code(s) only. see table: **HTS**

Category: **COSD** **DAHNO**

Primary diagnosis (ICD pathological) is the primary diagnosis based on the evidence from a pathological examination.

Tumour laterality (Path)
TUMOURLATERALITYPATH

Desirable SingleChoice: the code only.

1 - Left
2 - Right
3 - Midline
4 - Bilateral
8 - Not applicable
9 - Not known

Category: **COSD**

Tumour laterality identifies the side of the body for a tumour relating to paired organs within a patient based on the evidence from a pathological examination.

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

Category: **COSD**

The type of pathology investigation carried out.

Definitive pathology continued ...

Perineural invasion
PERINEURALINVASION

Optional SingleChoice: the code only.

0 - No
1 - Yes
8 - Not completed

Category: **HANA**

Please record whether the perineural invasion was noted In the pathology specimen.

Size of lesion - Length
SIZEOFLESIONLENGTH

Desirable Integer: enter a whole number.

Category: **COSD**

The size in millimetres of the diameter of a lesion, largest if more than one, if the histology of a sample proves to be invasive.

Maximum depth of invasion
MAXIMUMDEPTHOFINVASION

Desirable Integer: enter a whole number.

Category: **COSD**

The maximum depth of invasion in mm (this is not applicable for nasopharynx, hypopharynx, nasal cavity or sinuses).

Metastatic site seen on imaging
METASTATICSITESEENONIMAGING

Optional MultiChoice: the code(s) only.

2 - Brain
3 - Liver
4 - Lung
7 - Unknown metastatatic sites
8 - Skin
9 - Distant lymph nodes
10 - Bone excluding bone marrow
11 - Bone marrow
99 - Other metastatic sites

Category: **COSD**

The site of the metastatic disease, if any, at diagnosis.

Definitive pathology continued ...

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

Category: **COSD**

An indication of the presence or absence of unequivocal tumour in lymphatic and/or vascular spaces.

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

Category: **COSD**

Grade of differentiation (pathological) is the definitive grade of the tumour based on the evidence from a pathological examination.

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

Category: **COSD**

An indication of whether the excision margin was clear of the tumour and if so, by how much.

Synchronous tumour
SYNCHRONOUSTUMOUR

Desirable SingleChoice: the code only.

0 - No
1 - Yes
2 - Not known

Category: **COSD**

An indicator of the presence of multiple tumours at a tumour site.

Definitive pathology continued ...

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

Category: **HANA**

This is the anatomical site in the body where a synchronous tumour has occurred

Number of nodes examined
NUMBEROFNODESEXAMINED

Desirable Integer: enter a whole number.

Category: **COSD**

The number of local and regional nodes examined.

Number of nodes positive
NUMBEROFNODESPOSITIVE

Desirable Integer: enter a whole number.

Category: **COSD**

The number of local and regional nodes reported as being positive for the presence of tumour metastases.

Neck dissection laterality
NECKDISSECTIONLATERALITY

Desirable SingleChoice: the code only.

1 - Left
2 - Right
3 - Bilateral
4 - Not performed
9 - Not applicable

Category: **COSD**

Identify laterality of neck dissection if performed

Definitive pathology continued ...

Positive nodes laterality
POSITIVENODESLATERALITY
Desirable SingleChoice: the code only.
1 - Left
2 - Right
3 - Bilateral
4 - Not performed
Category: **COSD**
If nodes positive specify laterality

Largest metastasis left neck
LARGESTMETASTASISLEFTNECK
Desirable Integer: enter a whole number.
Category: **COSD**
If neck dissected on left side, the size in mm of the largest metastasis.

Largest metastasis right neck
LARGESTMETASTASISRIGHTNECK
Desirable Integer: enter a whole number.
Category: **COSD**
If neck dissected on right side, the size in mm of the largest metastasis.

Extracapsular spread
EXTRACAPSULARSPREAD
Desirable * SingleChoice: the code only.
1 - Present
2 - Absent
9 - Not assessable
Category: **COSD**
Invasion of metastatic tumour outside the capsule of a lymph node.

Bone invasion
BONEINVASION
Optional SingleChoice: the code only.
1 - Present
2 - Absent
8 - Not applicable
9 - Not assessed
Category: **COSD**
Is there evidence of invasion into bone.

Definitive pathology continued ...

