

Physician On-line Staging Application



Princess Margaret Hospital

University Health Network



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Outline

- Overview of Princess Margaret Hospital
- History of Staging at PMH
- Steps to On-Line Physician Staging at PMH
- Demonstration of Staging & Audit
- Next Steps



Princess Margaret Hospital, Toronto, ON

- PMH, the largest Comprehensive Cancer Centre in Canada, is part of the University Health Network in Toronto. UHN includes two acute care facilities along with PMH.
- A hospital based cancer registry that has been in operation since 1958. Currently sees over 12,000 new cases per year



History of Staging at PMH

- 1958-1973 captured TNM Staging for Breast, Ovary, Head & Neck
 - Completed by Physicians and Registry staff
- 1974-1985 staged according to UICC TNM, for Breast, Cervix, Corpus Uteri, Hypoharynx, Larynx, Nasopharynx, Oral Cavity and Ovary
- 1986-1989 added Prostate, Bladder and Thyroid
 - Completed by Physicians and Registry staff
- 1990-1996 added Colon, Hodgkin and non-Hodgkin Lymphoma, Kidney, Testis, and Melanoma
 - Used UICC 4th Edition of TNM, then 5th Edition in 1997



History of Staging at PMH (cont'd)

- In July 1997, the Medical Advisory Committee of the PMH endorsed a policy that: ‘The attending staff physician for all new patients with cancer should record the TNM stage as per the International Union Against Cancer (UICC), classification, no later than 6 months following the initial consultation.’
- Audit published in J of Clinical Oncology of 1997 cases to assess accuracy of the recorded stage and to identify problems in the application of TNM



1997 Staging Audit-Results

- 80% agreement between health record stage and final stage for clinical stage
- 90% agreement between health record stage and final stage for pathological stage
 - Lung was the least accurate
- Demonstrated the quality of staging and the need to develop guidelines
 - Staging and Education Sub-Committee of the Cancer Registry Committee was formed



History of Staging at PMH- (cont'd)

- In 2001, Cancer Registry Committee , Staging & Education Sub-Committee and VP/COO approved Physician staging for all stageable sites using UICC TNM
- With the purpose to get cancer classification and staging data into accessible format for integration into the cancer registry so that it can be used for research in an acceptable timeframe



Development of Physician On-Line Staging Application

- The Clinical Informatics Department was tasked with the development of an on-line staging tool so that Physicians would eventually be able to enter all the TNM information on-line through a web based application that would be accessible by Cancer Registrars
 - To include a means for tracking completeness and auditing
- Physicians and Cancer Registrars were involved in the development process



Cancer Staging Policy

July 2002

PMH Staging Policy-revised as of July 2, 2002

- All **new patients** with a diagnosis of cancer should be staged according to the **5th Edition of the UICC TNM** at the time of diagnosis.
- Starting on January 1, 2003, the 6th Edition of the UICC TNM Classification will be used.
- The recording of staging should be done within 3 months of the first appointment to PMH.
- This requires an accurate record of the individual T, N, and M categories for every case. However, it does not require the stage group to be recorded when all TNM elements are recorded, since this can be calculated in the Cancer Registry.
- Wherever possible, both clinical TNM and pathological TNM should be recorded.
- If there is doubt concerning the correct T, N, or M category, then the lower (i.e. less advanced) category should be chosen.
- Patients with palliative circumstances who present with distant metastasis do not need to have the T and N categories recorded but the M1 designation (in the M-category) must be specified in all such cases. The designation 'X' may be used for the T and N categories since this will not affect the Stage Group.
- Patients referred with recurrent disease should have the M-category at the time of recurrence recorded.



Development of Physician On-Line Staging Application (cont'd)

- Initially Physicians completed a paper form that as entered into the database by Cancer Registry staff
- New patients were identified through the patient scheduling system. The paper forms were put into the charts as they were being prepared for clinic



Physician On-Line Staging Application-Audit Process

- Physicians are given 3 months from the time of the first appointment date to complete the staging
- An audit is then run and the details of cases still to be staged are sent to the Physician
- After the 4th month if the staging is still not completed, the names of the Physicians with incomplete cases are sent to the Department Head
- After the 5th month, if the staging is still not complete, the names of the Physicians with incomplete cases are sent to the VP /COO



Physician On-Line Entry of Staging Information

- By June 2003, the application was developed so that Physicians would do their own entry of the staging information
- Allows Physicians to obtain a list of patient case reports to be completed
- Ability to enter, edit, sign off on incomplete cases, or transfer responsibility for case completion to another physician
- The application has built-in logic which controls the order of data entry and the site-specific list of values that can be selected



Cancer Staging Demonstration

- Physician Staging
- Auditing



Next Steps

- Compare the staging completed by the Physician with what the Cancer Registrars enter into the Cancer Registry
- Enhancements to the on-line application

To view the demo log on to uhnresearch.ca/core

