

# Victorian Consensus Data Set **Breast Cancer**

Data dictionary  
Version 1.0

2010



Western & Central Melbourne Integrated Cancer Service and Cancer Council Victoria jointly fund the Victorian Consensus Data Sets Project.

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## Acknowledgements

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A governance committee oversees the project with representatives from the following organisations:

- Cancer Council Victoria (CCV)
- Metropolitan Integrated Cancer Services (ICS)
- Regional Integrated Cancer Services (ICS)
- Victorian Cooperative Oncology Group (VCOG)
- BioGrid
- Victorian Department of Health
- Cancer Voices

## Abbreviations

|           |   |
|-----------|---|
| ACHI      | Australian Classification Of Health Interventions                                 |
| ADH       | Atypical Ductal Hyperplasia   |
| AIHW      | Australian Institute of Health and Welfare  |
| ALH       | Atypical Lobular Hyperplasia  |
| ASERNIP-S | Australian Safety & Efficacy Register of New Interventional Procedures - Surgical |
| CCV       | Cancer Council Victoria   |
| CDS       | Consensus Data Set  |
| CT        | Computerised Tomography   |
| DCIS      | Ductal Carcinoma In Situ  |
| ER        | Oestrogen Receptor  |
| FBE       | Full Blood Examination  |
| FNAC      | Fine Needle Aspiration Cytology   |
| GP        | General Practitioner  |
| ICD       | International Classification Of Diseases  |
| ICD-O     | International Classification Of Diseases For Oncology                             |
| ICRU      | International Commission On Radiation Units                                       |
| ICS       | Integrated Cancer Services  |
| ISH       | In Situ Hybridization   |
| LCIS      | Lobular Carcinoma In Situ   |
| METeOR    | Metadata Online Registry  |
| MRI       | Magnetic Resonance Imaging  |
| NBCC      | National Breast Cancer Centre   |
| NBOCC     | National Breast And Ovarian Cancer Centre   |
| NHDD      | National Health Data Dictionary   |
| PD        | Progressive Disease   |
| PET       | Positron Emission Tomography  |
| PR        | Progesterone Receptor   |
| RACS      | Royal Australian College of Surgeons  |
| UICC      | International Union Against Cancer  |
| US        | Ultrasound  |
| VCDS      | Victorian Consensus Data Set  |
| VCOG      | Victorian Cooperative Oncology Group  |
| VCR       | Victorian Cancer Registry   |
| WHO       | World Health Organization   |

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## About the Victorian Consensus Data Sets (VCDS)

The VCDS consist of a series of documents, initially covering 10 tumour streams and a generic data set.

The *Victorian Consensus Data Set (Cancer) – Generic Data Set* contains data elements that are common to a wide range of tumours. The *VCDS Generic Data Set* should be used in conjunction with the tumour specific items provided in the other documents.

It is important to emphasise that these are not mandatory or minimum data sets. Agreement was reached after wide ranging consultation on the items to be included and their definitions. Wherever possible, data elements are consistent with national standards (Australian Institute of Health & Welfare) and structured pathology reporting protocols for cancer (Royal College of Pathologists Australia).

For more information, users should refer to the source documents provided in the references for each data element.

The aim of developing these standard definitions is to allow the collection of consistent data in a range of IT systems. This will expand the evidence base to enhance health planning and clinical care.

## Guide to the VCDS – Breast cancer data element attributes (data standards)

The VCDS have been developed to align with national health data standards. A guide to the national health data standards can be found on page [10](#).

### Identifying and definitional attributes

|                     |   |
|---------------------|---|
| Metadata item type  | Data set specification  |
| Registration status | Not registered  |
| Scope               | <p>This cancer data specification is not mandated for collection. If items incorporated into the data set are to be collected, the application of the definition in this data dictionary is recommended.</p> <p>The data set allows common, consistent and high quality cancer data to be collected.</p> <p>These data will contribute to patient management, and help inform research, policy, planning and guideline development work in the cancer area.</p> |

### Collection and usage attributes

|               |   |
|---------------|---|
| Guide for use | Data elements in this data set may be captured more than once and in no particular order. |
|---------------|---|

### Source and reference attributes

|                                      |   |
|--------------------------------------|---|
| Submitting organisations             | Integrated Cancer Services (ICS)<br>BioGrid<br>Victorian Cancer Registry (VCR)<br>Victorian Cooperative Oncology Group (VCOG)   |
| Steward                              | Cancer Council Victoria (CCV)<br>Western and Central Melbourne Integrated Cancer Services (WCMICS)  |
| References                           | AIHW National Health Data Dictionary METeOR   |
| Generic data set                     | CCV Victorian Clinical Cancer Registration Data Set<br>UICC TNM Classification of Malignant Tumours, 6 <sup>th</sup> Edition<br>WHO International Classification of Diseases for Oncology, 3 <sup>rd</sup> Edition<br>National Centre for Classification in Health, International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification   |
| References<br>Breast cancer data set | <p>Australian Safety &amp; Efficacy register of New Interventional Procedures – Surgical, Royal Australasian College of Surgeons (ASERNIP-S/RACS). The National Breast Cancer Audit Data Dictionary. 2006</p> <p>Breast Cancer Committee, Cancer Council Victoria. Breast Cancer update. Issue 59. February 2008.</p> <p>Coates, A. et al. Five Years of Letrozole Compared With Tamoxifen As Initial Adjuvant Therapy for Postmenopausal Women With Endocrine-Responsive</p> |

Early Breast Cancer: Update of Study BIG 1-98. J Clin Oncology, 2007; 25:5. (Downloaded from [jco.ascopubs.org](http://jco.ascopubs.org) on January 27, 2010)

Department of Human Services, Victoria. Performance Indicators and Standards for hospital breast services in Victoria. 2006

Francis, G. et al. Frequency and reliability of oestrogen receptor, progesterone receptor and HER2 in breast carcinoma determined by immunohistochemistry in Australasia: results of the RCPA Quality Assurance Program. J Clin Pathol 2007;60:1277-1283 Published Online First: 26 January 2007 doi:10.1136/jcp.2006.044701. Available [jcp.bmjournals.com/content/60/11/1277.abstract?sid=65d299a9-9d09-4442-a6b4-d907de443231](http://jcp.bmjournals.com/content/60/11/1277.abstract?sid=65d299a9-9d09-4442-a6b4-d907de443231)

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National Breast Cancer Centre (NBCC). The clinical management of ductal carcinoma in situ, lobular carcinoma in situ and atypical hyperplasia of the breast. 2003 (1<sup>st</sup> Edition)

NBCC. Clinical Practice Guidelines – Management of early breast cancer. 2001 (2<sup>nd</sup> Edition)

NBCC. Clinical practice guidelines. Management of advanced breast cancer. 2001.

NBOCC. Anti-HER2 treatment [Extract]. Available [www.nbocc.org.au/breast-cancer/treatment/trastuzumab-herceptin](http://www.nbocc.org.au/breast-cancer/treatment/trastuzumab-herceptin) (viewed 1 Oct 2009)

NBOCC. Breast Cancer Specific Data Items for Clinical Registration.

NBOCC. The Pathology Reporting of Breast Cancer -A guide for pathologists, surgeons, radiologists and oncologists.

Royal College of Pathologists of Australasia (RCPA). Breast Cancer Structured Reporting Protocol. 2010 (1<sup>st</sup> Edition)

Victorian Cancer Registry (VCR). Breast Cancer Staging and Treatment Data Linkage Project 2008-2010, Phase 1. 2009

Wolff, A. et al. American Society of Clinical Oncology/College of American Pathologists. Guideline Recommendations for Human Epidermal Growth Factor Receptor 2 Testing in Breast Cancer, Arch Pathol Lab Med, 2007; 131:18-43. Available [www.archivesofpathology.org/doi/pdf/10.1043/1543-2165%282007%29131%5B18%3AASOCCO%5D2.0.CO%3B2](http://www.archivesofpathology.org/doi/pdf/10.1043/1543-2165%282007%29131%5B18%3AASOCCO%5D2.0.CO%3B2)

## Guide to the national health data standards

The components described below are consistent with National Health Data Dictionary standards.

