

# Victorian Consensus Data Set **Lung 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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[www.cancervic.org.au/about-our-research/victorian\\_cancer\\_registry/vcds-project/](http://www.cancervic.org.au/about-our-research/victorian_cancer_registry/vcds-project/)

## Acknowledgements

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

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 Lung 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 8.

### 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.
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### Source and reference attributes

Submitting organisations	<p>Integrated Cancer Services (ICS)</p> <p>BioGrid</p> <p>Victorian Cancer Registry (VCR)</p> <p>Victorian Cooperative Oncology Group (VCOG)</p>
Steward	<p>Cancer Council Victoria (CCV)</p> <p>Western and Central Melbourne Integrated Cancer Services (WCMICS)</p>
Reference documents	<p>AIHW National Health Data Dictionary METeOR</p> <p>CCV Victorian Clinical Cancer Registration Data Set</p> <p>UICC TNM Classification of Malignant Tumours, 6<sup>th</sup> Edition</p> <p>WHO International Classification of Diseases for Oncology, 3<sup>rd</sup> Edition</p> <p>National Centre for Classification in Health, International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification</p>
References - Lung cancer	<p>De Klerk, N. et al. Cancer mortality in relation to measures of occupational exposure to crocidolite at Wittenoom Gorge in Western Australia. <i>British Journal of Industrial Medicine</i> (1989) 46, 529-536</p> <p>Conron, M. Specifications for updating Multidisciplinary OIS. 2010.</p> <p>Colinet, B. A new simplified comorbidity score as a prognostic factor in non-small-cell lung cancer patients: description and comparison with the Charlson's index. <i>British Journal of Cancer</i> (2005) 93, 1098-1105</p> <p>CONTRO. Diagnostic Test Definitions. Accessed 10 February 2010.</p> <p>Royal College of Pathologists of Australasia (RCPA). Lung Cancer Structured Reporting Protocol. 2010 (1st Edition)</p>

## 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.
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## 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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## LUNG CANCER DATA ELEMENTS

**Data Element Name**            **Tobacco smoking status – lung cancer**

### Identifying and Definitional Attributes

Definition                            Description of the patient’s tobacco smoking status.

Justification                        Smoking has long been known as a health risk factor. Population studies indicate a relationship between smoking and increased mortality/morbidity.

### Representational Attributes

Data Type                            Number

Representational Class            Code

Field Size Maximum                1

Format                                N

Data Domain	Code	Description
	0	Never smoked
	1	Current smoker
	2	Ex-smoker
	9	Not stated/unknown

Guide For Use                        Current smoker is a person who still smokes tobacco.  
Ex-smoker is a person who does not smoke at all now, but has smoked at least 100 cigarettes or a similar amount of other tobacco products in his/her lifetime.  
Never smoked is a person who does not smoke now and has smoked fewer than 100 cigarettes or similar amount of other tobacco products in his/her lifetime.

Validation Rules                      •

Related Data Element Name

### Administration Information

References

**Data Element Name      Tobacco smoking start age – lung cancer**

**Identifying and Definitional Attributes**

Definition                      The age a current or ex-smoker started smoking.

Justification                      Smoking has long been known as a health risk factor. Population studies indicate a relationship between smoking and increased mortality/morbidity.

**Representational Attributes**

Data Type                      Number

Representational Class              Total

Field Size Maximum              2

Format                      [NN]

Data Domain

Guide For Use                      Record age in completed years.  
This information is relevant only if a person currently smokes or has smoked in the past.

Validation Rules                      •

Related Data Element Name

**Administration Information**

References                      AIHW – Tobacco smoking—start age (daily smoking)  
METeOR ID: 270324

**Data Element Name      Tobacco smoking quit age – lung cancer**

**Identifying and Definitional Attributes**

Definition                      The age an ex-smoker ceased smoking daily.

Justification                      Smoking has long been known as a health risk factor. Population studies indicate a relationship between smoking and increased mortality/morbidity. There is a significant difference in survival between ex and current smokers with lung cancer.

**Representational Attributes**

Data Type                      Number  
Representational Class              Total  
Field Size Maximum              2  
Format                      [NN]  
Data Domain

Guide For Use                      Record age in completed years.  
  
