National Cancer Intelligence Network (NCIN)

Purpose of this document

This document defines the specification for the Systemic Anti-Cancer Therapy Dataset (SACT)

The data set is intended to utilise information routinely captured for primary use purposes i.e. the direct care of the patient wherever possible and where there is a corresponding secondary use purpose. It is not intended to reflect all of the information required to support 'primary uses' and has not been designed or clinically assured for such purposes, and as such MUST not be treated as a Cancer Chemotherapy Care Record.

The development of the SACT data set has been overseen by the NCIN Chemotherapy Dataset Working Group, incorporating representatives of relevant clinical disciplines and key stakeholder organisations.

Document Version History

Version	Date Issued	Brief Summary of Change	Owner's Name
15	***13/07/2011***	*Incorporating field requirements (M/R/O)*	NCIN
2.0	***27/08/2013***	*Updating to incorporate minor changes*	NCIN

IMPORTANT

This document should be read in conjunction with the corresponding User Guidance and Information Standards Notice for ISB 1533 which can be found on the ISB website - http://www.isb.nhs.uk/documents/isb-1533/amd-63-2010/index_html

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Mandatory/Required/Optional Data Items

A column has been included within the table specifications to identify whether a data item is mandatory or optional as follows:

Mandatory: These data items **MUST** be reported. Failure to submit these items will result in the rejection of the submission.

Required: These data items **SHOULD** be reported where they apply. Failure to submit these items will not result in the rejection of the submission but may affect the derivation of national indicators or national analysis. (Please note that the purpose of the data set is not to change clinical practice.)

Optional: These data items **MAY** be submitted on an optional basis at the submitters discretion.

Please note that these rules are applied at record level i.e. they only apply where a record is present.

