

Annual Report 2020

of the certified Gynaecology Cancer Centres

Audit year 2019 / Indicator year 2018



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General information

| | |
|---|--|
| Kennzahl Nr. 1: Vorstellung Tumorkonferenz | |
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| Kennzahl Nr. 3: Beratung Sozialdienst | |
| Kennzahl Nr. 4: Anteil Studien Patientinnen | |
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| Kennzahl Nr. 6: Primärfälle mit Genitalmalignom | |
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| Kennzahl Nr. 11: Postoperative Chemotherapie fortgeschrittenes Ovarialkarzinom (LL Ovar QI 5) | |
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| Kennzahl Nr. 13: Platinhaltige Chemotherapie frühes Ovarialkarzinom (LL Ovar QI 7) | |
| Kennzahl Nr. 14: First-Line Chemotherapie fortgeschrittenes Ovarialkarzinom (LL Ovar QI 8) | |

Quality indicators of the guidelines (GL QI):

In the table of contents and in the respective headings the indicators, which correspond to the quality indicators of the evidence-based guidelines are specifically identified. The quality indicators identified in this way are based on the strong recommendations of the guidelines and were derived from the guidelines groups in the context of the guideline programme oncology. Further information: www.leitlinienprogramm-onkologie.de

| | Definition of indicator | All clinical sites 2014 | |
|-------------|---|-------------------------|---------------|
| | | Median | Range |
| Numer ator | All surgically treated primary cases presented in the tumour conference | 151* | 46 - 801 |
| Popula tion | Surgically treated primary cases (for definition of a primary case see 5.2.1) | 152* | 46 - 806 |
| Rate | Target ≥ 95% | 100% | 93.75% - 100% |

Basic data indicator:

The definitions of numerator, population (=denominator) and target value are taken from the Data Sheet.
The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.
The values for the numerators, populations and rates of all Centres are given under range.
The Total Patients column shows the total of all patients treated according to the key figure and the corresponding quota.

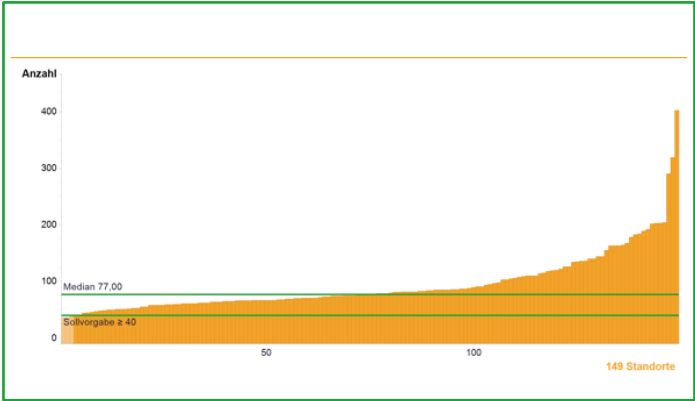
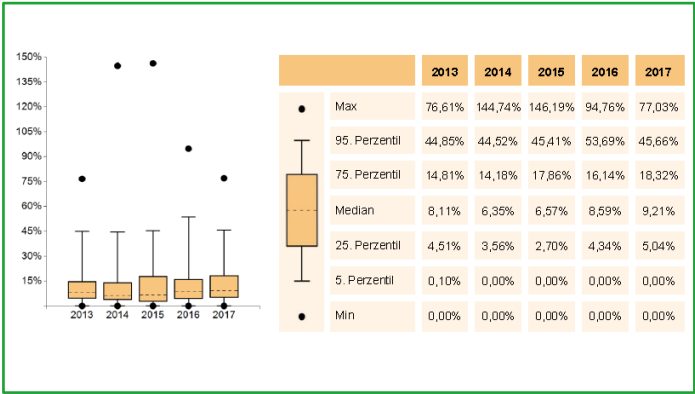


Diagram:

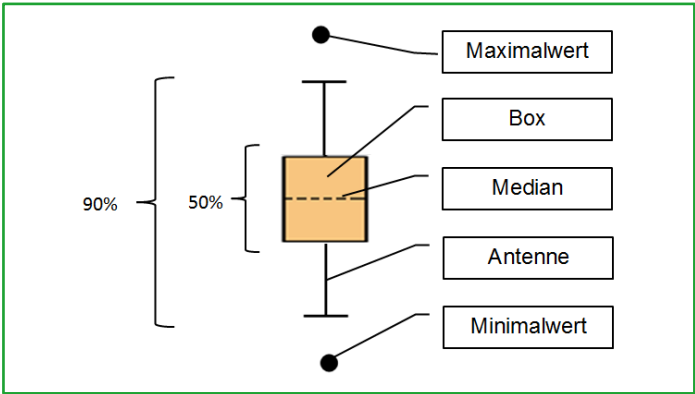
The x-axis indicates the number of Centres, the y-axis gives the values in percent or number (e.g. primary cases). The target value is depicted as a horizontal green line. The median, which is also depicted as a green horizontal line, divides the entire group into two equal halves.

General information



Cohort development:

The cohort development in the years 2014, 2015, 2016, 2017 and 2018 is presented in a box plot diagram.



Box plot:

A box plot consists of a **box with median, whiskers** and **outliers**. 50 percent of the Centres are within the box. The median divides the entire available cohort into two halves with an equal number of Centres. The whiskers and the box encompass a 90th percentile area/range. The extreme values are depicted here as dots.

Status of the certification system for Gynaecology Cancer Centres 2019

| | 31.12.2019 | 31.12.2018 | 31.12.2017 | 31.12.2016 | 31.12.2015 | 31.12.2014 |
|--|------------|------------|------------|------------|------------|------------|
| Ongoing procedures | 12 | 4 | 10 | 6 | 8 | 8 |
| Certified Centres | 155 | 143 | 134 | 133 | 123 | 110 |
| Certified clinical sites | 156 | 145 | 136 | 135 | 125 | 112 |
| Gynaecology Cancer Centres with 1 clinical site | 154 | 141 | 132 | 131 | 121 | 108 |
| 2 clinical sites | 1 | 2 | 2 | 2 | 2 | 2 |
| 3 clinical sites | 0 | 0 | 0 | 0 | 0 | 0 |
| 4 clinical sites | 0 | 0 | 0 | 0 | 0 | 0 |

Clinical sites taken into account

| | 31.12.2019 | 31.12.2018 | 31.12.2017 | 31.12.2016 | 31.12.2015 | 31.12.2014 |
|--|------------|------------|------------|------------|------------|------------|
| Clinical sites included in the Annual Report | 149 | 139 | 128 | 125 | 112 | 103 |
| equivalent to | 95,5% | 95,9% | 94,1% | 92,6% | 89,6% | 92,0% |
| Primary cases total* | 13.762 | 12.937 | 12.087 | 11.587 | 10.412 | 9.390 |
| Primary cases per clinical site (mean)* | 92 | 93 | 94 | 93 | 93 | 91 |
| Primary cases per clinical site (median)* | 78 | 77 | 76 | 79 | 79 | 79 |

