Public Health England

Protecting and improving the nation's health

Cancer Outcome and Services Data set

Change request

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Data Coordination Board

This information standard (DCB1521) has been approved for publication by the Department of Health and Social Care under section 250 of the Health and Social Care Act 2012.

Assurance that this information standard meets the requirements of the Act and is appropriate for the use specified in the specification document has been provided by the Data Coordination Board (DCB), a sub-group of the Digital Delivery Board.

This information standard comprises the following documents:

- specification
- implementation guide
- change request

An Information Standards Notice (DCB1521 Amd 13/2019) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled versions of these documents can be found on the NHS Digital website. Any copies held outside of that area, in whatever format (for example, paper, email attachment), are considered to have passed out of control and should be checked for currency and validity.

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Title	Cancer Outcome and Services Data set (COSD) – change request		
DCB Reference	DCB1521 Amd 13/2019		
Sponsor	Dr Jem Rashbass	**Status**	Final
Senior Responsible Officer	Professor John Newton	**Versions**	COSD v9.0 Pathology v4.0
Developer	Andrew Murphy		
Author(s)	Public Health England	**Version Date**	06/09/2019

Amendment history

Version(s)	Date	Amendment History
COSD v9.0 & Pathology v4.0	24 June 2019	Draft document sent to DCB for initial review
COSD v9.0 & Pathology v4.0	4 July 2019	Final amended document sent to DCB for board review
COSD v9.0 & Pathology v4.0	1 September 2019	Final amended document for publication

Approvals

This document has been approved by the following:

Name	Signature	Title / Responsibility	Date	Version
COSD Advisory Board	COSD Advisory Board	Cross Organisation Board	4 April 2019	v9.0 & v4.0
COSD Governance Board	COSD Governance Board	Cross Organisation Board, reporting to Professor Chris Harrison, National Clinical Director (NHS England) and Dr Jem Rashbass, Director for National Disease Registration (Public Health England)	30 April 2019	v9.0 & v4.0

Related documents

Ref #	Doc Reference	Title	Version	Date
1	COSD Specification[1]	COSD Specification	COSD v9.0 Pathology v4.0	6 July 2019

[1] www.digital.nhs.uk/isce/publication/dcb1521

Executive summary

The purpose of this document is to provide guidance intended to support providers of Cancer Services and developers (both in-house and commercial system suppliers), to prepare for the implementation of the COSD v9.0 and v4.0 for Pathology from April 2020.

This change request document outlines these changes across both data sets highlighting what are new data items verses those that have been amended, moved or deleted.

This is an update to an existing information standard DCB1521 Amd 74/2016 and is required to ensure that the data still meets the business objectives, scope and content of the standard and continues to be clinically accurate and relevant.

In order to maintain the clinical accuracy, it is important to regularly review COSD with clinical experts from across the NHS, including analysts and NHS England.

It is important to note that all pathology data items have now been removed from the main COSD v9.0 data set and can only be submitted via the pathology data set v4.0 and its set of schemas.

Introduction

Background

The Cancer Outcomes and Services Data Set (COSD) is the national standard for reporting cancer for the NHS in England. The National Cancer Registration and Analysis Service (NCRAS) are responsible for ongoing maintenance, development and implementation. The data sets relate to all cancer patients, both adult and paediatric, in acute inpatient and outpatient settings, but does not include private patients or primary care.

The COSD are compiled data sets, which provides the standard for secondary uses. The standard consists of:

- a set of individual data items, with their definitions
- the assemblage of these data items into discrete data sets
- the means of flowing the data items
- compilation of the data items into 2 reconciled and verified data sets

Overtime clinical data items may have changed or been amended by internationally recognised bodies, these must be acknowledged, and amendments made.

COSD has removed the interdependency between the National Cancer Waiting Times Monitoring Data set (NCWTMDS). In v9.0 developers from NHS England and Public Health England (PHE), have worked together to align both data sets, to reduce wherever possible the burden of data collection.

Summary of changes

These 2 new versions of COSD (v9.0 and v4.0 for pathology), complete the changes started in 2017 and further updated in 2018.

