| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| **Identification Of Patient Demographics** | | | | | | | |
| NHS Number | NHS Wales Data Dictionary | NHS Wales Data Dictionary | N/A | N/A | M | NHS Number | NHS Number |
| NHS Number Status Indicator | NHS Wales Data Dictionary | Code List | NHS Wales Data Dictionary | NHS Wales Data Dictionary | M | NHS Number Status Indicator | NHS Number Status Indicator Code |
| Unique Pathway Identifier | An identifier which together with the organisation code uniquely identifies a patient pathway | an24 | N/A | N/A | M | N/A | N/A |
| Birth Date | NHS Wales Data Dictionary | ccyymmdd | N/A | N/A | M | Birth Date | Person Birth Date |
| Sex (At Birth) | NHS Wales Data Dictionary | Code List | F | Female | M | Sex | N/A |
| | | | I | Indeterminate | | | |
| | | | M | Male | | | |
| | | | Z | Not disclosed or unknown, e.g. for unborn baby | | | |
| Gender Identity | NHS Wales Data Dictionary | Code List | F | Female | M | Gender | Person Stated Gender Code |
| | | | M | Male | | | |
| | | | N | Non-Binary | | | |
| | | | Z | Not disclosed or unknown, e.g. for unborn baby | | | |
| Person Sexual Orientation Code (At Diagnosis) | Persons sexual orientation as self declared at the time of the patients diagnosis. | Code List | 1 | Heterosexual or Straight | R | N/A | Person Sexual Orientation Code (At Diagnosis) |
| | | | 2 | Gay or Lesbian | | | |
| | | | 3 | Bisexual | | | |
| | | | 4 | Other sexual orientation not listed | | | |
| | | | U | Person asked and does not know or is not sure | | | |
| | | | Z | Not Stated (person asked but declined to provide a response) | | | |
| | | | 9 | Not Known (Not Recorded) | | | |
| General Medical Practitioner Code (GP Code) | NHS Wales Data Dictionary | NHS Wales Data Dictionary | N/A | N/A | R | GP Code | General Medical Practitioner (Specified) |
| General Medical Practice Code (GP Practice Code) | NHS Wales Data Dictionary | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - GP Practice Code | General Medical Practice Code (Patient Registration) |
| Ethnic Group/Category | NHS Wales Data Dictionary | Code List | NHS Wales Data Dictionary | NHS Wales Data Dictionary | R | Ethnic Group | Ethnic Category |
| | | | 99 | Unknown | | | |
| Case Record Number (Local Patient Identifier) | NHS Wales Data Dictionary | NHS Wales Data Dictionary | N/A | N/A | M | Local Patient Identifier | Local Patient Identifier |
| Patient Name - Family Name (Surname) | The patients surname used to describe family, clan or marital association | an35 | N/A | N/A | R | N/A | Person Family Name |
| Patient Name - Person Given Name (Forename) | The persons forename(s) or given name(s) | an35 | N/A | N/A | R | N/A | Person Given Name |
| Person Family Name (At Birth) | The patients surname at birth | an35 | N/A | N/A | R | N/A | Person Family Name (At Birth) |
| Patient Address (At Diagnosis) | NHS Wales Data Dictionary<br><br>At admission, attendance or diagnosis | NHS Wales Data Dictionary | N/A | N/A | R | Patient's Usual Address | Patient Usual Address (At Diagnosis) |
| Patient Postcode (At Diagnosis) | NHS Wales Data Dictionary<br><br>At admission, attendance or diagnosis | NHS Wales Data Dictionary | N/A | N/A | R | Postcode of Usual Address | Postcode Of Usual Address (At Diagnosis) |
| **Referral Details (This Section Includes Details From Referral Up To First Appointment (For The Primary Diagnosis) And Is Therefore To Be Recorded Once For Each New Primary Cancer Diagnosis.** | | | | | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Source Of Cancer Referral | This is a classification used to identify the source of referral of each episode or referral | Code List | Initiated by the Consultant or Independent Nurse responsible for the Out-Patient Episode | | R | N/A | Source Of Referral For Out-Patients |
| | | | 01 | Following an emergency admission | | | |
| | | | 02 | Following a Domiciliary visit | | | |
| | | | 10 | Following an Accident And Emergency Attendance (including Minor Injuries Units and Walk In Centres) | | | |
| | | | 11 | Other - initiated by the Consultant responsible for the Consultant out patient episode | | | |
| | | | Not initiated by the Consultant or Independent Nurse responsible for the Out-Patient Episode | | | | |
| | | | 03 | Referral from a General Medical Practitioner | | | |
| | | | 04 | Referral from A&E Department (including minor injuries units and walk in centres) | | | |
| | | | 05 | Referral from a Consultant or Independent Nurse, other than in an A&E department | | | |
| | | | 06 | Self-referral | | | |
| | | | 07 | Referral from Prosthetist | | | |
| | | | 08 | Other sources of referral | | | |
| | | | 12 | Referral from a General Practitioner with a Special Interest (GPwSI) or dentist with a Special Interest (DwSI) | | | |
| | | | 13 | Referral from a Specialist Nurse (Secondary Care) | | | |
| | | | 14 | Referral from an Allied Health Professional (AHP) | | | |
| | | | 15 | Referral from Optometrist | | | |
| | | | 16 | Referral from an Orthoptist | | | |
| | | | 17 | Referral from a National Screening Programme | | | |
| | | | 171 | Breast Test Wales - screening referral | | | |
| | | | 172 | Bowel Screening Wales - screening referral | | | |
| | | | 173 | Cervical Screening Wales - screening referral | | | |
| | | | 174 | Other Screening Service (not Breast, Bowel or Cervical) | | | |
| | | | 92 | General Dental Practitioner | | | |
| | | | 93 | Community Dental Service | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 97 | Other - not initiated by the Consultant responsible for the Consultant Out Patient Episode | | | |
| Date Of Cancer Referral | The date on which the decsion was made to refer a patient with suspected cancer. This should be the first point of referral from one of the following:<br>(a) the date on the letter or proforma from the referring clinician or GP. This definition will need to be reviewed in line with SCP definitions<br>(b) the date of admission to hospital in the case of patients admitted as an emergency<br>(c) the date of the first OPA appt, if the referral was a self-referral<br>(d) the date on the recall letter for patients recalled following a routine screening appt | ccyymmdd | N/A | N/A | M | N/A | N/A |
| Date Of Receipt Of Cancer Referral | The date that the referral request is received by the provider. (Applies to all referral routes, not just from primary care)<br>(a) Date when letter/fax/electronic form is received. In the case of a written referral, this should be the date on which the letter/fax arrived in the hospital. The most likely source of this data will be a date stamp of teh receiving department on the referral letter<br>(b) Date of verbal request<br>(c) Date of admission to hospital in the case of patients admitted as an emergency<br>(d) The date of the first out patient appointment, if the referral was a self referral | ccyymmdd | N/A | N/A | M | N/A | N/A |
| Cancer Waiting Times Eligibility Identifier (Presentation Of Disease At Referral) | To note Cancer Waiting Times (CWT) eligibility and a trigger of new presenation of disease. | Boolean | N/A | N/A | M | N/A | N/A |
| Pathway Start Date (Point Of Suspicion Of Cancer) | The date when a clinician suspects that patient may have cancer - this is for all routes of referral other than via the GP USC route<br>See Definitions document for pathway start date defnitions<br>http://www.walescanet.wales.nhs.uk/scp-key-documents<br>(Point of Suspicion Document) | ccyymmdd | N/A | N/A | M | N/A | N/A |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Organisation Code (Referred To) (Code Of Provider) | NHS Wales Data Dictionary | NHS Wales Data Dictionary | N/A | N/A | M | Organisation Code - LHB/Trust Code | Organisation Identifier (Code Of Provider) |
| Organisation Site Code (Referred To) (Code Of Provider) | NHS Wales Data Dictionary | NHS Wales Data Dictionary | N/A | N/A | M | Organisation Code - LHB/Trust Site Code | N/A |
| Date First Seen | The date that the patient is first seen in the Health Board that receives the first referral. It is the date first seen in secondary care for this diagnosis. | ccyymmdd | N/A | N/A | R | N/A | Date First Seen |
| Professional Registration Issuer Code - Consultant (First Seen) | A code which identifies the professional registration body | Code List | 02 | General Dental Council | M | N/A | Professional Registration Issuer Code - Consultant (First Seen) |
| | | | 03 | General Medical Council | | | |
| | | | 04 | General Optical Council | | | |
| | | | 08 | Health and Care Professions Council | | | |
| | | | 09 | Nursing and Midwifery Council | | | |
| Professional Registration Entry Identifier - Consultant (First Seen) | NHS Wales Data Dictionary<br><br>The consultant or health care professional who first sees the patient following the initial referral which leads to the cancer diagnosis | NHS Wales Data Dictionary | N/A | N/A | M | Consultant Code | Professional Registration Entry Identifier - Consultant (First Seen) |
| Organisation Site Identifier (Provider First Seen) | NHS Wales Data Dictionary<br><br>The organisation site where there was the first contact with the patient (first seen) | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Provider First Seen) |
| Date First Seen (Cancer Specialist) | This is the date that the patient is first seen by the appropriate specialist for cancer care within the care spell/episode. This is the person who are most able to progress the diagnosis of the primary tumour. If patients first appointment is with the appropriate cancer specialist this will be the same as the date first seen | ccyymmdd | N/A | N/A | R | N/A | Date First Seen (Cancer Specialist) |
| Organisation Site Identifier (Provider First Cancer Specialist) | NHS Wales Data Dictionary<br><br>The organisation site where the patient is first seen by an appropriate cancer specialist on the date first seen (cancer specialist). If the patient's first appointment is with the appropriate cancer specialist this will be the same as the provider first seen | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Provider First Cancer Specialist) |
| Consultant Code (Cancer Specialist) | NHS Wales Data Dictionary<br><br>The consultant who is most able to progress the diagnosis of the primary tumour - this is the code of the consultant who is responsible for the appointment recorded under the date first seen (cancer specialist). If the patient's first appointment is with the approriate cancer specialist this will be the same as the consultant first seen | NHS Wales Data Dictionary | N/A | N/A | R | Consultant Code | N/A |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Cancer Referral Patient Status (Primary) | The status of referral requests for patients referred with a suspected cancer, or referred with breast symptoms with cancer not orignally suspected. To be used for all patients regardless of referral route. | Code List | 14 | Suspected primary cancer | R | N/A | N/A |
| | | | 09 | Under investigation following symptomatic referral, cancer not suspected (breast referrals only) | | | |
| | | | 03 | No new cancer diagnosis identified by the Healthcare Provider | | | |
| | | | 31 | Diagnosis of new cancer confirmed | | | |
| Cancer Symptoms First Noted Date | Record the time when the symptoms were first noted related to this diagnosis as agreed between the consultant and the patient. This will normally be recorded by the consultant first seeing the patient in secondary care. Depending on length of time this should normally include at least the month and year. The day should also be included if known. If symptoms have been present for a long time then it may only be possible to record the year. | ccyymmdd | N/A | N/A | R for CTYA<br><br>O for other sites | N/A | Cancer Symptoms First Noted Date |
| **Key Imaging Investigations (Multiple Occurences Per Tumour)** | | | | | | | |
| Organisation Site Identifier Of Imaging | NHS Wales Data Dictionary<br><br>The organisation site at which the imaging took place | NHS Wales Data Dictionary | N/A | N/A | M | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Of Imaging) |
| Date Of Imaging (Procedure Date) | NHS Wales Data Dictionary<br><br>The date the imaging was performed | ccyymmdd | N/A | N/A | M | Procedure Date | Procedure Date (Cancer Imaging) |
| Date Imaging Reported | The date the imaging was reported | ccyymmdd | N/A | N/A | R | N/A | N/A |
| Imaging Outcome | Record the outcome for the imaging event as agreed with the radiologist or clinical team | Code List | 01 | Abnormal – used when patient does not have normal imaging and the radiologist deems there to be a finding or mass correlating with a disease process which could be benign or malignant disease | R | N/A | Imaging Outcome |
| | | | 02 | Normal – used when imaging investigation looks completely normal in the radiologists opinion | | | |
| | | | 03 | Benign – used when patients imaging has shown an abnormality or mass on imaging and in the radiologists opinion this looks benign given the features on the image | | | |
| | | | 04 | Non-diagnostic – when the image taken and when to the radiologist it is unclear and therefore they cannot make a diagnosis | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 05 | Inadequate – when the image is difficult to interpret and needs to be repeated, this could be down to system or human reason | | | |
| | | | 09 | Not Known | | | |
| Image Code (NICIP) | This is the National Interim Clinical Imaging Procedure Code Set is used to identify both the test modality and body site of test | an6 | N/A | N/A | M | N/A | Image Code (NICIP) |
| Image Code (NICIP) Description | Description associated with Image Code (NICIP) | an6 | N/A | N/A | D | N/A | N/A |
| Imaging Code (SNOMED) | Imaging code is the SNOMED concept ID which is used to identify both the test modality and body site of the test<br><br>Required if NICIP/SNOMED not available | min n6 max n18 | N/A | N/A | R | N/A | Image Code (NICIP) |
| Image Code (SNOMED) Description | Description associated with Image Code (SNOMED) | an100 | N/A | N/A | D | N/A | N/A |
| Cancer Imaging Modality | The type of imaging procedure used during an Imaging or Radiodiagnostic event for a cancer care spell.<br><br>Only completed if NICIP/SNOMED is not available | Code List | C01X | Standard Radiography | R | N/A | Cancer Imaging Modality |
| | | | C01M | Mammogram | | | |
| | | | C02X | CT Scan | | | |
| | | | C02C | Virtual colonoscopy | | | |
| | | | C03X | MRI Scan | | | |
| | | | C04F | FDG PET Scan | | | |
| | | | C04O | Other PET Scan | | | |
| | | | C05X | Ultrasound Scan | | | |
| | | | C06X | Nuclear Medicine imaging | | | |
| | | | C08A | Angiography | | | |
| | | | C08B | Barium | | | |
| | | | C08U | Urography (IV and retrograde) | | | |
| | | | C09X | Intervention radiography. | | | |
| | | | CXXX | Other | | | |
| Imaging Anatomical Site | A classification of the part of the body that is the subject of an Imaging or Radiodiagnostic Event - coded. (The coding frame used is the OPCS-4 'Z' coding plus two additional local codes for whole body and multiple sites)<br><br>Only completed if NICIP/SNOMED code is not available - this data item is required to be completed when imaging modality data item is completed | Code List | Z921 | Head NEC | R | N/A | Imaging Anatomical Site |
| | | | Z923 | Neck NEC | | | |
| | | | Z924 | Chest NEC | | | |
| | | | Z925 | Back NEC | | | |
| | | | Z926 | Abdomen NEC | | | |
| | | | Z927 | Trunk NEC | | | |
| | | | Z899 | Arm NEC | | | |