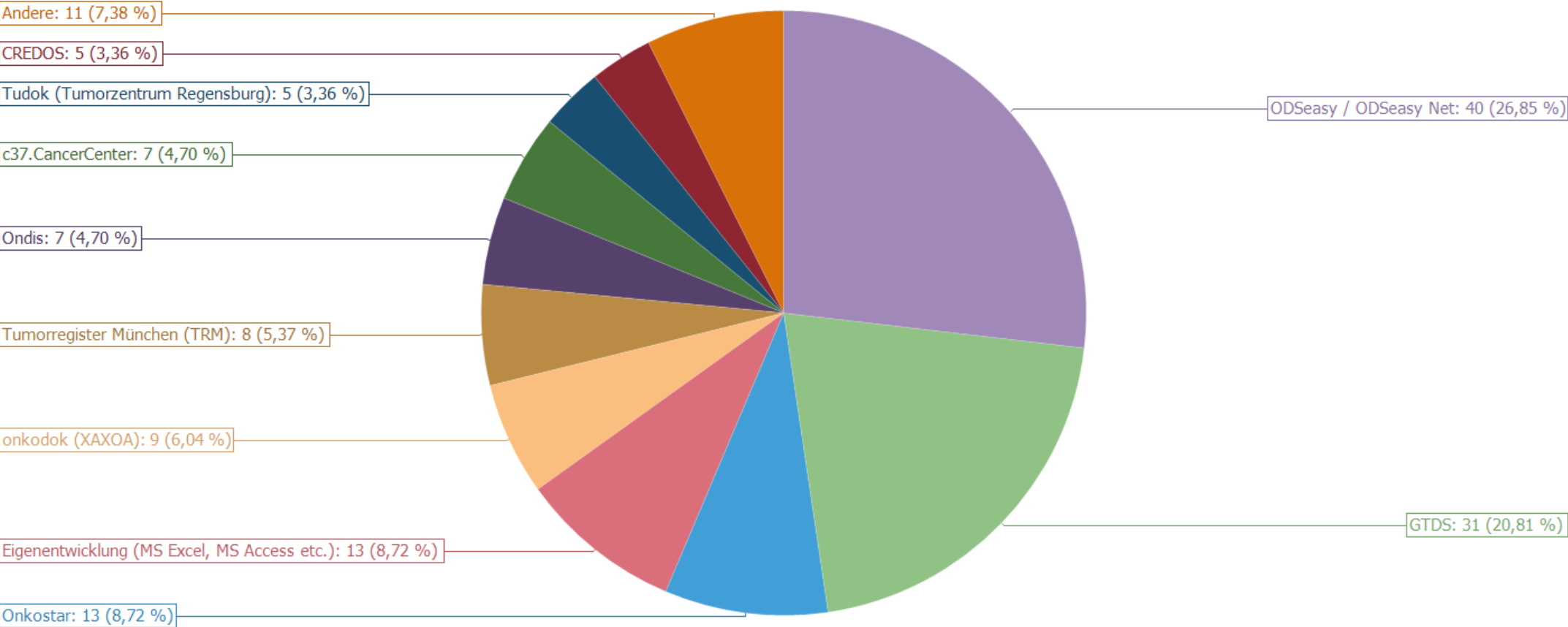
*The figures are based on the clinical sites listed in the Annual Report.

This Annual Report looks at the Gynaecology Cancer Centres certified in the Certification System of the German Cancer Society. The Data sheet which is part of the Catalogue of Requirements (Catalogue of Requirements Certification) is the basis for the diagrams.

149 out of the 156 certified clinical sites of the Centres are included in the Annual Report. 7 clinical sites, certified for the first time in 2019, are not included (data depiction of a full calendar year is not mandatory for initial certifications). In all 156 clinical sites a total of 14,225 primary cases with genital malignancy were treated. An up-to-date overview of all certified clinical sites is given on www.oncomap.de.

The indicators published here refer to the indicator year 2018. They are the assessment basis for the audits conducted in 2019.

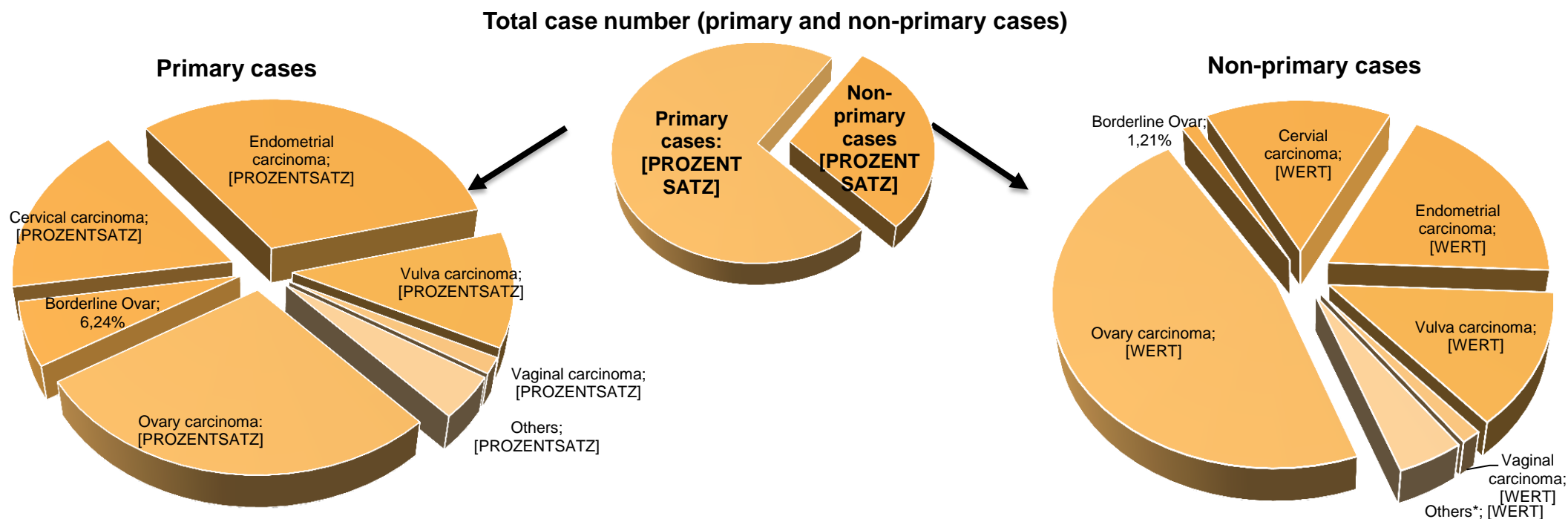
Tumour documentation systems in the Centres' clinical sites



| | |
|---------|-----------------------------------|
| Legend: | |
| Other | System used in ≤ 3 clinical sites |

The information on the tumour documentation system was taken from the data sheet (Basic Data Sheet). It is not possible to select more than one system. In many cases, support is provided by the cancer registries or there may be a direct link to the cancer registry via a specific tumor documentation system.

Basic data – total case number (primary and non-primary cases)



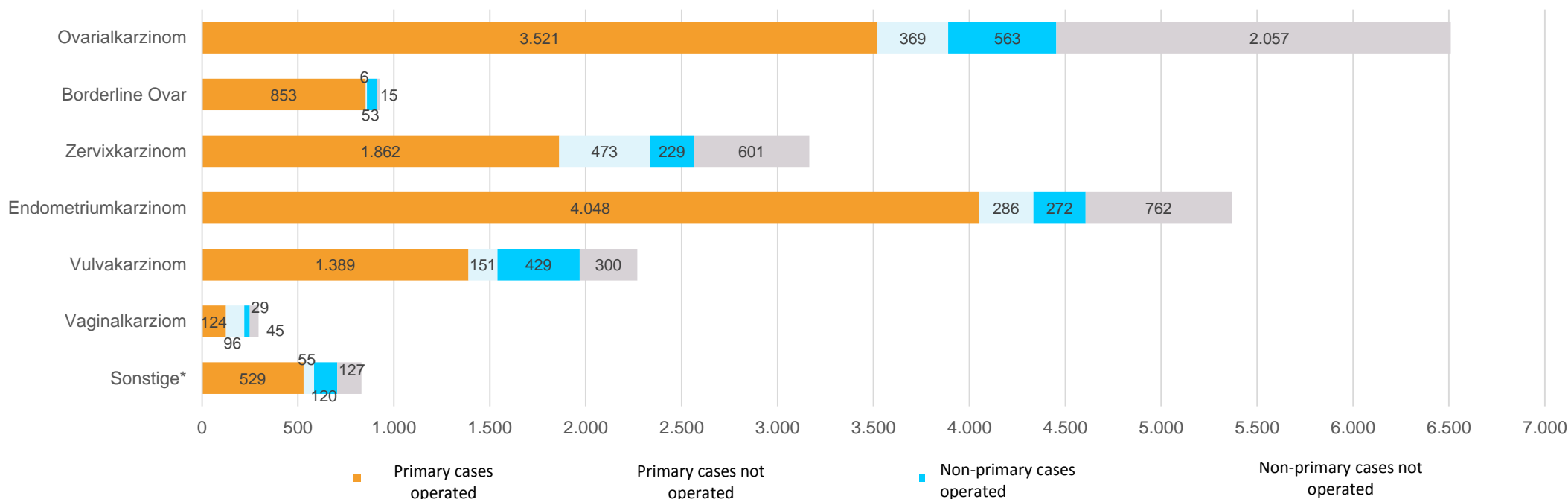
| | Total case number | Primary cases | Non-primary cases |
|--------------------------|----------------------|----------------------|---------------------|
| Ovary carcinoma | 6,510 (33.62%) | 3,890 (28.27%) | 2,620 (46.77%) |
| Borderline ovary | 927 (4.79%) | 859 (6.24%) | 68 (1.21%) |
| Cervical carcinoma | 3,165 (16.34%) | 2,335 (16.97%) | 830 (14.82%) |
| Endometrial carcinoma | 5,368 (27.72%) | 4,334 (31.49%) | 1,034 (18.46%) |
| Vulva carcinoma | 2,269 (11.72%) | 1,540 (11.19%) | 729 (13.01%) |
| Vaginal carcinoma | 294 (1.52%) | 220 (1.60%) | 74 (1.32%) |
| Others* | 831 (4.29%) | 584 (4.24%) | 247 (4.41%) |
| Total case number | 19,364 (100%) | 13,762 (100%) | 5,602 (100%) |