These additional changes were required in order to make the data sets clinically accurate, fully align with the Royal College of Pathologists (RC Path) Core data sets and also meet the recommendations within the Achieving World-Class Cancer Outcomes, A Strategy for England 2015-2020 (Cancer Taskforce Report)[2].

[2] http://www.cancerresearchuk.org/about-us/cancer-strategy-in-england

New data items have been added after an extensive (5 month) consultation was conducted with 40 key stakeholder groups and more than 150 clinical experts, including:

- site specific Expert Advisory Groups (EAGs) within PHE
- experts from within the NCRAS
- clinical support and advice from the chair of the Royal College of Pathologists Working Group on Cancer Services
- cancer charities (Cancer Research UK, AMMF – The Cholangiocarcinoma Charity, Breast Cancer Care, Living Beyond Cancer and MacMillan)
- patient groups and individuals through 'Use My Data' and the EAGs
- national cancer audits
- cancer and pathology system suppliers
- NHS England
- Cancer Waiting Times (CWT)
- quality surveillance
- cancer taskforce transformation board

This revision allowed the data sets to be clinically reviewed, validated and updated by experts in all fields of cancer, and provides a clinically sound set of data to be collected from 2020 onwards.

This required changes to the standard include:

- the mandation of certain key fields throughout the data sets to improve data quality and reduce the burden of data processing – where there was not enough data provided to make a validated treatment/cancer record
- the addition of choices enables clearer decision making and improves data quality
- 101 new data items enabled the data sets continue to meet the changing demand of cancer treatment and outcome data – of which 18 were pathology specific (after extensive discussions with the chair of the Royal College of Pathologists Working Group on Cancer Services)
- certain data were realigned or moved to within the data set – this ensures that data nests correctly within the XML and will help with data collection, quality and ascertainment
- 82 data items were deleted of which 12 were pathology specific (after extensive discussions with the chair of the Royal College of Pathologists Working Group on Cancer Services)
- represent only a small increase of 3% COSD and 4% Pathology in this version

Implementation start and full conformance timeline

The following timeframe will be used to support the implementation, data collection and outline the full conformance dates:

- implementation will be between 6 September 2019 and 31 March 2020 (six-and-a-half months)
- data collection will start from 1 April 2020 (with a 3-month roll-out period between 1 April 2020 and 30 June 2020)
- full conformance from 1 July 2020 (July data reported in the September upload)

Supporting documents

All the documents referred to in this change request document were submitted to the Data Standards Assurance Service (DSAS) for review under DCB1521 amendment Amd 13/2019.

Following acceptance by the Data Coordination Board (DCB) and confirmation of authority to publish by the Department of Health and Social Care, the official Information Standards Notice (ISN) and related documents were published on 6 September 2019.

This specification should be read in conjunction with the following documents, available at the designated website, http://content.digital.nhs.uk/isce/publication/dcb1521:

- specification
- implementation guide
- information standards notice

http://www.ncin.org.uk/collecting_and_using_data/data_collection/cosd:

- COSD data set v9.0
- COSD v9.0 user guide
- COSD v9.0 technical guide
- COSD pathology data set v4.0
- COSD pathology v4.0 user guide
- COSD pathology v4.0 technical guide

https://isd.digital.nhs.uk/trud3/user/guest/group/0/home:

- COSD data set v9.0 schema pack
- COSD pathology data set v4.0 schema pack

These documents are intended to support providers, in-house developers and system suppliers who wish to identify and plan changes to their systems.

The standard has been formally issued by DCB as an approved standard and the additional documentation above will help support change to local practice.

Related standards

The following standards should also be read in conjunction with this information standard:

- DCB0147 – National Cancer Waiting Times Monitoring Data Set[3]
- SCCI0111 – Radiotherapy Data Set[4]
- DCB1533 – Systemic Anti-Cancer Therapy Data Set[5]
- SCCI1577 – Diagnostic Imaging Data set[6]
- SCCI0021 – International Classification of Diseases[7]
- SCCI0034 – SNOMED CT[8]
- DCB2094 – Sexual Orientation Monitoring[9]
- Royal College of Pathologists Standards and Data sets for Histopathology Reporting on Cancers and Tissue Pathways[10]