Cartilage invasion
CARTILAGEINVASION

Optional SingleChoice: the code only.

1 - Present
2 - Absent
8 - Not applicable
9 - Not assessed

Category: **COSD**

Is there evidence of invasion into cartilage?

Histologic grade (Salivary)
HISTOLOGICGRADESALIVARY

Desirable SingleChoice: the code only.

0 - Not assessed
1 - Low
2 - High
9 - Not applicable

Category: **COSD**

Specify the histological grade of the tumour

Macroscopic extraglandular extension
MACROSCOPICEXTRAGLANDULAREXTENSION

Desirable SingleChoice: the code only.

0 - Absent
1 - Present

Category: **COSD**

Macroscopic extension of tumour outside the capsule of the salivary gland.

Tumour T grade - pathological
TUMOURTGRADEPATHOLOGICAL

Desirable SingleChoice: the code only. see table: **HTT**

Category: **COSD**

T category (pathological) is the Union for International Cancer Control (UICC) code which classifies the size and extent of the primary Tumour based on the evidence from a pathological examination.

Tumour N grade - pathological
TUMOURNGRADEPATHOLOGICAL

Desirable SingleChoice: the code only. see table: **HTN**

Category: **COSD**

N category (pathological) is the Union for International Cancer Control (UICC) code which classifies the absence or presence and extent of regional lymph node metastases based on the evidence from a pathological examination.

Tumour M grade - pathological
TUMOURMGRADEPATHOLOGICAL

Desirable SingleChoice: the code only. see table: **HTM**

Category: **COSD**

M category (pathological) is the Union for International Cancer Control (UICC) code which classifies the absence or presence of distant metastases based on the evidence from a pathological examination.

Definitive pathology continued ...

Was pathology done after neoadjuvant Rx
WASPATHOLOGYAFTERNEOADJUVANTRX
Optional SingleChoice: the code only.
0 - No
1 - Yes
9 - Not known
Category: **COSD**
Indicator of whether the pathological stage was recorded after the patient had received neoadjuvant therapy.

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
Category: **COSD**
TNM stage grouping (pathological) is the Union for International Cancer Control (UICC) code which classifies the combination of Tumour, node and metastases into stage groupings based on the evidence from a pathological examination.

Was resective pathology discussed at MDT
WASRESECTIVEPATHOLOGYDISCUSSEDATMDT
Desirable SingleChoice: the code only.
0 - No
1 - Yes
9 - Not known
Category: **DAHNO**
By entering yes to record the fact that the resective pathological report of this patient was formally reviewed by a specialist multi-disciplinary team. The MDT is as defined by National Guidance.

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

Definitive pathology continued ...

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

Post-treatment evaluation

Date of assessment
DATEOFFOLLOWUP
Mandatory Date: ODBC date as yyyy-mm-dd.
Category: **COSD**- Category: **DAHNO**
The date on which a clinical assessment was performed

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
Category: **HANA**
This is a follow-up field ideally to be completed at most follow-up appointments. Can you record the main specialty of the person seeing the patient and completing this field. There may have been many specialties seeing the patient at this outpatient appointment but just record the main one.

Patient weight
WEIGHT
Desirable Floating point: enter a numeric value.
Category: **COSD**
Weight of the patient, in kilograms with up to three decimal places (nnn.nnn).

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
Category: **HANA**
Select one option from the list dependant on the state of the patient's presence or absence of front teeth. This is a follow-up field ideally to be completed at most follow-up appointments.

Max mouth opening post-treatment
MAXINTERINCISALDISTANCEPOSTTREATMENT
Desirable Integer: enter a whole number.
Category: **HANA**
Record the patient's maximal mouth opening in mm between the upper and the lower jaw at the front according to your choice in the drop-down list above. This is a follow-up field ideally to be completed at most follow-up appointments.

Follow up clinic measurements

Where was the follow up
WHEREWASTHEFOLLOWUP
Desirable SingleChoice: the code only. see table: **HOS**
Category: **HANA**
The code of the Trust, Hospital or other organisation where the follow up took place.

Suspected recurrence
SUSPECTEDRECURRENCE
Optional SingleChoice: the code only.
0 - No
1 - Yes
Category: **HANA**
This is a follow-up field ideally to be completed at most follow-up appointments but certainly when you do suspect a recurrence. Please record whether you suspect a recurrence.