| | Incidence ¹ Germany | Primary cases 2018 ² | Share 2018 | Primary Cases Germany 2017 | Share 2017 |
|-----------------------|-----------------------------------|------------------------------------|---------------|----------------------------------|---------------|
| Ovary carcinoma | 7,349 | 3,698 | 50.32% | 3,215 | 43.75% |
| Borderline ovary | - | 814 | - | 773 | - |
| Cervical carcinoma | 4,380 | 2,234 | 51.00% | 2,124 | 48.49% |
| Endometrial carcinoma | 10,599 | 4,203 | 39.66% | 3,789 | 35.75% |
| Vulva carcinoma | 3,333 | 1,506 | 45.19% | 1,386 | 41.58% |
| Vaginal carcinoma | 458 | 212 | 46.29% | 191 | 41.70% |
| Others* | 850 | 576 | 67.76% | 510 | 60.00% |

¹ Centre for cancer register data in the Robert Koch-Institute, incidence 2016.

² including primary cases not yet part of the annual report (Germany only)
 database query www.krebsdaten.de/abfrage 27.02.2020

Basic data – primary and non-primary cases



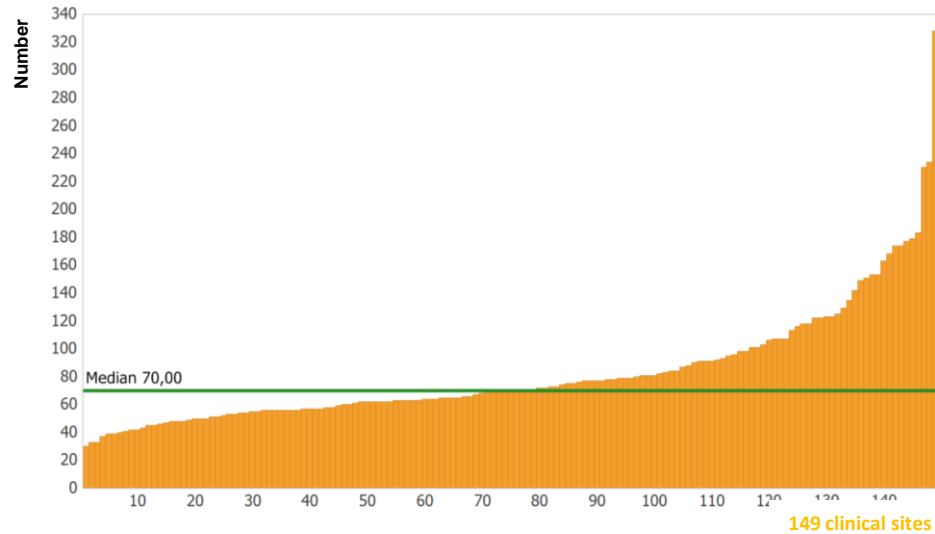
| | Primary cases | | |
|-----------------------|---------------|-----------------|-----------------|
| | | operated | not operated |
| | Total | absolute (in %) | absolute (in %) |
| Ovary carcinoma | 3,890 (100%) | 3,521 (90.51%) | 369 (9.49%) |
| Borderline ovary | 859 (100%) | 853 (99.30%) | 6 (0.70%) |
| Cervical carcinoma | 2,335 (100%) | 1,862 (79.74%) | 473 (20.26%) |
| Endometrial carcinoma | 4,334 (100%) | 4,048 (93.40%) | 286 (6.60%) |
| Vulva carcinoma | 1,540 (100%) | 1,389 (90.19%) | 151 (9.81%) |
| Vaginal carcinoma | 220 (100%) | 124 (56.36%) | 96 (43.64%) |
| Others* | 584 (100%) | 529 (90.58%) | 55 (9.42%) |
| Total | 13,762 | 12,326 | 1,436 |

| | Non-primary cases | | |
|-----------------------|-------------------|-----------------|-----------------|
| | | operated | not operated |
| | Total | absolute (in %) | absolute (in %) |
| Ovary carcinoma | 2,620 (100%) | 563 (21.49%) | 2,057 (78.51%) |
| Borderline ovary | 68 (100%) | 53 (77.94%) | 15 (22.06%) |
| Cervical carcinoma | 830 (100%) | 229 (27.59%) | 601 (72.41%) |
| Endometrial carcinoma | 1,034 (100%) | 272 (26.31%) | 762 (73.69%) |
| Vulva carcinoma | 729 (100%) | 429 (58.85%) | 300 (41.15%) |
| Vaginal carcinoma | 74 (100%) | 29 (39.19%) | 45 (60.81%) |
| Others* | 247 (100%) | 120 (48.58%) | 127 (51.42%) |
| Total | 5,602 | 1,695 | 3,907 |

* Others (for instance sarcomas, chorion carcinomas, etc.)

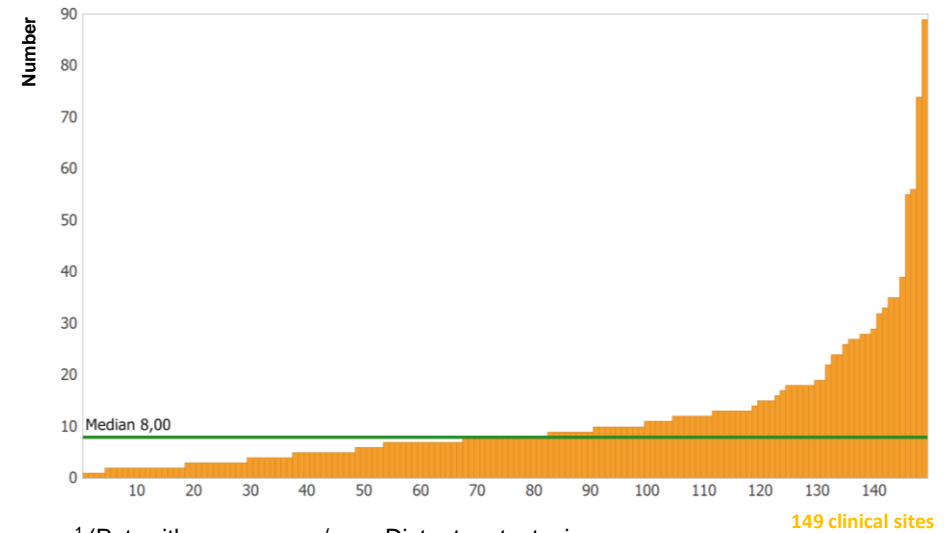
Surgical cases with a genital malignoma

Surgical primary cases



| | 2014 | 2015 | 2016 | 2017 | 2018 |
|----------------|--------|--------|--------|--------|--------|
| Max | 267.00 | 223.00 | 310.00 | 342.00 | 328.00 |
| 95. percentile | 155.45 | 162.60 | 157.30 | 149.00 | 171.60 |
| 75. percentile | 103.25 | 98.00 | 104.25 | 97.00 | 93.00 |
| Median | 71.50 | 71.00 | 68.00 | 71.00 | 70.00 |
| 25. percentile | 57.00 | 58.00 | 58.00 | 57.00 | 56.00 |
| 5. percentile | 48.55 | 47.20 | 44.35 | 44.00 | 41.40 |
| Min | 36.00 | 32.00 | 40.00 | 36.00 | 30.00 |

