

Type of the Center:*	Critical Mass:			Number of Cases Operated per Year:
	a. Total number of cases attending outpatient clinic at your facility per year	b. Total number of Early diagnosed patients attending the outpatient clinic at your facility per year	c. Total number of Advanced/ Metastatic diagnosed patients attending the outpatient clinic at your facility per year	

Is there a multidisciplinary case management meeting (MDM) to discuss diagnostic preoperative and postoperative cases, as well as any other issues related to cancer patients that requires multidisciplinary discussion:	If Yes, How Often:	Percentage of all cases (early, locally advanced, and metastatic) discussed at the meeting / all cases attending the center of head and neck tumors:	Do you have records for evidence on decisions taken for each patient at the meeting assigned by each member participating in each meeting:	Does the MDT recommendation for the treatment plan are communicated and discussed with the patient to arrive at a shared decision which includes the patient's wishes:

MDT Members

a. Surgeons (Choose all available options):	0	1	2	3	4	>4	b. Oncologists (Choose all available options):	0	1	2	3	4	>4	c. Radiologists (Choose all available options):	0	1	2	3	4	>4	d. Pathologists (Choose all available options):	0	1	2	3	4	>4	e. Radiation Oncologists:
MD							MD							MD							MD							
EGYPTIAN Fellowship							EGYPTIAN Fellowship							EGYPTIAN Fellowship							EGYPTIAN Fellowship							
MasterDegree							MasterDegree							MasterDegree							MasterDegree							

10- Did your facility coordinate with a population-based cancer screening program for the assessment of screen-positive cases:	11- Does the facility have a patient pathway and treatment protocol that ensures continuity of care and describes the steps and their timing from diagnosis (or screening) to follow-up.	12- Is the patient pathway agreed at least by: the core MDT members and quality department and general manager and revised by the higher committee of surgical oncology (Choose all available options):	13- Percentage of patients fully informed about each step in the diagnostic and therapeutic pathway (documented):	14- Are your patients offered clear verbal and written information (leaflets) that describe the diagnostic and treatment options:

20- Resources and Equipment:

a. Total Number of Hospital Beds:	b. Number of program-dedicated (specialty) inpatient beds days\week:	c. Dedicated OR rooms for specialty\week:	d. Dedicated surgical ICU beds for specialty\ week:	e. Availability of Towers and sets to serve the service required:	f. Mention all available option:	g. Well-Equipped Emergency Services Room:	h. Dialysis ICU:	i. Blood Bank / Storage:

21- Quality Control & Data Management

22- Medical Records & Data Base:

a. The Presence Of (Choose all available options):	b. Total Score of Last Evaluation (Last 3 Months):	a. Is there is a formal medical record including history, examination, follow up & operative details (Choose all available options):	b. Percentage of completion of the records	c. Is there a database to collect data on all primary and advanced cancer patients:	d. Is there a data manager who works in the core team under the supervision of a medical doctor designated by the clinical coordinator:	e. Does the facility have:

23- Morbidity & Mortality Committee:		24- KPIs (last 3 months):						
a. Is there is a morbidity and mortality committee in the Center:	b. If yes, Is there (Choose all available options):	a. Average length of stay of cases as per procedure done:	b. Percentage of readmission within one month:	c. Consultant outcomes:	d. Surgical safety checklist practice in OR:	e. Infection control measures abidance Intraoperative, Inpatient and ICU:	f. Infection rates Post-Operative:	g. Mortality rates (last 3 months):

25- Does the Facility (Choose all available options):	26- Research:		
	a. Does the facility have Clinical Research Department:	b. If yes, Is there a research work conducted within the facility (Choose all available options):	c. Percentage of patients participating in clinical trials/research work each year:

27. Radiology Department:

a. Number of Qualified Radiologists	0	1	2	3	4	>4	b. Imaging equipment (Choose all available options):	c. Digital storage of all reports:	d. Maintenance of the Equipment:
Consultant									
Specialist with Experience Less than 7 years									
Specialist with Experience More than 7 years									

28- Pathology Department:

[illegible]

29- Medical Oncology Department:

a. Number of Qualified Medical Oncologists:	0	1	2	3	4	>4	b. Is there a specialized medical oncologists who treat a minimum of 50 early and 25 metastatic cancer patients (per certain specialty):	c. Does your facility Medical Oncologists supervise systemic therapy:	d. Are follow-up information on all patients treated with systemic therapy collected:
Consultant									
Specialist with Experience Less than 7 years									
Specialist with Experience More than 7 years									

30- Radiation oncology:

a. The radiation oncology unit is:	b. In all situations, does the facility have full access to all patient data regarding diagnosis and treatment:	c. Is there radiation oncologists competent to determine the need for different techniques (Choose all available options):	d. Does the radiation oncology units work to an evidence-based radiation therapy clinical protocol:	e. Is there a quality assurance program for the entire radiation oncology process, including for the machines/ infrastructure:	f. Is available/ access to 3D Brachytherapy available: