

Evaluating Treatment Plans and Summary Templates in the ASCO Breast Cancer Registry Pilot*

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American Society of Clinical Oncology

Making a world of difference in cancer care

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Program Goals

- **Support practice-based quality improvement**
- **Support real-time quality monitoring for breast cancer care**
- **Evaluate feasibility of registry participation in the ambulatory oncology care setting**



Secondary Aim

Evaluate ASCO treatment plan/summary templates as a tool for improving communication and care coordination

- **Practice/provider perspectives on utility**
- **Patient perspectives on utility and satisfaction**

Using a web-based application, practices:

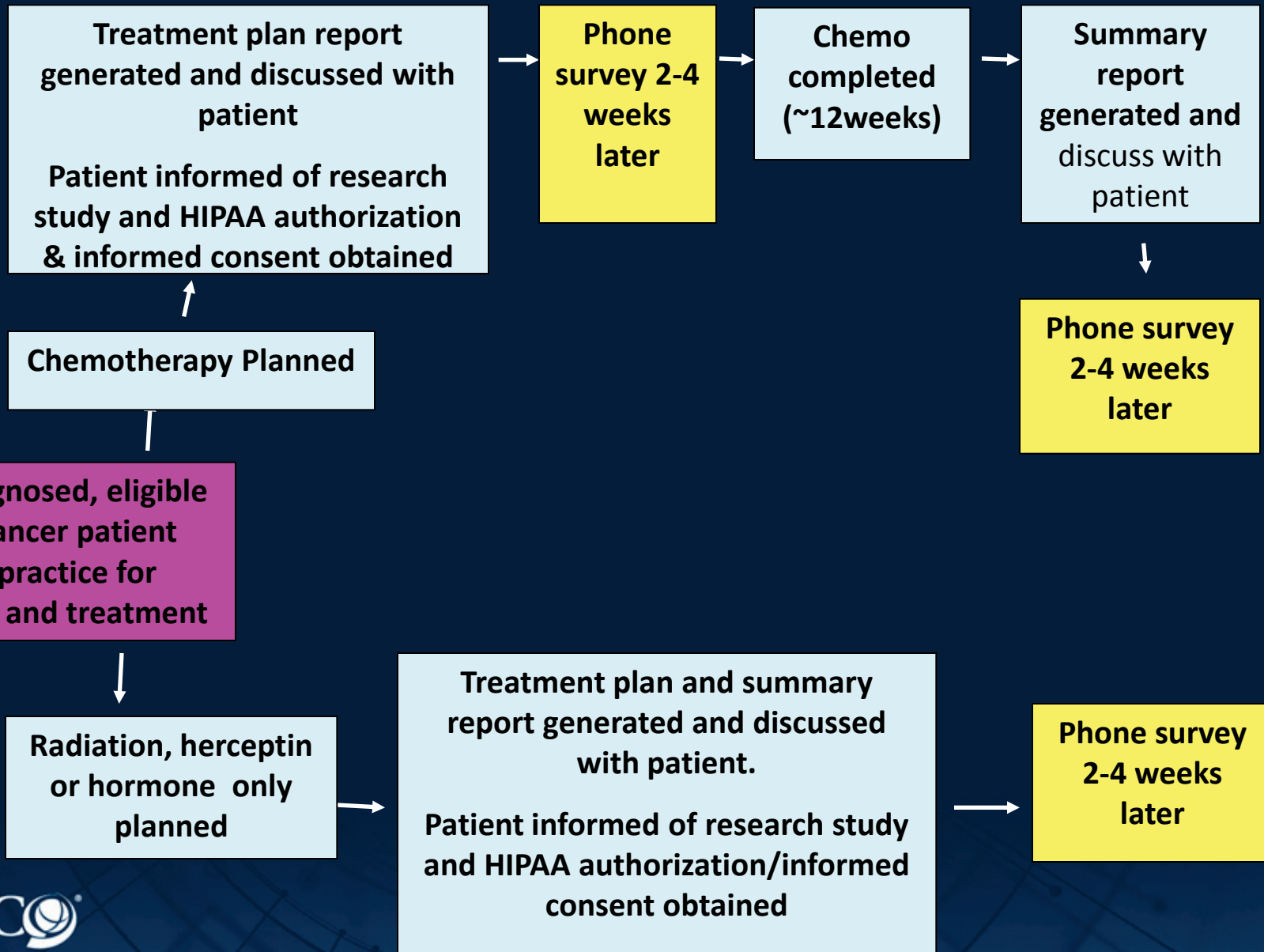
- **Enter data about their patients with breast cancer into the registry**
- **Simultaneously generate patient-specific treatment plans and summaries to improve patient care and communication**
- **Practices given reports based on measures of quality from registry data**



