

Ongoing 2.0

Data Collection Period: 20 cases/patients from June 1-August 31. If you do not have 20 cases, include all that you do have. You may include more than 20 if you'd like

**This ongoing data collection tool is for [initial_applicatio_arm_1][hospital_name] [fin_number]
Please answer questions for the time period indicated.**

Date of Operation:

Record accession number:

**A nine-digit number used to identify the year in which the patient was first seen at the reporting facility for the diagnosis and/or treatment of cancer
If this case does not yet have an accession number or the case is in suspense, please enter 000
For more information, please see the STORE 2024 Manual

Case Tumor Sequence Number:

**Indicates the sequence of malignant and nonmalignant neoplasms over the lifetime of the patient.
Allowable values: 00-88, 99
If this case does not yet have a sequence number assigned, please enter "999"
For more information, please see the STORE 2024 Manual

Age:

Sex

- Female
- Male

Did this patient receive a pre-operative lymph node evaluation?

- Endobronchial Ultrasound (EBUS)
- Mediastinoscopy
- None

What type of procedure/surgery was done?

- Robotic
- VATS (Video Assisted Thoracoscopic Surgery)
- Open
- Converted Robotic to Open
- Converted VATS to Open

Procedure (Please select laterality AND tumor site(s))

	Right	Left	Upper Lobe	Middle Lobe	Lower Lobe
Wedge Resection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Segmentectomy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lobectomy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bilobectomy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pneumonectomy

Did this patient receive neoadjuvant therapy? (Remember, Standard 5.8 excludes primary resection specimens with no residual cancer) (e.g., following neoadjuvant therapy)

- Yes
- No

If, yes, please select below

- Neoadjuvant chemotherapy
- Neoadjuvant immunotherapy
- Neoadjuvant immunochemotherapy
- Neoadjuvant chemotherapy and radiation

From the synoptic report, which of the following nodal stations were collected (Select all that apply)

	2	3	4	5	6	7	8	9
Mediastinal Stations (need at least 3 to be compliant)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

From the synoptic report, which of the following nodal stations were collected (Select all that apply)

	10	11	12	13	14
Hilar Station (need at least one to be compliant)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Was this case compliant?

- Compliant
- Non-Compliant

Please select ALL known reasons why this case was non-compliant with Standard 5.8

- Surgeon did not perform the required lymphadenectomy
- Submitted nodes were identified by the pathologist to be fat tissue
- A fat pad from a station was sent but no nodes were found
- Pathologist did not report the findings in synoptic format
- Nodes obtained from prior mediastinoscopy were not documented in pathology note
- Specimen was mislabeled or lost
- Other reason not categorized above (please specify below)

Other Non-Compliant

To add another case, please click "add another case"

Other Comments