Surgical non-primary cases ¹

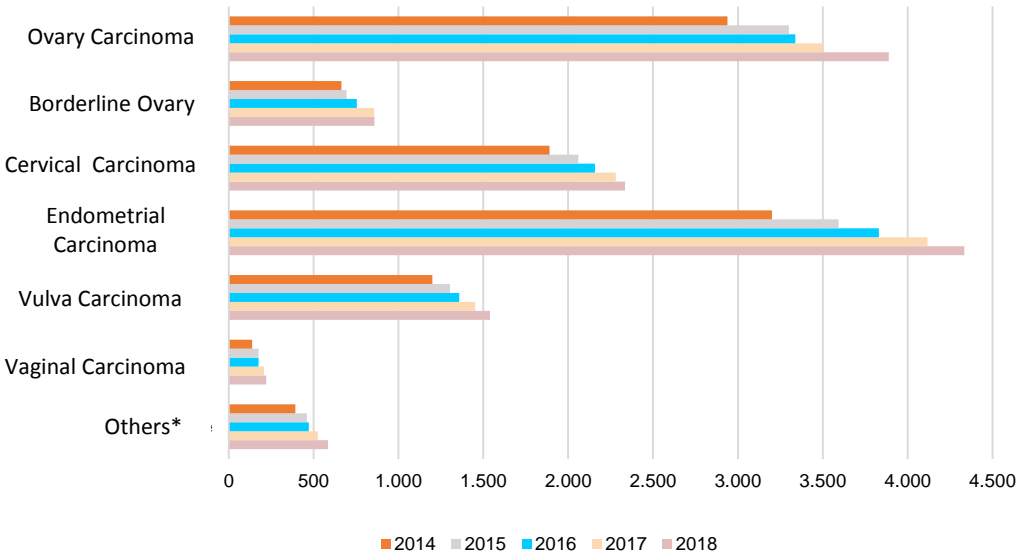


¹ (Pat. with recurrence/ sec. Distant metastasis)

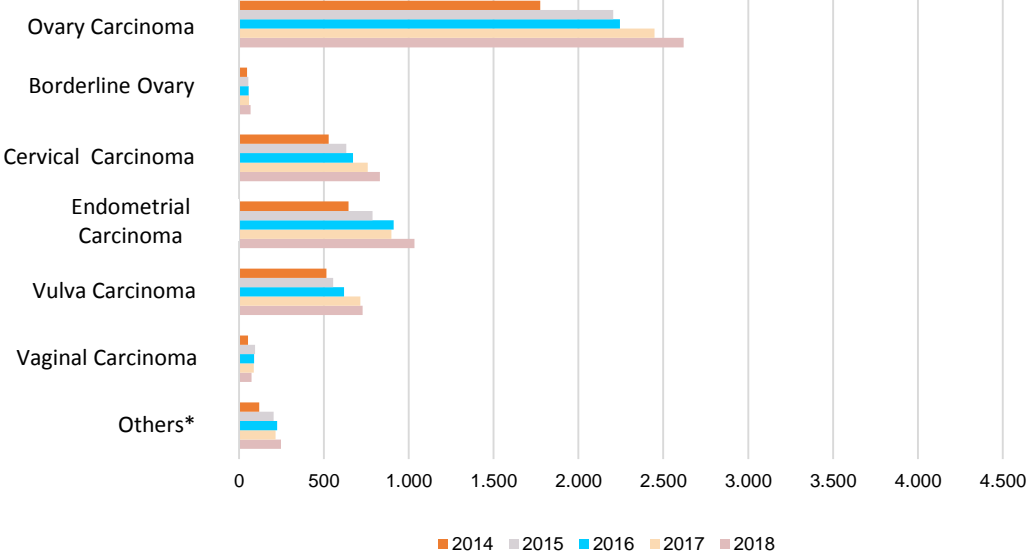
| | 2014 | 2015 | 2016 | 2017 | 2018 |
|----------------|-------|-------|-------|-------|-------|
| Max | 70.00 | 69.00 | 69.00 | 92.00 | 89.00 |
| 95. percentile | 30.45 | 35.40 | 30.00 | 30.20 | 32.60 |
| 75. percentile | 15.00 | 14.00 | 17.00 | 13.00 | 13.00 |
| Median | 8.00 | 10.00 | 9.00 | 9.00 | 8.00 |
| 25. percentile | 5.00 | 6.00 | 5.00 | 5.00 | 5.00 |
| 5. percentile | 1.00 | 2.00 | 1.35 | 2.00 | 2.00 |
| Min | 0.00 | 0.00 | 0.00 | 0.00 | 1.00 |

