

QOPI® 2018 Chart Selection Criteria

Round 2

Module	Sampling Criteria	Diagnosis and Visit Window
Breast	<ul style="list-style-type: none"> ICD-10 diagnosis codes: C50.xx (Female) 18 or older at diagnosis 	<p>Diagnosed 07/01/2017 - 10/31/2018</p> <p>First Office Visit 07/01/2017 - 10/31/2018</p> <p>2 office visits (practitioner) 05/01/2018 – 12/01/2018</p> <p>Chemo events can be abstracted to the office visit window end date</p>
Colorectal	<ul style="list-style-type: none"> ICD-10 diagnosis codes: C18.x, C19, C20 18 or older at diagnosis Curative resection* 	
Non-Hodgkin's Lymphoma	<ul style="list-style-type: none"> ICD-10 diagnosis codes: C82.x – C86.6, C88.4, C96.x 18 or older at diagnosis Indolent NHL may be included Patient received chemotherapy in or overseen by the practice for this diagnosis 	
Non-Small Cell Lung	<ul style="list-style-type: none"> ICD-10 diagnosis codes: C34.x 18 or older at diagnosis Non-small cell only Curative resection* 	
Gyn Onc (Ovarian, Fallopian Tube, Primary Peritoneal Cancer) MOQC PRACTICES: ONLY USE THIS CRITERIA TO IDENTIFY PATIENTS IF YOUR PRACTICE HAS A GYN ONC SURGEON(S) WHO ADMINISTERS CHEMOTHERAPY	<ul style="list-style-type: none"> ICD-10 diagnosis codes: C48.1, C48.2, C56.x, C57.00 - C57.02 Women, 18 or older at diagnosis Primary, secondary or interval cytoreduction to remove the ovary and/or fallopian tube, and/or adnexa (CPT codes: 58925, 58940, 58943, 58950, 58951, 58952, 58953, 58954, 58956, 58957, 58958, 58960, 58661, 58662, 49321, 49322, 38571, 38572, 58150, 58180, 58200, 58210, 58240, 58542, 58544, 58548, 58552, 58554, 58571, 58573, 58900, 58920, 58700, 58720, 49203, 49204, 49205, 49180) 	
Small Cell Lung Cancer	<ul style="list-style-type: none"> ICD-10 diagnosis codes: C34.x 18 or older at diagnosis 	
Prostate Cancer	<ul style="list-style-type: none"> ICD-10 diagnosis codes: C61, C61.0, C61.00 18 or older at diagnosis 	

*Not required, but if your site can select charts of patients with curative resection, it will maximize the sample size for selected disease-specific measures.

**The following ICD-10 codes are not eligible for the QOPI CORE sample: C80.2, C88.8, C90.02, C90.12, C90.22, C90.32, C91.02, C91.12, C91.22, C91.92, C92.02, C92.12, C92.22, C92.32, C92.42, C92.52, C92.12, C93.62, C93.32, C93.92, C94.02, C94.22, C94.32, C94.82, C95.02, C95.12, C95.92, C95.92, D45, D46.0, D46.1, D46.2, D46.20, D46.21, D46.4, D46.A, D46.B, D46.22, D46.C, D46.9, D47.Z1, C93.Z2