### Name of the Data Element

#### Identifying and definitional attributes

**Definition** A statement that expresses the essential nature of a data element and its differentiation from all other data elements.

**Rationale** The reason for collecting this data element.

#### Representational attributes

**Data type** The type of symbol or character, or other designation used to represent the data element. E.g. numeric, alphanumeric, alphabetic or integer.

**Representational class** Describes whether the valid values for the data item take the form of a code set, free text. If the form is described as 'Code' the relevant code set or sets will be specified in the Data domain section.

**Field size maximum** The number of characters allowable to represent the data element defined as a maximum.

**Format** A generic example of what the data element should look like in the unit record. For example, dates should be represented in the format of DDMMYYYY where DD represents, the day, MM represents the month, and YYYY represents the four-digit numeric for the year. The Data Type indicates whether it is alphabetic or alphanumeric).

**Classification scheme** The official terminology system recognised and endorsed by a national or international body, which is used to classify data.

**Data domain** The set of possible values for the data item. This may take the form of a code set, or a description of the possible values. Domain values are only specified where size of the code set is small enough to be reasonably reproduced in the document. In other instances the domain may be indicated by reference to a source document.

**Guide for use** These are comments designed to assist in further defining aspects of the data domain.

**Validation rules** These are included to assist in reducing input error. Where validation rules are known to exist, they have been included to assist with the programming.

**Related data element** Data elements that have some direct relationship with the data element being described.

#### Administration information

**References** Documents listed here have been used as references when designing the specified item. Also listed are names of the organisations that developed the source document or provided advice on the data item.

## User notes and assumptions

### Dates

In this data dictionary, all dates are inter-related in some way. To avoid confusion, only those dates that have a direct relationship with a specific field (especially date fields) appear as related fields.

In some cases, there are implied relationships (even though it may not have been explicitly mentioned) between some fields (especially date fields).

For example:

DOB < Date Diagnosis, Date Diagnosis < Date of Death

This implies DOB < Date of Death

### Implied relationships throughout this document are:

Assessment date < all dates (except DOB)

DOB < all dates

Date of death > all dates

## Enquiries

Any enquiries about or comments on this publication should be directed to:

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## BREAST CANCER DATA ELEMENTS

**Data element name**                      **Pregnancy (current)**

### Identifying and definitional attributes

Definition                                      Whether the female person is currently pregnant.

Justification                                      Pregnancy status can influence breast cancer treatment options and the patient may require further information, appropriate referrals or discussion with treating clinicians.

### Representational attributes

Data type    Number

Representational class                          Code

Field size maximum                              1

Format    N

| Data domain | Code | Description                       |
|-------------|------|-----------------------------------|
|             | 1    | Yes                               |
|             | 2    | No                                |
|             | 9    | Not stated/inadequately described |

Guide for use                                      Record whether the patient is currently pregnant (self-reported). it may not be evident whether a pregnancy test has confirmed the patient's status.

Validation rules                                      •

Related data element name

### Administration information

References    AIHW – Female – pregnancy indicator (current)  
METeOR ID: 302817  
NBOCC website <http://www.nbocc.org.au/breast-cancer/treatment/treatment-and-pregnancy> (viewed 28 Sep 2009)



**Data element name**                      **Plans for future pregnancy**

**Identifying and definitional attributes**

Definition                                      Whether the female person is planning to become pregnant in the future.

Justification                                    Plans for future pregnancy can influence breast cancer treatment options. It is recommended that women do not become pregnant during treatment for breast cancer. Treatments such as chemotherapy and radiotherapy can harm the unborn baby. Some treatments for breast cancer can affect a woman's fertility. Once treatment has finished there is no reliable test to determine if a woman will be able to fall pregnant in future.

**Representational attributes**

Data type                                        Number

Representational class                      Code

Field size maximum                         1

Format    N

| Data domain | Code | Description                       |
|-------------|------|-----------------------------------|
|             | 1    | Yes                               |
|             | 2    | No                                |
|             | 3    | Unsure                            |
|             | 4    | Patient is not female             |
|             | 9    | Not stated/inadequately described |

Guide for use                                    This data will be self-reported and the patient may not be sure of future plans for pregnancy in the context of cancer treatment.

Validation rules                                •

Related data element name

**Administration information**

References

## Data element name      Previous pregnancies

### Identifying and definitional attributes

Definition                      Number of previous pregnancies.

Justification                      Collected for demographic analyses.

### Representational attributes

Data type                      Number

Representational class              Total

Field size maximum              2

Format                      N[N]

Data domain                      99                      Not stated/unknown

Guide for use                      Self reported number of pregnancies (not including current pregnancy if relevant). Record number of pregnancies as distinct from number of live births.

Validation rules                      •

Related data element name

### Administration information

References





**Data element name                      Menopausal status**

**Identifying and definitional attributes**

Definition    The menopausal status of a woman, self reported.

Justification    Menopausal status can influence breast cancer treatment options.

**Representational attributes**

Data type    Number

Representational class                              Code

Field size maximum                                1

Format    N

| Data domain | Code | Description   |
|-------------|------|---|
|             | 1    | Premenopausal – has not yet experienced menopause   |
|             | 2    | Postmenopausal – has experienced menopause and 12 months of spontaneous amenorrhea        |
|             | 3    | Postmenopausal as determined by biochemical testing                                       |
|             | 4    | Perimenopausal from the onset of amenorrhea and extending across the subsequent 12 months |
|             | 9    | Not stated/not adequately described   |

Guide for use    Responses would normally be based on self-identification of menopausal status (rather than LH/FSH concentrations which generally would be unknown). Can be collected at both initial presentation and also follow up.

Validation rules    •

Related data element name                              Age at menopause

**Administration information**

References    NBOCC – Breast cancer specific data items for clinical cancer registration, p 13





## Data element name      Oral contraceptive pill use

### Identifying and definitional attributes

|               |  |
|---------------|--|
| Definition    | Description of whether the female patient is currently using an oral contraceptive pill (OCP). |
| Justification | Required to determine patient therapy.   |

### Representational attributes

| Data type              | Number  |      |             |   |     |   |    |   |                                   |
|------------------------|---|------|-------------|---|-----|---|----|---|-----------------------------------|
| Representational class | Code  |      |             |   |     |   |    |   |                                   |
| Field size maximum     | 1   |      |             |   |     |   |    |   |                                   |
| Format                 | N   |      |             |   |     |   |    |   |                                   |
| Data domain            | <table><thead><tr><th>Code</th><th>Description</th></tr></thead><tbody><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>9</td><td>Not stated/inadequately described</td></tr></tbody></table> | Code | Description | 1 | Yes | 2 | No | 9 | Not stated/inadequately described |
| Code                   | Description   |      |             |   |     |   |    |   |                                   |
| 1                      | Yes   |      |             |   |     |   |    |   |                                   |
| 2                      | No  |      |             |   |     |   |    |   |                                   |
| 9                      | Not stated/inadequately described   |      |             |   |     |   |    |   |                                   |

Guide for use      Self reported use of OCP.

Validation rules      •

Related data element name

### Administration information

References

**Data element name            Hormone replacement therapy**

**Identifying and definitional attributes**

|               |   |
|---------------|---|
| Definition    | Description of whether the patient is using Hormone Replacement Therapy (HRT) medication. |
| Justification | Required to determine patient therapy.  |

**Representational attributes**

| Data type              | Number  |      |             |   |     |   |    |   |                                   |
|------------------------|---|------|-------------|---|-----|---|----|---|-----------------------------------|
| Representational class | Code  |      |             |   |     |   |    |   |                                   |
| Field size maximum     | 1   |      |             |   |     |   |    |   |                                   |
| Format                 | N   |      |             |   |     |   |    |   |                                   |
| Data domain            | <table><thead><tr><th>Code</th><th>Description</th></tr></thead><tbody><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>9</td><td>Not stated/inadequately described</td></tr></tbody></table> | Code | Description | 1 | Yes | 2 | No | 9 | Not stated/inadequately described |
| Code                   | Description   |      |             |   |     |   |    |   |                                   |
| 1                      | Yes   |      |             |   |     |   |    |   |                                   |
| 2                      | No  |      |             |   |     |   |    |   |                                   |
| 9                      | Not stated/inadequately described   |      |             |   |     |   |    |   |                                   |

Guide for use                      Self reported use of HRT.

