Surgery for cancer cluster

Exported from METEOR (AIHW's Metadata Online Registry)

© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY4.0 (CC BY4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AIHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at https://creativecommons.org/licenses/by/4.0/.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

Surgery for cancer cluster

Identifying and definitional attributes

Metadata item type:	Data Set Specification
METEOR identifier:	603488
Registration status:	Health!, Standard 14/05/2015
DSS type:	Data Element Cluster
Scope:	Cancer-directed surgery is surgery that destroys or modifies cancer tissue anywhere in the body and includes biopsies that remove the entire tumour and/or leave only microscopic margins. It may be palliative, (to control symptoms, alleviate pain, or make the patient more comfortable), or curative.
	The surgery treatment cluster consists of those data elements recommended for collection as best practice when cancer-directed surgery is performed as part of the course of treatment for cancer. The surgery treatment cluster collects information on the target sites of surgery, the procedure types and the date of each procedure.
	Information on target sites and procedures is required to evaluate patterns of care, the effectiveness of different treatment modalities and treatment by patient outcome. Collecting the procedure dates will enable an estimate of the time interval from diagnosis to treatment.
	The use of standard definitions and formats supports the consistent collection and management of data and enables the integration of data from different sources. It provides a common language facilitating the interpretation and analysis of results, data linkage for statistical purposes, longitudinal studies and patient patterns of care and outcome studies. These results may then inform professional guidelines and training, quality assurance and the planning and evaluation of cancer control activities, potentially improving outcomes for patients.

Collection and usage attributes

Collection methods: All cancer-directed surgery performed during the course of treatment is recorded regardless of treatment intent or timing. The data element Healthcare provider—organisation identifier, N(16) may be recorded for each treatment. It is recommended that, wherever possible, the database be configured to allow entry of different healthcare provider identifiers for each therapeutic course of treatment.

This information should be collected from the patient's medical record.

Source and reference attributes

Submitting organisation:	Cancer Australia
Reference documents:	American College of Surgeons 2002. Facility Oncology Registry Data Standards (FORDS), 2009 revision. Commission on Cancer

Relational attributes

Related metadata references:	Supersedes <u>Surgery for cancer cluster</u> <u>Health!</u> , Superseded 14/05/2015
	See also <u>Cancer treatment—cancer treatment type, code N[N]</u> <u>Health!</u> , Standard 08/05/2014

Conditional on the patient receiving cancer-directed surgery.

Metadata items in this Data Set Specification

Seq No.	Metadata item	Obligation	Max occurs
-	Cancer treatment—surgery target site, topography code (ICD-O-3) ANN.N	Mandatory	99
-	Cancer treatment—surgical procedure date, DDMMYYYY	Mandatory	99
-	Cancer treatment—surgical procedure for cancer, procedure code (ACHI 9th edn) NNNNN-NN	Mandatory	99