Basic data – changes in case numbers between the indicator years 2013-2017

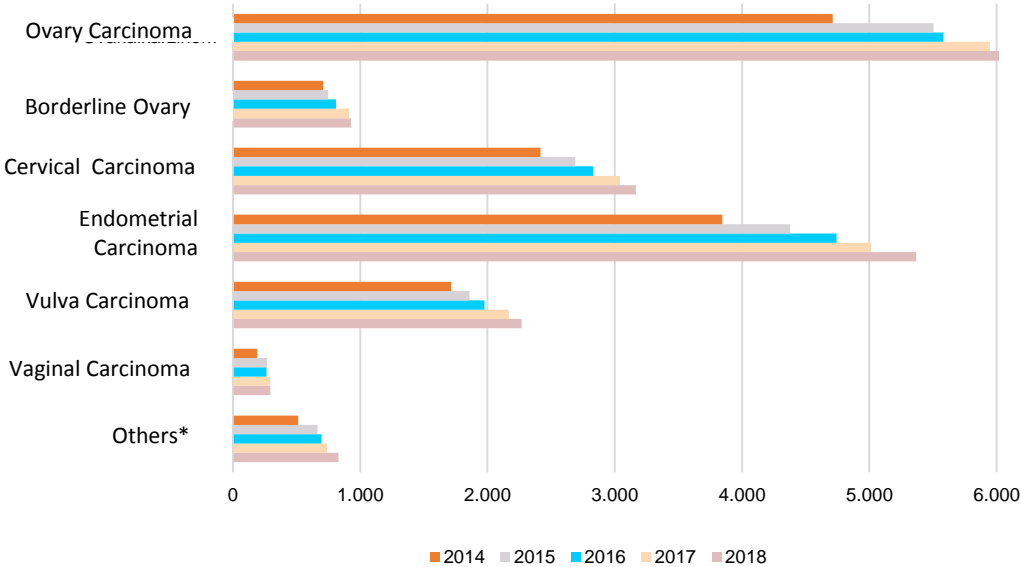
Distribution primary cases



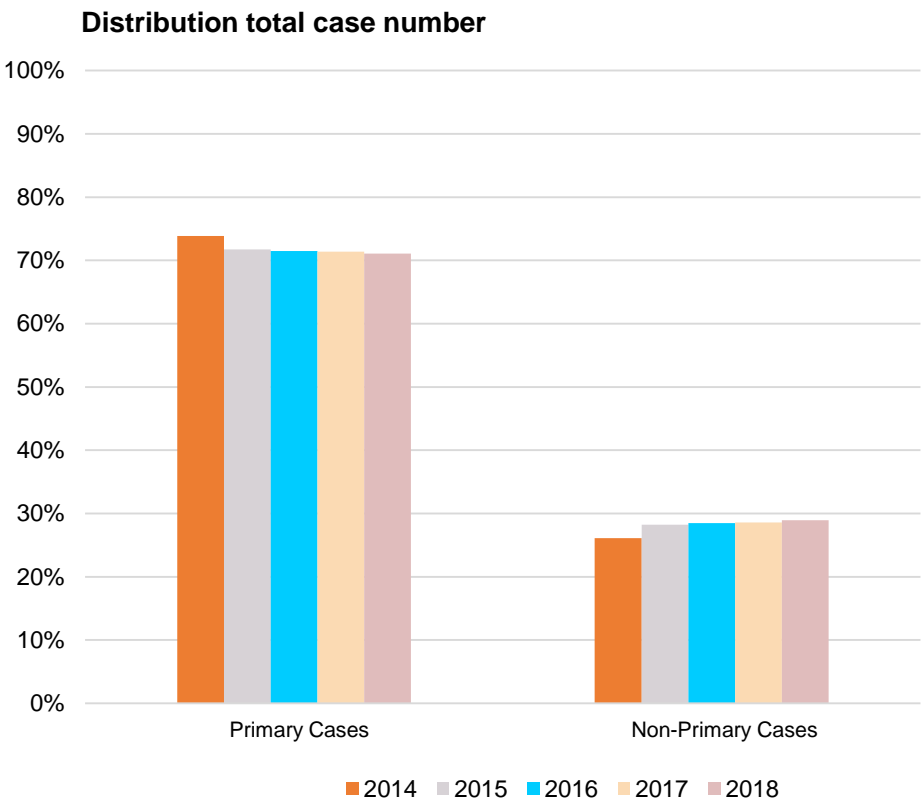
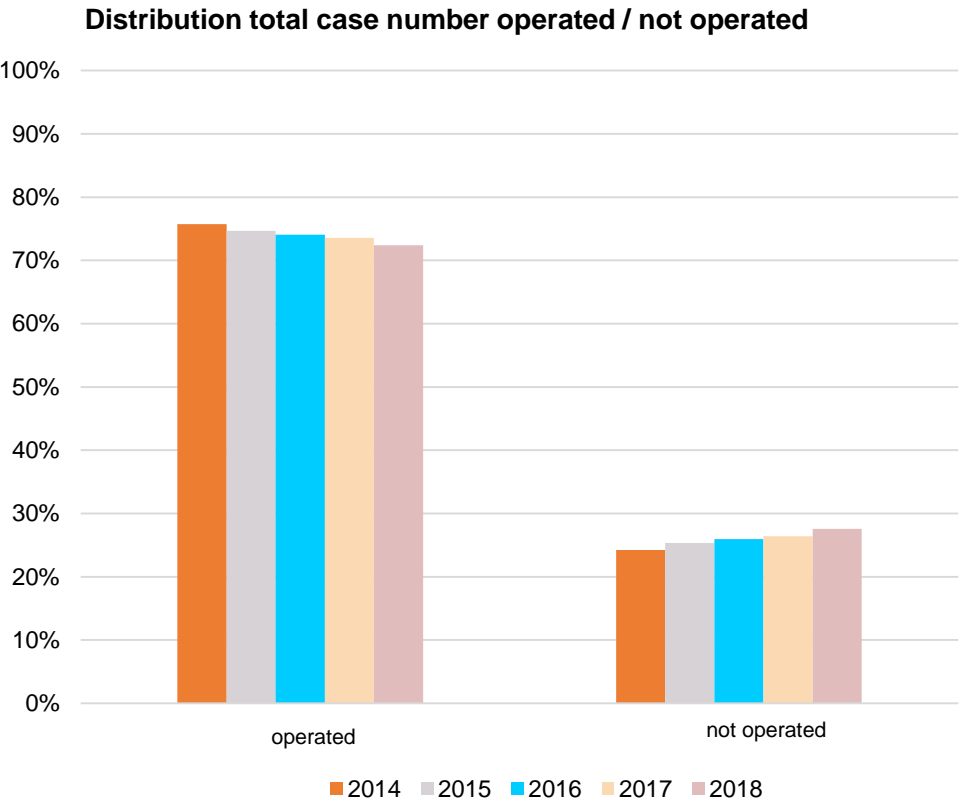
Distribution non-primary cases



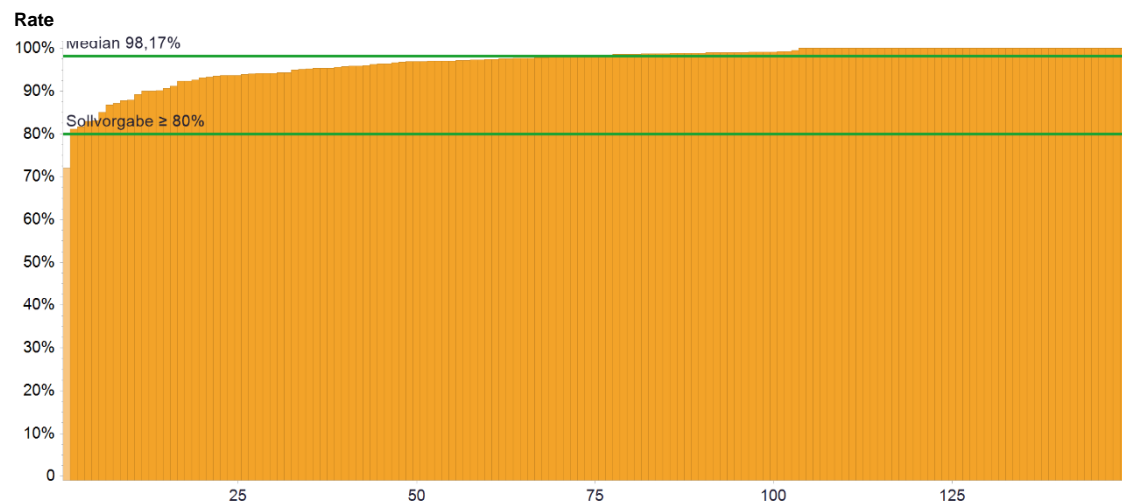
Distribution total case number



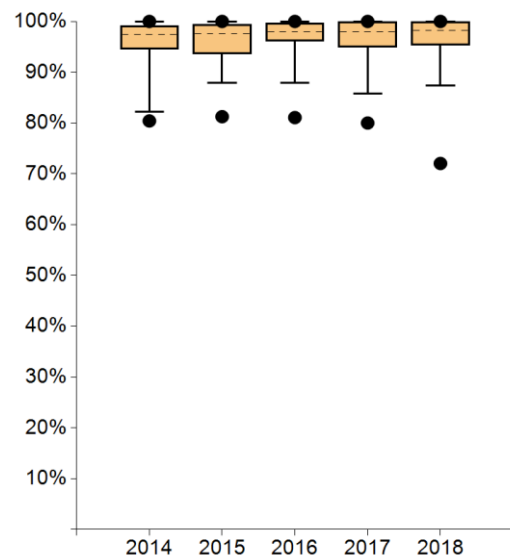
Basic data – changes in case numbers between the indicator years 2014-2018