[3] http://digital.nhs.uk/isce/publication/DCB0147
[4] http://digital.nhs.uk/isce/publication/SCCI0111
[5] http://digital.nhs.uk/isce/publication/DCB1533
[6] http://digital.nhs.uk/isce/publication/scci1577
[7] http://digital.nhs.uk/isce/publication/SCCI0021
[8] http://digital.nhs.uk/isce/publication/scci0034
[9] http://digital.nhs.uk/isce/publication/DCB2094
[10] http://www.rcpath.org/professional-standards

Change specification

These are complex data sets covering 200 diseases and requiring alignment with changing clinical practice. It is therefore expected that regular changes will be required. The newly added items reflect this and are introduced to align with current business needs and clinical practice, and to support data quality.

New data items have been added after extensive consultation was conducted with all the EAGs within PHE, experts from within the NCRAS, as well as clinical support and advice from the chair of the Royal College of Pathologists Working Group on Cancer Services.

Details of the consultation process were provided as supporting evidence to the DCB in the Consultation Plan document. In addition, there are new data to help identify and analyse.

For COSD, this includes:

- non primary cancer diagnoses
- diagnostic procedures
- risk factors
- additional items to support the living with and beyond cancer campaign
- a new multi disciplinary team meeting section
- acute oncology
- many new mandatory items for improve data quality
- support for National Audit of Breast Cancer in Older Patients (NABCOP), National Lung Cancer Audit (NLCA), and the National Prostate Cancer Audit (NPCA)
- to carry surgery outcome measures for Upper GI - Esophageal Database (ESODATA)

For pathology, this includes

- additional cell proliferation using Ki-67 cellular marker for multiple tumours
- mismatch repair
- HPV (p16) testing for head and neck cancers
- a new way of recording consultant information enforced by NHS Digital across all new or changed data sets

Choices have been added to improve data quality and reduce misinterpretation and burden.

Many data have been re-aligned across the data sets into the correct higher-level groupings, improving the structure and schema. This in turn enforces the addition of mandatory data items, improving data quality.

The data set can now be easily maintained within each Trust, by using 1 of 2 subsets (depending on the department responsible for each data collection process).

Pathology

All pathology data items have now been removed from the main COSD v9.0 data set and can only be submitted via the pathology data set v4.0 and its set of schemas.

Patient pathway

This is the data, excluding Pathology, which the Cancer Services Teams need to collect. By removing the pathology data from their workload, it could reduce their burden of data collection by up to 30%.

New items

Full details of all the new items (listed below) are provided in the COSD data set v9.0 and COSD user guide v9.0.

Core – Diagnostic – Non Primary Cancer Pathway Details (Recurrence):
- Original Primary Diagnosis (ICD)

Core – Diagnostic – Non Primary Cancer Pathway Details (Transformation):
- Original Morphology (ICD-O-3)
- Original Morphology (SNOMED)

Core – Referrals And First Stage Of Patient Pathway:
- Professional Registration Issuer Code – Consultant (First Seen)
- Professional Registration Entry Identifier – Consultant (First Seen)

Core – Non Primary Cancer Pathway – Referral:
- Date First Seen – Non Primary Cancer Pathway
- Organisation Site Identifier (Provider First Seen – Non Primary Cancer Pathway)

Core – Diagnostic Procedures:
- Organisation Site Identifier (Diagnostic Procedure)
- Diagnostic Procedure Date
- Diagnostic Procedure (OPCS)
- Diagnostic Procedure (SNOMED CT)

Core – Diagnosis – Progression:
- Metastatic Type
- Metastatic Site

Core – Clinical Nurse Specialist + Risk Factor Assessment:
- Tobacco Smoking Status
- Tobacco Smoking Cessation
- Physical Activity (Current)

Core – Clinical Nurse Specialist – Holistic Needs Assessment:
- Assessment Offered
- Staff Role Carrying Out The Assessment

Core – Clinical Nurse Specialist – Personalised Care And Support Planning:
- Care Planning Offered
- Care Planning Completed Date
- Point of Pathway
- Staff Role Carrying Out The Planning

