

Person with cancer—myometrial thickness, total millimetres N[N]

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Person with cancer—myometrial thickness, total millimetres N[N]

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Myometrial thickness
METEOR identifier:	424269
Registration status:	HealthI , Standard 08/05/2014
Definition:	The total myometrial thickness for a person with endometrial cancer, expressed in millimetres.
Data Element Concept:	Person with cancer—myometrial thickness
Value Domain:	Total millimetres N[N]

Value domain attributes

Representational attributes

Representation class:	Total								
Data type:	Number								
Format:	N[N]								
Maximum character length:	2								
Supplementary values:	<table><thead><tr><th>Value</th><th>Meaning</th></tr></thead><tbody><tr><td>97</td><td>Not applicable</td></tr><tr><td>98</td><td>Unknown</td></tr><tr><td>99</td><td>Not stated/inadequately described</td></tr></tbody></table>	Value	Meaning	97	Not applicable	98	Unknown	99	Not stated/inadequately described
Value	Meaning								
97	Not applicable								
98	Unknown								
99	Not stated/inadequately described								
Unit of measure:	Millimetre (mm)								

Collection and usage attributes

Guide for use: Size in millimetres with valid values from 1 to 96.

Source and reference attributes

Submitting organisation: Cancer Australia

Data element attributes

Collection and usage attributes

Guide for use: Record the total myometrial thickness in millimetres (mm).

Depth of myometrial invasion is a prognostic factor for endometrial cancer. Myometrial thickness ranges from 2 to 40 mm. A myometrial thickness of 5 mm or less is considered to be normal.

The fractional myometrial invasion by tumour cells, i.e. the ratio of myometrial invasive depth to total normal myometrial thickness, is predictive of lymph node metastases in high risk endometrial cancers.

Source and reference attributes

Submitting organisation: Cancer Australia

Reference documents: Hauth EA, Jaeger HJ, Libera H, Lange S, Forsting M 2007. MR imaging of the uterus and cervix in healthy women: determination of normal values. *European Radiology* 17:734

O'Connell LO, Fries MH, Zeringue E, Brehm W 1998. Triage of Abnormal Postmenopausal Bleeding: A comparison of endometrial biopsy and transvaginal sonohysterography versus fractional curettage with hysteroscopy. *American Journal of Obstetrics & Gynecology* 178:956-61

RCPA 2011. Endometrial Cancer Structured Reporting Protocol (1st Edition 2011). Sydney: Royal College of Pathologists of Australasia

Weber AM, Belinson JL, Bradley LD, Piedmonte MR 1997. Vaginal ultrasonography versus endometrial biopsy in women with postmenopausal bleeding. *American Journal of Obstetrics & Gynecology* 177:924-9

Relational attributes

Related metadata references: See also [Person with cancer—depth of myometrial invasion, total millimetres N\[N\] Health!](#), Standard 08/05/2014

Implementation in Data Set Specifications: [Gynaecological cancer \(clinical\) DSS Health!](#), Superseded 14/05/2015

Conditional obligation: This data element is only to be recorded for patients with endometrial cancer, as indicated by [Person with cancer—primary site of cancer, topography code \(ICD-O-3\) ANN.N.](#)

[Gynaecological cancer \(clinical\) NBPDS Health!](#), Standard 14/05/2015

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This data element is only to be recorded for patients with endometrial cancer, as indicated by [Person with cancer—primary site of cancer, topography code \(ICD-O-3\) ANN.N.](#)