

Cancer Surgery

Type of the center	HOSPITAL NAME:	
	Specialized Oncology Center	
	Department of Surgical Oncology	
	Specialized Department (General Surgery - Head & Neck - Gynecology - Urology - E.N.T. - Plastic Surgery - GIT - Thoracic Surgery - Neurosurgery)	

Number of Cases Operated per Year	> 100 Cases/Year	
	50 - 100 Cases/Year	
	25 - 50 Cases/Year	
	< 25 Cases/Year	

Critical Mass	Head & Neck Cancer	Breast Cancer	Thoracic Cancer	Upper and Lower GI cancer	Hepatobiliary Cancer	Gynecologic Cancer	Urogenital Cancer	Skin & Soft Tissue Cancer
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:	Yes	No	If Yes, How Often:						
			Weekly		Biweekly		Monthly		N/A

Percentage of all cases (early, locally advanced, and metastatic) discussed at the meeting / all cases attending the center of head and neck tumors	100% of the Cases	
	100% - 80% of the Cases	
	80% - 50% of the Cases	
	< 50% of the Cases	

Do you have records for evidence on decisions taken for each patient at the meeting assigned by each member participating in each meeting?	Yes, 100% of patients records	
	Yes, 100% - 80% of patients records	
	Yes, 80% - 50% of patients records	
	Yes, < 50% of patients records	

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	Yes, 100% of patients	
	Yes, 100% - 80% of patients	
	Yes, 80% - 50% of patients	
	Yes, < 50% of patients	

MDT Members

Surgeons (Choose all available options):	0	1	2	3	4	>4
MD						
EGYPTIAN Fellowship						
Master Degree						

Oncologists (Choose all available options):	0	1	2	3	4	>4
MD						
EGYPTIAN Fellowship						
Master Degree						

Radiologists (Choose all available options):	0	1	2	3	4	>4
MD						
EGYPTIAN Fellowship						
Master Degree						

d. Pathologists (Choose all available options):	0	1	2	3	4	>4
MD						
EGYPTIAN Fellowship						
Master Degree						

e. Radiation Oncologists:	0	1	2	3	4	>4
MD						
EGYPTIAN Fellowship						
Master Degree						

Did your facility coordinate with a population-based cancer screening program for the assessment of screen-positive cases:	Yes	No

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?	Patient Pathway	Patient Pathway and Treatment Protocol	Patient Pathway and Treatment Protocol with Ensures Continuity of Care	None Of The Above

Percentage of patients fully informed about each step in the diagnostic and therapeutic pathway (documented):	100%	
	100% - 80%	
	80% - 50%	
	< 50%	

Are patients allowed to ask for a second opinion?	Yes	No

Are your patients offered clear verbal and written information (leaflets) that describe the diagnostic and treatment options	Written and Verbal	
	Written Only	
	Verbal Only	
	None	

Time to start primary treatment (in weeks) from the first diagnostic examination in your facility or first consultation at your clinics if diagnosed elsewhere:	< 2 Weeks	
	2 - 4 Weeks	
	> 4 Weeks	

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):	General Manager	The Core MDT Members	Quality Department	Revised by the Higher Committee of Surgical Oncology	None of the above

the facility has a nominated oncology center coordinator (a healthcare professional from any specialty within the core team):	Yes	No

If yes, Mention what of the following tasks are included among his duties (Choose all available options):	Responsible for the multidisciplinary approach and the full involvement of experts from the core disciplines and their regular participation in the MDM.	Ensure there is training and continuing medical education of MDT members.	Ensure related research.	Ensure the facility performance is based on high quality data collection and indicators	N/A

Available staff

Surgeons Qualifications:*	Head & Neck Cancer	Breast Cancer	Thoracic Cancer	Upper and Lower GI cancer	Hepatobiliary Cancer	Gynecologic Cancer	Urogenital Cancer	Skin & Soft Tissue Cancer
Consultant								
Specialist with experience 7 Years								
Specialist with experience more than 7 Years								

Average no. of cases/year each surgeon can perform:	Head & Neck Cancer	Breast Cancer	Thoracic Cancer	Upper and Lower GI cancer	Hepatobiliary Cancer	Gynecologic Cancer	Urogenital Cancer	Skin & Soft Tissue Cancer
Consultant								
Specialist with experience 7 Years								
Specialist with experience more than 7 Years								

Surgeons Can Perform (Choose all available options):	Head & Neck Cancer Surgery												
	Superficial Parotidectomy	Partial Glossectomy	Submandibular Gland Excision	Total Parotidectomy	Total Glossectomy	Excision of Maxillary / Orbital tumors	Excision of Mandibular tumors	Neck Dissection	Head & Neck Reconstructive Surgery	Hemithyroidectomy Open /Endoscopic	Total Hemithyroidectomy open /Endoscopic	Parathyroidectomy open /Endoscopic	N/A