| | | | Z909 | Leg NEC | | | |
| | | | Z019 | Brain NEC | | | |
| | | | Z069 | Spine NEC | | | |
| | | | Z301 | Liver NEC | | | |
| | | | CZ001 | Whole body | | | |
| | | | CZ002 | Multiple sites | | | |
| | | | Z929 | Other | | | |
| Anatomical Side | Side of the body that is the subject of an Imaging or Radiodiagnostic Event<br><br>Only completed if NICIP/SNOMED code is not available - this data item is required to be completed with imaging modality and anatomical site | Code List | L | Left | R | N/A | Anatomical Side (Imaging) |
| | | | R | Right | | | |
| | | | M | Midline | | | |
| | | | B | Bilateral | | | |
| | | | 8 | Not applicable | | | |
| | | | 9 | Not Known | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Imaging Text Report | This is the full text provided in the imaging report. This is also required by cancer registries to derive final stage and diagnosis date for cancer registration<br>When either one of the mandatory data items are completed for imaging either NICIP code, SNOMED code or Imaging Modality this data item is required | an270000 | N/A | N/A | R | N/A | Imaging Report Text |
| Lesion Size (Radiological) | The size in millimetres of the maximum diameter of the primary lesion, largest if more than one | n3.n2 | N/A | N/A | R | N/A | Lesion Size (Radiological) |
| **Diagnostic Procedures (Multiple Occurrences Per Tumour)** | | | | | | | |
| Organisation Site Identifier (Diagnostic Procedure) | NHS Wales Data Dictionary<br><br>The Organisation site where the diagnostic procedure took place | NHS Wales Data Dictionary | N/A | N/A | M | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Diagnostic Procedure) |
| Diagnostic Procedure Date | This is the date the diagnostic procedure was carried out | ccyymmdd | N/A | N/A | M | N/A | Diagnostic Procedure Date |
| Diagnostic Procedure (OPCS) | Record the diagnostic procedure(s) carried out using OPCS.<br>This may be recorded in addition or instead of SNOMED Diagnostic Procedure | an4 | N/A | N/A | M | N/A | Diagnostic Procedure (OPCS) |
| Diagnostic Procedure (OPCS) Description | Description associated with Diagnostic Procedure (OPCS) | an100 | N/A | N/A | D | N/A | N/A |
| Diagnostic Procedure (SNOMED) | Record the diagnostic procedure(s) carried out using SNOMED.<br>This may be recorded in addition or instead of OPCS Diagnostic Procedure | min n6 max n18 | N/A | N/A | M | N/A | Diagnostic Procedure (SNOMED CT) |
| Diagnostic Procedure (SNOMED) Description | Description associated with Diagnostic Procedure (SNOMED) | an100 | N/A | N/A | D | N/A | N/A |
| Sentinel Node Biopsy Outcome (Diagnostic Procedure) | Record the outcome of the Sentinel Node Biopsy | Code List | P | Malignant | R | N/A | Sentinel Node Biopsy Outcome |
| | | | N | No Malignancy | | | |
| **Core Diagnosis (One Occurrence Per Primary Cancer Pathway)** | | | | | | | |
| Organisation Site Identifier (Of Diagnosis) | NHS Wales Data Dictionary<br><br>The organisation site where the patient diagnosis took place | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Of Diagnosis) |
| Primary Cancer Site Code (ICD) | NHS Wales Data Dictionary<br><br>The site of the primary cancer for which the patient is receiving care. | NHS Wales Data Dictionary | N/A | N/A | M | Primary ICD Diagnostic Code | Primary Cancer Site Code (ICD) |
| Primary Cancer Site (ICD) Description | Description associated with Primary Cancer Site (ICD) Description | NHS Wales Data Dictionary | N/A | N/A | D | Primary ICD Diagnostic Code | N/A |
| Primary Cancer Site Code (SNOMED) | The site of the primary cancer for which the patient is receiving care. | min n6 max n18 | N/A | N/A | M | N/A | N/A |
| Primary Cancer Site (SNOMED) Description | Description associated with Primary Cancer Site (SNOMED) Description | an100 | N/A | N/A | D | N/A | N/A |
| Tumour Laterality | Identifies the side of the body for a tumour relating to paired organs within a patient. This refers to the side of the body on which the cancer originates. | Code List | L | Left | M | N/A | Tumour Laterality |
| | | | R | Right | | | |
| | | | M | Midline | | | |
| | | | B | Bilateral | | | |
| | | | 8 | Not Applicable | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | For the central nervous system, the definition of bilateral is 'evidence that the tumour is crossing the midline'. | | 9 | Not Known | | | |
| Date Of Primary Diagnosis - Clinically Agreed | Record the date when the primary cancer was confirmed. The definition provided conforms with the international requirements specified by the European Network of Cancer Registries (ENCR). The date of the first event (of the six listed under permissible values) to occur chronologically should be chosen as the incidence date. If an event of higher priority occurs within three months of the date initially chosen, the date of the higher priority event should take precedence, this should also be reflected and updated in the 'Basis of diagnosis'. | ccyymmdd | N/A | N/A | M | N/A | Date Of Primary Diagnosis - Clinically Agreed |
| Basis Of Diagnosis | This is the method used to confirm the cancer. As a measure of validity, only the 'most valid basis of diagnosis' is required. The codes opposite are hierarchical, therefore the higher the number the more validity the basis holds. If an event of higher priority occurs within three months of the date of diagnosis, the basis of the higher priority event should take precedence. | Code List | Non-microscopic | | R | N/A | Basis Of Diagnosis (Cancer) |
| | | | 0 | Death Certificate: The only information available is from a death certificate | | | |
| | | | 1 | Clinical: Diagnosis made before death but without the benefit of any of the following (2-7) | | | |
| | | | 2 | Clinical Investigation: Includes all diagnostic techniques (e.g. X-rays, endoscopy, imaging, ultrasound, exploratory surgery and autopsy) without a tissue diagnosis | | | |
| | | | 4 | Specific tumour markers: Includes biochemical and/or immunological markers which are specific for a tumour site | | | |
| | | | Microscopic | | | | |
| | | | 5 | Cytology: Examination of cells whether from a primary or secondary site, including fluids aspirated using endoscopes or needles. Also including microscopic examination of peripheral blood films and trephine bone marrow aspirates | | | |
| | | | 6 | Histology of a metastasis: Histological examination of tissues from a metastasis, including autopsy specimens | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 7 | Histology of a primary tumour: Histological examination of tissue from the primary tumour, however obtained, including all cutting and bone marrow biopsies. Also includes autopsy specimens of a primary tumour | | | |
| | | | 9 | Unknown: No information on how the diagnosis has been made (e.g. PAS or HISS record only) | | | |
| Morphology (Pre Treatment) (ICD10 V4) | Cell type of malignant disease determined before the start of treatment (ICD10 V4) | min an4 max an6 | N/A | N/A | O | N/A | N/A |
| Morphology (Pre Treatment) (SNOMED) | Cell type of malignant disease determined before the start of treatment (SNOMED) | min n6 max n18 | N/A | N/A | M | N/A | N/A |
| Morphology Description (Pre Treatment) (SNOMED) | Description associated with Morphology (Pre Treatment) (SNOMED) | an100 | N/A | N/A | D | N/A | N/A |
| Morphology (SNOMED) Diagnosis | This is the patients diagnosis using the SNOMED code for the cell type of the malignant disease recorded as part of a cancer spell/episode. | min n6 max n18 | N/A | N/A | M | N/A | Morphology (SNOMED) Diagnosis |
| Morphology Description (SNOMED) Diagnosis | Desription associated with Morphology (SNOMED) Diagnosis | an100 | N/A | N/A | D | N/A | N/A |
| SNOMED Version (Diagnosis) | The version of SNOMED used to encode morphology (SNOMED) pathology and topography (SNOMED) pathology | Code List | 01 | SNOMED II | M | N/A | SNOMED Version (Diagnosis) |
| | | | 02 | SNOMED 3 | | | |
| | | | 03 | SNOMED 3.5 | | | |
| | | | 04 | SNOMED RT | | | |
| | | | 05 | SNOMED CT | | | |
| | | | 99 | Not Known | | | |
| Grade Of Differentiation (At Diagnosis) | The Grade of differentiation at diagnosis is the definitive grade of the tumour at the time of the patients diagnosis.<br>Note: Required for all urological cancers except Prostate and Testis cancer. Data item not applicable to CNS, Sarcoma or Haematological tumour sites | Code List | GX | Grade of differentiation is not appropriate or cannot be assessed | R | N/A | Grade Of Differentiation (At Diagnosis) |
| | | | G1 | Well differentiated | | | |
| | | | G2 | Moderately differentiated | | | |
| | | | G3 | Poorly differentiated | | | |
| | | | G4 | Undifferentiated / anaplastic | | | |
| | | | G9 | Not Applicable | | | |
| Performance Status (At Diagnosis) | A World Health Organisation/ECOG classification indicating a person's status relating to activity / disability. | Code List | 0 | Able to carry out all normal activity without restriction | R | N/A | Performance Status (Adult) |
| | | | 1 | Restricted in physically strenuous activity, but able ambulatory and able to carry out light work | | | |
| | | | 2 | Ambulatory and capable of all self-care but unable to carry out any work activities; up and about more than 50% of waking hours | | | |
| | | | 3 | Symptomatic and in a chair or in bed for greater than 50% of the day but not bedridden | | | |
| | | | 4 | Completely disabled; cannot carry out any self-care; totally confirned to bed or chair | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 9 | Not recorded | | | |
| Diagnosis Code (SNOMED) | Diagnosis code (SNOMED) which is used to identify the clinical diagnosis given to the patient | min n6 max n18 | N/A | N/A | R | N/A | Diagnosis Code (SNOMED CT) |
| Diagnosis Description (SNOMED) | Description associated with Diagnosis Code (SNOMED) | an100 | N/A | N/A | D | N/A | N/A |
| Metastatic Site (At Diagnosis) | The site of the metastatic disease, if any, at diagnosis. More than one site can be recorded | Code List | 02 | Brain | M | N/A | Metastatic Site |
| | | | 03 | Liver | | | |
| | | | 04 | Lung | | | |
| | | | 07 | Unknown metastatic site | | | |
| | | | 08 | Skin | | | |
| | | | 09 | Distant lymph nodes | | | |
| | | | 10 | Bone (excluding Bone Marrow) | | | |
| | | | 11 | Bone Marrow | | | |
| | | | 12 | Regional Lymph Nodes | | | |
| | | | 97 | Not Applicable | | | |
| | | | 98 | Other Metastatic Site | | | |
| **Diagnosis - Additional Data Items - Child Group Of Core Diagnosis – May Be Up To One Occurrence Per Tumour** | | | | | | | |
| Primary Diagnosis Subsidiary Comment | Additional comments on diagnosis where coding is difficult or imprecise. (Examples of this would be: "papillary glioneuronal tumour" or "angiocentric glioma" to specify recently described diagnoses which do not have ICD10 or ICD-O-3 coding. anaplastic ependymoma or ependymoblastoma to distinguish between these two diagnoses which may have different treatment decisions or outcomes but which cannot be distinguished in ICD10 or ICD-O-3 coding.) | an50 | N/A | N/A | R | N/A | Primary Diagnosis Subsidiary Comment |
| Secondary Diagnosis (ICD) | Types (ICD10 codes) of other significant conditions (e.g. Down Syndrome, NF1, Fanconi anaemia) which may predispose to cancer or influence treatment. Possible multiple entries | min an4 max an6 | N/A | N/A | R | N/A | Secondary Diagnosis (ICD) |
| Secondary Diagnosis (ICD) Description | Description associated with Secondary Diagnosis (ICD) | an100 | N/A | N/A | D | N/A | N/A |
| Secondary Diagnosis (SNOMED) | Types (SNOMED codes) of other significant conditions (e.g. Down Syndrome, NF1, Fanconi anaemia) which may predispose to cancer or influence treatment. Possible multiple entries | min n6 max n18 | N/A | N/A | R | N/A | N/A |
| Secondary Diagnosis (SNOMED) Description | Description associated with Secondary Diagnosis (SNOMED) | an100 | N/A | N/A | D | N/A | N/A |
| Other Significant Diagnosis Subsidiary Comment (Secondary Diagnosis Comment) | Additional comments on other significant conditions where coding is difficult or imprecise. (For example "NF1" or "NF2" to distinguish between these two distinct conditions which may have different treatment decisions or outcomes but cannot be coded separately.) | an50 | N/A | N/A | R | N/A | Other Significant Diagnosis Subsidiary Comment |
| Familial Cancer Syndrome | Indicate whether there is a possible or confirmed familial cancer syndrome | Code List | Y | Yes | R | N/A | Familial Cancer Syndrome |
| | | | N | No | | | |
| | | | P | Possible | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 9 | Not Known | | | |
| Familial Cancer Syndrome Subsidiary Comment | Where Familial Cancer Syndrome is Yes or Possible this field can be used to provide further details. For example, 'Li-Fraumeni', 'Rhabdoid tumour predisposition syndrome' or 'Biallelic PMS2 mutation' to identify distinct syndromes which may have different treatment decisions or outcomes but cannot be coded separately. | an50 | N/A | N/A | R | N/A | Familial Cancer Syndrome Subsidiary Comment |
| **Banked Tissue - Core Diagnosis (One Occurrence Per Tumour)** | | | | | | | |
| Banked Tissue Status (At Diagnosis) | Indicates whether any tissue was banked at diagnosis | Code List | 1 | Patient approached, consented | R | N/A | Banked Tissue At Diagnosis |
| | | | 2 | Patient approached, but declined | | | |
| | | | 3 | Patient not approached | | | |
| | | | 9 | Not Known (Not Recorded) | | | |
| Type Of Tissue Banked At Diagnosis | Indicates what tissue was banked at diagnosis | Code List | 1 | Tumour | R | N/A | Type Of Tissue Banked At Diagnosis |
| | | | 2 | Blood | | | |
| | | | 3 | CSF | | | |
| | | | 4 | Bone Marrow | | | |
| | | | 5 | Urine | | | |
| | | | 6 | Other | | | |
| Other - Type Of Tissue Banked (At Diagnosis) | If Other is chosen in type of tissue banked, specify the other type | an50 | N/A | N/A | R | N/A | N/A |
| **Person Observations - Core (Multiple Occurrences Can Be Recorded)** | | | | | | | |
| Person Height (Metres) | Height of the patient in Metres | n1.n2 | N/A | N/A | R | N/A | Person Observation Height In Metres |
| Person Weight (Kgs) | Weight of the patient in kgs | n3.n3 | N/A | N/A | R | N/A | Person Observation (Weight) |
| Body Mass Index (BMI) | Estimate of a patients BMI - autocalculated if height and weight provided - at diagnosis | n2.n1 | N/A | N/A | D | N/A | Body Mass Index |
| Date Observation Measured | Date the patients observation weight or height was measured. Must be completed if Person Height (Metres) or Person Weight (Kgs) recorded | ccyymmdd | N/A | N/A | R | N/A | Date Observation Measured |
| **Clinical Nurse Specialist & Risk Factor Assessment - Core (One Occurrence Of This Group Per Tumour)** | | | | | | | |
| Clinical Nurse Specialist Indication Code | Record if and when the patient saw an appropriate site specific clinical nurse specialist | Code List | Y1 | Yes - CNS present when patient given diagnosis | R | N/A | Clinical Nurse Specialist Indication Code |
| | | | Y3 | Yes - CNS not present when patient given diagnosis but saw the patient during same consultant clinic session | | | |
| | | | Y4 | Yes - CNS not present during consultant clinic session when patient given diagnosis but saw patient at another time | | | |
| | | | Y5 | Yes - CNS not present when patient given diagnosis but the patient was seen by a trained member of the CNS team | | | |
| | | | Y6 | Yes - CNS not present when patient given diagnosis but the patient was seen by a trained member of the MDT | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | NI | No - Patient not seen at all by CNS but CNS informed of diagnosis | | | |