Quit-age is relevant only to persons who have been smokers in the past and are not current smokers.  
  
Quit-age may be directly reported, or derived from the date the person quit smoking or the length of time since quitting, once the person's date of birth (or current age) is known.

Validation Rules                      •

Related Data Element Name

**Administration Information**

References

**Data Element Name Tobacco smoking quantity – cigarettes per day**

**Identifying and Definitional Attributes**

Definition	An estimate of quantity of tobacco cigarettes smoked per day (currently or in the past).
Justification	Smoking has long been known as a health risk factor. Population studies indicate a relationship between smoking and increased mortality/morbidity.

**Representational Attributes**

Data Type	Number
Representational Class	Total
Field Size Maximum	2
Format	NN
Data Domain	

Guide For Use	For current smokers, record the average number of cigarettes that the person reports to smoke each day. For ex-smokers, record the average number of cigarettes that the person reports to have smoked in the past.
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Validation Rules	•
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Related Data Element Name

**Administration Information**

References

**Data Element Name      Tobacco smoking quantity – pack years**

**Identifying and Definitional Attributes**

Definition                      An estimate of quantity of tobacco smoked in pack years. Pack years smoking are the average number of cigarettes smoked per day divided by 25 (a pack) multiplied by the number of years smoked.

Justification                      Smoking has long been known as a health risk factor. Population studies indicate a relationship between smoking and increased mortality/morbidity.

**Representational Attributes**

Data Type                      Number

Representational Class              Total

Field Size Maximum              2

Format                          NN

Data Domain

Guide For Use                      Pack years are to be considered an estimate of tobacco smoking quantity only.  
Pack years are calculated from cigarettes per day and number of years smoked. Assume that a pack contain 25 cigarettes. Divide the self-reported number of cigarettes smoked per day by 25. Multiple this by then self-reported number of years smoked. For example, 25 cigarettes per day for 25 years is 25 pack years. 10 per day for 20 years is 8 pack years.  
Where the calculation results does not result in whole number (ie containing decimal points), use standard rounding. That is, numbers equal to or above 0.5 are rounded up to the next whole number. Numbers with less than 0.5 are rounded down to the preceding whole number. For example 10.4 rounds down to 10 but 10.5 rounds up to 11.

Validation Rules                      •

Related Data Element Name

**Administration Information**

References                      Cancer Institute of NSW, NSW Oncology Group Lung Cancer Minimum Data Set Extension Data Dictionary, Ver 1, Jul 2007

**Data Element Name**                    **Marijuana smoking – lung cancer**

**Identifying and Definitional Attributes**

Definition                                    Description of whether the patient has smoked marijuana.

Justification                                Marijuana use is known as a risk factor for lung cancer.

**Representational Attributes**

Data Type                                  Number

Representational Class                Code

Field Size Maximum                    1

Format                                        N

Data Domain	Code	Description
	0	No known marijuana use
	1	Regular current marijuana use
	2	Previous marijuana use
	9	Unknown/not stated

Guide For Use                              This information should be obtained from the patient's medical record or medical practitioner.  
Marijuana may also be described by a variety of street names referring to leaves from the plant Cannibas sativa.

Validation Rules                            •

Related Data Element Name

**Administration Information**

References



## Data Element Name      Referral source – lung 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>Code</b>	<b>Description</b>
1	General Practitioner
2	Organised cancer screening program
3	Medical specialist/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      •

Related Data Element Name

### Administration Information

References

**Data Element Name          Asbestos exposure**

**Identifying and Definitional Attributes**

Definition                          Whether the patient has been exposed to asbestos.

Justification                        Asbestos exposure has been known as a health risk factor in lung factor and mesothelioma. Exposure to asbestos may occur in the workplace (occupational) or outside of the workplace (domestically). Occupational exposure may also extend secondarily to family members of those in contact with asbestos in the workplace. This information is collected for analysis of survival and distribution of cancer by type and stage.

