OUTCOME REPORTING

REGIONS INCLUDED:
Avera McKennan | Avera Queen of Peace | Avera St. Luke’s | Avera Sacred Heart | Avera Marshall

PANCREATIC ADENOCARCINOMA, 2018

2018 NATIONAL COMPREHENSIVE CANCER NETWORK (NCCN) GUIDELINES FOR DIAGNOSTIC WORKUP OF ALL PANCREATIC ADENOCARCINOMA:
• Specialized pancreatic protocol imaging when clinically appropriate: 18/20 = 90%
• Multidisciplinary consultation/care when clinically appropriate: 67/67 = 100%

2018 NCCN GUIDELINES FOR DIAGNOSTIC WORKUP OF METASTATIC (STAGE IV) PANCREATIC ADENOCARCINOMA:
• Biopsy of metastatic site when clinically appropriate: 23/23=100%

2018 NCCN GUIDELINES FOR DIAGNOSTIC WORKUP OF NON-METASTATIC (STAGE I-III) PANCREATIC ADENOCARCINOMA:
• Proper imaging done to confirm the absence of metastatic disease prior to treatment when clinically appropriate: 8/10 = 80%
• Baseline values for liver function tests (LFTs) and carbohydrate antigen (CA) 19-9 obtained in the presence of adequate biliary drainage when clinically appropriate: 32/32=100%

*Duplicate patients have been consolidated into one record
*Class of Case 00 cases were eliminated

AVERA IS A HIGH-VOLUME PANCREATIC CANCER TREATMENT CENTER

• High-volume pancreatic cancer centers are defined by NCCN Guidelines as facilities that see more than 50 pancreatic cancer cases per year (all stages, all histologies). Pancreatic cancers seen at Avera in 2018 = 67.

• A high-volume pancreatic surgical resection hospital is defined by the NCCN Guidelines as a facility that does between 6 and 16 pancreatic cancer surgeries per year. Pancreatic cancer surgeries performed at Avera = 15.

*All patients in every Avera region have access to a high-volume pancreatic cancer center for their diagnosis and treatment. They can receive surgery at a high-volume surgery center and get both chemotherapy and radiation therapy close to home.