| | | | NN | No - Patient not seen at all by CNS and CNS not informed of diagnosis | | | |
| | | | 99 | Not known/Not recorded | | | |
| Date Clinical Nurse Specialist Seen | Date of contact with the cancer specialist nurse | ccyymmdd | N/A | N/A | R | N/A | N/A |
| Tobacco Smoking Status | Specify the current tobacco smoking status of the patient. | Code List | 1 | Current smoker | R | N/A | Tobacco Smoking Status |
| | | | 2 | Ex smoker | | | |
| | | | 4 | Never smoked | | | |
| | | | 9 | Unknown | | | |
| Tobacco Smoking Cessation | Was treatment for tobacco addiction/cessation given to the patient | Code List | 1 | Patient treated | R | N/A | Tobacco Smoking Cessation |
| | | | 2 | Patient not treated | | | |
| | | | 3 | Patient offered treatment but declined | | | |
| | | | 8 | Not applicable (Not current tobacco user) | | | |
| | | | 9 | Not Known (Not recorded) | | | |
| History Of Alcohol (Current) | Specify the current history of alcohol consumption for the patient (≤3 months) from date of diagnosis.<br>These are based on the UK Chief Medical Officer Alcohol Guideline Review (Jan 2016) | Code List | 1 | Heavy (>14 Units per week) | R | N/A | History Of Alcohol (Current) |
| | | | 2 | Light (≤14 Units per week) | | | |
| | | | 3 | None in this period | | | |
| | | | Z | Not Stated (PERSON asked but declined to provide a response) | | | |
| | | | 9 | Not Known (Not recorded) | | | |
| History Of Alcohol (Past) | Specify the past history of alcohol consumption for the patient (>3 months) from date of diagnosis.<br>These are based on the UK Chief Medical Officer Alcohol Guideline Review (Jan 2016) | Code List | 1 | Heavy (>14 Units per week) | R | N/A | History Of Alcohol (Past) |
| | | | 2 | Light (≤14 Units per week) | | | |
| | | | 3 | None ever | | | |
| | | | Z | Not Stated (PERSON asked but declined to provide a response) | | | |
| | | | 9 | Not Known (Not recorded) | | | |
| Diabetes Mellitus Indicator | Does the patient have a diagnosis of diabetes? | Code List | Y | Yes | R | N/A | Diabetes Mellitus Indicator |
| | | | N | No | | | |
| | | | 9 | Not Known | | | |
| Diabetes Mellitus Type | If Diabetes Mellitus Indicator = Y, specify the type of diabetes the patient has | Code List | 1 | Type 1 | R | N/A | N/A |
| | | | 2 | Type 2 | | | |
| | | | 9 | Not Known | | | |
| Menopausal Status | Record the menopausal status (at the point of diagnosis) of female patients only | Code List | 1 | Premenopausal | R | N/A | Menopausal Status |
| | | | 2 | Perimenopausal | | | |
| | | | 3 | Postmenopausal | | | |
| | | | 8 | Not Applicable | | | |
| | | | 9 | Not Known | | | |
| Physical Activity (Current) | Specify the current physical activity level | Code List | 1 | Achieves guidance level of physical activity | R | N/A | Physical Activity (Current) |
| | | | 2 | Does not achieve guidance level of physical activity | | | |
| | | | Z | Not Stated (Person asked but declined to provide a response) | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 9 | Not Known (Not recorded) | | | |
| **Holistic Needs Assessment (Multiples Can Be Added Throughout Pathway)** | | | | | | | |
| Holistic Needs Assessment Status | An indication of whether a patient has been offered a HNA for completion<br>Picklist item 05 - 'Offered but patient is unable to complete' could relate to patients who have cognitive difficulties, picklist item 04 - 'Not Offered' covers patients who would not normally be expected to undergo HNA due to being on a clinical pathway that deliberately does not include it (eg, some skin cancer patients or because the patient has been referred on to another provider who will offer the HNA) | Code List | 01<br>02<br>03<br>04<br>05 | Offered and Undecided<br>Offered and Declined<br>Offered and Accepted<br>Not Offered<br>Offered but patient unable to complete (eg, due to cognitive difficulties) | R | N/A | Assessment Offered |
| Holistic Needs Assessment Completed Date | The date a Holistic Needs Assessment is completed.<br>Every HNA should be recorded but only HNAs carried out in Secondary care setting | ccyymmdd | N/A | N/A | R | N/A | Assessment Completed Date |
| Holistic Needs Assessment Point Of Pathway | The point of the pathway where a Holistic Needs Assessment is completed. | Code List | 91<br>01<br>02<br>03<br>04<br>05<br>06<br>07<br>97 | Point of Suspicion<br>Initial cancer diagnosis<br>Start of treatment<br>During treatment<br>End of treatment<br>Diagnosis of recurrence<br>Transition to palliative care<br>Prehabilitation<br>Other | R | N/A | Assessment Point Of Pathway |
| Staff Role Carrying Out The Holistic Needs Assessment | Record the role of the individual carrying out the Holistic Needs Assessment (secondary care only). The staff role is needed in order to support workforce planning of who and how HNA and PCSP activities are being carried out.<br>HNAs are carried out by any health or social care professional and also by support workers/care navigators, volunteers or by the person themselves from home. Also note that Cancer Information & Support Co-ordinators are roles specifically to Wales and often each Health Board has one of these Co-ordinators who assist in the completion of HNAs therefore this role has been added to picklist item 04. | Code List | 01<br>02<br>03<br>04<br>05<br>06<br>08<br>09 | Cancer Nurse Specialist<br>Other Nurse<br>Allied Health Professional<br>Support worker/Care Navigator/Cancer Information & Support Co-ordinator<br>Psychologist or other mental health professional<br>Consultant/Medical Team<br>Other<br>Not Known | R | N/A | Staff Role Carrying Out The Assessment |
| **Holistic Needs Assessment Care Plan (This Is Called PCSP In England) (Multiples Can Be Added Throughout Pathway)** | | | | | | | |
| Care Planning Offered | An indication of whether a patient has been offered a Holistic Needs Assessment (HNA) Care Plan | Code List | 01<br>02<br>03<br>04<br>05<br>06 | Offered and Undecided<br>Offered and Declined<br>Offered and Accepted<br>Not Offered<br>Offered but patient unable to complete<br>Not required (no concerns from HNA) | R | N/A | Care Planning Offered |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Care Planning Completed Date | The date Holistic Needs Assessment (HNA) Care Planning is completed | ccyymmdd | N/A | N/A | R | N/A | Care Planning Completed Date |
| Point Of Pathway | The point of the pathway where Holistic Needs Assessment (HNA) Care Planning is completed | Code List | 91 | Point of Suspicion | R | N/A | Point Of Pathway |
| | | | 01 | Initial cancer diagnosis | | | |
| | | | 02 | Start of treatment | | | |
| | | | 03 | During treatment | | | |
| | | | 04 | End of treatment | | | |
| | | | 05 | Diagnosis of recurrence | | | |
| | | | 06 | Transition to palliative care | | | |
| | | | 07 | Prehabilitation | | | |
| | | | 97 | Other | | | |
| Staff Role Carrying Out The Planning | Record the role of the individual carrying out the Holistic Needs Assessment (HNA) Care Plan (secndary care only) | Code List | 01 | Cancer Nurse Specialist | R | N/A | Staff Role Carrying Out The Planning |
| | | | 02 | Other Nurse | | | |
| | | | 03 | Allied Health Professional | | | |
| | | | 04 | Support worker/Care Navigator/Cancer Information & Support Co-ordinator | | | |
| | | | 05 | Psychologist or other mental health professional | | | |
| | | | 06 | Consultant/Medical Team | | | |
| | | | 08 | Other | | | |
| | | | 09 | Not Known | | | |
| **Keyworker (Mulitples Can Be Added Throughout Pathway)** | | | | | | | |
| Keyworker Allocated | Has a keyworker been allocated to the patient | Code List | Y | Yes | R | N/A | N/A |
| | | | N | No | | | |
| Date Keyworker Allocated | Date when Key worker was allocated | ccyymmdd | | | R | N/A | N/A |
| Keyworker Allocation Point In Pathway | The point in the patient pathway when a keyworker was allocated | Code List | 91 | Point of Suspicion | R | N/A | N/A |
| | | | 01 | Initial cancer diagnosis | | | |
| | | | 02 | Start of treatment | | | |
| | | | 03 | During treatment | | | |
| | | | 04 | End of treatment | | | |
| | | | 05 | Diagnosis of recurrence | | | |
| | | | 06 | Transition to palliative care | | | |
| | | | 07 | Prehabilitation | | | |
| | | | 98 | Other | | | |
| **Rehabilitation (Multiples Can Be Added Through Pathway)** | | | | | | | |
| Rehabilitation Status | An indication of whether a patient has been offered a referral to the rehabilitation services | Code List | 01 | Offered and Accepted - Referral made | R | N/A | N/A |
| | | | 02 | Offered and Declined - No referral made | | | |
| | | | 03 | Not Required | | | |
| | | | 04 | Rehab service unavailable for this cancer/tumour site | | | |
| Rehabilitation Referral Date | The date of referral to the rehabilitation service | ccyymmdd | N/A | N/A | R | N/A | N/A |
| Rehabilitation - Point In Pathway | The point in the patient pathway when rehabilitation services was allocated | Code List | 91 | Point of Suspicion | R | N/A | N/A |
| | | | 01 | Initial cancer diagnosis | | | |
| | | | 02 | Start of treatment | | | |
| | | | 03 | During treatment | | | |
| | | | 04 | End of treatment | | | |
| | | | 05 | Diagnosis of recurrence | | | |
| | | | 06 | Transition to palliative care | | | |
| | | | 07 | Prehabilitation | | | |
| | | | 08 | Late onset - consequence of cancer | | | |
| | | | 98 | Other | | | |
| Rehabilitation Intent | Specify the intention for the cancer rehabilitation referral | Code List | 01 | Preventative Rehabilitaton/Prehabilitation | R | N/A | N/A |
| | | | 02 | Restorative Rehabilitation | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 03 | No Intervention Required | | | |
| | | | 04 | Supportive Rehabilitation | | | |
| | | | 05 | Palliative Rehabilitation | | | |
| | | | 06 | Comfort Measures Only | | | |
| | | | 98 | Other | | | |
| **MDT (Multiples Occurences Required Per Tumour)** | | | | | | | |
| MDT Meeting Discussion Indicator | Record if the patient was not discussed within an MDT meeting | Code List | 4 | Not discussed at all | M | N/A | Multidisciplinary Team Meeting Discussion |
| | | | 9 | Not Known | | | |
| MDT Meeting Discussion Type | Record if the patient was discussed with a Multidisciplinary team meeting (MDT) | Code List | 1 | Discussed within a Health Board MDT | M | N/A | Multidisciplinary Team Meeting Discussion Type |
| | | | 2 | Patient on predefined Standard of Care reviewed outside the MDT | | | |
| | | | 3 | Discussed at MDT in another Health Board | | | |
| MDT Meeting Date | Record the date of each Multidisciplinary Team meeting where the patient was discussed. (This will include but will not be limited to the date when a treatment planning decision was made which is covered specifically under MDT date discussed treatment plan (COSD data label MDT Discussion Date (Cancer)). If a patient is on a Predefined Standard of Care reviewed outside MDT, use the date of discussion where this was minuted | ccyymmdd | N/A | N/A | M | N/A | Multidisciplinary Team Meeting Date |
| Organisation Site Identifier MDT Meeting | NHS Wales Data Dictionary<br><br>The Organisation Site where the Multidisciplinary Team Meeting took place.<br>Note: For joint MDT meetings a new MDT section must be recorded for each meeting | NHS Wales Data Dictionary | N/A | N/A | M | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier Of Multidisciplinary Team Meeting |
| MDT Meeting Identifier (MDT Meeting Type) | Record the relevant meeting identifier<br><br>All MDTs in Wales have been allocated one of the codes listed | Code List | 0100 | Breast | M | N/A | Multidisciplinary Team Meeting Type |
| | | | 0101 | Breast MDT | | | |
| | | | 0200 | Brain/Central Nervous System | | | |
| | | | 0201 | Brain Central Nervous System (CNS)/Neuroscience MDT | | | |
| | | | 0202 | Rehabilitation and Non-Surgical (Network) MDT | | | |
| | | | 0203 | Pituitary MDT | | | |
| | | | 0204 | Skull base MDT | | | |
| | | | 0205 | Spinal cord MDT | | | |
| | | | 0206 | Low grade glioma MDT | | | |
| | | | 0207 | Metastasis to brain MDT | | | |
| | | | 0208 | Stereotactic Radiosurgery (SRS) MDT | | | |
| | | | 0209 | Genetic subtypes MDT | | | |
| | | | 0300 | Colorectal | | | |
| | | | 0301 | Colorectal MDT | | | |
| | | | 0302 | Anal MDT | | | |
| | | | 0400 | CTYA | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 0401 | Paediatric Combined Diagnostic and Treatment MDT | | | |
| | | | 0402 | Paediatric Haematology only MDT | | | |
| | | | 0403 | Paediatric non-CNS solid tumours only MDT | | | |
| | | | 0404 | Paediatric CNS malignancy only MDT | | | |
| | | | 0405 | Paediatric Late Effects MDT | | | |
| | | | 0406 | Paediatric (POSCU) MDT | | | |
| | | | 0407 | Teenage and Young Adult MDT | | | |
| | | | 0408 | Teenage and Young Adult Late Effects MDT | | | |
| | | | 0500 | Gynaecology | | | |
| | | | 0501 | Gynaecology local MDT | | | |
| | | | 0502 | Gynaecology Specialist MDT | | | |
| | | | 0600 | Haematology | | | |
| | | | 0601 | Haematology MDT | | | |
| | | | 0602 | Lymphoma MDT | | | |
| | | | 0603 | Plasma Cell MDT | | | |
| | | | 0604 | Myeloid MDT | | | |
| | | | 0605 | Bone marrow transplant MDT | | | |
| | | | 0700 | Head and Neck (including Thyroid) | | | |
| | | | 0701 | Upper Aerodigestive Tract (UAT) only MDT | | | |
| | | | 0702 | Upper Aerodigestive Tract (UAT) and Thyroid MDT | | | |
| | | | 0703 | Thyroid Only MDT | | | |
| | | | 0800 | Lung | | | |
| | | | 0801 | Lung MDT | | | |
| | | | 0802 | Mesothelioma Specialist MDT | | | |
| | | | 0900 | Sarcoma | | | |
| | | | 0901 | Bone and Soft tissue MDT | | | |
| | | | 0902 | Bone MDT | | | |
| | | | 0903 | Soft tissue MDT | | | |
| | | | 1000 | Skin | | | |
| | | | 1001 | Skin Local MDT | | | |
| | | | 1002 | Skin Specialist MDT | | | |
| | | | 1003 | Melanoma MDT | | | |
| | | | 1004 | Supra T-Cell Lymphoma MDT | | | |
| | | | 1100 | Upper GI | | | |
| | | | 1101 | Upper GI Local MDT | | | |
| | | | 1102 | Oesophago-Gastric Specialist MDT | | | |
| | | | 1103 | Hepatobiliary and Pancreatic (HPB) Specialist MDT | | | |
| | | | 1104 | Pancreatic/Biliary (PB) Specialist MDT | | | |
| | | | 1105 | Hepatic Specialist MDT | | | |
| | | | 1200 | Urology | | | |
| | | | 1201 | Urology Local MDT | | | |
| | | | 1202 | Urology Specialist MDT | | | |
| | | | 1203 | Testicular Supranetwork MDT | | | |
| | | | 1204 | Penile Supranetwork MDT | | | |
| | | | 1300 | Other | | | |
| | | | 1301 | CUP MDT | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 1302 | Neuroendocrine MDT | | | |
| | | | 1303 | Palliative Care MDT | | | |
| | | | 1304 | Enhanced Supportive Care MDT | | | |
| MDT Meeting Type Comment | To provide additional information on the MDT Meeting type, if not covered in the list provided (see MDT Meeting Identifier (MDT Meeting Type)). | AN60 | N/A | N/A | O | N/A | Multidisciplinary Meeting Type Comment |
| **Cancer Care Plan (One Care Plan Per Tumour)** | | | | | | | |
| MDT Discussion Date | The date on which the patients cancer care plan was discussed at a MDT meeting and the treatment planning decision was made | ccyymmdd | N/A | N/A | R | N/A | Multidisciplinary Team Discussion Date (Cancer) |
| Professional Registration Issuer Code - Consultant (MDT Lead) | A code which identifies the professional registration body | Code List | 02 | General Dental Council | M | N/A | Professional Registration Issuer Code - Consultant (Multidisciplinary Team Lead) |
| | | | 03 | General Medical Council | | | |
| | | | 04 | GeneralOptical Council | | | |
| | | | 08 | Health and Care Professions Council | | | |