Evaluation Study Practices and Patients

- **Practice staff participants responded to practice survey electronically at mid point and at conclusion of registry pilot**
- **Each patient participant was surveyed by trained telephone interviewer 1-2X (depending on their care) during registry pilot period**

Patient Participant Flow Diagram



Development of Pilot

- **Fall 2008 – Fall 2009**
 - **Steering Committee and staff developed overall pilot study, registry, surveys**
 - **Recruited and trained 20 diverse practices**

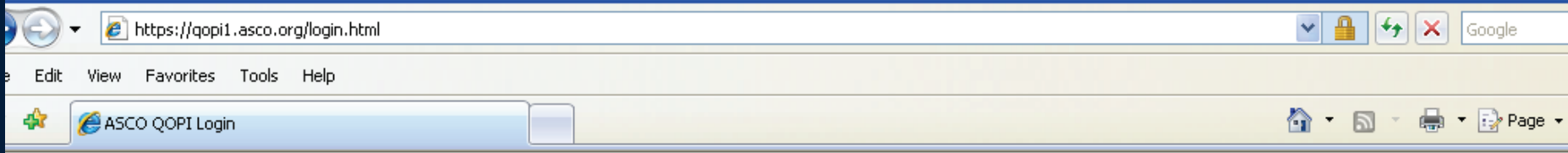


Implementation of Pilot

- Two phases of implementation
 - Registry pilot (*started Fall 2009*)
 - Practices begin entering patients into registry
 - Deliver individual Treatment Plan and Summary to patients

Over 2200 individual patients entered as of 11/1/2010 (~50/week)





ASCO QUALITY PROGRAMS



ASCO Breast Cancer Registry Pilot Program,
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► **REGISTER** new QOPI Practice

The QOPI and BCR studies will be undergoing routine system maintenance on Saturday, February 26th beginning at 8am EST ending at approximately 4pm EST. During this time the program will be intermittently unavailable. We apologize for any inconvenience this may cause.

REGISTERED PARTICIPANT LOGIN

username:

password:

ENTER

CONTACT the QOPI help desk | **CONTACT** the BCR help desk
Help logging in | **GO TO** asco.org

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POWERED BY:
OUTCOME  **ME™**

[Click Here to Enter New Patient](#)

Search By Patient ID Do not include site ID prefix or '-'

Form to Search

Completeness

Date Restriction Earliest Latest

Date Range

Medical Oncologist

First Name

Last Name

Patients Per Page

[\[-\] Hide Advanced Search](#)

Displaying patients 1-31 of 31.

Patient	Patient Name	PHI	Treatment Plan	Treatment Summary	Medical Oncologist	Generate Treatment Plan	Generate Treatment Summary
1766-00001	Smith, Susan	09/10/2009	09/18/2009	11/06/2009	Hanson, Sally	Generate Treatment Plan	Generate Treatment Summary
1766-00002	one, Patient	09/18/2009	09/18/2009	09/29/2009	Norris, Ginger	Generate Treatment Plan	Generate Treatment Summary
1766-00003	Mollierson, Molly	10/01/2009	04/02/2010	Enter Form	Cullen, Edward	Generate Treatment Plan	Generate Treatment Summary
1766-00004	jones, salll	10/02/2009	10/02/2009	11/13/2009	Jones, Bob	Generate Treatment Plan	Generate Treatment Summary
1766-00005	,	10/07/2009	10/07/2009	11/13/2009	Johnson, Frank	Generate Treatment Plan	Generate Treatment Summary
1766-00006	, patient 2	10/14/2009	10/14/2009	11/25/2009	Johnson, Frank	Generate Treatment Plan	Generate Treatment Summary
1766-00007	Smyth, Jane	10/29/2009	10/29/2009	03/12/2010	White, Betty	Generate Treatment Plan	Generate Treatment Summary
1766-00008	,	11/03/2009	12/01/2009	Enter Form	Johnson, Frank	Generate Treatment Plan	Generate Treatment Summary
1766-00009	,	11/05/2009	07/06/2010	Enter Form	Cullen, Edward	Generate Treatment Plan	Generate Treatment Summary
1766-00010	Smith, Mary	11/06/2009	11/06/2009	Enter Form	Hanson, Sally	Generate Treatment Plan	Generate Treatment Summary
1766-00011	Jones, Anne	11/11/2009	06/23/2010	06/23/2010	Cullen, Edward	Generate Treatment Plan	Generate Treatment Summary
1766-00012	bigwig, Molly	11/13/2009	11/13/2009	Enter Form	Johnson, Frank	Generate Treatment Plan	Generate Treatment Summary
1766-00013	Smith, Amy	11/13/2009	11/13/2009	Enter Form	Jones, Bob	Generate	Generate Treatment