**Representational Attributes**

Data Type                          Number

Representational Class          Code

Field Size Maximum              1

Format                                N

Data Domain	Code	Description
	0	No known exposure to asbestos
	1	Known occupational exposure to asbestos
	2	Known domestic exposure to asbestos
	9	Unknown/not stated

Guide For Use                      This information should be obtained from the patient's medical record or medical practitioner.  
Code 1 Occupational exposure to asbestos known to have occurred in the workplace (eg mining, plumbing, electrical, construction material). Include secondary exposure to asbestos through a family member exposed to asbestos in the workplace (eg asbestos on work clothing).  
Code 2 Domestic exposure to asbestos known to have occurred outside of the workplace (eg construction material in the home).

Validation Rules                    •

Related Data Element Name

**Administration Information**

References                          Cancer Institute of NSW, NSW Oncology Group Lung Cancer Minimum Data Set Extension Data Dictionary, Ver 1, Jul 2007

**Data Element Name                      Method of detection of lung 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	Code
Representational Class	Number
Field Size Maximum	1
Format	N
Data Domain	<b>Code</b>

<b>Code</b>	<b>Description</b>
1	Screening – Opportunistic
2	Screening – Organised
3	Incidental finding
4	Symptomatic
9	Not stated/inadequately described

Guide For Use	<p>It is assumed that 'Screening – Opportunistic', 'Screening – Organised' and 'Incidental finding' are used for asymptomatic patients.</p> <p>Code 1 Screening – Opportunistic is cancer identified through screening (other than an established population screening program), such as referral by health provider as a general check up</p> <p>Code 2 Screening – Organised is cancer detected through established population screening program</p> <p>Code 3 Incidental finding is cancer detected through investigation for other health matter other than lung cancer</p> <p>Code 4 Symptomatic is finding of cancer after investigation of possible lung cancer symptoms</p>
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Validation Rules	<ul style="list-style-type: none"> <li>•</li> </ul>
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Related Data Element Name	Symptomatic presentation – lung cancer
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**Administration Information**

References

## Data Element Name    **Loss of weight – lung cancer**

### Identifying and definitional attributes

Definition                                      Description of loss of body weight experienced by the patient

Justification                                      Collected to determine condition of the patient when the tumour was initially detected. A significant loss of weight is usually >10% weight loss in the past six months which is not attributable to lifestyle changes (e.g. dieting) or other medical conditions.

### Representational Attributes

Data Type	Code
Representational Class	Numeric
Field Size Maximum	<i>Min</i> 1 <i>Min</i> 1
Format	N
Data Domain	<b>Code      Description</b>
	0              No loss of weight
	1              Loss of weight less than 10%
	2              Loss of weight greater than 10%
	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.

Verification Rules                                      •      Can be null

Related Data Element  
Name

### **Administration Information**

References                                      None

**Data Element Name          Palliative surgery – lung**

**Identifying and Definitional Attributes**

Definition                                  The surgical procedure used in palliative treatment of the cancer.

Justification                                Collected to determine palliative surgical procedures performed.

**Representational Attributes**

Data Type                                  Number

Representational Class                  Code

Field Size Maximum                      2

Format                                        N[N]

7Data Domain	Code	Description
	1	Laser
	2	Pleurodesis
	3	Stent
	4	Parenchymal
	5	Craniotomy
	6	Orthopaedic stabilisation
	7	Biliary
	88	Other
	99	Not stated/unknown

Guide For Use                              Palliative surgery is classified as Thoracic (Laser, Pleurodesis, Stent or Parenchymal) or Extrathoracic (Craniotomy, Orthopaedic stabilisation or Other).  
  
Curative surgery is classified as Anatomical (Segmentectomy, Lobectomy or Pneumonectomy) or Non Anatomical (Wedge).

Validation Rules                            •

Related Data Element Name

**Administration Information**

References

## Data Element Name      **Surgery access**

### Identifying and Definitional Attributes

Definition	Description of means of surgical access to the tumour.
Justification	Collected to identify means of surgical access to the tumour.

### Representational Attributes

Data Type	Number	
Representational Class	Code	
Field Size Maximum	1	
Format	N	
Data Domain	<b>Code</b>	<b>Description</b>
	1	Video assisted (VATS)
	2	Open
	9	Not stated/inadequately described

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      Extent of spread – lung cancer**

**Identifying and Definitional Attributes**

Definition	Description of extent of direct spread of the lung cancer at time of diagnosis (tumour T stage).
Justification	Collected to determine extent of spread of lung cancer at diagnosis.