Validation rules                      •

Related data element name

**Administration information**

References

## Data element name      Previous breast disease

### Identifying and definitional attributes

|               |   |
|---------------|---|
| Definition    | Description of any previous disease of the breast including in situ or invasive cancer. |
| Justification | Collected to determine duration and progress of disease.                                |

### Representational attributes

|                        |        |
|------------------------|--------|
| Data type              | Number |
| Representational class | Code   |
| Field size maximum     | 1      |
| Format                 | N      |

|             |             |   |
|-------------|-------------|---|
| Data domain | <b>Code</b> | <b>Description</b>                            |
|             | 0           | No previous breast disease (including cancer) |
|             | 1           | Fibrocystic/other benign                      |
|             | 2           | ADH   |
|             | 3           | ALH   |
|             | 4           | LCIS  |
|             | 5           | DCIS  |
|             | 6           | Invasive cancer                               |
|             | 8           | Other   |
|             | 9           | Not stated/not adequately described           |

Guide for use      This information should be obtained from the patient's pathology report or the patient's medical record.

Validation rules      

- Can be multiple events

Related data element name

### Administration information

References

**Data element name                      Number of first degree relatives with breast cancer**

**Identifying and definitional attributes**

|               |   |
|---------------|---|
| Definition    | Number of first degree relatives (mother, father, sibling or child) diagnosed with breast cancer. |
| Justification | Family history of cancer may indicate genetic factors to be investigated.                         |

**Representational attributes**

|                        |   |
|------------------------|---|
| Data type              | Number  |
| Representational class | Total   |
| Field size maximum     | 2   |
| Format                 | N[N]  |
| Data domain            | 0 – no first degree relatives with breast cancer<br>1 to 10 count of first degree relatives with breast cancer<br>88 – Unknown<br>99 – Not stated |

Guide for use                      Record self reported number of first degree relatives (mother, father, sibling or child) diagnosed with breast cancer.

Validation rules                      •

Related data element name

**Administration information**

References

**Data element name                      Number of first degree relatives with ovarian cancer**

**Identifying and definitional attributes**

Definition                                      Number of first degree relatives (mother, sister or daughter) diagnosed with ovarian cancer.

Justification                                      Family history of cancer may indicate genetic factors to be investigated.

**Representational attributes**

Data type    Number

Representational class                              Total

Field size maximum                                      2

Format    N[N]

Data domain

0 – no first degree relatives with breast cancer  
1 to 10 count of first degree relatives with breast cancer  
88 – Unknown  
99 – Not stated

Guide for use    Record self reported number of first degree relatives (mother, sister or daughter) diagnosed with ovarian cancer.

Validation rules    •

Related data element name

**Administration information**

References

**Data element name                      Number of first degree relatives with other cancer**

**Identifying and definitional attributes**

|               |  |
|---------------|--|
| Definition    | Number of first degree relatives (mother, father, sibling or child) diagnosed with cancers other than breast and ovarian cancer. |
| Justification | Family history of cancer may indicate genetic factors to be investigated.  |

**Representational attributes**

|                           |  |
|---------------------------|--|
| Data type                 | Number   |
| Representational class    | Total  |
| Field size maximum        | 2  |
| Format                    | N[N]   |
| Data domain               | 0 – no first degree relatives with breast cancer<br>1 to 10 count of first degree relatives with breast cancer<br>88 – Unknown<br>99 – Not stated          |
| Guide for use             | Record self reported number of first degree relatives (mother, father, sibling or child) diagnosed with cancers (not including breast and ovarian cancer). |
| Validation rules          | <ul style="list-style-type: none"><li>•</li></ul>  |
| Related data element name |  |

**Administration information**

References

**Data element name**                      **First degree relatives with other cancer**

**Identifying and definitional attributes**

|               |   |
|---------------|---|
| Definition    | Description of cancers affecting first degree relatives (mother, father, sibling or child) diagnosed with cancers other than breast and ovarian cancer. |
| Justification | Family history of cancer may indicate genetic factors to be investigated.   |

**Representational attributes**

|                        |   |
|------------------------|---|
| Data type              | String  |
| Representational class | Code  |
| Field size maximum     | 6   |
| Format                 | ANN{.N[N]}  |
| Data domain            | Code: ICD-10-AM International Statistical Classification of Diseases and Related Health Problems, Australian Modification |

Guide for use                                      Record each diagnosis of cancer in accordance with the ICD-10-AM Australian Coding Standards.

Validation rules                                      •

Related data element name

**Administration information**

References    International Statistical Classification of Diseases and Related Health Problems, Australian Modification, Tenth Revision

**Data element name                      Genetic testing – breast cancer**

**Identifying and definitional attributes**

Definition                                      Description of genetic testing performed on the person.

Justification                                      The risk of developing breast, ovarian and or other cancers is greatly increased in patients (men and women) with a genetic BRCA1 or BRCA2 mutation. Inherited variants in the TP53 tumour suppressor gene have been implicated in some families with Li-Fraumeni syndrome which is characterised by increased risk of breast cancer and a range of other cancers. Ataxia Telangiectasia (AT) is an autosomal recessive condition associated with mutations in the ATM gene. It is a syndrome characterised by a small increase in breast cancer risk.

**Representational attributes**

Data type    Number

Representational class                              Code

Field size maximum                                      1

Format    N

| Data domain | Code | Description                           |
|-------------|------|---------------------------------------|
|             | 1    | BRCA 1 mutation detected              |
|             | 2    | BRCA 2 mutation detected              |
|             | 3    | TP53 mutation detected                |
|             | 4    | ATM mutation detected                 |
|             | 5    | Other genetic mutation detected       |
|             | 6    | No genetic mutation detected          |
|             | 7    | No genetic testing has been performed |
|             | 9    | Not stated/unknown                    |

Guide for use                                      This information should be obtained from the patient's pathology report or the patient's medical record.

Validation rules                                      •

Related data element name

**Administration information**

References    NOCC - Breast cancer risk factors a review of the evidence July 2009

## Data element name                      Referral source – breast cancer

### Identifying and definitional attributes

|               |  |
|---------------|--|
| Definition    | The person or agency responsible for the referral of a patient to a service provider agency. |
| Justification | Collected to assist in the analyses of inter-service client flow and for service planning.   |

### Representational attributes

|                        |        |
|------------------------|--------|
| Data type              | Number |
| Representational class | Code   |
| Field size maximum     | 1      |
| Format                 | N      |

|             |             |                                    |
|-------------|-------------|------------------------------------|
| Data domain | <b>Code</b> | <b>Description</b>                 |
|             | 1           | General Practitioner               |
|             | 2           | BreastScreen                       |
|             | 3           | Surgeon                            |
|             | 4           | Hospital Ward/Accident & Emergency |
|             | 5           | Family Cancer Centre               |
|             | 6           | Self                               |
|             | 7           | Second opinion                     |
|             | 8           | Other                              |
|             | 9           | Not stated/inadequately described  |

|               |  |
|---------------|--|
| Guide for use | The referral source should be obtained from the patient's medical record at initial presentation to identify the source of detection of cancer. The referral source should not change with subsequent assessments. |
|---------------|--|

|                  |   |
|------------------|---|
| Validation rules | <ul style="list-style-type: none"><li>•</li></ul> |
|------------------|---|

Related data element name

### Administration information

References

**Data element name                      Method of detection of breast cancer**

**Identifying and definitional attributes**

|               |   |
|---------------|---|
| Definition    | Description of the principal method by which the cancer was detected at initial presentation.       |
| Justification | Collected to determine method by which cancer was detected and effectiveness of screening programs. |

**Representational attributes**

|                        |        |
|------------------------|--------|
| Data type              | Number |
| Representational class | Code   |
| Field size maximum     | 1      |
| Format                 | N      |

|             |             |  |
|-------------|-------------|--|
| Data domain | <b>Code</b> | <b>Description</b>                           |
|             | 1           | Screening – Mammography                      |
|             | 2           | Screening – Magnetic resonance imaging (MRI) |
|             | 3           | Screening – Other                            |
|             | 4           | Symptomatic                                  |
|             | 8           | Other  |
|             | 9           | Not stated/inadequately described            |

Guide for use                      It is assumed that 'Screening – Mammography', 'Screening – MRI' and 'Screening – Other' are used for asymptomatic patients. Symptomatic presentation may include breast lump, nipple discharge, change in breast skin, change in nipple shape or new pain. Screening – Other may include screening through ultrasound or other clinical examination. 'Other' may include incidental detection through modalities such as ultrasound.

