Quality Research in Radiation Oncology (QRRO)

J. Frank Wilson, M.D., Pl

Jean B. Owen, Ph.D., Project Director

Supported by NCI CA65435





QRRO – History and Key Players

- QRRO evolved from Patterns of Care Study (PCS)
- Key QRRO Committees for ATC
 - eData Committee
 - Chair Christopher Rose, M.D. (also QRRO Vice Chair)
 - Vice Chair Phillip Devlin, M.D.
 - GU Committee
 - Chair Michael Zelefsky, M.D.
 - Vice Chair Anthony Zietman, M.D.





QRRO is Different from Clinical Trials!

- Retrospective survey based on patient records
- Goals
 - Quality indicators and process measures for radiation oncology
 - Measure quality for emerging advanced technologies
- HIPAA
 - IRB review, but no informed consent or patient authorization
 - De-identified data no Protected Health Information (PHI)
- All types of practice
 - Not just those who can meet defined standards!





Electronic Data Collection

- Goals for Current Survey and for Future Surveys
 - Electronic Health Record direct transfer
 - From many institutions and systems
 - Demographics, diagnosis, staging, treatment (RT, chemotherapy, surgery, etc.), outcome
 - Web based data collection
 - Image data collection





Image Collection – First Study

- Prostate Brachytherapy would like to collect
 - Diagnostic images, i.e. post-implant CT scans
 - Treatment planning data, including DVH
- Data from whole spectrum of RT facilities
 - All possible systems





Questions

- Can ATC transfer <u>de-identified</u> images and treatment planning data?
- What does the data cleanup process at ATC include?
 - Technical compatibility
 - Meeting standards
- Does ATC have room for QRRO?
 - Suppose CT files for 600 patients from 70 facilities with a range of systems