Legend
Pending
Incomplete
 Complete
 Locked
 Form Options

General Neoadjuvant Chemo Adjuvant Chemo Other Therapy Contacts

General Information

Patient date of birth

 / / 
MM DD YYYY

Patient zip code at diagnosis

Medical oncologist name

Patient gender

☐ Female ☐ Male  

Ethnicity

☐ Hispanic or Latino
☐ Not Hispanic or Latino
☐ Not reported
☐ Unknown
☒  

Race

Select all that apply

☐ American Indian or Alaska Native
☐ Asian
☐ White
☐ Black or African American
☐ Native Hawaiian or other Pacific Islander
☐ Other
☐ Not Reported
☐ Unknown


Primary payer at diagnosis

Select all that apply

☐ Not insured/self pay
☐ Medicare
☐ Medicare with supplemental insurance
☐ Medicaid
☐ Private insurance
☐ VA/Military
☐ Other

[+] Errors

Errors and Warnings

The following **errors** will prevent saving the form as complete:

Patient date of birth:

Please enter a value for Patient date of birth.
ETPG1

Patient zip code at diagnosis:

Please enter a value for Patient zip code at diagnosis.
ETPG2

Medical oncologist name:

Please enter a value for Medical oncologist name.
ETPG3

Patient gender:

Please enter a value for Patient gender.
ETPG4

Ethnicity:

Please enter a value for Ethnicity.
ETPG5

Race:

Please enter a value for Race.
ETPG6

Primary payer at diagnosis:

Please enter a value for Primary payer at diagnosis.
ETPG7

ICD-9-CM code:

Please enter a value for ICD-9-CM code.
ETPG8

Date of diagnosis:



Legend: © Clear Selection Open Calendar Add Annotation Show Warnings Show History Show All Annotations

General **Neoadjuvant Chemo** Adjuvant Chemo Other Therapy Contacts

Neoadjuvant Chemotherapy Planned

Patient height (cm.)		Not documented	☐
Date of most recent measurement	/ /	Unknown	☐
Patient pre-treatment weight (kg.)		Not documented	☐
Date of most recent measurement	/ /	Unknown	☐
Patient pre-treatment BSA		Not documented	☐
Date of most recent calculation	/ /	Unknown	☐
Planned neoadjuvant chemotherapy start date	/ /		

Neoadjuvant chemotherapy regimen planned

- ☐ TAC Chemotherapy -- Docetaxel 75 mg/m² IV day 1; Doxorubicin 50 mg/m² IV day 1; Cyclophosphamide 500 mg/m² IV day 1; Cycled every 21 days for 6 cycles
- ☐ Dose-dense AC followed by paclitaxel chemotherapy -- Doxorubicin 60 mg/m² IV day 1; Cyclophosphamide 600 mg/m² IV day 1; Cycled every 14 days for 4 cycles. Followed by Paclitaxel 175 mg/m² by 3 h IV infusion day 1; Cycled every 14 days for 4 cycles.
- ☐ AC followed by paclitaxel chemotherapy -- Doxorubicin 60 mg/m² IV day 1; Cyclophosphamide 600 mg/m² IV day 1; Cycled every 21 days for 4 cycles. Followed by Paclitaxel 80 mg/m² by 1 h IV infusion weekly for 12 weeks (Or Paclitaxel 175 mg/m² by 3 h IV infusion every 21 days for 4 cycles)
- ☐ TC chemotherapy -- Docetaxel 75 mg/m² IV day 1; Cyclophosphamide 600 mg/m² IV day 1; Cycled every 21 days for 4 cycles
- ☐ AC chemotherapy -- Doxorubicin 60 mg/m² IV day 1; Cyclophosphamide 600 mg/m² IV day 1; Cycled every 21 days for 4 cycles
- ☐ CMF Chemotherapy -- Cyclophosphamide 100 mg/m² PO days 1-14; Methotrexate 40 mg/m² IV days 1 and 8; 5-Fluorouracil 600 mg/m² IV on days 1 and 8; Cycled every 28 days for 6 cycles

General Neoadjuvant Chemo **Adjuvant Chemo** Other Therapy Contacts

Adjuvant Chemotherapy Administered

Adjuvant chemotherapy regimen administered

TC chemotherapy -- Docetaxel 75 mg/m2 IV day 1; Cyclophosphamide 600 mg/m2 IV day 1; Cycled every 21 days for 4 cycles



Adjuvant chemotherapy start date

08 / 08 / 2009
MM DD YYYY



Adjuvant chemotherapy end date (discontinued or completed)

08 / 09 / 2009
MM DD YYYY



Modifications to regimen (dose reductions, cycles not administered, additional cycles administered, schedule changes)

No modifications to regimen

☐

Additional chemotherapy drugs administered

- ☐ Yes
☒ No



Enter new drug names



Reason for stopping treatment

- ☐ Completion
☒ Toxicity
☐ Progression of disease
☐ Death
☐ Patient request to stop
☐ Patient transfer to another practice/care facility
☐ Other



Toxicities and Hospitalizations

[-] Errors

Errors and Warnings

The following **critical errors** will prevent saving the form unless corrected:

Modifications to regimen (Adjuvant):

Please enter a value for Modifications to regimen.
ETS0024



Breast Cancer Treatment Plan

The Breast Cancer Treatment Plan provides a brief record of major aspects of breast cancer adjuvant treatment. This is not a complete patient history or comprehensive record of intended therapies.

