



# Quality Measures

Primary Site	Measure Type	Measure Specifications
Breast	Accountability	(NQF #219) Radiation therapy is administered within 1 year (365 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer. (BCSRT)
	Accountability	(NQF #0559) Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cN0M0, or stage II or III hormone receptor negative breast cancer. (MAC)
	Accountability	(NQF #0220) Tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1cN0M0, or stage II or III hormone receptor positive breast cancer. (HT)
	Accountability	Radiation therapy is considered or administered following any mastectomy within 1 year (365 days) of diagnosis of breast cancer for women with >4 positive regional lymph nodes. (MASTRT)
	Quality Improvement	(NQF #0221) Image or palpation-guided needle biopsy (core or FNA) is performed to the primary site to establish diagnosis of breast cancer. (nBx)
	Surveillance	Breast conservation surgery rate for women with AJCC clinical stage 0, I, or II breast cancer. (BCS)
Cervix	Surveillance	Radiation therapy is completed within 60 days of initiation of radiation among women diagnosed with any stage of cervical cancer (CERRT)
	Surveillance	Use of brachytherapy in patients treated with primary radiation with curative intent in any stage of cervical cancer. (CBRRT)
	Surveillance	Chemotherapy administered to cervical cancer patients who received radiation for stages IB2-IV cancer (Group 1) or with positive pelvic nodes, positive surgical margin, and/or positive parametrium (Group 2) (CERCT)
Colon	Accountability	(NQF #0223) Adjuvant chemotherapy is considered or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer. (ACT)
	Quality Improvement	(NQF #0225) At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer. (12RLN)
Gastric	Quality Improvement	At least 15 regional lymph nodes are removed and pathologically examined for resected gastric cancer. (G15RLN)
Lung	Surveillance	At least 10 regional lymph nodes are removed and pathologically examined for AJCC stage IA, IB, IIA and IIB resected NSCLC. (10RLN)
	Quality Improvement	Surgery is not the first course of treatment for cN2, M0 lung cases. (LNoSurg)
	Quality Improvement	Systemic chemotherapy is administered within 4 months to the day preoperatively or day of surgery to 6 months postoperatively or it is considered for surgically resected cases with pathologic lymph node - positive (pN1 and pN2) NSCLC. (LCT)
Rectum	Quality Improvement	Preoperative chemo and radiation are administered for clinical AJCC T3N0, T4N0, or Stage III; or Postoperative chemo and radiation are administered within 180 days of diagnosis for clinical AJCC T1-2N0 with pathologic AJCC T3N0, T4N0, or Stage III; or treatment is considered; for patients under the age of 80 receiving resection for rectal cancer. (RECRTCT)
Ovary	Surveillance	Chemotherapy started within 42 days (before or after) the Date of Most Definite Surgery in Stages IA-IV Ovarian, Fallopian Tube, or Peritoneal cancers (OVCT)
	Surveillance	Salpingo-oophorectomy with omentectomy, debulking; cytoreductive surgery, or pelvic exenteration in Stages I-IIIC Ovarian cancer (OVSAL)
Endometrium	Surveillance	Chemotherapy and/or radiation administered to patients with Stage IIIC or IV Endometrial cancer (ENDCTRT)
	Surveillance	Endoscopic, laparoscopic, or robotic surgery performed for all Endometrial cancer (excluding sarcoma and lymphoma), for all stages except stage IV (ENDLRC)