



CANCER PROGRAM

### Penn Medicine Virtua Cancer Program Performance Measures 2019

To maintain compliance with the Commission on Cancer accreditation standards, the Penn Medicine Virtua Cancer Program is required to submit patient data annually to the National Cancer Data Base (NCDB). The NCDB is a nationwide oncology outcomes database that collects information on 70% of all new invasive cancer diagnoses in the United States each year. It serves as a powerful clinical surveillance and quality improvement mechanism for cancer programs. The data submitted by the Penn Medicine Virtua Cancer Program is analyzed and compared to national benchmarks for performance measures. Results of our performance measures outcomes are based on 2018 data (most recent year of complete data) and are as follows:

At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer.

**Virtua Results: 87% CoC Benchmark: 85%**

Tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year or 365 days of diagnosis with AJCC T1c or Stage IB-III hormone receptor positive breast cancer.

**Virtua Results: 90% CoC Benchmark: 90%**

Radiation is administered within 1 year (365 days) of diagnosis for women under the age of 70 receiving breast conservation surgery for breast cancer.

**Virtua Results: 95% CoC Benchmark: 90%**

Image or palpation-guided needle biopsy (core or FNA) to the primary site is used to establish diagnosis of breast cancer.

**Virtua Results: 100% CoC Benchmark: 80%**

Systemic chemotherapy is administered within 4 months to day preoperatively or day of surgery to 6 months postoperatively, or it is considered for surgically resected cases with pathologic, lymph node-positive (pN1) and (pN2) NSCLC

**Virtua Results: 100% CoC Benchmark: 85%**

Surgery is not the first course of treatment for cN2, M0 lung cases

**Virtua Results: 100% CoC Benchmark: 85%**