Surgeons Can Perform (Choose all available options):	Breast Cancer Surgery									
	Excision wide local excision	Simple Mastectomy	Axillary Dissection	Radical Mastectomy	Conservative Breast Surgery	Oncoplastic Surgery Level I	Oncoplastic Surgery Level II	Reconstructive Breast surgery	Sentinel Lymph node	N/A

Surgeons Can Perform (Choose all available options):	Upper and Lower GI cancer (Laparoscopic / Open)															
	Esophagectomy	Partial Gastrectomy	Total Gastrectomy	Excision of Duodenal Tumors	Excision of Intestinal Tumors	Colectomy (Lift, Right...)	Open Anterior Resection	Open Low Anterior Resection	Open Ultra Low Anterior Resection	Open Abdominoperineal Anterior Resection	Laparoscopic Anterior Resection	Laparoscopic Low Anterior Resection	Laparoscopic Ultra Low Anterior Resection	Laparoscopic Abdominoperineal Anterior Resection	Excision of Retroperitoneal tumors	N/A

Surgeons Can Perform (Choose all available options):	Thoracic Cancer Surgery									
	Bronchoscopy	Lung Metastasectomy	lobectomy Metastasectomy	Thymectomy	Thoracic Lymph node Dissection	Excision of Epicardial Tumors	Excision of Pleural Tumors	Excision of Chest Wall Tumors	Excision of Chest Wall Tumors with Reconstruction	N/A

Surgeons Can Perform (Choose all available options):	Gynecologic Cancer Surgery (Laparoscopic / Open)						
	Open Total Abdominal Hysterectomy	Laparoscopic Total Abdominal Hysterectomy	Oophorectomy	Excision of Vaginal Tumors	Excision of Vulvar Tumors	Radical Hysterectomy	N/A

Surgeons Can Perform (Choose all available options):	Hepatobiliary Cancer Surgery(Laparoscopic / Open)						
	Hepatectomy	Open Cholecystectomy	Laparoscopic Colostectomy	Open Excision of Pancreatic Tumors	Laparoscopic Excision of Pancreatic Tumors	Excision of Retroperitoneal Tumors	N/A

Surgeons Can Perform (Choose all available options):	Urogenital Cancer Surgery(Laparoscopic / Open)								
	Nephrectomy	Urethrectomy	Radical Cystectomy	Complete TUR	Radical Orchidectomy	Open Adrenalectomy	Laparoscopic Adrenalectomy	Radical Cystectomy with Neobladder	N/A

Surgeons Can Perform (Choose all available options):	Skin & Soft Tissue Cancer Surge		
	Simple excision of tumor	Simple excision of tumor with Reconstruction	N/A

Anesthesia Staff Qualifications:		NO
Consultant		
Specialist with experience 7 Years		
Specialist with experience more than 7 Years		
Number of Nursing/Bed Ratio at Inpatient Department:		NO
1 Nurse / 5 Beds		
1 Nurse / 9 Beds		
1 Nurse / > 9 Beds		

Number of Operative Nurses / Operation Room:		NO
2 Nurses / 1 OR		
1 Nurse / 1 OR		
1 Nurse / > 1 OR		

Number of Nursing/Bed Ratio at ICU Department:		NO
1 Nurse / 1 ICU Bed		
1 Nurse / 2 ICU Beds		
1 Nurse / > 2 ICU Bed		

Resources and Equipment:

Total Number of Hospital Beds:	> 100 beds	
	100 - 70 beds	
	70 - 50 beds	
	< 50 beds	

Availability of laparoscopic sets to serve the service required:	Available	
	Not Available	

Dialysis/ ICU:	Available	
	Not Available	

Blood Bank / Storage:	Available	
	Not Available	

Dedicated OR rooms for specialty\week:	> 3 ORs	
	3 - 2 ORs	
	2 - 1 ORs	
	No ORs	

Well-Equipped Emergency Services Room:	Available	
	Not Available	

Dedicated surgical ICU beds for specialty\ week:	> 3 Beds	
	2 - 3 Beds	
	1 - 2 Beds	
	No Beds	

Number of program-dedicated (specialty) inpatient beds days\week:	> 15 beds	
	10 - 15 beds	
	5 - 10 beds	
	< 5 beds	

Quality Control & Data Management

The Presence Of (Choose all available options):	Quality Department	
	Quality Committee	
	Both (Quality Department & Committee)	
	N/A	

Medical Records & Data Base:

Is there is a formal medical record including history, examination, follow up & operative details (Choose all available options):	Paper Medical Records	
	Local Electronic Medical Records	
	Central Electronic Medical Records	
	Not Available	

Does the facility have:	Follow-up information from elsewhere at least yearly for its database.	
	Participate in external benchmarking activities.	
	Formal internal review meeting at least once a year to discuss all performance aspects.	
	None of the Above	