Site of suspected head and neck recurrence
SITEOFSUSPECTEDHNRECURRENCE
Optional SingleChoice: the code only. see table: **HTS**
Category: **HANA**
This is a follow-up field to be completed when you suspect a recurrence. Please report the site of the suspected recurrence

Side of suspected recurrence
SIDEOFSUSPECTEDRECURRENCE
Optional SingleChoice: the code only.
1 - Left
2 - Right
3 - Midline
4 - Bilateral
8 - Not applicable
9 - Not known
Category: **HANA**
This is a follow-up field to be completed when you suspect a recurrence. Please record the side of the suspected recurrence

Suspected new tumour
SUSPECTEDNEWTUMOUR
Desirable SingleChoice: the code only.
0 - No
1 - Yes
Category: **HANA**
This is a follow-up field ideally to be completed at most follow-up appointments but certainly when you suspect a new tumour has arisen. Please record whether you suspect that the patient has a new tumour

Follow up clinic measurements continued ...

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

Category: **HANA**

This is a follow-up field to be completed when you suspect a new tumour has arisen. Please select the general anatomical site in the body where you suspect a new tumour.

Head & Neck site of suspected new tumour
HEADNECKSITEOFSUSPECTEDNEWTUMOUR

Optional SingleChoice: the code only. see table: **HTS**

Category: **HANA**

If this new tumour is in the head and neck please select the specific site. This is a follow-up field to be completed when you suspect a new tumour has arisen

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

Category: **HANA**

This is a follow-up field to be completed when you suspect a new tumour has arisen. Select the side of the body where you suspect that there is a new tumour.

Follow up clinic measurements continued ...

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

Category: **HANA**

Record any complications using this multiple-choice drop-down list. If the patient has no complications select **none** otherwise please select the general category of the complication or complications. This is a follow-up field ideally to be completed at most follow-up appointments but certainly when the patient has complications.

Acute radiotherapy toxicity complications

ACUTETOXICITYRADIOTHERAPY

Optional MultiChoice: the code(s) only.

1 - Mucositis
2 - Skin sores
3 - Pain
4 - Dysphagia
9 - Other

Category: **HANA**

Only select one or more of these options if the patient has grade 3/4 toxicity or requires hospital admission

Follow up clinic measurements continued ...

Late radiotherapy toxicity complications
LATERADIOTHERAPYCOMPLICATIONS

Desirable * MultiChoice: the code(s) only.

1 - Xerostomia
2 - Cartilige 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

Category: **HANA**

This is a follow-up field ideally to be completed at most follow-up appointments but certainly when the patient has complications

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

Category: **HANA**

Only select one or more of these options if the patient has grade 3/4 toxicity or requires hospital admission

Follow up clinic measurements continued ...

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

Category: **HANA**

This is a follow-up field ideally to be completed at most follow-up appointments but certainly when the patient has complications

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

Category: **HANA**

This is a follow-up field ideally to be completed at most follow-up appointments but certainly when the patient has complications

Follow up clinic measurements continued ...

Other complications
OTHERCOMPLICATIONS
Optional ShortString: maximum of 1,024 characters.

Investigations ordered - Imaging nature
INVESTIGATIONSORDEREDIMAGINGNATURE
Desirable MultiChoice: the code(s) only.
1 - PET/CT
2 - MRI
3 - CT
4 - US
9 - Other
Category: **HANA**
Select the modality of imaging that is requested

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
Category: **HANA**
Select the anatomical site of the imagining request.

Investigations ordered - Pathology nature
INVESTIGATIONSORDEREDPATHOLOGYNATURE
Desirable MultiChoice: the code(s) only.
1 - Biopsy
2 - FNAC
3 - Image guided biopsy
9 - Other
Category: **HANA**
Select the type of pathology test that is ordered.

Follow up clinic measurements continued ...

Investigations ordered - Pathology site
INVESTIGATIONSORDEREDPATHOLOGYSITE

Desirable MultiChoice: the code(s) only.

1 - Head and Neck
2 - Liver
3 - Lung
4 - Spine
99 - Other

Category: **HANA**

Select the anatomical site from which the pathology material was removed.

Planned weeks to next appointment
PLANNEDWEEKSTONEXTAPPOINTMENT

Optional Integer: enter a whole number.

Category: **HANA**

Select the number of weeks until the patient is next seen.