| | | | 09 | Nursing and Midwifery Council | | | |
| Professional Registration Entry Identifier - Consultant (MDT Lead) | NHS Wales Data Dictionary<br><br>The registration identifier allocated by an Organisation for the Consultant or health care professional who is the multidisciplinary team (MDT) lead responsible for the management and decisions made at the MDT | NHS Wales Data Dictionary | N/A | N/A | M | Consultant Code | Professional Registration Entry Identifier - Consultant (Multidisciplinary Team Lead) |
| Cancer Plan Intent | This is required to be recorded when the care plan is agreed - for Haematology it is understood that for the majority of cases this data item would be Z - Non Curative | Code List | C | Curative | R | N/A | Cancer Care Plan Intent |
| | | | Z | Non Curative | | | |
| | | | X | No Active Treatment | | | |
| | | | 9 | Not known | | | |
| Planned Cancer Treatment Type | This is the clinically proposed treatment, usually agreed at the MDT meeting and may not be the same as the treatment which is subsequently agreed with the patient.<br>More than one planned treatment type may be recorded and these may either be alternative or sequential treatments. This should only be recorded when the first treatment planning decision is made. | Code List | 01 | Surgery | R | N/A | Planned Cancer Treatment Type |
| | | | 02 | Teletherapy | | | |
| | | | 03 | Chemotherapy | | | |
| | | | 04 | Hormone Therapy | | | |
| | | | 05 | Specialist palliative care | | | |
| | | | 06 | Brachytherapy | | | |
| | | | 07 | Biological Therapy | | | |
| | | | 10 | Other Active Treatment | | | |
| | | | 11 | No active treatment | | | |
| | | | 12 | Bisphosphonates | | | |
| | | | 13 | Anti Cancer Drug - Other | | | |
| | | | 14 | Radiotherapy - Other | | | |
| | | | 99 | Not known | | | |
| Reason For No Specific Anti Cancer Treatment | The reason why the patient did not receive any specific anti-cancer treatment.<br>The permissible value 'Unfit: poor performance status' is dependent up on the output value for the 'Final pre treatment performance status agreed by the MDT' | Code List | 01 | Patient declined treatment | R | N/A | No Cancer Treatment Reason |
| | | | 02 | Unfit: poor performance status | | | |
| | | | 03 | Unfit: significant co-morbidity | | | |
| | | | 04 | Unfit: Advanced stage cancer | | | |
| | | | 05 | Unknown primary site | | | |
| | | | 06 | Died before treatment | | | |
| | | | 07 | No anti-cancer treatment available | | | |
| | | | 08 | Other | | | |
| | | | 10 | Watchful waiting | | | |
| | | | 99 | Not known | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Adult Comorbidity Evaluation (Ace 27) Score | The overall comorbidity score is defined according to the highest ranked single ailment, except in the case where two or more Grade 2 ailments occur in different organ systems. In this situation the overall comorbidity score should be designated Grade 3.<br>The nature of any relevant co-morbidity, to be recorded at the MDT prior to the beginning of treatment<br>(N/A for skin diagnoses) | Code List | 0 | None | O | N/A | Adult Comorbidity Evaluation - 27 Score |
| | | | 1 | Mild | | | |
| | | | 2 | Moderate | | | |
| | | | 3 | Severe | | | |
| | | | 9 | Not Known | | | |
| **Molecular & Biomarkers - Germline Testing For Cancer Predisposition (Multiple Occurences Can Be Added)** | | | | | | | |
| Germline Genetic Testing Offered (Offer Status) | An indication of whether a patient has been offered a germline genetic test | Code List | 01 | Offered and Undecided | R | N/A | Germline Genetic Testing Offered |
| | | | 02 | Offered and Declined | | | |
| | | | 03 | Offered and Accepted | | | |
| | | | 04 | Not Offered | | | |
| Type Of Germline Genetic Test Offered | Record the germline/genetic test offered to the patient. More than one can be selected | Code List | 01 | Hereditary Breast and Ovarian Cancer (BRCA1/BRCA2/NGS Panel) | R | N/A | Germline Genetic Test Offered |
| | | | 02 | Lynch Syndrome/HNPCC (MLH1/MSH2/MSH6/PMS2/EPCAM/NGS Panel) | | | |
| | | | 03 | Myeoid Neoplasms (CEBPA/DDX41/RUNX1/ANKRD26/ETV6/GATA2) | | | |
| | | | 97 | Other | | | |
| Other Type Of Germline Genetic Test Offered | Record if 98 Other is selected for above data item. Specify the Gene or Syndrome that was offered | an30 | | | R | N/A | Other Germline Genetic Test Offered |
| Germline Analysis Offered Date | Record the date on which the germline genetic test was offered | ccyymmdd | | | R | N/A | Germline Analysis Offered Date |
| Organistation Identifier Of Reporting Regional Genetics Laboratory | NHS Wales Data Dictionary<br><br>The organisation where the reporting lab is based | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Code | Organistation Identifier Of Reporting Regional Genetics Laboratory |
| Referral To Clinical Geneticist Offered | Indicate whether the patient has been offered a referral to a Regional Clinical Genetics Service | Code List | 01 | Offered and Undecided | R | N/A | Referral To Clinical Geneticist Offered |
| | | | 02 | Offered and Declined | | | |
| | | | 03 | Offered and Accepted | | | |
| | | | 04 | Not Offered | | | |
| **Molecular & Biomarkers - Somatic Testing For Targeted Therapy And Personalised Medicine** | | | | | | | |
| Gene Or Stratification Biomarker Type Analysed | Record the specific Gene or Stratification Biomarker analysed for the patient, regardless of test outcome.<br><br>More than one of these can be selected | Code List | 01 | ALK Fusions | R | N/A | Gene Or Stratification Biomarker Analysed |
| | | | 02 | BRC-ABL Fusion | | | |
| | | | 03 | BRAF Mutation | | | |
| | | | 04 | BRCA1 Mutation | | | |
| | | | 05 | BRCA2 Mutation | | | |
| | | | 06 | EGFR Mutation | | | |
| | | | 07 | ERBB2 (HER2/neu) Amplification/Overexpression | | | |
| | | | 08 | JAK2 | | | |
| | | | 09 | KIT (CD117) Mutation | | | |
| | | | 10 | KRAS Mutation | | | |
| | | | 11 | Microsatellite Instability (MSI)/Mismatch Repair Analysis | | | |
| | | | 12 | NGS Panel (specify in Other below) | | | |
| | | | 13 | NRAS Mutation | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 14 | Oncotype DX Gene Expression Test | | | |
| | | | 15 | PDGFRA Mutation | | | |
| | | | 16 | PIK3CA Mutation | | | |
| | | | 17 | RET Fusions | | | |
| | | | 18 | ROS Fusions | | | |
| | | | 19 | PD-L1 | | | |
| | | | 97 | Other | | | |
| Other Gene Or Stratification Biomarker Analysed | Record if 97 Other, or 12 NGS Panel is selected for above data item. Specify the Gene or Stratification that was analysed | an30 | N/A | N/A | R | N/A | Other Gene Or Stratification Biomarker Analysed |
| Date Gene Or Stratification Biomarker Reported | Record the date the Gene or Stratification Biomarker was reported | ccyymmdd | N/A | N/A | M | N/A | Date Gene Or Stratification Biomarker Reported |
| Organistation Identifier Of Reporting Laboratory | NHS Wales Data Dictionary<br><br>The organisation where the reporting lab is based | NHS Wales Data Dictionary | N/A | N/A | M | Organisation Code - LHB/Trust Code | Organistation Identifier Of Reporting Laboratory |
| **Clinical Trials (Multiple Occurences Can Be Added)** | | | | | | | |
| Patient Trial Status | | Code List | 01 | Patient approached, consented to and entered clinical trial | R | N/A | Patient Trial Status (Cancer) |
| | | | 02 | Patient approached, but declined clinical trial | | | |
| | | | 03 | Patient approached and consented, but failed screening | | | |
| | | | 09 | Not Known (Not Recorded) | | | |
| | | | 99 | No Trial available | | | |
| Clinical Trial Decision Date | This is a mandatory date for 01 & 02 above only and links each Clinical Trial (if more than one entered). If there are more than one entered on the same day, record the first Clinical Trial only | ccyymmdd | N/A | N/A | R | N/A | Clinical Trial Decision Date (Patient) |
| Date Clincial Trial Started | This will allow multiple trials to be recorded if applicable. Each trial has to be part of the primary diagnosis treatment pathway. | ccyymmdd | N/A | n/A | R | N/A | Date Clinical Trial Started |
| Cancer Clinical Trial Treatment Type | Where a trial covers more than one type of treatment, eg chemotherapy compared with radiotherapy, then the option for "combined treatment" should be selected. Where the trial covers a treatment type not specified eg, biological therapies 'Other' should be selected from the list. | Code List | 01 | Surgery | R | N/A | Cancer Clinical Trial Treatment Type |
| | | | 02 | Chemotherapy | | | |
| | | | 03 | Hormone therapy | | | |
| | | | 04 | Immunotherapy | | | |
| | | | 05 | Radiotherapy | | | |
| | | | 06 | Combination treatment | | | |
| | | | 07 | Observational study | | | |
| | | | 08 | Biological therapy (Welsh specific) | | | |
| | | | 09 | Cellular therapy (Welsh specific) | | | |
| | | | 98 | Other | | | |
| Study Identification Number | Record Clinical Trial Study Identification Number | an11 | N/A | N/A | R | N/A | N/A |
| IRAS Number | Record Integrated Research Application System (IRAS) Number | an6 | N/A | N/A | R | N/A | N/A |
| Clinical Trial Name/Acronym | Record the Clinical Trial Name or Acronym given | an30 | N/A | N/A | R | N/A | N/A |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| **Staging**<br>**This Data Should Be Recorded At The Time That The First Cancer Care Plan Is Agreed** | | | | | | | |
| T Stage (Final Pre Treatment) | A code which classifies the size and extent of the primary tumour before treatment.<br><br>The T (tumour) part of the TNM (Tumour, Nodes, Metastasis) classification to describe the clinical stage of the tumour prior to treatment. Clinical classification (Pre-treatment clinical classification), designated cTNM. This is based on evidence acquired before treatment. Such evidence arises from physical examination, imaging, endoscopy, biopsy, surgical exploration and other relevant examinations. If the malignancy is discoved only at autopsy, or via a death certificate, then no pre-treatment TNM stage will be recorded. | an15 | N/A | N/A | R | N/A | T Category (Final Pretreatment) |
| N Stage (Final Pre Treatment) | A code which classifies the absence or presence and extent of regional lymph node metastases before treatment<br><br>The N (tumour) part of the TNM (Tumour, Nodes, Metastasis) classification to describe the clinical stage of the tumour prior to treatment. Clinical classification (Pre-treatment clinical classification), designated cTNM. This is based on evidence acquired before treatment. Such evidence arises from physical examination, imaging, endoscopy, biopsy, surgical exploration and other relevant examinations. If the malignancy is discoved only at autopsy, or via a death certificate, then no pre-treatment TNM stage will be recorded. | an15 | N/A | N/A | R | N/A | N Category (Final Pretreatment) |
| M Stage (Final Pre Treatment) | A code which classifies the absence or presence of distant metastases pre-treatment<br><br>The M (tumour) part of the TNM (Tumour, Nodes, Metastasis) classification to describe the clinical stage of the tumour prior to treatment. Clinical classification (Pre-treatment clinical classification), designated cTNM. This is based on evidence acquired before treatment. Such evidence arises from physical examination, imaging, endoscopy, biopsy, surgical exploration and other relevant examinations. If the malignancy is discoved only at autopsy, or via a death certificate, then no pre-treatment TNM stage will be recorded. | an15 | N/A | N/A | R | N/A | M Category (Final Pretreatment) |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| TNM Stage Grouping (Final Pre Treatment) | To record the overall clinical TNM Stage grouping of the tumour, derived from each T, N, M component prior to treatment. This classification is based on all the evidence available to the clinician with responsibility for assessing the patient and for the patients treatment plan. The overall pre-treatment TNM stage grouping indicates the tumour stage at the time the treatment plan was devised | an15 | N/A | N/A | R | N/A | TNM Stage Grouping (Final Pretreatment) |
| Stage Date (Final Pre Treatment Stage) | The date of the TNM Staging & Stage Grouping (final pre treatment) | ccyymmdd | N/A | N/A | R | N/A | Stage Date (Final Pre Treatment Stage) |
| Organisation Site Identifier (Reported Pre Treatment TNM Stage) | NHS Wales Data Dictionary<br><br>The Organisation Site where the diagnosing MDT agreed the final pre treatment TNM stage | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Reported Pretreatment TNM Stage) |
| T Stage (Integrated Stage) | A code which classifies the size and extent of the primary tumour after treatment and/or after all available evidence has been collected | an15 | N/A | N/A | R | N/A | T Category (Integrated Stage) |
| N Stage (Integrated Stage) | A code which classifies the absence or presence and extent of regional lymph node metastases after treatment and/or after all available evidence has been collected | an15 | N/A | N/A | R | N/A | N Category (Integrated Stage) |
| M Stage (Integrated Stage) | A code which classifies the absence or presence of distant metastases after treatment and/or after all available evidence has been collected | an15 | N/A | N/A | R | N/A | M Category (Integrated Stage) |
| TNM Stage Grouping (Integrated Stage) | To record the overall TNM stage grouping for the tumour derived from each T, N, and M component after treatment.<br><br>The overall integrated TNM stage grouping indicates the tumour stage after treatment and/or after all available evidence has been collected<br><br>This classification is based on all the evidence available to the clinician with responsibility for assessing the patient. It will be determined on the basis of all the clinical, imaging and pathological data available following the first surgical procedure ie, this is the integration of the pathological staging with the clinical staging. | an15 | N/A | N/A | R | N/A | TNM Stage Grouping (Integrated) |
| Stage Date (Integrated Stage) | The date of the TNM Staging & Stage Grouping (Integrated) | ccyymmdd | N/A | N/A | R | N/A | Stage Date (Integrated Stage) |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Organisation Site Identifier (Integrated Stage) | NHS Wales Data Dictionary<br><br>The Organisation Site where the treating MDT post surgery (where surgery was the first treatment) agreed the Integrated TNM stage | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Reported Integrated TNM Stage) |
| TNM Coding Edition | The TNM coding edition used | Code List | 1 | UICC (Union for International Cancer Control) | M | N/A | TNM Coding Edition |
| | | | 2 | AJCC (Americal Joint Committee on Cancer) | | | |
| | | | 3 | ENETS (European Neuroendocrine Tumour Society) | | | |
| TNM Version Number | The AJCC, UICC or ENETS version number used for Tumour, Node and Metastasis (TNM) Staging for cancer diagnosis | an2 | N/A | N/A | M | N/A | TNM Version Number (Staging) |
| **Site Specific Staging<br>(These Fields Are Only Required Where There Is A Site Specific Stage Recorded For A Patient And Will Not Be Applicable To Every Cancer - These Data Items Must Be Linked With The Site Specific Stage Fields Within The Separate Site Specific Datasets)** | | | | | | | |
| Organisation Site Identifier (Site Specific Stage) | NHS Wales Data Dictionary<br><br>The Organisation Site which carried out the site specific stage | NHS Wales Data Dictionary | N/A | N/A | M | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Site Specific Stage) |