Validation rules                      • This data item is for both invasive cancer and in situ lesions

Related data element name

**Administration information**

References                      NBOCC – Breast Specific Data Item Definitions for Clinical Registrations  
June 2009, p 18

## Data element name                      **Symptomatic presentation – breast cancer**

### Identifying and definitional attributes

Definition                                      Description of symptoms of breast cancer at initial presentation.

Justification                                  Collected to determine conditions in which tumour was initially detected.

### Representational attributes

Data type                                      Number

Representational class                      Code

Field size maximum                        1

Format                                         [N]

| Data domain | Code | Description                       |
|-------------|------|-----------------------------------|
|             | 1    | Breast lump                       |
|             | 2    | Axillary lump                     |
|             | 3    | Nipple discharge                  |
|             | 4    | Nipple rash                       |
|             | 5    | Nipple retraction                 |
|             | 6    | Breast skin changes               |
|             | 7    | Breast pain                       |
|             | 8    | Other                             |
|             | 9    | Not stated/inadequately described |

Guide for use                                  This information should be obtained from the patient's pathology report, the patient's medical record, or the patient's medical practitioner/nursing staff.

Validation rules                              

- If Initial presentation – breast cancer is 4, may not be null

Related data element name

### Administration information

References

**Data element name**                      **Mammography result**

**Identifying and definitional attributes**

Definition                                      Results of mammography imaging.

Justification                                  Collected to determine appearance of cancer on mammographic imaging.

**Representational attributes**

Data type                                      Number

Representational class                      Code

Field size maximum                         1

Format                                         [N]

| Data domain | Code | Description                       |
|-------------|------|-----------------------------------|
|             | 1    | No significant abnormality        |
|             | 2    | Benign                            |
|             | 3    | Equivocal/atypical                |
|             | 4    | Suspicious                        |
|             | 5    | Malignant                         |
|             | 9    | Not stated/inadequately described |

Guide for use                                  This information should be obtained from the patient's radiology report.

Validation rules                                •

Related data element name                  Mammography date

**Administration information**

References

**Data element name            Mammography date**

**Identifying and definitional attributes**

Definition                            Date of mammography.

Justification                        Collected to determine history of breast cancer.

**Representational attributes**

Data type                            Date/Time

Representational class            Date

Field size maximum                8

Format                                [DDMMYYYY]

Data domain  
  
Valid date

Guide for use                        This information should be obtained from the patient's radiology report, the patient's medical record, or the patient's medical practitioner/nursing staff.

Validation rules                      •

Related data element name        Mammography result

**Administration information**

References

**Data element name                      Ultrasound radial position of tumour**

**Identifying and definitional attributes**

|               |  |
|---------------|--|
| Definition    | The location of an ultrasound imaging abnormality as described as a clock-face position. |
| Justification | Collected to determine location of breast cancer on ultrasound imaging.                  |

**Representational attributes**

|                        |                            |
|------------------------|----------------------------|
| Data type              | String                     |
| Representational class | Code                       |
| Field size maximum     | 3                          |
| Format                 | {[N]NA}                    |
| Data domain            | 1 to 12 followed by L or R |

|                  |  |
|------------------|--|
| Guide for use    | Location and laterality of the imaging abnormality is described as the position on a clock-face from 1 o'clock to 12 o'clock followed by L denoting left side of a paired organ and R denoting right side of paired organ. This information should be obtained from the patient's pathology report, the patient's medical record, or the patient's medical practitioner/nursing staff. |
| Validation rules | <ul style="list-style-type: none"><li>•</li></ul>  |

Related data element name

**Administration information**

|            |  |
|------------|--|
| References | NBOCC – The pathology reporting of breast cancer: A guide for pathologists, surgeons, radiologists and oncologists |
|------------|--|

## Data element name                      Localisation method

### Identifying and definitional attributes

|               |   |
|---------------|---|
| Definition    | Description of localisation method used during surgical biopsy or excision. |
| Justification | Collected to determine localisation method of surgical biopsy or excision.  |

### Representational attributes

| Data type              | Number  |      |             |   |          |   |        |   |       |   |           |   |            |
|------------------------|---|------|-------------|---|----------|---|--------|---|-------|---|-----------|---|------------|
| Representational class | Code  |      |             |   |          |   |        |   |       |   |           |   |            |
| Field size maximum     | 1   |      |             |   |          |   |        |   |       |   |           |   |            |
| Format                 | [N]   |      |             |   |          |   |        |   |       |   |           |   |            |
| Data domain            | <table><thead><tr><th>Code</th><th>Description</th></tr></thead><tbody><tr><td>1</td><td>Hookwire</td></tr><tr><td>2</td><td>Carbon</td></tr><tr><td>3</td><td>Other</td></tr><tr><td>8</td><td>Not known</td></tr><tr><td>9</td><td>Not stated</td></tr></tbody></table> | Code | Description | 1 | Hookwire | 2 | Carbon | 3 | Other | 8 | Not known | 9 | Not stated |
| Code                   | Description   |      |             |   |          |   |        |   |       |   |           |   |            |
| 1                      | Hookwire  |      |             |   |          |   |        |   |       |   |           |   |            |
| 2                      | Carbon  |      |             |   |          |   |        |   |       |   |           |   |            |
| 3                      | Other   |      |             |   |          |   |        |   |       |   |           |   |            |
| 8                      | Not known   |      |             |   |          |   |        |   |       |   |           |   |            |
| 9                      | Not stated  |      |             |   |          |   |        |   |       |   |           |   |            |

Guide for use                      If surgery is open biopsy or wide local excision, the localisation method should be recorded where indicated on patient's pathology report or medical record.

Validation rules                      •

Related data element name                      Surgical procedure date

### Administration information

References

**Data element name**                      **Total extent of lesion (DCIS and invasive)**

**Identifying and definitional attributes**

|               |  |
|---------------|--|
| Definition    | The maximum diameter in millimetres of the furthest points of extension of the whole lesion including any DCIS which extends beyond the invasive component.  |
| Justification | Presence of DCIS in adjacent breast tissue can have prognostic and treatment implications. In cases where there is extensive DCIS beyond the invasive tumour component of the lesion, treatment options may be affected. |

**Representational attributes**

|                        |   |
|------------------------|---|
| Data type              | Number                                  |
| Representational class | Total                                   |
| Field size maximum     | 3                                       |
| Format                 | N[NN]                                   |
| Data domain            | 999 - Not stated/inadequately described |

|               |   |
|---------------|---|
| Guide for use | <p>Record the total extent of lesion (DCIS + invasive carcinoma) in millimetres.</p> <p>For a lesion consisting only of DCIS, record the total extent of lesion in millimetres.</p> <p>For a single focus of invasive carcinoma associated with DCIS, the “whole-lesion size” includes any associated DCIS seen beyond the margin of the invasive carcinoma.</p> <p>For a lesion predominantly composed of DCIS, with multiple foci of invasive carcinoma, the whole lesion is measured.</p> <p>For discrete foci of invasive carcinoma arising in a background of DCIS, the size of each invasive carcinoma is measured separately (the largest of these is regarded to be the invasive tumour size).</p> <p>The “whole lesion size” includes the invasive foci and all associated DCIS.</p> |
|---------------|---|

|                  |  |
|------------------|--|
| Validation rules | <ul style="list-style-type: none"><li>• This data item is for combined invasive/in situ lesions.</li></ul> |
|------------------|--|

Related data element name

**Administration information**

References

**Data element name**                      **Distance from margin (invasive component) – breast cancer**

**Identifying and definitional attributes**

Definition                                      The distance of invasive carcinoma from the surgical resection margin, in millimetres.

