Radiotherapy for cancer cluster

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Radiotherapy for cancer cluster

| Seq No. | Metadata item | METEOR identifier | Data Type [Length] | Value & Meaning |
|------------|--|-------------------|-----------------------|--|
| - | Radiation dose administered | 561384 | Number [5] | 999.97 Not applicable-radiotherapy was not administered 999.98 Unknown whether radiotherapy was administered 999.99 Radiotherapy was administered but the dose is not stated/inadequately described |
| - | Radiotherapy completion date | 561389 | Date/Time [8] | DDMMYYYY The day of a particular month and year. |
| - | Radiotherapy fractions administered | 561464 | Number [2] | 97 Not applicable-no radiotherapy was administered 98 Unknown whether radiotherapy was administered 99 Radiotherapy administered but the number of fractions not stated/inadequately described |
| - | Radiotherapy start date—cancer treatment | 561469 | Date/Time [8] | DDMMYYYY The day of a particular month and year. |
| - | Radiotherapy target site | 561476 | Number [2] | 1 Primary site only 2 Regional nodes only 3 Distant metastases only 4 Primary site and regional nodes 5 Primary site and distant metastases 6 Primary site, regional nodes and distant metastases 7 Regional nodes and distant metastases 97 Regional nodes and distant metastases 97 Not applicable-radiotherapy was not administered 98 Unknown whether radiotherapy was administered 99 Radiotherapy was administered but the site not stated/inadequately described |
| - | Radiotherapy treatment type | 561521 | Number [2] | 1 External beam radiotherapy only 2 Brachytherapy only 3 Unsealed radioisotopes only 4 External beam radiotherapy and brachytherapy 5 External beam radiotherapy and unsealed radioisotopes 6 Brachytherapy and unsealed radioisotopes 7 External beam radiotherapy, brachytherapy and unsealed radioisotopes 97 External beam radiotherapy, brachytherapy and unsealed radioisotopes 97 Not applicable-radiotherapy was not administered 98 Unknown whether radiotherapy was administered 99 Radiotherapy was administered but the treatment type not stated/inadequately described |