| Stage Date (Site Specific Stage) | The date of the sample/MDT which provided a positive stage outcome | ccyymmdd | N/A | N/A | M | N/A | Stage Date (Site Specific Stage) |
| **Treatments - New Section - Core Treatment Summary - To Record Cancer Treatment Details (Multiple Occurences Of This Group Can Be Added)** | | | | | | | |
| Cancer Treatment Event Type | The treatment event reached during a cancer patient pathway | Code List | 01 | First Definitive Treatment for a New Primary Cancer | R | N/A | N/A |
| | | | 02 | Second or subsequent treatment for a New Primary Cancer | | | |
| | | | 03 | Treatment for a local recurrence of a Primary Cancer | | | |
| | | | 04 | Treatment for a regional recurrence of cancer | | | |
| | | | 05 | Treatment for a distant recurrence of cancer (metastatic disease) | | | |
| | | | 06 | Treatment for multiple recurrence of cancer (local and/or regional and/or distant) | | | |
| | | | 07 | First Treatment for Metastatic disease following an Unknown Primary Cancer | | | |
| | | | 08 | Second or subsequent treatment for Metastatic disease following an Unknown Primary Cancer | | | |
| | | | 09 | Treatment for relapse of primary cancer (second or subsequent) | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 10 | Treatment for progression of primary cancer (second or subsequent) | | | |
| | | | 11 | Treatment for transformation of primary cancer type (second or subsequent) | | | |
| Adjunctive Therapy | Adjunctive therapy is therapy given in addition to the main therapy to maximize its effectiveness.<br><br>This field allows for the accurate recording of these to determine if adjunctive therapy was adjuvant (after the main therapy) or Neo-adjuvant (before the main therapy) or not applicable | Code List | 1 | Adjuvant | R | N/A | Adjunctive Therapy |
| | | | 2 | Neo-adjuvant | | | |
| | | | 3 | Not Applicable (Primary Treatment) | | | |
| | | | 9 | Not Known | | | |
| Cancer Treatment Intent | The original intention of the cancer treatment intent being provided<br><br>SACT and RTDS should use these fields<br><br>* Disease modification is Drug specific<br>** Diagnositic and Staging are Surgery specific | Code List | 01 | Curative | R | N/A | Cancer Treatment Intent |
| | | | 02 | Palliative | | | |
| | | | 03 | Disease Modification * | | | |
| | | | 04 | Diagnostic ** | | | |
| | | | 05 | Staging ** | | | |
| | | | 06 | Uncertain of Treatment Intent | | | |
| | | | 09 | Not Known | | | |
| | | | 98 | Other | | | |
| Treatment Start Date (Cancer) | This is the start date of the first, second or subsequent cancer treatment given to a patient who is receiving care for a cancer condition | ccyymmdd | N/A | N/A | M | N/A | Treatment Start Date (Cancer) |
| Cancer Treatment Modality | The type of treatment or care which was delivered in a Cancer Treatment Period | Code List | 01 | Surgery | M | N/A | Cancer Treatment Modality (Registration) |
| | | | 02 | Anti-Cancer Drug Regimen (Cytotoxic Chemotherapy) | | | |
| | | | 03 | Anti-Cancer Drug Regimen (Hormone Therapy) | | | |
| | | | 04 | Chemoradiotherapy | | | |
| | | | 05 | Teletherapy (Beam Radiation excluding Proton therapy) | | | |
| | | | 06 | Brachytherapy | | | |
| | | | 07 | Specialist Palliative Care | | | |
| | | | 08 | Active Monitoring (excluding Non Specialist palliative care) | | | |
| | | | 09 | Non Specialist Paliative Care (excluding Active monitoring) | | | |
| | | | 10 | Radiofrequency Ablation (RFA) | | | |
| | | | 11 | High Intensity Focused Ultrasound (HIFU) | | | |
| | | | 12 | Cryotherapy | | | |
| | | | 13 | Proton Therapy | | | |
| | | | 14 | Anti-Cancer Drug Regimen (Other) | | | |
| | | | 15 | Anti-Cancer Drug Regimen (Immunotherapy) | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 16 | Light Therapy (including Photodynamic Therapy and Psoralen and Ultraviolet A Therapy (PUVA Therapy) | | | |
| | | | 17 | Hyperbaric Oxygen Therapy | | | |
| | | | 19 | Radioisotope Therapy (including Radioiodine) | | | |
| | | | 20 | Laser Treatment (including Argon Beam Therapy) | | | |
| | | | 21 | Biological Therapies (excluding Immunotherapy) | | | |
| | | | 22 | Radiosurgery | | | |
| | | | 97 | Other Treatment (not listed) | | | |
| | | | 98 | All Treatment Declined | | | |
| Organisation Site Identifier (Of Provider Cancer Treatment Start Date) | NHS Wales Data Dictionary<br><br>The Organisation Site where the treatment start date for cancer is recorded | NHS Wales Data Dictionary | N/A | N/A | M | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Of Provider Cancer Treatment Start Date) |
| Professional Registration Issuer Code - Consultant (Treatment) | A code which identifies the professional registration body | Code List | 02 | General Dental Council | M | N/A | Professional Registration Issuer Code - Consultant (Treatment) |
| | | | 03 | General Medical Council | | | |
| | | | 04 | General Optical Council | | | |
| | | | 08 | Health and Care Professions Council | | | |
| | | | 09 | Nursing and Midwifery Council | | | |
| Professional Registration Entry Identifier - Consultant (Treatment) | NHS Wales Data Dictionary<br><br>The consultant or health care professional responsible for the treatment of the patient | NHS Wales Data Dictionary | N/A | N/A | M | Consultant Code | Professional Registration Entry Identifier - Consultant (Treatment) |
| End Of Treatment Summary Date | The date of completion of End of Treatment Summary at the end of acute (secondary care) treatment/s which was sent to the patient and/or the GP (multiple repeating data item) | ccyymmdd | N/A | N/A | O | N/A | End Of Treatment Summary Date |
| Discharge Date | NHS Wales Data Dictionary | ccyymmdd | N/A | N/A | R | Discharge Date | Discharge Date (Hospital Provider Spell) |
| Discharge Destination | NHS Wales Data Dictionary | NHS Wales Data Dictionary | NHS Wales Data Dictionary | NHS Wales Data Dictionary | R | Discharge Destination | Discharge Destination (Hospital Provider Spell) |
| **Treatment - Surgery To Record The Surgery Details(Multiple Occurences Per Tumour)** | | | | | | | |
| Procedure Intent | The treatment intent of the procedure(s) being carried out | Code List | 04 | Diagnostic | M | N/A | N/A |
| | | | 05 | Staging | | | |
| | | | 01 | Curative | | | |
| | | | 02 | Palliative | | | |
| | | | 09 | Not Known | | | |
| Date Of Decision To Treat (Surgery) | The date of the decision to treat | ccyymmdd | N/A | N/A | R | N/A | N/A |
| Procedure Date | NHS Wales Data Dictionary | ccyymmdd | N/A | N/A | M | Procedure Date | Procedure Date |
| Surgical Admission Type | The type of surgical admission | Code List | 1 | Elective | R | N/A | Surgical Admission Type |
| | | | 2 | Emergency | | | |
| | | | 9 | Not Known | | | |
| Professional Registration Issuer Code - Consultant (Surgeon) | A code which identifies the professional registration body for the Consultant or Health Care Professional who is responsible for the treatment of the patient. If he/she is part of a surgical team, add all consultant surgeons | Code List | 02 | General Dental Council | M | N/A | Professional Registration Issuer Code - Consultant (Surgeon) |
| | | | 03 | General Medical Council | | | |
| | | | 04 | GeneralOptical Council | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | responsible for the procedure.<br><br>Data item can be added multiple times with below data item if multiple surgeons were responsible for procedure | | 08 | Health and Care Professions Council | | | |
| | | | 09 | Nursing and Midwifery Council | | | |
| Professional Registration Entry Identifier - Consultant (Surgeon) | NHS Wales Data Dictionary<br><br>The consultant surgeon responsible for the treatment of the patient. If he/she is part of a surgical team, add all consultant surgeons responsible for the procedure<br><br>Data item can be added multiple times with below data item if multiple surgeons were responsible for procedure | NHS Wales Data Dictionary | N/A | N/A | M | Consultant Code | Professional Registration Entry Identifier - Consultant (Surgeon) |
| Organisation Site Code - Procedure | NHS Wales Data Dictionary<br><br>The Organisation Site where the procedure took place and patient was treated | NHS Wales Data Dictionary | N/A | N/A | M | Organisation Code - LHB/Trust Site Code | N/A |
| Primary Procedure (OPCS) | NHS Wales Data Dictionary | NHS Wales Data Dictionary | N/A | N/A | R | Primary OPCS Code | Primary Procedure (OPCS) |
| Primary Procedure (OPCS) Description | Description associated with Primary Procedure (OPCS) | an100 | N/A | N/A | D | N/A | N/A |
| Primary Procedure (SNOMED) | The main procedure carried out using SNOMED. This may be recorded in addition to Primary Procedure OPCS | min n6 max n18 | N/A | N/A | R | N/A | Primary Procedure (SNOMED CT) |
| Primary Procedure (SNOMED) Description | Description associated with Primary Procedure (SNOMED) | an100 | N/A | N/A | D | N/A | N/A |
| Procedure(S) (OPCS) | NHS Wales Data Dictionary<br><br>This is a procedure(s) other than the primary procedure (OPCS) carried out and recorded.<br><br>Multiple occurrences may occur as more than one procedure can be recorded) | NHS Wales Data Dictionary | N/A | N/A | R | Secondary OPCS Code | Procedure (OPCS) |
| Procedures (OPCS) Description | Description associated with Procedures (OPCS) Description | an100 | N/A | N/A | D | N/A | N/A |
| Procedure(S) (SNOMED) | This is the procedure other than the primary procedure carried out and recorded. This may occur more than once and recorded in addition to Procedure OPCS | min n6 max n18 | N/A | N/A | R | N/A | Procedure (SNOMED CT) |
| Procedure(S) (SNOMED) Description | Description associated with Procedure(S) (SNOMED) | an100 | N/A | N/A | D | N/A | N/A |
| Unplanned Return To Theatre Indicator | If it is a planned primary procedure, select N (as this is not an unplanned return to theatre)<br><br>If this is an unplanned return to theatre (within the same admission/discharge period) then | Code List | Y | Yes | R | N/A | Unplanned Return To Theatre Indicator |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | the same admission/discharge period) then create a completely new surgery treatment record for this and then select Y<br><br>The admission and discharge dates for both however would be the same, the procedure date, OPCS procedure and possibly surgeon(s) may be different | | N | No | | | |
| | | | 9 | Not Known | | | |
| ASA Score | The ASA physical status classification system is a system for assessing the fitness of patients before surgery. | Code List | 1 | A normal healthy patient | R | N/A | ASA Score |
| | | | 2 | A patient with mild systemic disease | | | |
| | | | 3 | A patient with severe systemic disease, that limits function but is not incapacitating | | | |
| | | | 4 | A patient with severe systemic disease that is a constant threat to life | | | |
| | | | 5 | A moribund patient who is not expected to survive withoug the operation | | | |
| | | | 6 | A declared brain-dead patient whose organs are being removed for donar purposes | | | |
| Surgical Access Type | The surgical access type used to perform the main procedure | Code List | 1 | Open operation | R | N/A | Surgical Access Type |
| | | | 2 | Laparoscopic/Thoracoscopic with planned conversion to open surgery | | | |
| | | | 3 | Laparoscopic/Thoracoscopic with unplanned conversion to open surgery | | | |
| | | | 4 | Laparoscopic/Thoracoscopic completed | | | |
| | | | 5 | Robotic Surgery | | | |
| | | | Z | Not applicable | | | |
| **Core - Pathology**<br>**To Collect Pathology Details - It Is Expected That All The Data Items Outlined Below Are The Core Set Of Path Data Items As Per The Rcpath Datset Forms.**<br>**Note: Not Every Data Item On The Rcpath Forms Are Included As Core Or Site Specific Items - Only Ones Required For National Reporting.**<br>**A Patient May Have Any Number Of Pathology Reports And There May Be More Than One Pathology Report. (Multiple Occurences - There May Be More Then One Pathology Completed)** | | | | | | | | |
| Investigation Result Date | The date on which an investigation was concluded eg, the date the result was authorised | ccyymmdd | N/A | N/A | M | N/A | Investigation Result Date |
| Service Report Identifier | The status of the service report | Code List | 1 | Final (complete) | M | N/A | Service Report Identifier |
| | | | 2 | Preliminary (interim) | | | |
| | | | 3 | Test not available | | | |
| | | | 4 | Unspecified | | | |
| | | | 5 | Second Opinion/Supplementary | | | |
| | | | 6 | Deleted | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Pathology Observation Report Identifier | Local identifier of an observation report.<br><br>This differs from the Service Report Identifier as it identifies the specific RCPath form used, multiple of these could be contained within a service report (where multiple tumours are identified). | an36 | N/A | N/A | R | N/A | Pathology Observation Report Identifier |
| Service Report Status | The status of the service report | Code List | 1 | Final (complete) | R | N/A | Service Report Status |
| | | | 2 | Preliminary (interim) | | | |
| | | | 3 | Test not available | | | |
| | | | 4 | Unspecified | | | |
| | | | 5 | Second Opinion/Supplementary | | | |
| | | | 6 | Deleted | | | |
| Professional Registration Issuer Code - Consultant (Pathology Test Requested By) | A code which identifies the professional registration body for the Consultant or Health Care Professional who requested the pathology test | Code List | 02 | General Dental Council | M | N/A | Professional Registration Issuer Code - Consultant (Pathology Test Requested By) |
| | | | 03 | General Medical Council | | | |
| | | | 04 | GeneralOptical Council | | | |
| | | | 08 | Health and Care Professions Council | | | |
| | | | 09 | Nursing and Midwifery Council | | | |
| Professional Registration Entry Identifier - Consultant (Pathology Test Requested By) | NHS Wales Data Dictionary<br><br>The consultant or health care professional who requested the pathology test | NHS Wales Data Dictionary | N/A | N/A | M | Consultant Code | Professional Registration Entry Identifier - Consultant (Pathology Test Requested By) |
| Organisation Site Identifier (Pathology Test Requested By Organisation) | NHS Wales Data Dictionary<br><br>The organisation site at which the care professional who requested the diagnostic test request for suspected cancer is based | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Pathology Test Requested By) |
| Date Specimen Taken (Sample Collected Date) | The date on which the specimen was extracted/The date that the sample collection takes place or the start of a period for sample collection | ccyymmdd | N/A | N/A | R | N/A | Sample Collection Date |
| Sample Receipt Date | The date that the specimen was received by the pathology laboratory | ccyymmdd | N/A | N/A | R | N/A | Sample Receipt Date |
| Organisation Identifier Of Reporting Pathologist | NHS Wales Data Dictionary<br><br>The organisation at which the authorising pathologist is based | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Code | Organisation Identifier (Of Reporting Pathologist) |
| Professional Registration Issuer Code - Consultant (Pathologist) | A code which identifies the professional registration body for the Consultant or Health Care Professional who authorises the pathology report | Code List | 02 | General Dental Council | M | N/A | Professional Registration Issuer Code - Consultant (Pathologist) |
| | | | 03 | General Medical Council | | | |
| | | | 04 | GeneralOptical Council | | | |
| | | | 08 | Health and Care Professions Council | | | |