Justification                                      Collected to identify distance of invasive cancer from surgical margins for patient management as margin involvement is associated with risk of recurrence.

**Representational attributes**

Data type                                        Number

Representational class                        Total

Field size maximum                            3

Format    NNN

Data domain  
  
001 to 997  
999 – Unknown

Guide for use                                      The distance from the nearest resection margins should be initially assessed on macroscopic examination of the specimen. The measurements should be confirmed microscopically.

Validation rules                                      

- For invasive cancer only

Related data element name                      Date of diagnosis, Margin qualifier

**Administration information**

References                                        NBOCC – Breast Specific Data Item Definitions for Clinical Registrations  
June 2009, p 37

**Data element name**                      **Distance from margin (in situ component) – breast cancer**

**Identifying and definitional attributes**

Definition                                      The distance of in situ carcinoma from the surgical resection margin, in millimetres.

Justification                                      Collected to identify distance of in situ cancer from surgical margins for patient management as margin involvement is associated with risk of recurrence.

**Representational attributes**

Data type                                        Number

Representational class                      Total

Field size maximum                        3

Format                                         NNN

Data domain                                      001 to 997  
999 – Unknown

Guide for use                                      The status of resection margins for in situ carcinoma in association with invasive carcinoma can only be assessed microscopically.

Validation rules                                      

- For carcinoma in situ only

Related data element name                      Date of diagnosis, Margin qualifier

**Administration information**

References                                        NBOCC – Breast Specific Data Item Definitions for Clinical Registrations  
June 2009, p 39

## Data element name                      Margin qualifier

### Identifying and definitional attributes

|               |   |
|---------------|---|
| Definition    | The surgical resection margins (eg posterior, anterior, lateral or medial) described as involved by invasive or in situ carcinoma or where the distance to invasive or in situ carcinoma has been measured. |
| Justification | Collected to identify which surgical margins are involved by in situ or invasive cancer for patient management as margin involvement is associated with risk of recurrence.                                 |

### Representational attributes

|                        |             |
|------------------------|-------------|
| Data type              | Number      |
| Representational class | Code        |
| Field size maximum     | 1           |
| Format                 | N           |
| Data domain            | <b>Code</b> |

|  | <b>Code</b> | <b>Description</b>                                  |
|--|-------------|---|
|  | 1           | All margins are clear                               |
|  | 2           | Deep/posterior                                      |
|  | 3           | Cutaneous/anterior                                  |
|  | 4           | Lateral   |
|  | 5           | Medial  |
|  | 6           | Superior  |
|  | 7           | Inferior  |
|  | 8           | There is margin involvement but it is not qualified |
|  | 9           | Not stated/unknown                                  |

|               |  |
|---------------|--|
| Guide for use | This information should be obtained from the patient's pathology report. |
|---------------|--|

|                  |   |
|------------------|---|
| Validation rules | • |
|------------------|---|

|                           |                   |
|---------------------------|-------------------|
| Related data element name | Date of diagnosis |
|---------------------------|-------------------|

### Administration information

|            |   |
|------------|---|
| References | NBOCC – Breast Specific Data Item Definitions for Clinical Registrations<br>June 2009, p 40 |
|------------|---|

**Data element name                      Ductal carcinoma in situ dominant architecture**

**Identifying and definitional attributes**

Definition                                      Description of ductal carcinoma in situ architecture.

Justification                                  Collected to identify architecture of ductal carcinoma in situ present in the tumour.

**Representational attributes**

Data type                                      Number

Representational class                      Code

Field size maximum                        1

Format                                        N

| Data domain | Code | Description        |
|-------------|------|--------------------|
|             | 1    | Solid              |
|             | 2    | Cribriform         |
|             | 3    | Micropapillary     |
|             | 4    | Apocrine           |
|             | 5    | Papillary          |
|             | 6    | Other              |
|             | 9    | Not stated/unknown |

Guide for use                                  The dominant pattern should be recorded as many tumours show more than one type. This information should be obtained from the patient's pathology report.

Validation rules                              •

Related data element name                  Date of diagnosis

**Administration information**

References                                    NBOCC – The pathology reporting of breast cancer: A guide for pathologists, surgeons, radiologists and oncologists, p 31

## Data element name      **Ductal carcinoma in situ necrosis**

### Identifying and definitional attributes

Definition      Description of ductal carcinoma in situ necrosis. Necrosis is defined as the presence of ghost cells and karyorrhectic debris in the tumour.

Justification      Collected to identify type of ductal carcinoma in situ necrosis present in the tumour.

### Representational attributes

Data type      Number

Representational class      Code

Field size maximum      1

Format      N

| Data domain | Code | Description   |
|-------------|------|---|
|             | 1    | Present and associated with calcifications (comedo)         |
|             | 2    | Present but not associated with calcifications (non comedo) |
|             | 3    | Present but association with calcification not stated       |
|             | 4    | Absent/minimal  |
|             | 9    | Not stated/unknown  |

Guide for use      Necrosis should be recorded as: not present or minimal, present, and whether comedo or non-comedo type. Comedocarcinoma is defined as the presence of central duct necrosis and grade 3 nuclei. It is frequently associated with coarse casting calcifications. This information should be obtained from the patient's pathology report or medical record.

Validation rules      •

Related data element name      Date of diagnosis

### Administration information

References      NBOCC – The pathology reporting of breast cancer: A guide for pathologists, surgeons, radiologists and oncologists, p 31



## Data element name            Extensive intraductal carcinoma component

### Identifying and definitional attributes

|               |   |
|---------------|---|
| Definition    | Description of whether there is extensive intraductal carcinoma (EIC) within the the invasive tumour as well as beyond the margin of the invasive carcinoma.  |
| Justification | Collected to determine whether there is extensive intraductal carcinoma associated with the invasive tumour. Tumours with EIC have been shown (in some studies) to have a higher rate of local recurrence following breast-conserving surgery and radiotherapy. |

### Representational attributes

| Data type              | Number  |      |             |   |                |   |                |   |                    |
|------------------------|---|------|-------------|---|----------------|---|----------------|---|--------------------|
| Representational class | Code  |      |             |   |                |   |                |   |                    |
| Field size maximum     | 1   |      |             |   |                |   |                |   |                    |
| Format                 | N   |      |             |   |                |   |                |   |                    |
| Data domain            | <table><thead><tr><th>Code</th><th>Description</th></tr></thead><tbody><tr><td>1</td><td>Positive &gt; 25%</td></tr><tr><td>2</td><td>Negative &lt; 25%</td></tr><tr><td>9</td><td>Not stated/unknown</td></tr></tbody></table> | Code | Description | 1 | Positive > 25% | 2 | Negative < 25% | 9 | Not stated/unknown |
| Code                   | Description   |      |             |   |                |   |                |   |                    |
| 1                      | Positive > 25%  |      |             |   |                |   |                |   |                    |
| 2                      | Negative < 25%  |      |             |   |                |   |                |   |                    |
| 9                      | Not stated/unknown  |      |             |   |                |   |                |   |                    |

|                  |  |
|------------------|--|
| Guide for use    | This information should be obtained from the patient's pathology report or medical record.<br><br>Intraductal carcinoma is synonymous with ductal carcinoma in situ. |
| Validation rules | <ul style="list-style-type: none"><li>•</li></ul>  |

|                           |                   |
|---------------------------|-------------------|
| Related data element name | Date of diagnosis |
|---------------------------|-------------------|

### Administration information

|            |  |
|------------|--|
| References | NBOCC – The pathology reporting of breast cancer: A guide for pathologists, surgeons, radiologists and oncologists, p 24 |
|------------|--|

**Data element name                      Attempt to identify sentinel lymph nodes**

**Identifying and definitional attributes**

Definition    Whether or not identification of sentinel lymph nodes was attempted.