Follow up results

Date of clinician letter
DATEOFCLINICIANLETTER

Optional Date: ODBC date as yyyy-mm-dd.

Category: **HANA**

Record the date of the clinic letter relating to this appointment.

Letter copied to MDT co-ordinator
LETTERCOPIEDTOMDTCOORDINATOR

Optional SingleChoice: the code only.

0 - No
1 - Yes

Category: **HANA**

The clinic letter only needs to be copied to the MDT coordinator if a new tumour or recurrence is suspected and if radiology and pathology investigations have been ordered.

Date of radiology report for head & neck tumour
DATEOFRADIOLOGYREPORTFORHEADNECKTUMOUR

Desirable Date: ODBC date as yyyy-mm-dd.

Category: **HANA**

Record the date of the report relating to the radiology investigations for suspected recurrence or new tumour.

Radiology report copied to MDT co-ordinator
RADIOLOGYREPORTCOPIEDTOMDTCOORDINATOR

Desirable SingleChoice: the code only.

0 - No
1 - Yes

Category: **HANA**

Record whether this report has been copied to the MDT coordinator

Date of pathology report for head and neck tumour
DATEPATHOLOGYREPORTHNTUMOUR

Desirable Date: ODBC date as yyyy-mm-dd.

Category: **HANA**

Record the date of the report relating to the pathology investigations for suspected recurrence or new tumour.

Pathology report copied to MDT co-ordinator
PATHOLOGYREPORTCOPIEDTOMDTCOORDINATOR

Desirable SingleChoice: the code only.

0 - No
1 - Yes

Category: **HANA**

Record whether this report has been copied to the MDT coordinator

Follow up results continued ...

Biopsy result (recurrence or new tumour indicator)
BIOPSYRESULTRECURRENCEORNEWTUMOURINDICATOR

Desirable SingleChoice: the code only.

0 - No
1 - Yes
2 - N/A
9 - Not known

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.

Category: **COSD DAHNO**

The date on which the patient's Cancer Care Plan was discussed at a Multidisciplinary Team Meeting and a treatment planning decision was made.

Date new tumour clinically agreed
DATENEWTUMOURCLINICALLYAGREED

Optional Date: ODBC date as yyyy-mm-dd.

Category: **COSD DAHNO**

Record the date where Cancer was confirmed or diagnosis agreed (This will normally be the date of the authorised pathology report which confirms the cancer or if this is not available at the time it will be the date of the Multidisciplinary Team Meeting when the diagnosis was agreed). (This is may not be the same as Date of Diagnosis which is used for Cancer Registration.)

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

Category: **COSD DAHNO**

The status of the primary tumour at this follow up contact

Follow up results continued ...

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
Category: **COSD DAHNO**
The status of the regional nodal metastases at this follow-up contact.

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
Category: **COSD DAHNO**
The status of the distant metastases at this follow-up contact.

Complications

General complications

GENERALCOMPLICATIONS

Optional MultiChoice: the code(s) only.

1 - Gastrostomy problems
2 - Tracheostomy problems

Category: **HANA**

Please select if relevant.

Patient mortality

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

Category: HANA

Record whether the patient's death was related to disease or treatment or neither.

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 failurre
14 - Peptic ulcer
15 - Gastrostomy complications
16 - MRSA related
17 - Clostridium Difficlie related
18 - Other hospital acquired problem
19 - Renal failure
20 - Swallowing problems
21 - Aspiration pneumonia
22 - Radiation necrosis
23 - Carotid blow out
99 - Other

Category: HANA

Record the main specific cause of the patient's death.

Patient mortality continued ...

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

Category: **COSD**

The type of location at which a person died.

Radiology image

Date of imaging
DATEOFIMAGING

Mandatory Date: ODBC date as yyyy-mm-dd.

Category: **COSD**

The date the Cancer Imaging was carried out

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

Category: **COSD**

The type of imaging procedure used during an Imaging or radiodiagnostic event for a Cancer Care Spell. n.b., PET scan also includes PET-CT scan.

Anatomical site
ANATOMICALSITE

Desirable MultiChoice: the code(s) only. see table: **HAS**

Category: **COSD**

A classification of the part of the body that is the subject of an imaging or radiodiagnostic event.

Anatomical side
ANATOMICALSIDE

Desirable SingleChoice: the code only.