| | | | 09 | Nursing and Midwifery Council | | | |
| Professional Registration Entry Identifier - Consultant (Pathologist) | NHS Wales Data Dictionary<br><br>The consultant or health care professional who authorises the pathology report | NHS Wales Data Dictionary | N/A | N/A | M | Consultant Code | Professional Registration Entry Identifier - Consultant (Pathologist) |
| Specimen Nature | The nature of the specimen taken during a clinical investigation | Code List | 1 | Primary tumour | R | N/A | Specimen Nature |
| | | | 2 | Further excision of primary tumour | | | |
| | | | 4 | Regional Lymph Nodes | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 5 | Metastatic site other then regional lymph nodes | | | |
| | | | 9 | Not Known | | | |
| Histological Diagnosis (Morphology) (ICD) | A morphology code providing increased specificity for neoplasm recorded under diagnosis (ICD 10) | min an4 max an6 | N/A | N/A | R | N/A | N/A |
| Histological Diagnosis (Morphology) (SNOMED) | A morphology code providing increased specificity for neoplasm recorded under diagnosis (SNOMED) | an100 | N/A | N/A | R | N/A | N/A |
| Histological Diagnosis (Morphology) (SNOMED) Description | Description associated with Histological Diagnosis (Morphology) (ICD) | min n6 max n18 | N/A | N/A | D | N/A | N/A |
| SNOMED Version (Pathology) | The version of SNOMED used to encode morphology and topography | Code List | 01 | SNOMED II | M | N/A | SNOMED Version (Pathology) |
| | | | 02 | SNOMED 3 | | | |
| | | | 03 | SNOMED 3.5 | | | |
| | | | 04 | SNOMED RT | | | |
| | | | 05 | SNOMED CT | | | |
| | | | 99 | Not Known | | | |
| Morphology (SNOMED) Pathology | This is the morphology of the tumour as categorised by SNOMED International/SNOMED | min n6 max n18 | N/A | N/A | M | N/A | Morphology (SNOMED) Pathology |
| Morphology (SNOMED) Pathology Description | Description associated with Morphology (SNOMED) Pathology | an100 | N/A | N/A | D | N/A | N/A |
| Topography (SNOMED) Pathology | This is the topographical site of the tumour as categorised by SNOMED International/SNOMED | min n6 max n18 | N/A | N/A | R | N/A | Topography (SNOMED) Pathology |
| Topography (SNOMED) Pathology Description | Description associated with Topography (SNOMED) Pathology Description | an100 | N/A | N/A | D | N/A | N/A |
| Diagnosis (ICD Pathological) | NHS Wales Data Dictionary<br><br>Primary diagnosis based on the evidence from a pathological examination<br><br>This can be a repeated item | NHS Wales Data Dictionary | N/A | N/A | R | Primary ICD Diagnostic Code | Diagnosis (ICD Pathological) |
| Diagnosis (ICD Pathological) Description | Description associated with Diagnosis (ICD Pathological) | an100 | N/A | N/A | D | N/A | N/A |
| Diagnosis (SNOMED Pathological) | Primary diagnosis based on the evidence from a pathological examination<br><br>This can be a repeated item | min n6 max n18 | N/A | N/A | R | N/A | N/A |
| Diagnosis (SNOMED Pathological) Description | Description associated with Diagnosis (SNOMED Pathological) | an100 | N/A | N/A | D | N/A | N/A |
| Tumour Laterality (Pathological) | Tumour laterality identifies the side of the body for a tumour relating to paired organs within a patient based on the evidence from a pathological examination<br><br>Required for paired organs only | Code List | L | Left | R | N/A | Tumour Laterality (Pathological) |
| | | | R | Right | | | |
| | | | M | Midline | | | |
| | | | B | Bilateral | | | |
| | | | 8 | Not applicable | | | |
| | | | 9 | Not known | | | |
| Pathology Investigation Type | The type of pathology investigation procedure carried out | Code List | CY | Cytology | R | N/A | Pathology Investigation Type |
| | | | BU | Biopsy | | | |
| | | | EX | Excision | | | |
| | | | PE | Partial Excision | | | |
| | | | RE | Radical Excison | | | |
| | | | FE | Further Excision | | | |
| | | | CU | Curettage | | | |
| | | | SB | Shave Biopsy | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | PB | Punch Biopsy | | | |
| | | | IB | Incisional Biopsy | | | |
| | | | 99 | Uncertain/Other | | | |
| Pathology Report Text | The full text from the pathology report which may be required by Cancer Registries to calculate diagnosis and staging details | an 270000 | N/A | N/A | R | N/A | Pathology Report Text |
| Lesion Size (Pathological) | The size in mm of the diameter of a lesion, largest if more than one, if the histology of a sample proves to be invasive.<br><br>Not applicable for Haematological diagnoses, for skin values see site specific data standard. | n3.n2 | N/A | N/A | R | N/A | Lesion Size (Pathological) |
| Grade Of Differentiation (Pathological) | Grade of Differentiation is the definitive grade of the tumour based on the evidence from a pathological examination | Code List | GX | GX - Grade of differentiation is not appropriate or cannot be assessed | R | N/A | Grade Of Differentiation (Pathological) |
| | | | G1 | G1 - Well differentiated | | | |
| | | | G2 | G2 - Moderately differentiated | | | |
| | | | G3 | G3 - Poorly differentiated | | | |
| | | | G4 | G4 - Undifferentiated/anaplastic | | | |
| Cancer Vascular/Lymphatic Invasion | An indication of the presence of absence of unequivocal tumour in lymphatic and/or vascular spaces.<br><br>Not applicable to Haematological diagnoses | Code List | NU | No, vascular/lymphatic invasion not present | R | N/A | Cancer Vascular Or Lymphatic Invasion |
| | | | YU | Yes, vascular/lymphatic invasion present | | | |
| | | | YV | Vascular invasion only present | | | |
| | | | YL | Lymphatic invasion only present | | | |
| | | | YB | Both lymphatic and vascular invasion present | | | |
| | | | UU | Uncertain whether vascular/lymphatic invasion is present or not | | | |
| | | | XX | Cannot be assessed | | | |
| | | | 99 | Not known | | | |
| Excision Margins | An indication of whether the excision margin was clear of the tumour and if so by how much. Where this is more than one measurement, record the closest or closest releveant margin. Where actual measurements are not taken use options 01, 05, 06.<br><br>Codes 07, 08, 09 are only applicable for skin cancers, and have been included to align with the RCPath for skin diagnoses. This data item is not applicable for Haematology diagnosis | Code List | 01 | Excison margins are clear (distance from margin not stated) | R | N/A | Excision Margin |
| | | | 02 | Excision margins are clear (tumour >5 mm from the margin) | | | |
| | | | 03 | Excision margins are clear (tumour >1mm but less than or equal to 5 mm from the margin) | | | |
| | | | 04 | Tumour is less than or equal to 1 mm of excision margin, but does not reach margin | | | |
| | | | 05 | Tumour reaches excision margin | | | |
| | | | 06 | Uncertain | | | |
| | | | 07 | Margin not involved (equal to or greater than 1mm) | | | |
| | | | 08 | Margin not involved (less than 1 mm) | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 09 | Margin not involved (1 to 5 mm) | | | |
| | | | 98 | Not applicable | | | |
| | | | 99 | Not Known | | | |
| Synchronous Tumour Indicator | To record the presence of two primaries in the same tumour site<br><br>Not applicable to haematological diagnoses | Code List | Y | Yes, synchronous tumours present | R | N/A | Synchronous Tumour Indicator |
| | | | N | No, no synchronous tumours present | | | |
| | | | 9 | Not known | | | |
| Site Of Synchronous Tumour | Site of body where syncrhonous tumour has been identified. | Code List | 02 | Brain | R | N/A | N/A |
| | | | 03 | Liver | | | |
| | | | 04 | Lung | | | |
| | | | 07 | Unknown metastatic site | | | |
| | | | 08 | Skin | | | |
| | | | 09 | Distant lymph nodes | | | |
| | | | 10 | Bone (excluding Bone Marrow) | | | |
| | | | 11 | Bone Marrow | | | |
| | | | 12 | Regional Lymph Nodes | | | |
| | | | 97 | Not Applicable | | | |
| | | | 98 | Other metastatic site | | | |
| Number Nodes Examined | The number of local/regional lymph nodes examined<br><br>This data item is not applicable for CNS, Haematological or Lung diagnoses | n3 | | | R | N/A | Number Nodes Of Examined |
| Number Nodes Positive | The number of local/regional lymph nodes reported as being positive for the presence of tumour metastases<br><br>This data item is not applicable for CNS, Haematological or Lung diagnoses | n3 | | | R | N/A | Number Nodes Of Positive |
| Staging - TNM Coding Edition | The TNM coding edition in use | Code List | 01 | UICC (Union for International Cancer Control) | R | N/A | TNM Coding Edition |
| | | | 02 | AJCC (American Joint Committee on Cancer) | | | |
| | | | 03 | ENETS (European Neuroendocrine Tumour Society) | | | |
| Staging - TNM Version Number | The version number used for Tumour, Node and Metastasis (TNM) staging based on the evidence from a pathological examination | an2 | N/A | N/A | R | N/A | TNM Version Number (Pathological) |
| T Stage (Pathological) | A code which classifies the size and extent of the primary Tumour based on the evidence from a pathological examination | an15 | N/A | N/A | R | N/A | T Category (Pathological) |
| N Stage (Pathological) | A code which classifies the absence or presence and extent of regional lymph node metastases based on the evidence from a pathological examination | an15 | N/A | N/A | R | N/A | N Category (Pathological) |
| M Stage (Pathological) | A code which classifies the absence or presence of distant metastases based on the evidence from a pathological examination | an15 | N/A | N/A | R | N/A | M Category (Pathological) |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| TNM Stage Grouping (Pathological) | A code which classifies the combination of tumour, node and metastases into stage groupings based on the evidence from a pathological examination | an16 | N/A | N/A | R | N/A | TNM Stage Grouping (Pathological) |
| Neo-Adjuvant Therapy Indicator | Indicator of whether the pathological stage was recorded after the patient had received neo-adjuvant therapy (ie chemotherapy or radiotherapy prior to surgery)<br><br>If this is Yes the pathology stage fields should NOT be prefixed with the letter 'Y' | Code List | Y | Yes | R | N/A | Neoadjuvant Therapy Indicator |
| | | | N | No | | | |
| | | | 9 | Not Known | | | |
| Ki-67 Indicator | Indicate if a Ki-67 staining was done on the sample | Code List | 01 | Done and available | R | N/A | Ki-67 Indicator |
| | | | 02 | Done but not available | | | |
| | | | 03 | Not done | | | |
| | | | 04 | Not Known | | | |
| Ki-67 Result | Record the percentage of 'positivity' on a scale of 0-100 | n3 | N/A | N/A | R | N/A | Ki-67 Result |
| MLH1 Nuclear Expression Intact | Is MLH1 immunohistochemistry nuclear expression intact? | Code List | Y | Yes | R | N/A | MLH1 Nuclear Expression Intact |
| | | | N | No | | | |
| | | | E | Equivocal | | | |
| | | | F | Test Failed | | | |
| | | | X | Not Performed | | | |
| PMS2 Nuclear Expression Intact | Is PMS2 immunohistochemistry nuclear expression intact? | Code List | Y | Yes | R | N/A | PMS2 Nuclear Expression Intact |
| | | | N | No | | | |
| | | | E | Equivocal | | | |
| | | | F | Test Failed | | | |
| | | | X | Not Performed | | | |
| MSH2 Nuclear Expression Intact | Is MSH2 immunohistochemistry nuclear expression intact? | Code List | Y | Yes | R | N/A | MSH2 Nuclear Expression Intact |
| | | | N | No | | | |
| | | | E | Equivocal | | | |
| | | | F | Test Failed | | | |
| | | | X | Not Performed | | | |
| MSH6 Nuclear Expression Intact | Is MSH6 immunohistochemistry nuclear expression intact? | Code List | Y | Yes | R | N/A | MSH6 Nuclear Expression Intact |
| | | | N | No | | | |
| | | | E | Equivocal | | | |
| | | | F | Test Failed | | | |
| | | | X | Not Performed | | | |
| Microsatellite Instability (MSI) Testing | Result of microsatellite instability (MSI) testing | Code List | H | MSI-high | R | N/A | Microsatellite Instability (MSI) Testing |
| | | | L | MSI-low | | | |
| | | | S | MSI-stable | | | |
| | | | F | Test Failed | | | |
| | | | X | Not Performed | | | |
| **Treatment - Drug Therapy**<br>**(It Is Envisaged The Below Data Items Should Automated From SACT Dataset But Outlines The Main Data Items Required Relating To Drug Therapy Treatment)** | | | | | | | |
| Start Date Of Regimen (SACT Data Label) | The date on which the drug therapy was first administered | ccyymmdd | N/A | N/A | R | N/A | N/A |
| Adjunctive Therapy | Adjunctive therapy is therapy given in additon to the main therapy to maximize its effectiveness. | Code List | 1 | Adjuvant | R | N/A | Adjunctive Therapy |
| | | | 2 | Neoadjuvant | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 3 | Not Applicable (Primary Treatment) | | | |
| | | | 9 | Not Known | | | |
| Intent Of Treatment (SACT Data Label) | Intent of SACT regimen | Code List | 01 | Curative | R | N/A | N/A |
| | | | 02 | Palliative - Aiming to extend life expectancy | | | |
| | | | 03 | Palliative - Aiming to relieve and/or control malignancy related symptoms | | | |
| | | | 04 | Palliative - Aiming to achieve remission | | | |
| | | | 05 | Palliative - Aiming to delay tumour progression | | | |
| | | | 98 | Other | | | |
| | | | 99 | Not Known | | | |
| Date Of Decision To Treat (Chemo) | This is the date the patient agrees with the clinican to have treatment | ccyymmdd | N/A | N/A | R | N/A | N/A |
| Organisation Identifier Of SACT Administration (SACT Data Label)<br>Chemotherapy Provider (Code Of Provider/Organisation) - NCLA Requirement | NHS Wales Data Dictionary<br><br>The organisation where administration of the SACT cycles took place<br><br>Derived item - Display name of the Organisation identifier of the organisation where administration of the SACT cycles took place<br>NCLA Definition required - Name of the Organsation who provided the chemotherapy | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Code | N/A |
| Organisation Identifier Of SACT Administration (SACT Data Label)<br>Chemotherapy Provider (Name Of Org) - NCLA Requirement | Description associated with Organisation Identifier Of SACT Administration (SACT Data Label)<br>Chemotherapy Provider (Code Of Provider/Organisation) - NCLA Requirement | NHS Wales Data Dictionary | N/A | N/A | D | N/A | N/A |
| **Treatment - Radiotherapy<br>(It Is Envisaged The Below Data Items Should Automated From Rtds But Outlines The Main Data Items Required Relating To Radiotherapy Treatment)** | | | | | | | |
| Treatment Start Date | NHS Wales Data Dictionary | ccyymmdd | N/A | N/A | R | Start Date (Radiotherapy Treatment Episode) | Treatment Start Date (Cancer) |
| Radiotherapy Intent | NHS Wales Data Dictionary | Code List | 01 | Palliative | R | Radiotherapy Intent | N/A |
| | | | 04 | Curative | | | |
| | | | 03 | Other | | | |
| | | | 99 | Not Known | | | |
| Radiotherapy Treatment Modality | NHS Wales Data Dictionary | Code List | NHS Wales Data Dictionary | NHS Wales Data Dictionary | R | Radiotherapy Treatment Modality | N/A |
| Decision To Treat Date (Teletherapy/Brachytherapy) | NHS Wales Data Dictionary | CCYYMMDD | N/A | N/A | R | Decision to Treat Date (Radiotherapy Treatment Episode) | N/A |
| Organisation Code (Code Of Provider) | NHS Wales Data Dictionary<br><br>The organisation which provided the teletherapy/brachytherapy | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Code | Organisation Identifier (Code Of Provider) |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Name Of Organisation (Name Of Provider) | Description associated with Organisation Code (Code Of Provider)<br><br>(teletherapy/brachytherapy) | NHS Wales Data Dictionary | N/A | N/A | R | N/A | N/A |
| **Treatment - Palliative Care** | | | | | | | |