Justification    Identification and removal of the sentinel lymph node is undertaken to determine nodal status in patients where there is no clinical evidence of nodal involvement. If the sentinel node biopsy shows no tumour cells, an extensive regional lymph node dissection normally would not be undertaken, reducing the potential for lymphoedema and other surgical complications.

**Representational attributes**

Data type    Number

Representational class                              Code

Field size maximum                                1

Format

| Data domain | Code | Description |
|-------------|------|-------------|
|             | 1    | Yes         |
|             | 2    | No          |
|             | 9    | Not known   |

Guide for use    Record whether an attempt was made to locate sentinel lymph nodes.

Validation rules    

- This data item is for invasive and in situ lesions.

Related data element name

**Administration information**

References    NBOCC – Breast Specific Data Item Definitions for Clinical Registrations  
June 2009, p 33

## Data element name                      Size of metastasis in sentinel lymph nodes

### Identifying and definitional attributes

Definition                                      The size of the metastasis for each sentinel lymph node examined.

Justification                                      The number of lymph nodes with metastasis is important for cancer staging and treatment options. If no tumour cells are found, it is unnecessary to perform an extensive regional lymph node dissection.

### Representational attributes

Data type                                      Number

Representational class                      Code

Field size maximum                      1

Format    N

| Data domain | Code | Description                             |
|-------------|------|---|
|             | 0    | Not involved by tumour                  |
|             | 1    | Isolated tumour cells present (<0.2mm)  |
|             | 2    | Micrometastasis present (0.2 to 2.0 mm) |
|             | 3    | Macrometastasis present (>2mm)          |
|             | 9    | Not stated                              |

Guide for use                                      Indicate the involvement of tumour in each lymph node.  
Sentinel nodes are the first nodes that filter fluid draining away from the area of cancer. The presence of cancer cells in these lymph nodes indicates that the cancer has already spread outside the primary site and may have spread to another part of the body.

Validation rules                                      

- This data item is for invasive cancer only.

Related data element name

### Administration information

References                                      NBOCC – Breast Specific Data Item Definitions for Clinical Registrations  
June 2009, p 35

**Data element name                      Number of sentinel lymph nodes examined**

**Identifying and definitional attributes**

Definition                                      The number of sentinel nodes examined by the pathologist.

Justification                                      Collected to identify the number of sentinel lymph nodes examined. Sentinel lymph nodes are the first nodes that filter fluid draining away from the area of cancer. The number of lymph nodes with metastasis is important for cancer staging. A definitive negative result on assessment of the sentinel node may negate the need for secondary surgery.

**Representational attributes**

Data type                                        Number

Representational class                        Total

Field size maximum                            3

Format    N[NN]

Data domain                                      997- Number of lymph nodes unknown

Guide for use                                    This information should be obtained from the patient's pathology report or medical record.

Validation rules                                      •

Related data element name                    Date of diagnosis

**Administration information**

References                                        AIHW – Number of sentinel lymph nodes examined  
METeOR ID: 370558

**Data element name                      Number of sentinel nodes positive**

**Identifying and definitional attributes**

Definition                                      The total number of sentinel lymph nodes reported as containing tumour after examination by a pathologist.

Justification                                    Collected to identify the number of sentinel lymph nodes with tumour present. Sentinel lymph nodes are the first nodes that filter fluid draining away from the area of cancer. The number of lymph nodes with metastasis is important for cancer staging. A definitive negative result on assessment of the sentinel node may negate the need for secondary surgery.

**Representational attributes**

Data type                                        Number

Representational class                        Total

Field size maximum                            3

Format    N[NN]

Data domain                                     997- Number of lymph nodes unknown

Guide for use                                    This information should be obtained from the patient's pathology report or medical record.

Validation rules                                    •

Related data element name                    Date of diagnosis

**Administration information**

References                                        AIHW – Number of positive sentinel lymph nodes  
METeOR ID: 370549



**Data element name                    Oestrogen receptor percentage of nuclei stained**

**Identifying and definitional attributes**

|               |  |
|---------------|--|
| Definition    | The percentage of tumour cell nuclei staining for oestrogen receptors (ER) by immunohistochemistry.  |
| Justification | Collected to determine oestrogen receptor status. Immunochemical assay of oestrogen receptors (ER) are now routinely performed on invasive breast carcinoma because they provide independent prognostic information to predict response to hormonal therapy. |

**Representational attributes**

|                           |   |
|---------------------------|---|
| Data type                 | Number  |
| Representational class    | Percentage  |
| Field size maximum        | 3   |
| Format                    | N[NN]   |
| Data domain               | Input of nuclei stained (1-100%)  |
| Guide for use             | This information should be obtained from the patient's pathology report.<br>Only nuclear staining indicates a positive result for ER status.<br>0 indicates 0% or <1% staining<br>999 indicates not known or inadequately described |
| Validation rules          | <ul style="list-style-type: none"><li>•</li></ul>   |
| Related data element name |   |

**Administration information**

|            |   |
|------------|---|
| References | NBOCC – Breast Specific Data Item Definitions for Clinical Registrations<br>June 2009, p 28 |
|------------|---|





**Data element name                    Progesterone receptor percentage of nuclei staining**

**Identifying and definitional attributes**

|               |  |
|---------------|--|
| Definition    | The percentage of tumour cell nuclei staining for progesterone receptors (PR) by immunohistochemistry. |
| Justification | Collected to determine progesterone receptor status for prognostic and therapeutic purposes.           |

**Representational attributes**

|                        |   |
|------------------------|---|
| Data type              | Number  |
| Representational class | Percentage  |
| Field size maximum     | 3   |
| Format                 | N[NN]   |
| Data domain            | Input of nuclei stained (1-100%)  |
| Guide for use          | This information should be obtained from the patient's pathology report. Only nuclear staining indicates a positive result for ER status. |
| Validation rules       | <ul style="list-style-type: none"><li>• For cases with an invasive component</li></ul>  |

Related data element name

**Administration information**

|            |   |
|------------|---|
| References | NBOCC – Breast Specific Data Item Definitions for Clinical Registrations<br>June 2009, p 31 |
|------------|---|



**Data element name Progesterone receptor status**

**Identifying and definitional attributes**

|               |  |
|---------------|--|
| Definition    | Whether the tumour is progesterone receptor positive (has progesterone receptors on the tumour cells). |
| Justification | Collected to determine progesterone receptor status for prognostic and therapeutic purposes.           |

**Representational attributes**

|                        |             |
|------------------------|-------------|
| Data type              | Number      |
| Representational class | Code        |
| Field size maximum     | 1           |
| Format                 | N           |
| Data domain            | <b>Code</b> |

|   | <b>Description</b>                      |
|---|---|
| 1 | Positive > = 1% nuclei staining         |
| 2 | Negative < 1% nuclei staining           |
| 3 | Equivocal (result of test inconclusive) |
| 7 | Unknown (test results not available)    |
| 8 | Not applicable (test not done)          |
| 9 | Not stated                              |

Guide for use This information should be obtained from the patient's pathology report. Use code 7 if test results are unknown. Use code 8 to show that lack of results is due to test not being performed.