Core – Multidisciplinary Team Meetings:
- Multidisciplinary Team Meeting Discussion
- Multidisciplinary Team Meeting Discussion Type

Core – Cancer Care Plan:
- Professional Registration Issuer Code – Consultant (Multidisciplinary Team Lead)
- Professional Registration Entry Identifier – Consultant (Multidisciplinary Team Lead)

Core – Site Specific Staging:
- Organisation Site Identifier (Site Specific Stage)
- Stage Date (Site Specific Stage)

Core – Treatment:
- Professional Registration Issuer Code – Consultant (Treatment)
- Professional Registration Entry Identifier – Consultant (Treatment)
- End of Treatment Summary Date

Core – Treatment – Surgery:
- Surgical Admission Type
- Professional Registration Issuer Code – Consultant (Surgeon)
- Professional Registration Entry Identifier – Consultant (Surgeon)

Core – Acute Oncology:
- Acute Oncology Assessment Date
- Organisation Site Identifier (Acute Oncology)
- Assessment Location
- Patient Type
- Outcome

Core – Laboratory Results:
- Laboratory Result Date
- Organisation Site Identifier (Laboratory Result)

Breast – Triple Diagnostic Assessment:
- Triple Diagnostic Assessment

Breast – Clinical Nurse Specialist + Risk Factor Assessment – NABCOP:
- Fitness Assessment Indicator
- Fitness Assessment Date
- Clinical Frailty Scale
- Abbreviated Mental Test Score
- Cardiorespiratory Disease
- Other Non Breast Locally Advanced/Metastatic Malignancy

Colorectal – Clinical Nurse Specialist:
- Clinical Nurse Specialist Type

CTYA – Site Specific Staging – Hepatoblastoma:
- Pretext Annotation Factors

CTYA – Treatment – Principal Treatment Centre:
- Childhood Principal Treatment Centre
- Teenage Young Adult (TYA) Principal Treatment Centre

Haematological – Cancer Care Plan – Myelodysplasia:
- IPSS-R (Myelodysplasia)

Haematological – Site Specific Staging – Myeloma:
- R-ISS Stage For Myeloma

Haematological – Laboratory Results – Various:
- European Leukaemia Net (ELN) Genetic Risk (Acute Myeloid Leukaemia)

Haematological – Laboratory Results – Acute Lymphoblastic Leukaemia – Response:
- Post Induction MRD

Head and Neck – Treatment – Surgery:
- Surgical Access Type
- Other Surgical Access Type

Liver – Diagnosis – Cholangiocarcinoma:
- Cholangiocarcinoma Category

Liver – Treatment And Prognostic Indicators:
- Child-Pugh Score

Lung – Diagnostic Procedures – Bronchoscopy:
- Bronchoscopy Performed Type

Lung – Molecular And Biomarkers – Somatic Testing For Targeted Therapy And Personalised Medicine:

- ALK Fusion Status
- ROS1 Fusion Status
- PD-L1 Expression

Upper GI – Treatment – Surgery – ESODATA:

- Surgical Complications – International Esophageal Database (ESODATA)
- Leak Severity Type
- Conduit Necrosis/Failure Type
- Recurrent Laryngeal Nerve Injury Involvement Type
- Chyle Leak Severity Type
- Calvien-Dindo Classification of Surgical Classifications
- Additional Complications

Upper GI – Treatment – Surgery – Outcome Measures:

- Change In Level of Care
- Blood Product Utilisation
- Number of Units Transfused

Upper GI – Treatment – Surgery – Oesophagectomy:

- Surgical Approach Type
- Open Approach Type
- Minimally Invasive Approach Type
- Anastomosis Type
- Oesophageal Conduit Type
- Neck Dissection

Urological – Diagnostic Procedures – Prostate:

- Biopsy Anaesthetic

Urological – Diagnosis – Prostate:

- mpMRI Pre-Biopsy
- MRI/Fusion Biopsy

Full details of all the new items (listed below) are provided in the COSD pathology data set v4.0 and COSD pathology user guide v4.0.