1 - Left
2 - Right
3 - Midline
4 - Bilateral
8 - Not applicable
9 - Not known

Category: **COSD**

The side of the body that is the subject of an Imaging or radiodiagnostic event.

Where was the imaging done
WHEREWASTHEIMAGINGDONE

Desirable SingleChoice: the code only. see table: **HOS**

Category: **COSD**

This is the organisation site code of the Organisation where the imaging took place.

Radiology image continued ...

Maximum diameter of lesion
MAXIMUMLESIONDIAMETER
Desirable Integer: enter a whole number.
Category: **COSD**
The size in millimetres of the maximum diameter of the primary lesion, largest if more than one.

Radiologist
RADIOLOGIST
Optional SingleChoice: the code only. see table: **HRD**

Imaging report
IMAGINGREPORT
Optional String data (max 150000 chars)
Category: **COSD**
This is the full text provided in the imaging report and may be required by registries to derive final stage and diagnosis date for registration.

Metastasis found on imaging
METASTASISFOUNDONIMAGING
Optional SingleChoice: the code only.
0 - No
1 - Yes

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
Category: **COSD**
The site of the metastatic disease, if any, at diagnosis.

Metastasis confirmed histologically
METASTASISCONFIRMEDHISTOLOGICALLY
Optional SingleChoice: the code only.
0 - No
1 - Yes

Operation

Where was the surgery performed
WHEREWASTHESURGERYPERFORMED
Desirable SingleChoice: the code only. see table: **HOS**

Consultant with overall responsibility for the operation
CONSULTANTWITHOVERALLRESPONSIBILITYFORTHEPROCEDURE
Optional SingleChoice: the code only. see table: **GMC**

Category: **COSD**

The Consultant code of the consultant responsible for the treatment of the patient. Because one operation is made up of many procedures which may be performed by surgeons from different specialties there is an opportunity with each procedure to record a different consultant name and GMC number.

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 reconstrustive surgery
4 - General surgery
9 - Other

Category: **HANA**

Please choose the main specialty from one of the choices in the drop-down list.

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 treatent complication
9 - Other

Category: **HANA**

Please record the broad reason for surgery in the multi-choice drop-down list.

Variance between planned and actual procedure date
VARIANCEBETWEENPLANNEDANDACTUALPROCEDUREDATE
Optional Integer: enter a whole number.

Operation continued ...

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

Category: **HANA**

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

Category: **COSD** **DAHNO**

Operation continued ...

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)
Category: **COSD**

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

Operation continued ...

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 withdrawl - 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

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

Desirable * SingleChoice: the code only.

0 - No
1 - Yes

Procedures performed

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

Category: **HANA**

This is a drop-down list which captures the reason why the patient has a subsequent operation for complications. Select one or more options.

Operating surgeon
OPERATINGSURGEON
Desirable SingleChoice: the code only. see table: **GMC**

Assistant surgeon
ASSISTANTSURGEON
Optional SingleChoice: the code only. see table: **GMC**

Short term outcomes

Patient status at discharge

PATIENTSTATUSATDISCHARGE

Desirable SingleChoice: the code only.

0 - Alive
1 - Deceased

Category: HANA

Record deceased if the patient died in hospital prior to discharge following surgical treatment.

General cause of death

GENERALCAUSEOFDEATH

Optional SingleChoice: the code only.

1 - Treatment related
2 - Disease related
3 - Not treatment or disease related

Category: HANA

Please record whether the patient's death was related to disease or treatment or neither.

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

Category: HANA

Please record the main specific cause of the patient's death.

Short term outcomes continued ...

Discharge date
DISCHARGEDATE

Desirable Date: ODBC date as yyyy-mm-dd.

Category: **COSD DAHNO**

If patient was discharged alive following a surgical procedure enter date of discharge. If patient died prior to discharge no date required.

Delayed discharge
DELAYEDDISCHARGE

Optional SingleChoice: the code only.

0 - No
1 - Yes

Category: **HANA**

Please record whether the patient's discharge from hospital after surgery was delayed.

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

Category: **HANA**

If there was a non-clinical cause that delayed the patient's discharge from hospital please choose from the multi-choice drop-down list.

Short term outcomes continued ...

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

Category: **COSD**

This records the destination of a patient on completion of the Hospital Provider Spell. It can also indicate that the patient died.

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