Validation rules

- For cases with an invasive component

Related data element name

**Administration information**

References AIHW – Progesterone receptor assay result  
METeOR ID: 291341  
NBOCC – Breast Specific Data Item Definitions for Clinical Registrations  
June 2009, p 30

## Data element name            **HER2 results – immunohistochemistry**

### Identifying and definitional attributes

|               |  |
|---------------|--|
| Definition    | The presence or absence of Human Epidermal Growth Factor receptor 2 protein overexpression (HER2) on tumour cells. |
| Justification | Collected to determine HER2 receptor status for prognostic and therapeutic purposes.                               |

### Representational attributes

|                        |        |
|------------------------|--------|
| Data type              | Number |
| Representational class | Code   |
| Field size maximum     | 1      |
| Format                 | N      |

|             |             |                                      |
|-------------|-------------|--------------------------------------|
| Data domain | <b>Code</b> | <b>Description</b>                   |
|             | 0           | No staining                          |
|             | 1           | 1+                                   |
|             | 2           | 2+                                   |
|             | 3           | 3+                                   |
|             | 7           | Unknown (test results not available) |
|             | 8           | Not applicable (test not done)       |
|             | 9           | Not stated                           |

|                  |  |
|------------------|--|
| Guide for use    | <p>This information should be obtained from the patient's pathology report. Use code 7 if test results are unknown. Use code 8 to show that lack of results is due to test not being performed.</p> <p>Code 0    No staining (HER2 status is negative)</p> <p>Code 1    1+ or &lt;10% of cancer cells show staining (HER2 status is negative)</p> <p>Code 2    2+ or +++ &lt;10% of cancer cells show strong complete membrane staining (rare) or 10–30% of cancer cells show weak to moderate complete membrane staining or strong cytoplasmic staining is present, making an assessment of membrane staining difficult (HER2 status is equivocal)</p> <p>Code 3    3+ or +++ where <math>\geq 30\%</math> of cancer cells show strong, complete membrane staining without cytoplasmic staining and without staining of normal breast tissue (HER2 status is positive).</p> |
| Validation rules | <ul style="list-style-type: none"> <li>For cases with an invasive component</li> </ul>   |

Related data element name

### Administration information

|            |  |
|------------|--|
| References | NBOCC – Breast Specific Data Item Definitions for Clinical Registrations June 2009, p 22 |
|------------|--|

**Data element name HER2 results – in situ hybridization**

**Identifying and definitional attributes**

|               |   |
|---------------|---|
| Definition    | The presence or absence of amplification of Human Epidermal Growth Factor receptor 2 (HER2) oncogene in tumour cells. |
| Justification | Collected to determine HER2 receptor status for prognostic and therapeutic purposes.                                  |

**Representational attributes**

|                        |        |
|------------------------|--------|
| Data type              | Number |
| Representational class | Code   |
| Field size maximum     | 2      |
| Format                 | N[N]   |

| Data domain | Code | Description                            |
|-------------|------|--|
|             | 1    | Non amplified, diploid                 |
|             | 2    | Non amplified, polysomy                |
|             | 3    | Non amplified, not otherwise specified |
|             | 4    | Equivocal                              |
|             | 5    | Low amplification                      |
|             | 6    | High amplification                     |
|             | 7    | Amplified, not otherwise specified     |
|             | 77   | Unknown (test results not available)   |
|             | 88   | Not applicable (test not done)         |
|             | 99   | Not stated                             |

Guide for use This information should be obtained from the patient's pathology report. Use code 77 if test results are unknown. Use code 88 to show that lack of results is due to test not being performed.

- Code 1 Non amplified, diploid (1 to 2.5 HER2 gene copies/nucleus)
- Code 2 Non amplified, polysomy (>2.5 to ≤4 HER2 gene copies/nucleus)
- Code 3 Non amplified (by dual probe <1.8 HER2/CHR17 ratio of gene copies/nucleus)
- Code 4 Equivocal (by single probe >4 and ≤ 6 HER2 gene copies/nucleus or by dual probe 1.8 to 2.2 ratio of HER2/CHR17 gene copies/nucleus)
- Code 5 Low amplification (>6 to ≤10 HER2 gene copies/nucleus)
- Code 6 High amplification (>10 HER2 gene copies/nucleus)
- Code 7 Amplified (by single probe >4 HER2 gene copies/nucleus or by dual probe >2.2 ratio of HER2/CHR17 gene copies/nucleus)

Validation rules

- For cases with an invasive component

Related data element name

**Administration information**

References Wolff, A. et al American Society of Clinical Oncology/College of American Pathologists Guideline Recommendations for Human Epidermal Growth Factor Receptor 2 Testing in Breast Cancer, Arch Pathol Lab Med, 2007; 131:18-43

## Data element name      **HER2 status**

### Identifying and definitional attributes

|               |  |
|---------------|--|
| Definition    | The presence or absence of Human Epidermal Growth Factor receptor 2 protein (HER2) on tumour cells or detection of overexpression of the HER2 oncogene in tumour cells.  |
| Justification | Collected to determine HER2 receptor status for prognostic and therapeutic purposes. The HER2 (or c-erbB2) proto-oncogene encodes for a transmembrane receptor-like protein. HER2 gene amplification is observed in some breast cancers with an increase of HER2 protein expression on the surface of the tumour cells, a HER2 receptor. Detection of HER2 overexpression or amplification can be detected using immunohistochemistry (IHC) or In Situ Hybridisation (ISH) techniques. |

### Representational attributes

|                        |        |
|------------------------|--------|
| Data type              | Number |
| Representational class | Code   |
| Field size maximum     | 1      |
| Format                 | N      |

|             |             |   |
|-------------|-------------|---|
| Data domain | <b>Code</b> | <b>Description</b>                      |
|             | 1           | Positive                                |
|             | 2           | Negative                                |
|             | 3           | Equivocal (result of test inconclusive) |
|             | 7           | Unknown (test results not available)    |
|             | 8           | Not applicable (test not done)          |
|             | 9           | Not stated                              |

|               |  |
|---------------|--|
| Guide for use | This information should be obtained from the patient's pathology report. Use code 7 if test results are unknown. Use code 8 to show that lack of results is due to test not being performed. |
|---------------|--|

|                  |  |
|------------------|--|
| Validation rules | <ul style="list-style-type: none"><li>For cases with an invasive component</li></ul> |
|------------------|--|

Related data element name

### Administration information

|            |  |
|------------|--|
| References | AIHW – Epidermal growth factor receptor-2 test result<br>METeOR ID: 370572<br>NBOCC – Breast Specific Data Item Definitions for Clinical Registrations<br>June 2009, p 22<br>Roche – <a href="http://www.roche-australia.com/downloads/herceptin-pi.cfm?action=get">http://www.roche-australia.com/downloads/herceptin-pi.cfm?action=get</a> (viewed 6 Oct 2009) |
|------------|--|

**Data element name            HER2 test type**

**Identifying and definitional attributes**

|               |  |
|---------------|--|
| Definition    | The type of test used to determine the results of human epidermal growth factor receptor-2 (HER2) at the time of diagnosis of the primary tumour.  |
| Justification | Collected to determine type of HER2 testing undertaken. Detection of HER2 overexpression or amplification can be detected using an immunohistochemistry (IHC) or In Situ Hybridisation (ISH) techniques. |

**Representational attributes**

|                        |             |
|------------------------|-------------|
| Data type              | Number      |
| Representational class | Code        |
| Field size maximum     | 1           |
| Format                 | N           |
| Data domain            | <b>Code</b> |

|   | <b>Description</b>                        |
|---|---|
| 1 | Fluorescence in-situ hybridisation (FISH) |
| 2 | Brightfield in-situ hybridisation         |
| 3 | Immunochemistry (IHC)                     |
| 8 | Other                                     |
| 9 | Test type not stated or unknown           |

|                  |  |
|------------------|--|
| Guide for use    | This information should be obtained from the patient's pathology report. Code 2 - Brightfield in-situ hybridisation Includes Chromogenic in-situ hybridisation (CISH) and Silver in-situ hybridisation (SISH). |
| Validation rules | <ul style="list-style-type: none"> <li>For cases with an invasive component</li> </ul>   |

Related data element name

**Administration information**

|            |   |
|------------|---|
| References | <p>AIHW – Human epidermal growth factor receptor-2 test type<br/>METeOR ID: 370607<br/>NBOCC – Breast Specific Data Item Definitions for Clinical Registrations<br/>June 2009, p 24</p> |
|------------|---|





## Data element name      Endocrine therapy treatment – breast cancer

### Identifying and definitional attributes

|               |  |
|---------------|--|
| Definition    | Description of primary reason for patient’s endocrine (hormone) therapy for breast cancer. |
| Justification | Collected to identify patient treatments for breast cancer.                                |

### Representational attributes

|                        |        |
|------------------------|--------|
| Data type              | Number |
| Representational class | Code   |
| Field size maximum     | 1      |
| Format                 | N      |

|             |             |  |
|-------------|-------------|--|
| Data domain | <b>Code</b> | <b>Description</b>                               |
|             | 0           | No endocrine (hormone) therapy                   |
|             | 1           | Neo-adjuvant (pre-operative) for primary disease |
|             | 2           | Adjuvant for primary disease                     |
|             | 3           | For metastatic disease                           |
|             | 9           | Not stated                                       |

Guide for use      This information should be obtained from the patient’s medical record.