Core Pathology:

- Professional Registration Issuer Code – Consultant (Pathology Test Requested By)
- Professional Registration Entry Identifier – Consultant (Pathology Test Requested By)

- Professional Registration Issuer Code – Consultant (Pathologist)
- Professional Registration Entry Identifier – Consultant (Pathologist)
- Ki-67 Indicator
- Ki-67 Result
- MLH1 Nuclear Expression Intact
- PMS2 Nuclear Expression Intact
- MSH2 Nuclear Expression Intact
- MSH6 Nuclear Expression Intact
- Microsatellite Instability (MSI) Testing

CTYA – Renal Pathology (Paediatric Kidney):
- Viable Tumour At Resection Margin

Gynaecological – Pathology – Endometrial:
- Peritoneal Involvement (Endometrial)
- Site of Peritoneal Involvement

Head and Neck – Pathology – Human Papillomavirus (HPV):
- p16 Testing Indicator
- HPV-ISH Testing

Lung Pathology:
- Invasion Into Mediastinum

Upper GI – Pathology – Various:
- Total Number of Colorectal Metastases In Liver Code

Amendments

Full details of all the amendments are provided in both the data sets and user guides, and these documents should be read in conjunction to the change request. To help understand what has changed between versions:

- new or amended text is marked in green highlight
- text that has been deleted is ~~*marked with a strikethrough*~~
- where a yellow highlight is used, this denotes that the data item has been moved to a new group from COSD v8.0 to v9.0 or COSD pathology v3.0 to v4.0

The change log within each data set document outlines every change to each data item and is the best document to review these changes. These changes are grouped by tumour site/data set group.

The changes and the number of changes which apply to each group are listed below:

COSD v9

368 changes (excluding new or deleted items):

- fourteen data items now form part of a choice
- two data dictionary/element name changes
- sixteen data items had an updated description
- twelve data items had a name change
- sixteen data items had a new number assigned
- seven data items had a new format applied
- nine new grouped sections created
- fifty-one data items were moved within the data set
- one item had a national code definition change
- seventeen data items had changes to their attributes (new, amended or deleted)
- thirty-four data items became part of a new child group
- thirty-six new sections have been created
- twenty-eight data items were moved into a new section
- twenty-two sections have been renamed
- two section names have been corrected affecting 11 data items
- eighty-seven data items, sections or choices have a change to their schema specification

Pathology v4

225 changes (excluding new or deleted items):

- thirty-three data items had changes to their attributes (new or amended)
- six data items had updated descriptions
- five data items had a new format applied
- three data items had a new data item name
- three new grouped sections were created
- nine data items were moved within the data set
- three new sections were created within the data set
- sixteen data items, sections or choices have a change to their schema specification
- one-hundred-and-forty-seven data items had a new data item number applied (prefixed with a lower case ‘p’), to differentiate between COSD and COSD Pathology

Please remember that some data items have more than one change, for example Metastatic Type has been moved, got a new name, a new description and a schema specification change.

Amendments were required to ensure that where changes to international or other data items controlled by another body have been updated, these changes have been accurately reflected within COSD at the point of review. These included reviewing the pathology data set with the Royal College of Pathologists.

It is expected that some data will change throughout the lifetime of the data sets and these changes will be acknowledged and changes made in the next version review.

Deletions

The following data items are deleted for the reasons stated against each item. More detail is available within the change control log of COSD v9.0 and COSD pathology v4.0 (Inc. Data Item No.) and should be used in conjunction with this document.

COSD v9.0

Core – Diagnostic – Non Primary Cancer Pathway Details:
- Non Primary Cancer Pathway

(no longer required within v9 data set or for the schema algorithms)

Core – Referrals And First Stage Of Patient Pathway:
- Consultant Code (First Seen)

(this has been replaced by CR7300 and CR7310)
- Cancer or Symptomatic Breast Referral Patient Status

(this has been removed as not required for Cancer Registration purposes)

Core – Diagnostic – Non Primary Cancer Pathway Details (Recurrence):
- Cancer Recurrence Care Plan Indicator

(no longer required within v9 data set)

Core – Clinical Nurse Specialist + Risk Factor Assessment:
- Smoking Status

(replaced with Tobacco Smoking Status)

Core – Cancer Care Plan:
- Consultant Code (Multidisciplinary Team Lead)