1. Presentation tumour board



Sollvorgabe = target value



| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|--------|--------|--------|--------|--------|
| Max | 100% | 100% | 100% | 100% | 100% |
| 95 th percentile | 100% | 100% | 100% | 100% | 100% |
| 75 th percentile | 99.22% | 99.38% | 99.64% | 100% | 100% |
| Median | 97.43% | 97.56% | 97.98% | 97.93% | 98.17% |
| 25 th percentile | 94.53% | 93.53% | 96.09% | 94.87% | 95.35% |
| 5 th percentile | 82.19% | 87.90% | 87.91% | 85.79% | 87.36% |
| Min | 80.41% | 81.25% | 81.07% | 80.00% | 72.04% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|--|-------------------------|---------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Female patients with a genital malignoma who were presented at the tumour conference | 97* | 58 - 643 | 18,685 |
| Denominator | Total case number (= indicator 5) | 101* | 65 - 649 | 19,364 |
| Rate | Target value ≥ 80% | 98.17% | 72.04% - 100% | 96.49%** |

| Clinical sites with evaluable data | | Clinical sites meeting the target value | |
|------------------------------------|---------|---|--------|
| Number | % | Number | % |
| 149 | 100.00% | 148 | 99.33% |

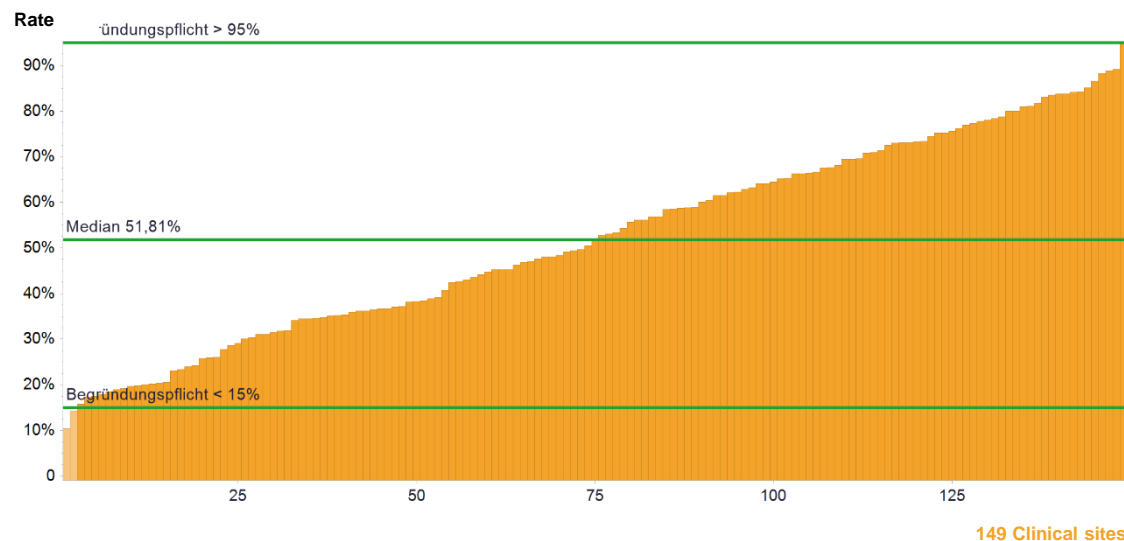
Comments:

As in previous years, this indicator is fulfilled excellently, with 46 Centres (previous year: 39) achieving a ratio of 100%. Only one Centre misses the target value of at least 80% with regard to the presentation in the tumour board. The surveillance audit revealed that this was due to the insufficient presentation of patients from non-gynaecological departments. In particular, patients had already received radiotherapy before their presentation in the tumour board. As a measure, it was agreed to inform the specialty departments specifically about the need for a pre-therapeutic presentation in the tumour board.

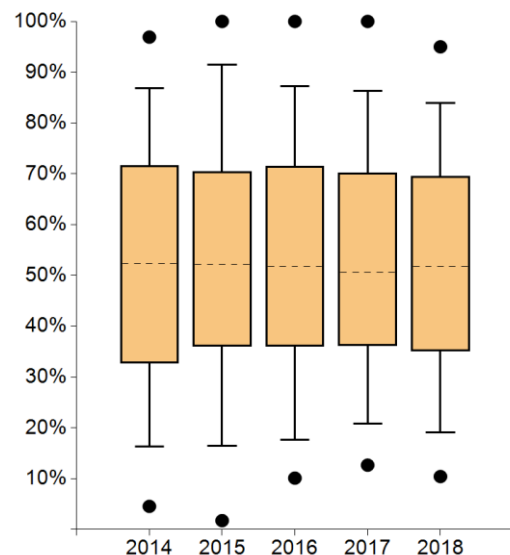
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

2. Psycho-oncological counselling (session ≥ 25 min)



Begründungspflicht = mandatory statement of reasons



| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|--------|--------|--------|--------|--------|
| Max | 96.91% | 100% | 100% | 100% | 95.00% |
| 95 th percentile | 86.83% | 91.50% | 87.27% | 86.35% | 83.98% |
| 75 th percentile | 71.61% | 70.41% | 71.46% | 70.18% | 69.51% |
| Median | 52.36% | 52.20% | 51.72% | 50.63% | 51.81% |
| 25 th percentile | 32.68% | 35.97% | 36.05% | 36.16% | 35.05% |
| 5 th percentile | 16.34% | 16.40% | 17.69% | 20.77% | 19.05% |
| Min | 4.55% | 1.74% | 10.11% | 12.66% | 10.42% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|---|-------------------------|-----------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Patients (= cases, definition 1.2.1), who received, in an outpatient or inpatient setting, psycho-oncological counselling (session ≥ 25 min.) | 57* | 10 - 490 | 10,007 |
| Denominator | Total case number (= indicator 5) | 101* | 65 - 649 | 19,364 |
| Rate | Mandatory statement of reasons*** < 15% and >95% | 51.81% | 10.42% - 95.00% | 51.68%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|---------|---|--------|
| Number | % | Number | % |
| 149 | 100.00% | 147 | 98.66% |

Comments:

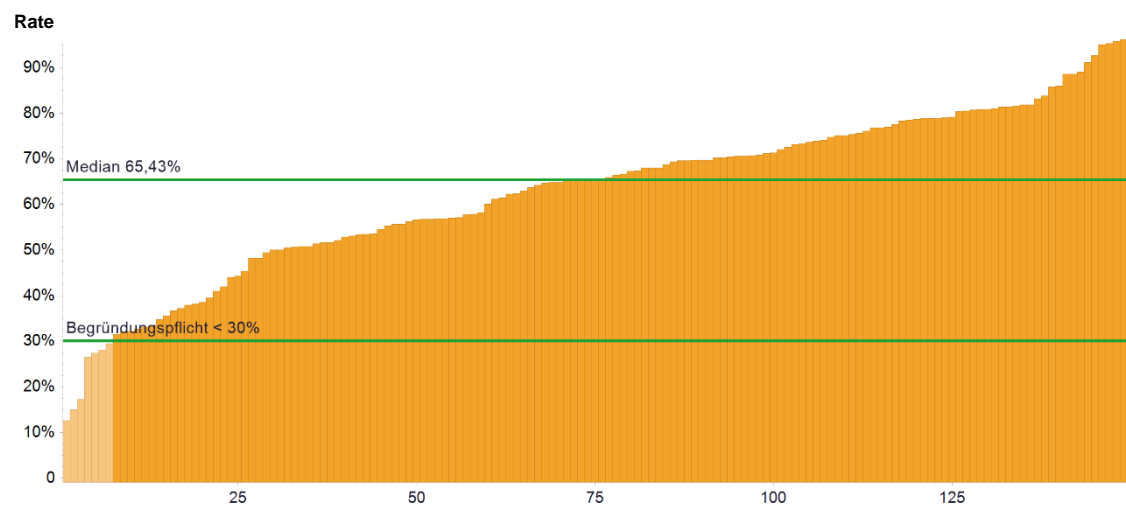
The vast majority of Centres stay within the planned corridor in terms of psycho-oncological counselling. Only 2 Centres (previous year: 6) were asked to substantiate why the counselling rate fell below 15% and cited lower patient demand as the reason. The auditor urges the use of screening instruments for the systematic assessment of needs. The range of psycho-oncological counselling offered was at the same time assessed by the auditors as very good.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