| Member Of The Palliative Care Team Seen | Has the patient seen a member of the specialist palliative care team? | Code List | Y | Yes | R | N/A | N/A |
| | | | N | No | | | |
| Date Member Of Palliative Care Team Seen | Date the member of the palliative care team was seen | ccyymmdd | N/A | N/A | R | N/A | N/A |
| **Core - Treatment - Stem Cell Transplantation (One Occurrence Of This Group Per Core Treatment)** | | | | | | | |
| Stem Cell Infusion Source | Source of stem cells for infusion | Code List | B | Bone Marrow | R | N/A | Stem Cell Infusion Source |
| | | | P | Peripheral Blood | | | |
| | | | C | Cord | | | |
| | | | 9 | Not Known | | | |
| Stem Cell Infusion Donor | Donor for stem cell infusion | Code List | 1 | Autologous | R | N/A | Stem Cell Infusion Donor |
| | | | 2 | Allogeneic - Sibling | | | |
| | | | 3 | Allogeneic - Haplo | | | |
| | | | 4 | Allogeneic - Unrelated | | | |
| | | | 9 | Not Known | | | |
| Conditioning Regimen | Record the MDS Stem Cell Transplant Conditioning Regimen | Code List | 1 | Myeloablative | R | N/A | Conditioning Regimen |
| | | | 2 | Reduced Intensity | | | |
| | | | 3 | Minimal Intensity | | | |
| **Acute Oncology - Core To Record Acute Oncology Episode Details (Multiple Occurrences Per Tumour)** | | | | | | | |
| Presentation Via Unscheduled Care Route | Did the patient present acutely unwell because of their cancer via the route of unscheduled care | Code List | Y | Yes | R | N/A | N/A |
| | | | N | No | | | |
| | | | 9 | Not Known | | | |
| Reason For Unscheduled Care Attendance | What was the reason for the unscheduled care attendance | Code List | 1 | Unwell as a consequence of cancer diagnosis | R | N/A | N/A |
| | | | 2 | Unwell as a consequence of cancer treatment | | | |
| | | | 3 | Unwell and suspect a new cancer diagnosis | | | |
| Outcome Of Unscheduled Care Attendance | Record the outcome of the unscheduled care attendance | Code List | 1 | Not Admitted | R | N/A | N/A |
| | | | 2 | Admitted | | | |
| | | | 3 | Discharge | | | |
| | | | 4 | Patient Died | | | |
| | | | 5 | Inpatient Transfer eg, to cancer centre/specialised unit | | | |
| | | | 6 | Transfer (where presents as a non IP but patient is transferred to a cancer centre or surgical unit for specialist treatment & admission) | | | |
| | | | 8 | Other | | | |
| Length Of Stay | The length of time between the admission date and discharge date for the patient<br><br>This data item should be derived from the admission date to discharge date and state the length of stay for the patient | n2 | N/A | N/A | D | N/A | N/A |
| Acute Oncology Assessment Date | The date on which an assessment was concluded | ccyymmdd | N/A | N/A | R | N/A | Acute Oncology Assessment Date |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Organisation Site Identifier (Acute Oncology) | NHS Wales Data Dictionary<br><br>The organisation site of the hospital or cancer treatment centre in which the patient was assessed | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Acute Oncology) |
| Assessment Location | The location where the Acute Oncology assessment was performed within the health care provider | Code List | 01 | Emergency Care Department | R | N/A | Assessment Location |
| | | | 02 | Medical Assessment Unit | | | |
| | | | 03 | Emergency Ambulatory Care Unit | | | |
| | | | 04 | Inpatient Ward | | | |
| | | | 05 | Outpatient Department/Clinic | | | |
| | | | 06 | Dedicated Acute Oncology Bed/Chair | | | |
| | | | 07 | Day Case Unit | | | |
| | | | 08 | Chemotherapy Unit | | | |
| | | | 09 | Other | | | |
| Patient Presentation/Type | Record the type each patient presentation is grouped within.<br><br>Muliple occurrences of this item can be recorded | Code List | 01 | New Presentation | R | N/A | Patient Type |
| | | | 02 | Treatment Complication | | | |
| | | | 03 | Suspected or Confirmed Neutropenic Sepsis | | | |
| | | | 04 | Cancer Complication | | | |
| | | | 05 | Cancer Recurrence/Progression (Local or Regional) | | | |
| | | | 06 | Cancer Recurrence/Progression (Distant) | | | |
| | | | 07 | Cancer Transformation | | | |
| | | | 08 | Suspected or Confirmed Metastatic Spinal Cord Compression (MSCC) | | | |
| | | | 09 | Comorbidity Complications | | | |
| | | | 91 | MUO/CUP (Malignancy Unknown Origing/Cancer Unknown Primary) | | | |
| | | | 98 | Other | | | |
| Outcome | Record the outcome of the acute oncology episode | Code List | 1 | Not Admitted | R | N/A | Outcome |
| | | | 2 | Admitted | | | |
| | | | 3 | Remained Admitted/Inpatient | | | |
| | | | 4 | Discharge | | | |
| | | | 5 | Patient Died | | | |
| | | | 6 | Inpatient Transfer eg, to cancer centre/specialised unit | | | |
| | | | 7 | Transfer (where presents as a non IP but patient is transferred to a cancer centre or surgical unit for specialist treatment & admission) | | | |
| | | | 8 | Other | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Length Of Stay | For admitted patients only, the length of time between the admission date and discharge date for the patient<br><br>This data item should be derived from the admission date to discharge date and state the length of stay for the patient | n2 | N/A | N/A | D | N/A | N/A |
| **General Laboratory Results (One Occurrence Per Tumour)<br>To Record Baseline Labs At Diagnosis** | | | | | | | |
| Laboratory Results Date | The date on which an investigation was concluded eg, the date the result was authorised | ccyymmdd | N/A | N/A | M | N/A | Laboratory Result Date |
| Organistation Site Identifier (Laboratory Results) | NHS Wales Data Dictionary<br><br>The organisation site of the hospital or cancer treatment centre in which the patient was assessed | NHS Wales Data Dictionary | N/A | N/A | M | Organisation Code - LHB/Trust Site Code | Organistation Site Identifier (Laboratory Result) |
| LDH Value | This is the peak Lactate Dehydrogenase Level (LDH) at diagnosis | n6 | N/A | N/A | R | N/A | LDH Value |
| Beta HCG (Betal Human Chorionic Gonadotropin Serum) | Maximum Serum level of HCG at diagnosis in IU/I<br><br>Measured only for germ cell CNS tumours. | n3 IU/I | N/A | N/A | R | N/A | Betal Human Chorionic Gonadotropin (Serum) |
| AFP (Alpha Fetoprotein Serum) | Maximum Serum level of alpha feto protein at diagnosis. AFP units recorded in kU/l<br><br>Values > 100,000 are recorded | n6 | N/A | N/A | R | N/A | Alpha Fetoprotein (Serum) |
| **Patient - TYA Referral Status<br>(Applicable For All Patients Aged 16 - 24)** | | | | | | | |
| TYA Referral Status | An indication of the referral status for patients who are eligible for a Tennage/Young Adult (TYA) referral | Code List | 01 | Referral discussed & offered - patient accepted | M | N/A | N/A |
| | | | 02 | Referral discussed & offered - patient declined | | | |
| | | | 09 | Not Known (Not Recorded) | | | |
| Date Referral Made To TYA | The date the referral was made to the TYA service This is mandatory date if 01 is completed for TYA Referral Status | ccyymmdd | N/A | N/A | R | N/A | N/A |
| **Patient - Fertility Information<br>(Applicable To All Patients Within Age Group - Tbc)** | | | | | | | |
| Fertility Preservation Status | Does the patient require Fertility Preservation | Code List | Y | Yes | R | N/A | N/A |
| | | | N | No | | | |
| Date Fertility Preservation Was Discussed | Record the date that discussions were held regarding fertility preservation | ccyymmdd | N/A | N/A | R | N/A | N/A |
| **Progression - Core Diagnosis Information (Primary Cancer Pathway)<br><br>To Carry The Patient Pathway Details Required To Define Progression That Is Part Of The Known Primary Cancer Pathway.<br><br>To Record Progression That Happens During The Intial Cancer Primary Diagnostic Or Treatment Phase. (This is where a patients progression happens during the initial treatment phase and has not been told they are disease free or that a cancer is not detectable). (Multiple Occurences Are Expected)** | | | | | | | |
| Metastatic Type (Progression - Primary Cancer Pathway) | Indicate the type of metastatic disease diagnosed by the clinical team | Code List | 01 | Local | M | N/A | Metastatic Type |
| | | | 02 | Regional | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 03 | Distant | | | |
| Metastatic Site (Progression - Primary Cancer Pathway) | The site of the metastatic disease, if any at diagnosis.<br><br>More than one site can be recorded | Code List | 02<br>03<br>04<br>07<br>08<br>09<br>10<br>11<br>12<br>97<br>98 | Brain<br>Liver<br>Lung<br>Unknown metastatic site<br>Skin<br>Distant lymph nodes<br>Bone (excluding Bone Marrow)<br>Bone Marrow<br>Regional Lymph Nodes<br>Not Applicable<br>Other metastatic site | M | N/A | Metastatic Site |
| Other Recurrence Or Metastatic Site (Progression - Primary Cancer Pathway) | To provide further information if Other is chosen for Metastatic Site (Progression - Primary Cancer Pathway) | an50 | N/A | N/A | R | N/A | N/A |
| Progression Date (Primary Cancer Pathway) | The date the progression was agreed by the clincal team. This is the date of progression that | ccyymmdd | N/A | N/A | M | N/A | Progression Date (Primary Pathway) |
| **Transformation - Core Diagnosis Information (Primary Cancer Pathway)**<br><br>**To Carry Patient Pathway Details Required To Define Transformation That Is Part Of The Known Primary Cancer Pathway**<br><br>**To Record Transformation That Happens During The Intial Cancer Primary Diagnostic Or Treatment Phase. (This is where there is a change in the cancer type (morphology). Applicable to Haematology, CNS and Sarcoma. (Multiple Occurences Are Expected)** | | | | | | | |
| Transformation Date (Primary Pathway) | The date the transformation was agreed by the clinical team | ccyymmdd | N/A | N/A | M | N/A | Transformation Date (Primary Pathway) |
| Morphology (SNOMED) Transformation | The transformation diagnosis using the SNOMED code for the cell type of the tumour recorded as part of a care spell. This can be recorded as well as or instead of morphology ICD10 transformation | min n6 max n18 | N/A | N/A | M | N/A | Morphology (SNOMED) Transformation |
| Morphology (SNOMED) Transformation Description | Description associated with Morphology (SNOMED) Transformation | an100 | N/A | N/A | D | N/A | N/A |
| SNOMED Version Current (Transformation) | The version of SNOMED used to encode morphology (SNOMED) | Code List | 01<br>02<br>03<br>04<br>05<br>99 | SNOMED II<br>SNOMED 3<br>SNOMED 3.5<br>SNOMED RT<br>SNOMED CT<br>Not Known | M | N/A | SNOMED Version Current (Transformation) |
| Morphology (ICD10 V4) Transformation | The morphology code for the transformation of the cancer as defined by ICD10 V4. This can be recorded as well as or instead of Morphology (SNOMED) Transformation | an6 | N/A | N/A | R | N/A | N/A |
| **Recurrence - Non Primary Cancer Pathway Details**<br><br>**To Carry Patient Pathway Details Required To Define The Non Primary Cancer Pathway For Recurrence**<br><br>**(This is where there is a return of cancer after treatment and after a disease free interval where cancer could not be detected. The 3 different types of cancer recurrence include local, regional or metastatic recurrence) (One Occurrence Per Recurrence)** | | | | | | | |
| **Core Referral Information (Recurrence - Non Primary Cancer Pathway)** | | | | | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Source Of Referral (Recurrence - Non Primary Cancer Pathway) | This identifies the source of referral for the non primary cancer pathway | Code List | Initiated by the Consultant or Independent Nurse responsible for the Out-Patient Episode | | R | N/A | Source Of Referral For Non Primary Cancer Pathway |
| | | | 01 | Following an emergency admission | | | |
| | | | 02 | Following a Domiciliary visit | | | |
| | | | 10 | Following an Accident And Emergency Attendance | | | |
| | | | 11 | Other - initiated by the Consultant responsible for the Consultant out patient episode | | | |
| | | | Not initiated by the Consultant or Independent Nurse responsible for the Out-Patient Episode | | | | |
| | | | 03 | Referral from a General Medical Practitioner | | | |
| | | | 04 | Referral from A&E Department (including minor injuries units and walk in centres) | | | |
| | | | 05 | Referral from a Consultant or Independent Nurse, other than in an A&E department | | | |
| | | | 06 | Self-referral | | | |
| | | | 07 | Referral from Prosthetist | | | |
| | | | 08 | Other sources of referral | | | |
| | | | 12 | Referral from a General Practitioner with a Special Interest (GPwSI) or dentist with a Special Interest (DwSI) | | | |
| | | | 13 | Referral from a Specialist Nurse (Secondary Care) | | | |
| | | | 14 | Referral from an Allied Health Professional (AHP) | | | |
| | | | 15 | Referral from Optometrist | | | |
| | | | 16 | Referral from an Orthoptist | | | |
| | | | 17 | Referral from a National Screening Programme | | | |
| | | | 171 | Breast Test Wales - screening referral | | | |
| | | | 172 | Bowel Screening Wales - screening referral | | | |
| | | | 173 | Cervical Screening Wales - screening referral | | | |
| | | | 174 | Other Screening Service (not Breast, Bowel or Cervical) | | | |
| | | | 92 | General Dental Practitioner | | | |
| | | | 93 | Community Dental Service | | | |
| | | | 97 | Other - not initiated by the Consultant responsible for the Consultant Out Patient Episode | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Date First Seen (Recurrence - Non Primary Cancer Pathway) | This is the date that the patient is first seen in the Health Board that receives the first referral. The date that the patient is first seen by the appropriate specialist for cancer care within a non primary cancer pathway spell. The date the person who is most able to progress the diagnosis of the non primary tumour. | ccyymmdd | N/A | N/A | R | N/A | Date First Seen - Non Primary Cancer Pathway |
| Organisation Site Identifier (Provider First Seen) (Recurrence - Non Primary Cancer Pathway) | NHS Wales Data Dictionary<br><br>The organisation site of the health care provider where the patient is first seen by an approriate cancer specialist on the date first seen. | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Provider First Seen - Non Primary Cancer Pathway) |
| Cancer Referral Patient Status (Recurrence - Non Primary Cancer Pathway) | The status of referral requests for patients referred with a suspected cancer, or referred with breast symptoms with cancer not orignally suspected on a non primary pathway. | Code List | 15 | Suspected recurrent cancer | M | N/A | N/A |
| | | | 31 | Diagnosis of recurrent cancer confirmed | | | |
| | | | 41 | No new recurrence of cancer detected | | | |
| **Core Diagnosis Information** | | | | | | | |
| Date Of Non Primary Cancer Diagnosis (Clinically Agreed) (Recurrence - Non Primary Cancer Pathway) | Record the date when the recurrence was confirmed or agreed<br><br>This should be either the authorised pathology report date or the date in which the clinical investigation took place or clinical agreement that confirms the diagnosis of cancer | ccyymmdd | N/A | N/A | M | N/A | Date Of Non Primary Cancer Diagnosis (Clinically Agreed) |
| Original Primary (ICD) (Recurrence - Non Primary Cancer Pathway) | NHS Wales Data Dictionary<br><br>The ICD10 code of the original diagnosis. This will normally be agreed at the MDT by the clinical team. | NHS Wales Data Dictionary | N/A | N/A | R | Primary ICD Diagnostic Code | Original Primary Diagnosis (ICD) |
| Original Primary (ICD) (Recurrence - Non Primary Cancer Pathway) Description | Description associated with Original Primary (ICD) (Recurrence - Non Primary Cancer Pathway) | an100 | N/A | N/A | D | N/A | N/A |