Is there a database to collect data on all primary and advanced cancer patients:	Yes	No

Is there a data manager who works in the core team under the supervision of a medical doctor designated by the clinical coordinator:	Yes	No

Percentage of completion of the records	100% - 70%	
	70% - 50%	
	< 50%	
	N/A	

Morbidity & Mortality Committee:

Is there is a morbidity and mortality committee in the Center:	Yes	No

If yes, Is there (Choose all available options):	Clear Policies, Procedures & Forms.	
	Regular Meetings.	
	Reports are assigned by Quality Department and Higher Manger.	
	N/A	

KPIs (last 3 months):

Average length of stay of cases as per procedure done:	< 3 days	
	3 - 5 days	
	5 - 10 days	
	> 10 days	

Surgical safety checklist practice in OR:	Applied	Not Applied

Infection rates Post-Operative:	< 2%	
	2% - 5%	
	5% - 10%	
	> 10%	

Infection control measures abidance Intraoperative, Inpatient and ICU:	Applied	Not Applied

Percentage of readmission within one month:	> 50%	
	20% - 50%	
	5% - 20%	
	< 5%	

Consultant outcomes:	100% Survival Rate	
	100% - 80% Survival Rate	
	80% - 50% Survival Rate	
	< 50% Survival Rate	

Mortality rates (last 3 months):	< 2%	
	2% - 5%	
	5% - 10%	
	> 10%	

Does the Facility (Choose all available options):	Provide Teaching on a Local, National or International for Surgeons.	
	Organize at Least one Teaching Course per year at local, regional, national or international level.	
	None of the Above	

Research:

Does the facility have Clinical Research Department:	Yes	No

If yes, Is there a research work conducted within the facility (Choose all available options):	Master and Ph.D. Research	
	Retrospective Cohort Studies	
	Prospective Cohort Studies	
	Clinical Trials	
	N/A	

Percentage of patients participating in clinical trials/research work each year:	> 5%	
	2% - 5%	
	< 2%	
	N/A	

Radiology Department:

Number of Qualified Radiologists:	0	1	2	3	4	>4
Consultant						
Specialist with Experience Less than 7 years						
Specialist with Experience More than 7 years						

Imaging equipment (Choose all available options):	Mammogram digital	
	Mammogram control enhanced	
	X-ray	
	Ultrasound	
	CT	
	MRI or access	
	Pet CT or access	
	N/A	

Digital storage of all reports:	Available	
	Not Available	

Maintenance of the Equipment:	Available	
	Not Available	

Pathology Department:

Number of Qualified Pathologists:	0	1	2	3	4	>4
Consultant						
Specialist with Experience Less than 7 years						
Specialist with Experience More than 7 years						

Pathologists Can Perform (Choose all available options):	Preoperative Samples (TCNB\Cytology).	
	Primary Cancer Resections.	
	Reports on Metastatic Surgical Specimens (Biopsy Performed for Suspicious Metastasis).	
	Intraoperative Frozen Pathology\Cytology	
	N/A	

Pathology Reports Include (Choose all available options):	Histological Type (According to the WHO Classification)	
	Grading (According to WHO Guidelines)	
	Immunohistochemistry Receptors Status	
	N/A	

Does the facility Revise Pathology when the patient is treated in another institution, do you revise the tumor blocks and by your facility pathologist:	Yes	No

Are tissue samples kept as long as possible (Pathology Archive):	100%	
	100% - 80%	
	80% - 50%	
	< 50%	

Pathology Equipment (Choose all available options):	Microscopes	
	Cryocut	
	Histoprocessors	
	Microtome Staining Machines	
	Immunostainers	
	A system for obtaining surgical sample and slide pictures	
	N/A	

Maintenance of the Equipment	Available	Not Available

Medical Oncology Department:

Number of Qualified Medical Oncologists:	0	1	2	3	4	>4
Consultant						
Specialist with Experience Less than 7 years						
Specialist with Experience More than 7 years						

Is there a specialized medical oncologists who treat a minimum of 50 early and 25 metastatic cancer patients (per certain specialty):	Yes	No

Does your facility Medical Oncologists supervise systemic therapy:	Yes	No

Are follow-up information on all patients treated with systemic therapy collected:	Yes	No

Radiation oncology:

The radiation oncology unit is:	On the same hospital	
	Not Available within the hospital, but there is an agreement with a radiation oncology Center	
	Not Accessible	

In all situations, does the facility have full access to all patient data regarding diagnosis and treatment:	Yes	No

Does the radiation oncology units work to an evidence-based radiation therapy clinical protocol:	Yes	No

Is there a quality assurance program for the entire radiation oncology process, including for the machines/ infrastructure:	Yes	No

Is available/ access to 3D Brachytherapy available:	Yes	No