**Representational Attributes**

Data Type	Number																																						
Representational Class	Code																																						
Field Size Maximum	2																																						
Format	N[N]																																						
Data Domain	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 10%;"><b>Code</b></th> <th><b>Description</b></th> </tr> </thead> <tbody> <tr><td>1</td><td>Tumour <math>\leq</math> 2 cm</td></tr> <tr><td>2</td><td>Tumour &gt; 2 cm but <math>\leq</math> 3 cm</td></tr> <tr><td>3</td><td>Tumour &gt; 3 cm but <math>\leq</math> 5 cm</td></tr> <tr><td>4</td><td>Atelectasis/obstructive pneumonitis not involving entire lung</td></tr> <tr><td>5</td><td>Invasion of visceral pleura</td></tr> <tr><td>6</td><td>Tumour &gt; 5 cm but <math>\leq</math> 7 cm</td></tr> <tr><td>7</td><td>Tumour &gt; 7 cm</td></tr> <tr><td>8</td><td>Invasion of main bronchus <math>\geq</math> 2cm distal to carina</td></tr> <tr><td>9</td><td>Involving main bronchus &lt; 2cm distal to carina</td></tr> <tr><td>10</td><td>Atelectasis/obstructive pneumonitis of entire lung</td></tr> <tr><td>11</td><td>Invasion of parietal pericardium</td></tr> <tr><td>12</td><td>Invasion of parietal pleura or chest wall</td></tr> <tr><td>13</td><td>Invasion of phrenic nerve</td></tr> <tr><td>14</td><td>Invasion of diaphragm or mediastinal pleura</td></tr> <tr><td>15</td><td>Satellite nodules in same lobe</td></tr> <tr><td>16</td><td>Invasion of mediastinum, heart, great vessels, trachea, recurrent laryngeal nerve, oesophagus, vertebral body or carina</td></tr> <tr><td>17</td><td>Satellite nodules in ipsilateral lobe</td></tr> <tr><td>99</td><td>Not stated/inadequately described</td></tr> </tbody> </table>	<b>Code</b>	<b>Description</b>	1	Tumour $\leq$ 2 cm	2	Tumour > 2 cm but $\leq$ 3 cm	3	Tumour > 3 cm but $\leq$ 5 cm	4	Atelectasis/obstructive pneumonitis not involving entire lung	5	Invasion of visceral pleura	6	Tumour > 5 cm but $\leq$ 7 cm	7	Tumour > 7 cm	8	Invasion of main bronchus $\geq$ 2cm distal to carina	9	Involving main bronchus < 2cm distal to carina	10	Atelectasis/obstructive pneumonitis of entire lung	11	Invasion of parietal pericardium	12	Invasion of parietal pleura or chest wall	13	Invasion of phrenic nerve	14	Invasion of diaphragm or mediastinal pleura	15	Satellite nodules in same lobe	16	Invasion of mediastinum, heart, great vessels, trachea, recurrent laryngeal nerve, oesophagus, vertebral body or carina	17	Satellite nodules in ipsilateral lobe	99	Not stated/inadequately described
<b>Code</b>	<b>Description</b>																																						
1	Tumour $\leq$ 2 cm																																						
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6	Tumour > 5 cm but $\leq$ 7 cm																																						
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8	Invasion of main bronchus $\geq$ 2cm distal to carina																																						
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17	Satellite nodules in ipsilateral lobe																																						
99	Not stated/inadequately described																																						
Guide For Use	<p>This information should be obtained from the patient's medical record or medical practitioner.</p> <p>Either record all features of direct tumour spread by collecting this element multiple times or record the feature with the highest code number that describes the most advanced stage of cancer. That is, if a tumour is between 5 and 7 cm in size (Code 6) but invades the parietal pericardium (Code 11), use Code 11.</p> <p>Collect for both small cell and non small cell carcinoma.</p>																																						
Validation Rules	•																																						
Related Data Element Name																																							

**Administration Information**

References	AJCC Cancer Staging Manual, 7 <sup>th</sup> Edition, p 263
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## Data Element Name      **Lymph nodes involved – lung cancer**

### Identifying and Definitional Attributes

Definition	Description of regional lymph nodes involved with lung cancer at time of diagnosis (lymph node N stage).
Justification	Collected to determine extent of spread of lung cancer at diagnosis.