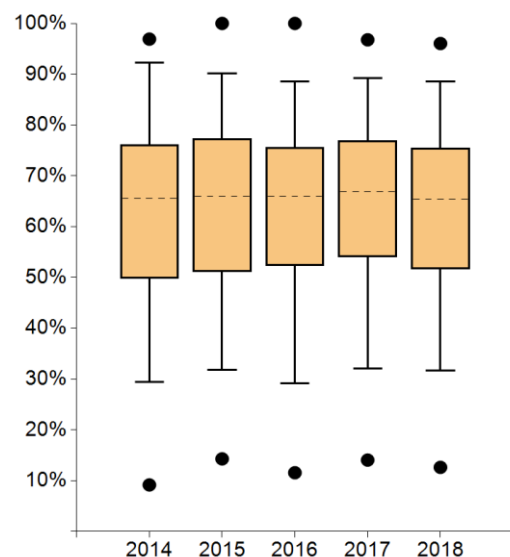
*** If value is outside the plausibility corridor, centres have to give an explanation.

3. Counselling social services



149 Clinical sites

Begründungspflicht = mandatory statement of reasons



| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|--------|--------|--------|--------|--------|
| Max | 96,91% | 100% | 100% | 96,77% | 96,04% |
| 95 th percentile | 92,31% | 90,21% | 88,58% | 89,23% | 88,51% |
| 75 th percentile | 76,18% | 77,36% | 75,55% | 76,92% | 75,53% |
| Median | 65,52% | 65,95% | 66,00% | 66,83% | 65,43% |
| 25 th percentile | 49,86% | 51,12% | 52,36% | 54,06% | 51,61% |
| 5 th percentile | 29,36% | 31,83% | 29,14% | 32,00% | 31,69% |
| Min | 9,16% | 14,29% | 11,56% | 14,05% | 12,62% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|---|-------------------------|-----------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Patients (= cases, definition 1.2.2), who received counselling by the social services in an inpatient or outpatient setting | 68* | 15 - 452 | 11,864 |
| Denominator | Total case number (= indicator 5) | 101* | 65 - 649 | 19,364 |
| Rate | Mandatory statement of reasons*** < 30% | 65.43% | 12.62% - 96.04% | 61.27%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|---------|---|--------|
| Number | % | Number | % |
| 149 | 100.00% | 142 | 95.30% |

Comments:

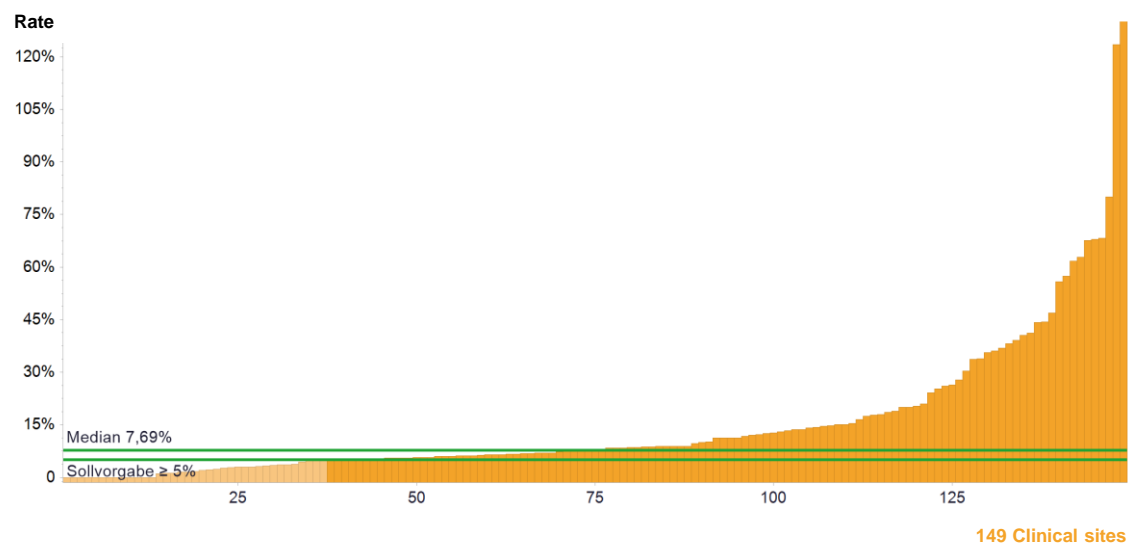
The rate of counselling by the social service remains at a high level. 7 Centres were asked to substantiate why the quota of 30% was not reached. 3 of these Centres are located in German-speaking countries abroad where the social service is provided by the nursing staff or where there is no legal entitlement to social law advice. The German Centres justify the low rate with low take-up by patients and staff shortages. It was agreed in the audits that staff should be made aware of the importance of the social service, that group counselling for mobile patients should be offered and that the social law advice provided by the cooperation partners should also be counted towards the quota.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

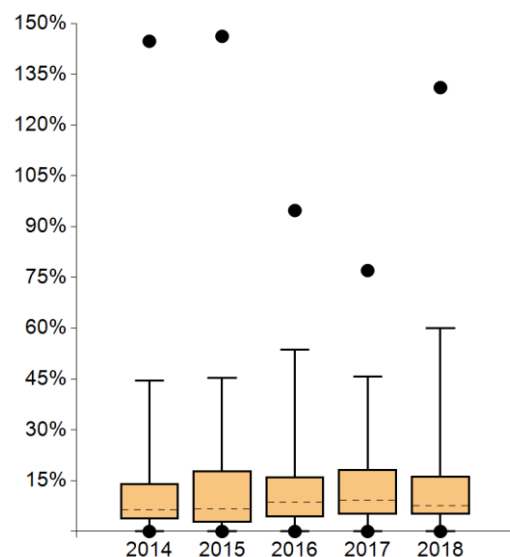
*** If value is outside the plausibility corridor, centres have to give an explanation.

4. Study participation



Sollvorgabe = target value

| | Indicator definition | All clinical sites 2018 | | |
|-------------|---|-------------------------|-----------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Patients of the Gynaecology Centre included in a study with an ethical vote | 6* | 0 - 325 | 2,794 |
| Denominator | Primary cases with a genital carcinoma (= indicator 6) | 78* | 42 - 352 | 13,762 |
| Rate | Target value ≥ 5% | 7.69% | 0.00% - 131.05% | 20.30%** |



| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|---------|---------|--------|--------|---------|
| Max | 144.74% | 146.19% | 94.76% | 77.03% | 131.05% |
| 95 th percentile | 44.52% | 45.41% | 53.69% | 45.66% | 59.97% |
| 75 th percentile | 14.18% | 17.86% | 16.14% | 18.32% | 16.44% |
| Median | 6.35% | 6.57% | 8.59% | 9.21% | 7.69% |
| 25 th percentile | 3.56% | 2.70% | 4.34% | 5.04% | 5.00% |
| 5 th percentile | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |
| Min | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

| Clinical sites with evaluable data | | Clinical sites meeting the target value | |
|------------------------------------|---------|---|--------|
| Number | % | Number | % |
| 149 | 100.00% | 112 | 75,17% |