Validation rules      •

Related data element name

### Administration information

References





**Data element name                      Ovarian suppression**

**Identifying and definitional attributes**

Definition                                      Description of suppression of ovarian function for therapeutic purposes.

Justification                                    Collected to determine ovarian suppression treatments used in patient therapy. Ovarian suppression is a treatment option of hormone-receptor positive breast cancer in premenopausal women.

**Representational attributes**

Data type                                      Number

Representational class                      Code

Field size maximum                        1

Format                                         [N]

| Data domain | Code | Description                                   |
|-------------|------|---|
|             | 1    | Bilateral oophorectomy                        |
|             | 2    | Gonadotropin-releasing hormone (GnRH) agonist |
|             | 3    | Radiotherapy                                  |
|             | 4    | Not required                                  |
|             | 8    | Not known                                     |
|             | 9    | Not stated                                    |

Guide for use                                    This information should be obtained from the patient's medical record. Ovarian suppression (or ablation) can be undertaken by surgery, drug therapy or radiotherapy. Oophorectomy is the removal of an ovary. Salpingo-oophorectomy is the surgical removal of an ovary with fallopian tube. Bilateral oophorectomy is one method of ovarian ablation in the treatment of hormone-receptor positive breast cancer. Surgical removal of only one ovary (unilateral oophorectomy or salpingo-oophorectomy) for other medical reasons does not suppress ovarian hormone production and should not be recorded as oophorectomy in this context. Ovarian suppression is not required where woman is post-menopausal. GnRH agonists have a hypogonadal effect and are useful in treatment of cancers that are hormonally sensitive eg prostate cancer and breast cancer. GnRH can also be known as luteinizing hormone releasing hormone (LHRH). Some are: leuprolide (Lupron, Eligard), buserelin (Suprefact, Suprecor), nafarelin (Synarel), histrelin (Supprelin), goserelin (Zoladex), deslorelin (Suprelorin, Ovuplant).

Validation rules                                      •

Related data element name                      Date of oophorectomy or Systemic therapy protocol

**Administration information**

References

## Data element name      Date of oophorectomy

### Identifying and definitional attributes

Definition      Date when oophorectomy was performed.

Justification      Bilateral oophorectomy is an option in the treatment of hormone-receptor positive breast cancer.

### Representational attributes

Data type      Date/Time

Representational class      Date

Field size maximum      8

Format      [DDMMYYYY]

Data domain  
Valid date

Guide for use      If Ovarian suppression is 1, record the date of the oophorectomy. Surgical removal of only one ovary (unilateral oophorectomy or salpingo-oophorectomy) for other medical reasons does not suppress ovarian hormone production and should not be recorded as oophorectomy in this context. This information should be obtained from the patient's medical record.

Validation rules      •

Related data element name      Ovarian suppression

### Administration information

References





**Data element name                      Endocrine therapy cessation specified**

**Identifying and definitional attributes**

Definition                                      Description of cause of cessation of endocrine (hormone) therapy.

Justification                                    To determine causes of incomplete endocrine (hormone) therapy.

**Representational attributes**

Data type                                      Number

Representational class                      Code

Field size maximum                         1

Format                                         [N]

| Data domain | Code | Description                                      |
|-------------|------|--|
|             | 0    | Endocrine (hormone) therapy completed as planned |
|             | 1    | Progressive disease                              |
|             | 2    | Toxicity of treatment                            |
|             | 3    | Hot flushes                                      |
|             | 4    | Planned change of treatment                      |
|             | 5    | Patient request                                  |
|             | 6    | Significant adverse event                        |
|             | 8    | Other  |
|             | 9    | Not stated                                       |

Guide for use                                    This information should be obtained from the patient's medical record.

Validation rules                                •

Related data element name                    Systemic drug therapy start date, Systemic drug therapy end date

**Administration information**

References



**Data element name                      Radiotherapy site –primary breast cancer**

**Identifying and definitional attributes**

Definition                                      Site of radiotherapy for primary breast cancer treatment

Justification                                      Collected to provide the basis for a standard approach to recording and monitoring patterns of treatment for cancer patients.

**Representational attributes**

Data type    Number

Representational class                          Code

Field size maximum                              1

Format    N

| Data domain | Code | Description                  |
|-------------|------|------------------------------|
|             | 1    | Whole breast                 |
|             | 2    | Partial breast               |
|             | 3    | Axilla                       |
|             | 4    | Supraclavicular fossa        |
|             | 5    | Internal mammary lymph nodes |
|             | 9    | Not stated                   |

Guide for use                                      This information should be obtained from the patient's medical record.

Validation rules                                      •

Related data element name                      Radiotherapy type, Radiotherapy dose

**Administration information**

References

**Data element name**                      **Radiotherapy site –metastatic breast cancer**

**Identifying and definitional attributes**

Definition                                      Site of radiotherapy for metastatic breast cancer treatment

Justification                                  Collected to provide the basis for a standard approach to recording and monitoring patterns of treatment for cancer patients.

**Representational attributes**

Data type                                      Number

Representational class                      Code

Field size maximum                        1

Format                                         N

| Data domain | Code | Description |
|-------------|------|-------------|
|             | 1    | Bone        |
|             | 2    | Brain       |
|             | 8    | Other       |
|             | 9    | Not stated  |

Guide for use                                This information should be obtained from the patient's medical record.

Validation rules                              •

Related data element name                Radiotherapy type, Radiotherapy dose

**Administration information**

References

**Data element name            Breast reconstruction date**

**Identifying and definitional attributes**

|               |   |
|---------------|---|
| Definition    | The date of breast reconstruction (where undertaken). Breast reconstruction is where a prosthesis or tissue from other parts of the body is used to rebuild a breast removed by mastectomy. |
| Justification | For patient follow-up and outcome studies.  |

**Representational attributes**

|                           |   |
|---------------------------|---|
| Data type                 | Date/Time   |
| Representational class    | Date  |
| Field size maximum        | 8   |
| Format                    | DDMMYYYY  |
| Data domain               | Valid date  |
| Guide for use             | This information should be obtained from the patient's medical record.  |
| Validation rules          | <ul style="list-style-type: none"><li>• This data item is for both invasive cancer and in situ lesions.</li></ul> |
| Related data element name | NBOCC – Breast Specific Data Item Definitions for Clinical Registrations<br>June 2009: p 47                       |

**Administration information**

References

## Data element name      Breast reconstruction type

### Identifying and definitional attributes

|               |  |
|---------------|--|
| Definition    | The type of breast reconstruction procedure. Breast reconstruction is where a prosthesis or tissue from other parts of the body is used to rebuild a breast removed by mastectomy. |
| Justification | For patient follow-up and outcome studies.   |

### Representational attributes

|                        |        |
|------------------------|--------|
| Data type              | Number |
| Representational class | Code   |
| Field size maximum     | 1      |
| Format                 | N      |

|             |             |  |
|-------------|-------------|--|
| Data domain | <b>Code</b> | <b>Description</b>                             |
|             | 1           | No reconstruction                              |
|             | 2           | Autologous reconstruction                      |
|             | 3           | Prosthetic reconstruction                      |
|             | 4           | Prosthetic and autologous reconstruction       |
|             | 5           | Reconstruction done but inadequately described |
|             | 9           | Not known                                      |

|               |   |
|---------------|---|
| Guide for use | This information should be obtained from the patient's pathology report or medical record. Record type of procedure where breast reconstruction was undertaken. |
|---------------|---|

|                  |   |
|------------------|---|
| Validation rules | <ul style="list-style-type: none"><li>•</li></ul> |
|------------------|---|

|                           |   |
|---------------------------|---|
| Related data element name | NBOCC – Breast Specific Data Item Definitions for Clinical Registrations<br>June 2009: p 46 |
|---------------------------|---|

### Administration information

References