(this has been replaced by CR8200 and CR8210)

Core – Molecular And Biomarkers – Somatic Testing For Targeted Therapy And Personalised Medicine:
- Stratified Molecular Test Performed

(no longer required within v9 data set or for the schema algorithms)

Core – Treatment:
- Consultant Code (Treatment)

(this has been replaced CR8400 and CR8410)
- Cancer Treatment Event Type

(this has been removed as not required for Cancer Registration purposes)

Core – Surgery And Other Procedures:
- Consultant Code (Surgeon)

(this has been replaced CR8510 and CR8520)

Core – Radiotherapy:
- Brachytherapy Type

(to be added to RTDS in 2020)

Core – Active Monitoring:
- Monitoring Intent

(can this be collected using CR0680 and CR2040 (08))

Core – Death Details:
- Person Death Date

(no longer required within v9 data set, collected directly from ONS)
- Death Location Type

(no longer required within v9 data set, collected directly from ONS)

Breast – Referrals:
- Date of Clinical Assessment

(no longer required within v9 data set)
- Organisation Site Identifier (of Clinical Assessment)

(no longer required within v9 data set)
- Clinical Assessment Result (Breast)

(no longer required within v9 data set)

CNS – Staging – CSF (Cerebrospinal Fluid):
- Chang Staging System Stage Date

(replaced using ‘Core Site Specific Stage’ mandatory fields)

Colorectal – Staging:
- Modified Dukes

(no longer required within v9 data set)
- Modified Dukes Stage Date

(no longer required within v9 data set)

CTYA – Staging – Renal Tumours:
- Wilms Tumour Stage Date

(replaced – ‘Core Site Specific Stage’ mandatory fields)

CTYA – Staging – Neuroblastoma:
- International Neuroblastoma Risk Group (INRG) Staging System Date

(replaced – ‘Core Site Specific Stage’ mandatory fields)

CTYA – Staging – Hepatoblastoma:
- Pretext Staging Outside Liver

(replaced with pretext annotation factors)

CTYA – Staging – Retinoblastoma:
- Retinoblastoma Assessment Date

(replaced – 'Core Site Specific Stage' mandatory fields)

CTYA – Laboratory Results – Neuroblastoma:
- Cytogenetic Risk Classification (Neuroblastoma)

(removed at the request of the lead of the Expert Advisory Group, following consultation)
- Ferritin Value

(removed at the request of the lead of the Expert Advisory Group, following consultation)

Gynaecological – Staging:
- Final Figo Stage Date

(replaced using 'Core Site Specific Stage' mandatory fields)

Haematological – Cancer Care Plan – CLL:
- Hepatomegaly Indicator

(no longer required within v9 data set)
- Number of Lymphadenopathy Areas

(no longer required within v9 data set)

Haematological – Cancer Care Plan – CML:
- Spleen CM Below Costal Margin

(no longer required within v9 data set)

Haematological – Cancer Care Plan – Myelodysplasia:
- IPSS (Myelodysplasia)

(replaced with new prognostic score HA9000)

Haematological – Staging – Myeloma:
- ISS Stage For Myeloma Date

(replaced using 'Core Site Specific Stage' mandatory fields)
- ISS Stage For Myeloma

(replaced with New R-ISS Stage for Myeloma)

All of the following are no longer required within v9 data set

Haematological – Laboratory Results – Various:
- Platelet Count
- Blood Haemoglobin Concentration (Grams Per Litre)
- Bone Marrow Karyotype
- Neutrophil Count
- Albumin Level
- Beta2 Microglobulin Level
- Blood Lymphoctye Count
- Lactate Dehydrogenase Level
- Blood Myeloblasts Percentage
- Blood Basophils Percentage
- Blood Eosinophils Percentage
- Cytogenetic Group (Acute Lymphoblastic Leukaemia And Acute Myeloid Leukaemia)

Haematological – Staging – Ann Arbor:
- Ann Arbor Stage Date

(replaced using 'Core Site Specific Stage' mandatory fields)

Haematological – Staging – CLL:
- Binet Stage Date

(replaced using 'Core Site Specific Stage' mandatory fields)

