

## Cancer Program Success Questions

### Cancer Registry *Class of Case* as a Decision-Support Resource: Part I – Analytic Cases

By Karen Gilden

*“Is Dr. Wayward a loyal supporter of our cancer program; or is he finding cancer among our patients and transferring them to the other community hospital for treatment?”*

*“How many patients leave our physicians and hospital, once cancer is diagnosed, to receive their treatment elsewhere?”*

*“How many patients seek breast cancer care at our institution, with our newly installed fellowship-trained breast surgeon, even when they receive their diagnosis at another local hospital?”*

These questions represent several real-world questions c-suite executives often ask about their cancer programs. The answers to these questions are available immediately from their program’s cancer registry *Class of Case* information. *Class of Case* information “most precisely describes the patient’s relationship to the facility.”<sup>1</sup>

In 2010, the Commission on Cancer revised the *Class of Case* categories, to provide substantive guidance for cancer registrars to more easily classify some cases. *Class of Case* information enables program and hospital administrators to answer such questions as how many (and what percentage of a year’s cancer case volume) were:

- Cases diagnosed within the institution, but moved elsewhere for treatment (by either patient preference or physician referral);
- Cases diagnosed within the institution (by its physicians) and all or most of the first course of cancer treatment delivered by that institution’s affiliated physicians; and,
- Cases which were diagnosed and treated entirely within a physicians’ office practice.

The “new” (2010) *Class of Case* categories replaced the single-digit model used historically. The chart below provides an easy reference to the new two digit classification scheme for analytic cancer patients.

Part II of this article will be featured in the next TOG eBlast and will include a similar graphic for understanding the 2010 two digit classification system for non-analytic cases.

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<sup>1</sup> Commission on Cancer. FORDS Manual (Facility Oncology Registry Data Standards), 2010, P 97.

Class of Case Two Digit Classification System, Part I		
Analytic Cases	Class of Case Code	Comments
Patients diagnosed at the reporting institution, but receiving their treatment elsewhere	00	Or, a decision not to treat was made elsewhere.
Patients diagnosed at the institution, or within a staff physician's office, and receiving all, or part of, their first course treatment there. Or a decision not to treat was made at the recording institution.	10	This is a "conversion" code that will be used less often after 2010, as it was replaced by more specific class of case codes 11,12,13 & 14.. Replaces, in part, previous Class of Case 1 or 2 cancer cases (patients).
Patient diagnosed at a staff physician's office <b>AND part</b> of the 1 <sup>st</sup> course of treatment was given at the reporting institution.	11	
Patient diagnosed at a staff physician's office <b>AND ALL</b> of the 1 <sup>st</sup> course of treatment was given at the reporting institution.	12	
Patient diagnosed at the institution <b>AND part</b> of the 1 <sup>st</sup> treatment course was given at the reporting institution.	13	
Patient diagnosed <b>AND received all</b> of their 1 <sup>st</sup> treatment course at the reporting institution; or a no-treatment decision was made at the institution.	14	
Patients initially diagnosed elsewhere (e.g. at another, or competing, institution) but receiving all or part of their first course of treatment at this institution.	20	This is another "conversion" code that will be used less often after 2010, as it was replaced by more specific class of case codes 21 and 22. Replaces, in part, previous Class of Case 1 or 2 cancer cases (patients)
Patient diagnosed elsewhere <b>AND part</b> of their 1 <sup>st</sup> course of treatment was done at this (reporting) institution.	21	
Patient diagnosed elsewhere <b>AND all</b> of their 1 <sup>st</sup> course of treatment was completed at the reporting institution. Or a decision not to treat was made at the reporting institution.	22	

Registrar Jerri Linn Phillips, who is also Manager of Information Technology and Data Standards, for the National Cancer Data Base, at the Commission on Cancer, has created a decision flow-chart (Figure 1) that explains how registrars can easily classify an analytic patient into one of the new (2010) class of case categories.

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