



Reporting of Cancer Quality Measures: Sidney Kimmel Cancer Center - Washington Township, 2012 - 2015

To ensure continuous monitoring and reporting of quality measures, the team at the Sidney Kimmel Cancer Center - Washington Township conducts continuous practice improvements to improve the quality of patient care.

Table Key: Green means that our results meet or exceed the American College of Surgeons Commission on Cancer (CoC) Benchmark - Standard 4.4/4.5. N/A means there were no qualifying cases.

The Commission on Cancer (CoC), a program of the American College of Surgeons (ACoS), recognizes cancer care programs for their commitment to providing comprehensive, high-quality, and multidisciplinary patient centered care.	2012	2013	2014	2015	CoC Benchmark
Tamoxifen, or third generation aromatase inhibitor, is recommended or administered within 1 year of diagnosis for women with AJCC T1c or stage IB-III hormone receptor positive breast cancer	96.80%	84.40%	97.10%	100%	90% Standard 4.4
Radiation is administered within 1 year of diagnosis for women under the age of 70 receiving breast conservation surgery	95.70%	91.70%	96.40%	100%	90% Standard 4.4
Radiation therapy is recommended or administered following any mastectomy within 1 year of diagnosis of breast cancer for women with >= 4 positive lymph nodes	100%	40%	N/A	100%	90% Standard 4.4
Image or palpation-guided needle biopsy to the primary site is performed to establish diagnosis of breast cancer	77.80%	86%	98.70%	94.10%	80% Standard 4.5
At least 12 regional lymph nodes removed and pathologically examined for resected colon cancer.	86.10%	94.90%	95.20%	95.70%	85% Standard 4.5
Preoperative chemo and radiation are administered for clinical AJCC T3N0, T3N0, or Stage III, or postoperative chemo and radiation are administered within 180 days of diagnosis for	100%	66.70%	100%	100%	85% Standard 4.5

clinical AJCC T1-2N0 with pathological AJCC T3N0, T4N0, or Stage III; or treatment is recommended for patients under the age of 80 receiving resection for rectal cancer					
Systemic chemotherapy is administered within 4 months to day of preoperatively, or day of surgery to 6 months postoperatively, or it is recommended for surgically resected cases with pathologic lymph node-positive (pN1) and (pN2) NSCLC	100%	N/A	100%	100%	85% Standard 4.5
Surgery is not the first course of treatment for cN2, M0 lung cases	100%	100%	100%	91.70%	85% Standard 4.5
At least 15 regional lymph nodes removed and pathologically examined for resected gastric cancer	N/A	100%	N/A	100%	80% Standard 4.5