| Original Primary (SNOMED) (Recurrence - Non Primary Cancer Pathway) | The SNOMED code of the original diagnosis. This will normally be agreed at the MDT by the clinical team. | min n6 max n18 | N/A | N/A | R | N/A | N/A |
| Original Primary (SNOMED) (Recurrence - Non Primary Cancer Pathway) Description | Description associated with Original Primary (SNOMED) (Recurrence - Non Primary Cancer Pathway) | an100 | N/A | N/A | D | N/A | N/A |
| Recurrence/Metastatic Type (Recurrence - Non Primary Cancer Pathway) | To indicate the type of recurrence or metastatic disease diagnosed by the clinical team<br><br>More than one type can be recorded | Code List | 01 | Local | M | N/A | Metastatic Type |
| | | | 02 | Regional | | | |
| | | | 03 | Distant | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Recurrence/Metastatic Site (Recurrence - Non Primary Cancer Pathway) | To indicate the site of metastatic disease, if any<br><br>More than one site can be recorded | Code List | 02 | Brain | M | N/A | Metastatic Site |
| | | | 03 | Liver | | | |
| | | | 04 | Lung | | | |
| | | | 07 | Unknown metastatic site | | | |
| | | | 08 | Skin | | | |
| | | | 09 | Distant lymph nodes | | | |
| | | | 10 | Bone (excluding Bone Marrow) | | | |
| | | | 11 | Bone Marrow | | | |
| | | | 12 | Regional Lymph Nodes | | | |
| | | | 97 | Not Applicable | | | |
| | | | 98 | Other metastatic site | | | |
| Other Recurrence/Metastatic Site (Recurrence - Non Primary Cancer Pathway) | To provide further information if Other is chosen for Metastatic Site (Recurrence - Non Primary Cancer Pathway) | an50 | N/A | N/A | R | N/A | N/A |
| Palliative Care Specialist Seen Indicator (Cancer Recurrence - Non Primary Cancer Pathway) | Record whether the patient was seen by a palliative care specialist.<br><br>This would be a member of the specialist palliative care team led by a consultant in palliative medicine for a recurrence of cancer | Code List | Y | Yes | R | N/A | Palliative Care Specialist Seen Indicator (Cancer Recurrence) |
| | | | N | No | | | |
| | | | 9 | Not Known | | | |
| Relapse - Method Of Detection (Recurrence - Non Primary Cancer Pathway) | Indicate the method of detection for the patients relapse.<br><br>The clinical value in the data item is around the early detection of recurrence<br><br>More than one method can be recorded | Code List | 1 | Morphology | R | N/A | Relapse - Method Of Detection |
| | | | 2 | Flow | | | |
| | | | 3 | Molecular | | | |
| | | | 4 | Clinical Examination | | | |
| | | | 9 | Other | | | |
| **Progression - Non Primary Cancer Pathway Details**<br><br>**To Carry Patient Pathway Details Required To Define The Non Primary Cancer Pathway For Progression**<br>**(This is where a patient presents at a Health Board/Trust but no previous cancer record exists for the patient as they were diagnosed with cancer at another hospital location outside of Wales). (One Occurrence Per Progression)** | | | | | | | | |
| **Core Referral Information** | | | | | | | |
| Source Of Referral (Progression - Non Primary Cancer Pathway) | This identifies the source of referral for the non primary cancer pathway | Code List | Initiated by the Consultant or Independent Nurse responsible for the Out-Patient Episode | | R | N/A | Source Of Referral For Non Primary Cancer Pathway |
| | | | 01 | Following an emergency admission | | | |
| | | | 02 | Following a Domiciliary visit | | | |
| | | | 10 | Following an Accident And Emergency Attendance | | | |
| | | | 11 | Other - initiated by the Consultant responsible for the Consultant out patient episode | | | |
| | | | Not initiated by the Consultant or Independent Nurse responsible for the Out-Patient Episode | | | | |
| | | | 03 | Referral from a General Medical Practitioner | | | |
| | | | 04 | Referral from A&E Department (including minor injuries units and walk in centres) | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 05 | Referral from a Consultant or Independent Nurse, other than in an A&E department | | | |
| | | | 06 | Self-referral | | | |
| | | | 07 | Referral from Prosthetist | | | |
| | | | 08 | Other sources of referral | | | |
| | | | 12 | Referral from a General Practitioner with a Special Interest (GPwSI) or dentist with a Special Interest (DwSI) | | | |
| | | | 13 | Referral from a Specialist Nurse (Secondary Care) | | | |
| | | | 14 | Referral from an Allied Health Professional (AHP) | | | |
| | | | 15 | Referral from Optometrist | | | |
| | | | 16 | Referral from an Orthoptist | | | |
| | | | 17 | Referral from a National Screening Programme | | | |
| | | | 171 | Breast Test Wales - screening referral | | | |
| | | | 172 | Bowel Screening Wales - screening referral | | | |
| | | | 173 | Cervical Screening Wales - screening referral | | | |
| | | | 174 | Other Screening Service (not Breast, Bowel or Cervical) | | | |
| | | | 92 | General Dental Practitioner | | | |
| | | | 93 | Community Dental Service | | | |
| | | | 97 | Other - not initiated by the Consultant responsible for the Consultant Out Patient Episode | | | |
| Date First Seen (Progression - Non Primary Cancer Pathway) | This is the date that the patient is first seen in the Health Board that receives the first referral. The date that the patient is first seen by the appropriate specialist for cancer care within a non primary cancer pathway spell. The date the person who is most able to progress the diagnosis of the non primary tumour. | ccyymmdd | N/A | N/A | R | N/A | Date First Seen - Non Primary Cancer Pathway |
| Organisation Site Identifier (Provider First Seen) (Progression - Non Primary Cancer Pathway) | NHS Wales Data Dictionary<br><br>The organisation site of the health care provider where the patient is first seen by an approriate cancer specialist on the date first seen. | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Provider First Seen - Non Primary Cancer Pathway) |
| Cancer Referral Patient Status (Progression - Non Primary Cancer Pathway) | The status of referral requests for patients referred with a suspected cancer, or referred with breast symptoms with cancer not orignally suspected on a non primary pathway. | Code List | 30 | Suspected cancer progression | M | N/A | N/A |
| | | | 31 | Diagnosis of cancer progression confirmed | | | |
| | | | 41 | No progression of cancer detected | | | |
| **Core Diagnosis Information** | | | | | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Date Of Non Primary Cancer Diagnosis (Clinically Agreed) (Progression - Non Primary Cancer Pathway) | Record the date when the progression was confirmed or agreed (This should be either the authorised pathology report date or the date in which the clinical investigation took place or clinical agreement that confirms the diagnosis of cancer) | ccyymmdd | N/A | N/A | M | N/A | Date Of Non Primary Cancer Diagnosis (Clinically Agreed) |
| Progression (ICD10) (Progression - Non Primary Cancer Pathway) | NHS Wales Data Dictionary<br><br>Where the cancer has progressed, this is to record the ICD10 code of the original diagnosis, this will normally be agreed at the MDT by the clinical team | NHS Wales Data Dictionary | N/A | N/A | M | Primary ICD Diagnostic Code | Progression (ICD) |
| Progression (ICD10) (Progression - Non Primary Cancer Pathway) Description | Description associated with Progression (ICD10) (Progression - Non Primary Cancer Pathway) | an100 | N/A | N/A | D | N/A | N/A |
| Progression (SNOMED) (Progression - Non Primary Cancer Pathway) | Where the cancer has progressed, this is to record the SNOMED code of the original diagnosis, this will normally be agreed at the MDT by the clinical team | min n6 max n18 | N/A | N/A | R | N/A | N/A |
| Progression (SNOMED) (Progression - Non Primary Cancer Pathway) Description | Description associated with Progression (SNOMED) (Progression - Non Primary Cancer Pathway) | an100 | N/A | N/A | D | N/A | N/A |
| Recurrence/Metastatic Type (Progression - Non Primary Cancer Pathway) | To indicate the type of recurrence/metastatic disease diagnosed by the clinical team<br><br>More than one type can be recorded | Code List | 01 | Local | M | N/A | Metastatic Type |
| | | | 02 | Regional | | | |
| | | | 03 | Distant | | | |
| Recurrence/Metastatic Site (Progression - Non Primary Cancer Pathway) | To indicate the site of recurrence/metastatic disease<br><br>More than one site can be recorded | Code List | 02 | Brain | M | N/A | Metastatic Site |
| | | | 03 | Liver | | | |
| | | | 04 | Lung | | | |
| | | | 07 | Unknown metastatic site | | | |
| | | | 08 | Skin | | | |
| | | | 09 | Distant lymph nodes | | | |
| | | | 10 | Bone (excluding Bone Marrow) | | | |
| | | | 11 | Bone Marrow | | | |
| | | | 12 | Regional Lymph Nodes | | | |
| | | | 97 | Not Applicable | | | |
| | | | 98 | Other metastatic site | | | |
| Other Recurrence Or Metastatic Site (Progression - Non Primary Cancer Pathway) | To provide further information if Other is chosen for Metastatic Site (Progression - Non Primary Cancer Pathway) | an50 | N/A | N/A | R | N/A | N/A |
| **Transformation - Non Primary Cancer Pathway Details**<br><br>**To Carry Patient Pathway Details Required To Define The Non Primary Cancer Pathway For Transformation**<br>**(This is where a patient presents at a Health Board/Trust but no previous cancer record exists for the patient as they were diagnosed with a different cancer type (morphology) at another hospital location outside of Wales but there is now a change in the cancer type (morphology)) (One Occurrence Per Transformation)** | | | | | | | |
| **Transformation - Core Referral Information** | | | | | | | |
| Source Of Referral (Transformation - Non Primary Cancer Pathway) | This identifies the source of referral for the non primary cancer pathway | Code List | Initiated by the Consultant or Independent Nurse responsible for the Out-Patient Episode | | R | N/A | Source Of Referral For Non Primary Cancer Pathway |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 01 | Following an emergency admission | | | |
| | | | 02 | Following a Domiciliary visit | | | |
| | | | 10 | Following an Accident And Emergency Attendance | | | |
| | | | 11 | Other - initiated by the Consultant responsible for the Consultant out patient episode | | | |
| | | | Not initiated by the Consultant or Independent | | | | |
| | | | 03 | Referral from a General Medical Practitioner | | | |
| | | | 04 | Referral from A&E Department (including minor injuries units and walk in centres) | | | |
| | | | 05 | Referral from a Consultant or Independent Nurse, other than in an A&E department | | | |
| | | | 06 | Self-referral | | | |
| | | | 07 | Referral from Prosthetist | | | |
| | | | 08 | Other sources of referral | | | |
| | | | 12 | Referral from a General Practitioner with a Special Interest (GPwSI) or dentist with a Special Interest (DwSI) | | | |
| | | | 13 | Referral from a Specialist Nurse (Secondary Care) | | | |
| | | | 14 | Referral from an Allied Health Professional (AHP) | | | |
| | | | 15 | Referral from Optometrist | | | |
| | | | 16 | Referral from an Orthoptist | | | |
| | | | 17 | Referral from a National Screening Programme | | | |
| | | | 171 | Breast Test Wales - screening referral | | | |
| | | | 172 | Bowel Screening Wales - screening referral | | | |
| | | | 173 | Cervical Screening Wales - screening referral | | | |
| | | | 174 | Other Screening Service (not Breast, Bowel or Cervical) | | | |
| | | | 92 | General Dental Practitioner | | | |
| | | | 93 | Community Dental Service | | | |
| | | | 97 | Other - not initiated by the Consultant responsible for the Consultant Out Patient Episode | | | |
| Date First Seen (Transformation - Non Primary Cancer Pathway) | This is the date that the patient is first seen in the Health Board that receives the first referral. The date that the patient is first seen by the appropriate specialist for cancer care within a non primary cancer pathway spell. The date the person who is most able to progress the diagnosis of the non primary tumour. | ccyymmdd | N/A | N/A | R | N/A | Date First Seen - Non Primary Cancer Pathway |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| Organisation Site Identifier (Provider First Seen) (Transformation - Non Primary Cancer Pathway) | NHS Wales Data Dictionary<br><br>The organisation site of the health care provider where the patient is first seen by an approriate cancer specialist on the date first seen. | NHS Wales Data Dictionary | N/A | N/A | R | Organisation Code - LHB/Trust Site Code | Organisation Site Identifier (Provider First Seen - Non Primary Cancer Pathway) |
| Cancer Referral Patient Status (Transformation - Non Primary Cancer Pathway) | The status of referral requests for patients referred with a suspected cancer, or referred with breast symptoms with cancer not orignally suspected on a non primary pathway. | Code List | 23 | Suspected cancer transformation | M | N/A | N/A |
| | | | 31 | Diagnosis of cancer transformation confirmed | | | |
| | | | 41 | No transformation of cancer detected | | | |
| **Core Diagnostic Information (Transformation - Non Primary Cancer Pathway)** | | | | | | | |
| Date Of Non Primary Cancer Diagnosis (Clinically Agreed) (Transformation - Non Primary Cancer Pathway) | Record the date when the transformation was confirmed or agreed<br><br>This should be either the authorised pathology report date or the date in which the clinical investigation took place or clinical agreement that confirms the diagnosis of cancer | ccyymmdd | N/A | N/A | M | N/A | Date Of Non Primary Cancer Diagnosis (Clinically Agreed) |
| Morphology (ICD10 V4) | The morphology ICD 10 V4 code of the original diagnosis.<br><br>This will normally be agreed at the MDT by the clinical team | an6 | N/A | N/A | O | N/A | N/A |
| Original Morphology (SNOMED) | Record the SNOMED morphology code of the original diagnosis.<br><br>This will normally be agreed at the MDT by the clinical team | min n6 max n18 | N/A | N/A | R | N/A | Original Morphology (SNOMED) |
| Original Morphology (SNOMED) Description | Description associated with Original Morphology (SNOMED) | an100 | N/A | N/A | D | N/A | N/A |
| Morphology (ICD10 V4) Transformation | The morphology code for the transformation of the cancer as defined by ICD10 V4.<br><br>This can be recorded as well as or instead of Morphology (SNOMED) Transformation | an6 | N/A | N/A | O | N/A | N/A |
| Morphology (SNOMED) Transformation | This is the Transformation diagnosis using the SNOMED International/SNOMED CT code for the cell type of the tumour recorded as part of a care spell.<br><br>This can be recorded as well as or instead of Morphology (ICD10 V4) Transformation | min n6 max n18 | N/A | N/A | M | N/A | Morphology (SNOMED) Transformation |
| Morphology (SNOMED) Transformation Description | Description associated with Morphology (SNOMED) Transformation | an100 | N/A | N/A | D | N/A | N/A |
| SNOMED Version Current (Transformation) | The version of SNOMED used to encode morphology (SNOMED) | Code List | 01 | SNOMED II | M | N/A | SNOMED Version Current (Transformation) |
| | | | 02 | SNOMED 3 | | | |
| | | | 03 | SNOMED 3.5 | | | |

| Reporting Data Item | Definition | Format | Code List (Code) | Code List (Text) | Status | NHS Wales DD | COSD |
|---|---|---|---|---|---|---|---|
| | | | 04 | SNOMED RT | | | |
| | | | 05 | SNOMED CT | | | |
| | | | 99 | Not Known | | | |
| **Death (Clinical Status Assessment)** | | | | | | | |
| Death Date | The date of the patient's death | ccyymmdd | N/A | N/A | R | N/A | N/A |