Data item number	Data item name	Data Dictionary Data Element	Data Dictionary Field format	Commentary	M/R/O
Demographics and Consultant					
1	NHS number	NHS NUMBER	n10	Primary identifier, essential for data linkage	M
43	NHS number status indicator code	NHS NUMBER STATUS INDICATOR CODE	an2	The NHS NUMBER STATUS INDICATOR CODE indicates the verification status of the NHS number provided.	M
2	Date of birth	PERSON BIRTH DATE	an10 ccyy-mm-dd	Secondary identifier and allows analysis of provision by age	M
3	Gender - current	PERSON GENDER CODE CURRENT	an1	To allow analysis by gender	R
4	Ethnicity	ETHNIC CATEGORY	an2	To allow analysis by ethnicity using ONS categories	R
5	Patient postcode	POSTCODE OF USUAL ADDRESS	max an8	To allow analysis of geographical patterns of care	M
6	Registered GP practice code	GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	an6	This allows reporting of commissioning	R
7	Consultant GMC code	CONSULTANT CODE (INITIATED SYSTEMIC ANTI-CANCER THERAPY)	an8	This allows identification of consultant team and patterns of management	R
8	Consultant specialty code	CARE PROFESSIONAL MAIN SPECIALTY CODE	an3	This facilitates analysis by specialty	R
9	Organisation code of provider	ORGANISATION CODE (CODE OF PROVIDER)	an3 or an5	This is the code of the provider initiating the programme of chemotherapy	M
Clinical Status					
10	Primary diagnosis (ICD-10)	PRIMARY DIAGNOSIS (ICD AT START SYSTEMIC ANTI-CANCER THERAPY)	an6	ICD-10: To allow for analysis by tumour site	M or field 11
11	Morphology	MORPHOLOGY (ICD-O AT START SYSTEMIC ANTI-CANCER THERAPY)	min an5 – max an7	ICD-O3: Is essential for some tumour sites e.g. haematology and lung, where ICD-10 is inadequate	M or field 10
12	TNM stage grouping (final pretreatment)	TNM STAGE GROUPING (FINAL PRETREATMENT)	an5	To allow analysis by stage, which is essential for outcome analysis	R
Programme and Regimen					
13	Programme number	SYSTEMIC ANTI-CANCER THERAPY PROGRAMME NUMBER	max n2	To allow for sequential analysis of patient care, may start at any number to account for previous treatment and is unique to each patient. This also corresponds to the term "line of chemotherapy' expressed in many prescribing systems.	R
14	Regimen number	ANTI-CANCER REGIMEN NUMBER	max n2	To allow for sequential analysis of patient care, may start at any number to account for previous treatment and is unique to each patient	R
15	Intent of treatment	DRUG TREATMENT INTENT	an1	To allow analysis by treatment intent	R
16	Regimen	DRUG REGIMEN ACRONYM	max an35	To be consistent with the National Regimen List (when established)	M
17	Height at start of regimen	PERSON HEIGHT IN METRES	n1.max n2	To allow comparison of dose by metre²	R
18	Weight at start of regimen	PERSON WEIGHT	max n3.max n3	To allow comparison of dose by metre²	R
19	Performance status at start of regimen	PERFORMANCE STATUS FOR (ADULT) *or* PERFORMANCE STATUS CODE (YOUNG PERSON)	an1 or an2	WHO or Lansky - to allow casemix adjusted analysis	R
20	Co-morbidity adjustment	CO-MORBIDITY ADJUSTMENT INDICATOR	an1	Yes/no -to allow casemix adjusted analysis	R
21	Date decision to treat	DECISION TO TREAT DATE (ANTI-CANCER DRUG REGIMEN)	an10 ccyy-mm-dd	To allow analysis of wait before treatment start	R
22	Start date of regimen	START DATE (ANTI-CANCER DRUG REGIMEN)	an10 ccyy-mm-dd	To allow analysis by time period	M
23	Clinical trial	CLINICAL TRIAL INDICATOR	an2	Yes/no -to identify chemotherapy given within clinical trials	R
24	Chemo-radiation	CHEMO-RADIATION INDICATOR	an1	Yes/no - to identify use of chemo-radiation, only used where this is a recognised treatment regimen	R
25	Number of cycles planned	NUMBER OF SYSTEMIC ANTI-CANCER THERAPY CYCLES PLANNED	max n2	To allow comparison with number of cycles actually given. Not necessarily relevant for palliative treatment	R
Cycle					
26	Cycle number	ANTI-CANCER DRUG CYCLE IDENTIFIER	max n2	Sequential within each regimen and indicates the patient's progress through the regimen	M
27	Start date of cycle	START DATE (SYSTEMIC ANTI-CANCER DRUG CYCLE)	an10 ccyy-mm-dd	The date of the first administration in each cycle	R
28	Weight at start of cycle	PERSON WEIGHT	max n3.max n3	Where relevant to allow for recalculation of dose	O
29	Performance status at start of cycle	PERFORMANCE STATUS FOR (ADULT) *or* PERFORMANCE STATUS CODE (YOUNG PERSON)	an1 or an2	To assess patient's suitability for further treatment	R
30	OPCS procurement code	PRIMARY PROCEDURE (OPCS)	an4	To await final decision on PbR structure	R
Drug Details					
31	Drug name	SYSTEMIC ANTI-CANCER DRUG NAME	max an35	This is the approved name in the BNF. It identifies individual drug usage	R
32	Actual dose per administration	CHEMOTHERAPY ACTUAL DOSE	max n7	For oral regimens this is the daily dose. Allows calculation of cumulative dose per patient and global drug usage	R
33	Administration route	SYSTEMIC ANTI-CANCER THERAPY DRUG ROUTE OF ADMINISTRATION	an2	Pick list - to allow analysis by route of administration for each drug	R
34	Administration date	SYSTEMIC ANTI-CANCER THERAPY ADMINISTRATION DATE	an10 ccyy-mm-dd	The date of actual administration	R
35	Organisation code of provider	ORGANISATION CODE (CODE OF PROVIDER)	an3 or an5	This may change throughout a regimen. Allows analysis by provider	R

36	OPCS delivery code	PRIMARY PROCEDURE (OPCS)	an4	To await final decision on PbR structure	R
Outcome					
37	Date of final treatment	START DATE (FINAL SYSTEMIC ANTI-CANCER THERAPY)	an10 ccyy-mm-dd	Date of the start of the final cycle	R
38	Regimen modification - dose reduction	SYSTEMIC ANTI-CANCER THERAPY REGIMEN MODIFICATION INDICATOR (DOSE REDUCTION)	an1	Yes/no - where a dose of any SACT drug is reduced at any cycle	R
39	Regimen modification - time delay	SYSTEMIC ANTI-CANCER THERAPY REGIMEN MODIFICATION INDICATOR (TIME DELAY)	an1	Yes/no - where administration of drugs is delayed > 5 days at any cycle	R
40	Regimen modification - stopped early	SYSTEMIC ANTI-CANCER THERAPY REGIMEN MODIFICATION INDICATOR (DAYS REDUCED)	an1	Yes/no - where the regimen is abandoned before the planned number of cycles	R
41	Regimen outcome summary	PLANNED TREATMENT CHANGE REASON	an1	Six option pick list to summarise the regimen outcome	R
42	Date of death	PERSON DEATH DATE	an10 ccyy-mm-dd	To estimate 30-day mortality or to analyse survival after chemotherapy. May be sourced from ONS statistics	R
				M mandatory - record will be rejected without this field	
				R required - must be completed if available and all fields complete by April 2014	
				O optional - should be completed where relevant to clinical management	