### Representational Attributes

Data Type	Number
Representational Class	Code
Field Size Maximum	1
Format	N

Data Domain	<b>Code</b>	<b>Description</b>
	0	No regional lymph node metastases
	1	Ipsilateral peribronchial, hilar or intrapulmonary lymph node(s)
	2	Ipsilateral mediastinal (midline) or subcarinal lymph node(s)
	3	Contralateral mediastinal lymph node(s)
	4	Contralateral hilar lymph node(s)
	5	Ipsilateral scalene lymph node(s)
	6	Contralateral scalene lymph node(s)
	7	Supraclavicular lymph node(s)
	9	Not stated/inadequately described

Guide For Use	<p>This information should be obtained from the patient's pathology report or the patient's medical record.</p> <p>Either record all features of lymph node spread by collecting this element multiple times or record the feature with the highest code number that describes the most advanced stage of cancer. That is, tumour is present in ipsilateral peribronchial lymph nodes (Code 1) but is also present in supraclavicular lymph nodes (Code 7), use Code 7.</p> <p>Collect for both small cell and non small cell carcinoma.</p>
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Validation Rules	<ul style="list-style-type: none"><li>•</li></ul>
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Related Data Element Name	Regional lymph node metastasis – N Stage
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### Administration Information

References	AJCC Cancer Staging Manual, 7 <sup>th</sup> Edition, p 263
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**Data Element Name                      Extent of metastatic spread – lung cancer**

**Identifying and Definitional Attributes**

Definition	Description of extent of metastatic spread of the lung cancer at time of diagnosis (metastases M stage).
Justification	Collected to determine extent of spread of lung cancer at diagnosis.

**Representational Attributes**

Data Type	Number												
Representational Class	Code												
Field Size Maximum	2												
Format	N[N]												
Data Domain	<table border="0"> <thead> <tr> <th style="text-align: left;">Code</th> <th style="text-align: left;">Description</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>No distant metastasis</td> </tr> <tr> <td>1</td> <td>Malignant pericardial/pleural effusion</td> </tr> <tr> <td>2</td> <td>Metastasis in contralateral lung</td> </tr> <tr> <td>3</td> <td>Distant metastasis</td> </tr> <tr> <td>99</td> <td>Not stated/inadequately described</td> </tr> </tbody> </table>	Code	Description	0	No distant metastasis	1	Malignant pericardial/pleural effusion	2	Metastasis in contralateral lung	3	Distant metastasis	99	Not stated/inadequately described
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0	No distant metastasis												
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2	Metastasis in contralateral lung												
3	Distant metastasis												
99	Not stated/inadequately described												

Guide For Use	<p>This information should be obtained from the patient's medical record or medical practitioner.</p> <p>Either record all features of metastatic spread by collecting this element multiple times or record the feature with the highest code number that describes the most advanced stage of cancer. That is, metastases to the contralateral lung (Code 2) but also distant metastases in bone or liver (Code 3), use Code 3</p> <p>Code 1 Although most pleural or pericardial effusions occurring in patients with lung cancer are due to the the tumour, occasionally they will be negative for malignant cells in multiple cytological investigations. Therefore, exclude effusions that are judged clinically not to be related to the tumour.</p> <p>Collect for both small cell and non small cell carcinoma.</p>
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Validation Rules

Related Data Element Name

**Administration Information**

References	AJCC Cancer Staging Manual, 7 <sup>th</sup> Edition, p 263
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**Data Element Name**      **Chemotherapy treatment – lung cancer**

**Identifying and Definitional Attributes**

Definition                      Description of lung cancer patient’s chemotherapy.

Justification                      Collected to identify patient treatments for lung cancer.

**Representational Attributes**

Data Type                      Number

Representational Class        Code

Field Size Maximum            1

Format                            N

Data Domain	Code	Description
	0	No chemotherapy
	1	Neo-adjuvant (pre-operative) with radiotherapy
	2	Neo-adjuvant (pre-operative) without radiotherapy
	3	Adjuvant
	4	Palliative
	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