Treatment plan report date: 02/25/2011	
Patient name: Number five Patient	
Patient ID: 00027	Support contact name: Husband O. Patient
Patient phone 1: 123-456-7890	Support contact relationship: spouse
Patient date of birth: 01/01/1931	Support contact phone: 123-456-7890
Medical oncologist name: Ginger Norris	

BACKGROUND INFORMATION

Hysterectomy status: No hysterectomy	Menstrual status: Last menstrual period more than 1 year before diagnosis date
	Age of menopause: 52

BREAST CANCER DIAGNOSIS INFORMATION

ICD-9-CM code: 174.3	Date of diagnosis: 01/12/2011	Age at diagnosis: 80
Breast cancer site: Right	Tumor type: Infiltrating ductal	
Breast cancer surgical status: Local excision	Lymph node evaluation: Complete axillary dissection	Surgical resection results: Tumor resected, clear margins
Number lymph nodes removed: 14	Number lymph nodes positive: 3	
Pathologic T-stage: T1a	Pathologic N-stage: N1	
AJCC stage at diagnosis: I	Her2Neu status: HER2 negative	
ER status: Uninterpretable	Additional ER testing: Yes	PR status: PR negative

TREATMENT PLAN

ECOG performance status: 1
Comorbid conditions: Dementia; Diabetes

Chemotherapy

Chemotherapy planned: Adjuvant chemotherapy			
Pre-treatment BSA:		Planned chemotherapy start date: 02/___/2011	
Chemotherapy regimen planned: CMF Chemotherapy -- Cyclophosphamide 100 mg/m ² PO days 1-14; Methotrexate 40 mg/m ² IV days 1 and 8; 5-Fluorouracil 600 mg/m ² IV on days 1 and 8; Cycled every 28 days for 6 cycles			
Possible side effects of this regimen:	X Hair loss = Low blood count = Cardiac symptoms = Other:	X Nausea/Vomiting X Fatigue = Other:	X Neuropathy = Menopause symptoms

Trastuzumab

Trastuzumab planned: No		
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Hormonal Therapy

Hormonal therapy planned: No	Planned start date:	Hormonal therapy type:
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Radiation Therapy

Radiation therapy: Radiation complete	Radiation start date: 01/25/2011	Radiation end date: 01/30/2011
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ONCOLOGY TEAM MEMBER CONTACTS

Provider Type	First Name	Last Name	Contact Info
Medical oncologist	George	Orwell	(123) 654-0987

COMMENTS

Discussed Mrs. Patient's concerns about the implication for her three daughters



Evaluation of Pilot

- Qualitative evaluation of pilot throughout
- Formal evaluation of pilot
(Apr'10-Dec '10)
 - Practice staff surveys
 - Patient surveys



Conclusion of Pilot: Dec 2010

- **Critically evaluate pilot based on:**
 - **Patient and practice surveys**
 - **Practice interviews and qualitative experience (recorded by staff throughout pilot)**

Conclusion of Pilot

- **2 Abstracts submitted to ASCO 2011**
 - **Feasibility and utility of Registry to practices**
 - **Utility, satisfaction and burden of Treatment Plan and Summary administration for patients and practices**



Practice Evaluation Results

- 52% of practice participants replied to an end-of-pilot survey (52 physicians, 49 staff)
- 73% were satisfied with the overall BCR and its web-based application
- 90% of those who had been involved with creating or communicating the treatment plans/summaries found them useful to improve communication between the medical oncologist and the patient



Practice Evaluation Results

- 93% had a favorable view of using BCR data for practice quality improvement
- 31% expressed concern regarding the time required to accomplish at least one aspect of the pilot
- 52% indicated the practice incurred additional costs to meet the requirements of the BCR



Patient Evaluation Results

- Of 318 consented patients, 175 (55%) responded to at least one survey; 8 completed two surveys
- 94% felt it improved communication with their doctors
- 82% felt it improved communication between their doctors
- 72% said it gave them greater peace of mind, while 2 (1%) had less peace of mind

Patient Evaluation Results

- 97% felt it was useful
- 62% had given the form to another doctor or planned to
- All patients surveyed after receiving a summary (N=63) recommended their practice continue to provide plans/summaries to patients



Moving Forward with Registry

- **Dissemination and implementation more widely**
- **Must minimize burden**
- **Great opportunity point of care QI, improved care coordination and communication, and for health services research (community-based care)**