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Symptom/Toxicity Management	<ul style="list-style-type: none"> ICD-10 diagnosis codes**: C00.x - C26.x, C30.x - C34.x, C37.9 - C41.x, C43.x - C58.x, C60.x - C86.6, C88.x - C89.x, C90.x - C96.x, C4A.x, C7A.x - C7B.x, D00.x - D07.x, D09.x, D32.x - D33.x, D35.2 - D35.4, D43.x - D44.x, D46.x - D47.x Patients must have received chemotherapy in or overseen by the practice for the diagnosis being abstracted 	<p>Diagnosed 07/01/2017 - 10/31/2018</p> <p>First Office Visit 07/01/2017 - 10/31/2018</p> <p>2 office visits (practitioner) 05/01/2018 – 12/01/2018</p> <p>Chemo events can be abstracted to the office visit window end date</p>
Care at End of Life	<ul style="list-style-type: none"> ICD-10 diagnosis codes**: C00.x - C26.x, C30.x - C34.x, C37.9 - C41.x, C43.x - C58.x, C60.x - C86.6, C88 - C88.9, C90.x - C96.x, C4A.x, C7A.x - C7B.x, D00.x - D07.x, D09.x, D32.x - D33.x, D35.2 - D35.4, D43.x - D44.x, D46.x - D47.x Patient must have died 7/1/2017 - 10/31/2018 Death related to cancer or cancer-related treatment (assumed) Patients must have a known date of death 	<p>Diagnosed with invasive malignancy on/prior to 10/31/2018</p> <p>First Office Visit 07/01/2017 - 10/31/2018</p> <p>2 office visits (practitioner): In the 9 months preceding death with date of death on or before 12/01/2018</p>
<p>Palliative Care</p> <p>MOQC PRACTICES: DO NOT USE THIS CRITERIA TO IDENTIFY CHARTS UNLESS YOU ARE ABSTRACTING FOR QOPI CERTIFICATION OR RE-CERTIFICATION</p>	<ul style="list-style-type: none"> ICD-10 diagnosis codes**: C18.x, C19, C20, C34.x, C25.x Must be diagnosed with stage IV colorectal, lung, or pancreatic cancer or developed distant metastases during the diagnosis window 	<p>Diagnosed with Stage IV cancer 07/01/2017 - 10/31/2018</p> <p>OR (Diagnosed on/prior to 07/01/2017 AND Diagnosed with distant metastases 07/01/2017 - 10/31/2018)</p> <p>First Office Visit 07/01/2017 - 10/31/2018</p> <p>3 office visits (practitioner) 05/01/2018 - 10/31/2018</p>

*Not required, but if your site can select charts of patients with curative resection, it will maximize the sample size for selected disease-specific measures.

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Chart selection notes

- Select charts with only **Invasive Malignancies**. Non-invasive cancer is often termed "carcinoma in situ," "non-invasive cancer," or "intraductal carcinoma".
- Charts for patients with only non-invasive cancer should **not** be included in the sample. You can include charts for patients diagnosed with DCIS and invasive breast cancer; then abstract based on **invasive malignancy only**.
- **Practitioner:** Licensed independent practitioner, including physicians, advanced practice nurses (nurse practitioner or clinical nurse specialist), and/or physician assistants, as determined by state law.
- **Date of diagnosis:** Date the specimen was **collected** for the diagnosis being abstracted.
- **First Office Visit** can occur anytime within the diagnosis window; it is *not* required to be within the two (2) office visit window of **05/01/2018 – 12/01/2018**.
- Two (2) office visit window of **05/01/2018 – 12/01/2018** can include the first office visit and subsequent office visit, or two office visits after the **First Office Visit**.
- All patients must be aged 18 or older at the time of diagnosis for inclusion in the disease modules.
- All patients must have come to the office for cancer care, **not** for only a consult or second opinion.
- The abstraction will primarily focus on the care for the **initial** diagnosis and **initial** course of treatment (*not* recurrence).
- If the patient's original diagnosis occurred prior to the 16-month period: You may include the chart for the EOL sample, and only EOL questions will apply (if the patient died as a result of his or her cancer or cancer treatment during specified 16-month diagnosis window).
- If the patient was diagnosed with prostate cancer and castration resistant prostate cancer occurred during the 16-month diagnosis window, the chart may be included for Core, Symptom, and/or EOL **if** the criteria for these modules are met.
- Charts abstracted for the previous QOPI round should **not** be included; QOPI encourages selection of more recently diagnosed new patient charts to allow more recent assessment of care provided by the practice
- Only include charts of patients who had a recurrence if the initial diagnosis was made by the practice during the diagnosis window. The abstraction will focus on the initial diagnosis, **not** the recurrence.
- Exclude charts of patients diagnosed with more than one invasive malignancy during the diagnosis window. E.g., exclude charts of patients diagnosed with colorectal and breast cancer during the diagnosis window.
- For EOL charts, patients diagnosed **prior to 10/31/2018** may have had more than one invasive malignancy since first diagnosis but these charts will **not** apply to CORE.

*Not required, but if your site can select charts of patients with curative resection, it will maximize the sample size for selected disease-specific measures.

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