Haematological – Diagnosis – Acute Lymphoblastic Leukaemia:
- Risk Group Allocation

(no longer required within v9 data set)

Haematological – Staging – Non Hodgkin Lymphoma:
- Murphy (St Jude) Stage Date

(replaced using 'Core Site Specific Stage' mandatory fields)

All of the following are no longer required within v9 data set

Haematological – Laboratory Results – Acute Lymphoblastic Leukaemia – Response:
- D29 BM
- D29 MRD
- D29 Status of Extramedullary

Liver – Staging:
- Barcelona Clinic Liver Cancer (BCLC) Stage Date

(replaced using ‘Core Site Specific Stage’ mandatory fields)
Liver – Treatment – Liver Mets and Liver HCC:

- HCC Embolisation

(no longer required within v9 data set)

Lung – Imaging – NLCA:

- Transthoracic Echocardiogram Date

(replaced using ‘Core Diagnostic Procedure’ mandatory fields)

Lung – Diagnosis – National Lung Cancer Audit (NLCA):

- Diffusion Capacity (DLCO or TLCO) Date

(replaced using ‘Core Diagnostic Procedure’ mandatory fields)

Lung – Surgery And Other Procedures – Bronchoscopy:

- Procedure Date Bronchoscopy

(replaced using ‘Core Diagnostic Procedure’ mandatory fields)

- Bronchoscopy Performed Indicator

(replaced using ‘Bronchoscopy Performed Type’)

Bronchoscopy Performed Indicator:

- Cardiopulmonary Exercise Test Date

(replaced using ‘Core Diagnostic Procedure’ mandatory fields)

Skin – Diagnosis – MM:

- Sentinel Node Biopsy

(no longer required within v9 data set, can be collected using the Diagnostic Procedures section)

- Sentinel Node Biopsy Date

(replaced using ‘Core Diagnostic Procedure’ mandatory fields)

- Organisation Identifier Of Reporting Laboratory

(no longer required within v9 data set, can be collected using the Diagnostic Procedures section)

All of the following are no longer required within v9 data set

Skin – Staging:

- AJCC Stage Group
- AJCC Stage Group Date

Upper GI – Staging Laparoscopy:
- Staging Laparoscopy Performed

Upper GI – Staging – Pancreatic:
- Clinical Stage (Pancreatic Cancer)
- Clinical Stage (Pancreatic Cancer) Date

Upper GI – Surgery And Other Procedures – O-G:
- Surgical Complications

Urological – Staging – Testicular:
- Urological – Staging – Testicular Date

(replaced using 'Core Site Specific Stage' mandatory fields)

Urological – Treatment – Prostate:
- PSA (Pre Treatment)

(no longer required within v9 data set)

COSD Pathology v4.0

Core – Pathology Details
- Care Professional Code (Pathology Test Requested By)

(this has been replaced by pCR7100 and pCR7120)
- Consultant Code (Pathologist)

(this has been replaced by pCR7130 and pCR7140)

Colorectal – Pathology
- Grade Of Differentiation (Colorectal Pathological)

(can be assigned using pCR0860, there is a table in the user guide for more detail)

CTYA – Renal Pathology (Paediatric Kidney)
- Viable Tumour

(replaced with new data item pCT6680)

Gynaecological – Pathology – Nodes
- Nodal Status Cervical Cancer

(can be collected using pCR0920)

Lung – Pathology
- Proximity To Carina

(within TNM 8 this is no longer required as the distance is irrelevant)

Sarcoma – Pathology – Bone And Soft Tissue

- Sarcoma Surgical Margin Adequacy

(not required in v4.0)

Skin – Pathology – BCC and SCC

- Deep Invasion Indicator For PT3

(this should be recorded within the Core Pathology T Stage field, removed duplication and potential data error)

- Deep Invasion Indicator For PT4

(this should be recorded within the Core Pathology T Stage field, removed duplication and potential data error)

Upper GI – Pathology – Liver Mets

- Number Of Colorectal Metastases In Liver Code

(replaced with the following data item pUG14500)

Urological – Pathology – Prostate

- Organ Confined

(not required in v4.0)

- Seminal Vesicles Invasion

(not required in v4.0)