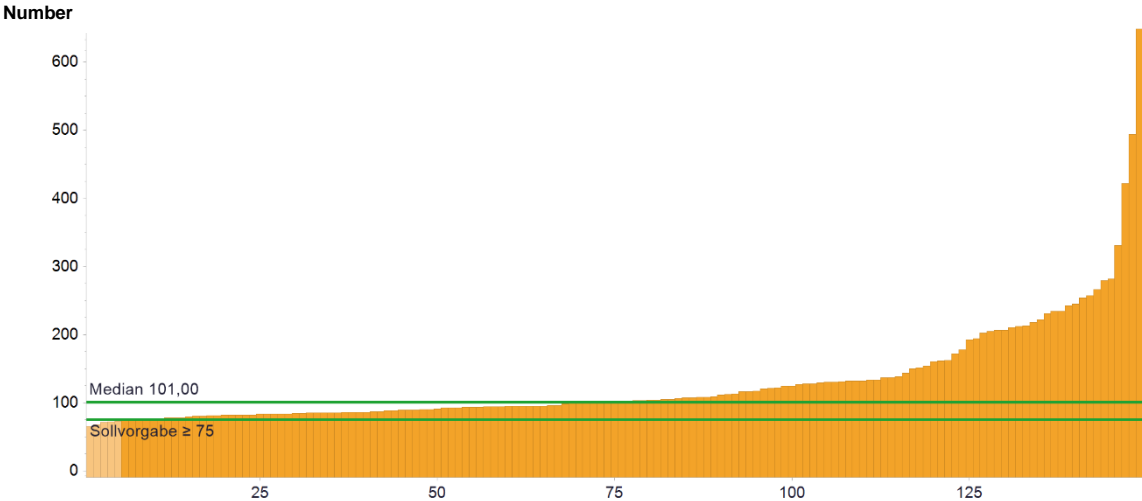
Comments:

The degree to which this indicator is implemented is at the same level as in the previous year. The high discrepancy between the individual Centres is striking and has continued to grow. 37 Centres miss the target value of at least 5% of study patients, 16 of them already in the previous year. Many of these Centres are trying to increase the recruitment of participants but cannot identify suitable (open) studies. Patients are also refusing to participate. In the audits, it was agreed, among other things, to initiate studies themselves, to place patients on the waiting lists of ongoing studies, and to cooperate with university hospitals with regard to studies.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

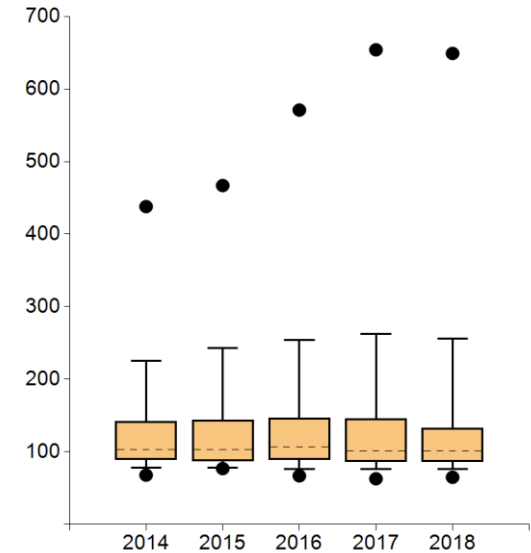
5. Total case number with a gynecological genital malignoma



Sollvorgabe = target value

139 Clinical sites

| | Indicator definition | All clinical sites 2018 | | |
|--------|---|-------------------------|----------|----------------|
| | | Median | Range | Patients Total |
| Number | Primary cases with a genital malignoma (Def. 1.2.1) | 101 | 65 - 649 | 19,364 |
| | Target value ≥ 75 | | | |

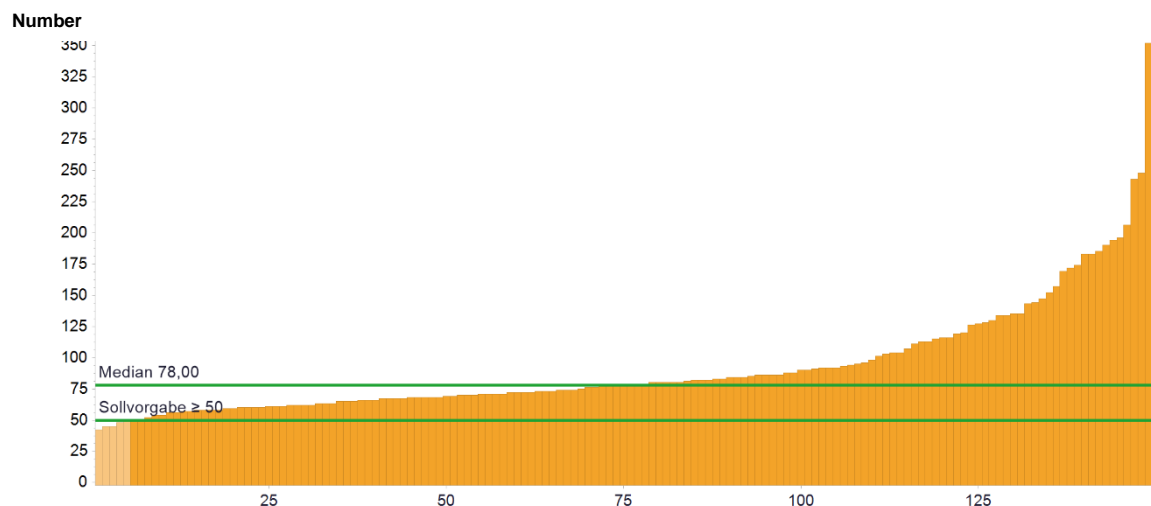


| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|--|--------|--------|--------|--------|--------|
| Max | | 438.00 | 467.00 | 571.00 | 654.00 | 649.00 |
| 95 th percentile | | 225.60 | 243.00 | 253.65 | 262.00 | 255.80 |
| 75 th percentile | | 141.75 | 144.00 | 147.00 | 145.50 | 133.00 |
| Median | | 103.00 | 103.00 | 106.50 | 101.00 | 101.00 |
| 25 th percentile | | 89.00 | 87.00 | 89.00 | 86.00 | 86.00 |
| 5 th percentile | | 78.00 | 78.00 | 76.35 | 75.90 | 76.40 |
| Min | | 68.00 | 77.00 | 67.00 | 63.00 | 65.00 |

| Clinical sites with evaluable data | | Clinical sites meeting the target value | |
|------------------------------------|---------|---|--------|
| Number | % | Number | % |
| 149 | 100,00% | 144 | 96,64% |

Comments:
The number of patients treated in the Centres increased by 6.9% compared to the previous year (18,118). Once again, 5 Centres missed the target value of treating at least 75 patients. None of them was conspicuous in this ratio in the previous year. In 4 of the Centres, the failure to meet the target value in the surveillance audit (missing the target value by a maximum of 10% was possible) was addressed and substantiated by the Centres, in particular by changes in personnel. The remaining Centre had to prove the number of cases in a re-audit. The target value was met on average over the last 3 years.

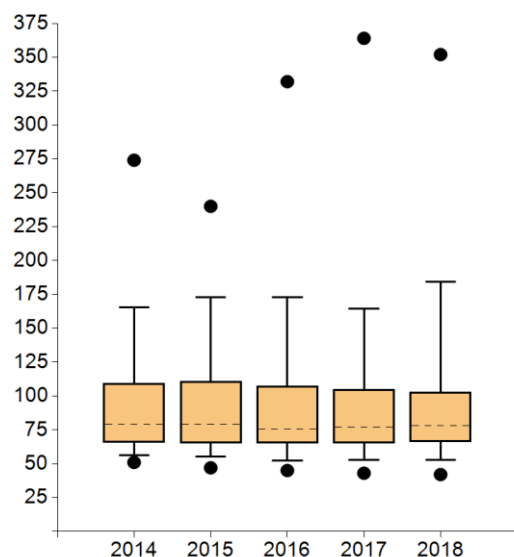
6. Primary cases with a gynecological genital malignoma



149 Clinical sites

Sollvorgabe = target value

| | Indicator definition | All clinical sites 2018 | | |
|--------|---|-------------------------|----------|----------------|
| | | Median | Range | Patients Total |
| Number | Primary cases with a genital malignoma (Def. 1.2.1) | 78 | 42 - 352 | 13,762 |
| | Target value ≥ 50 | | | |



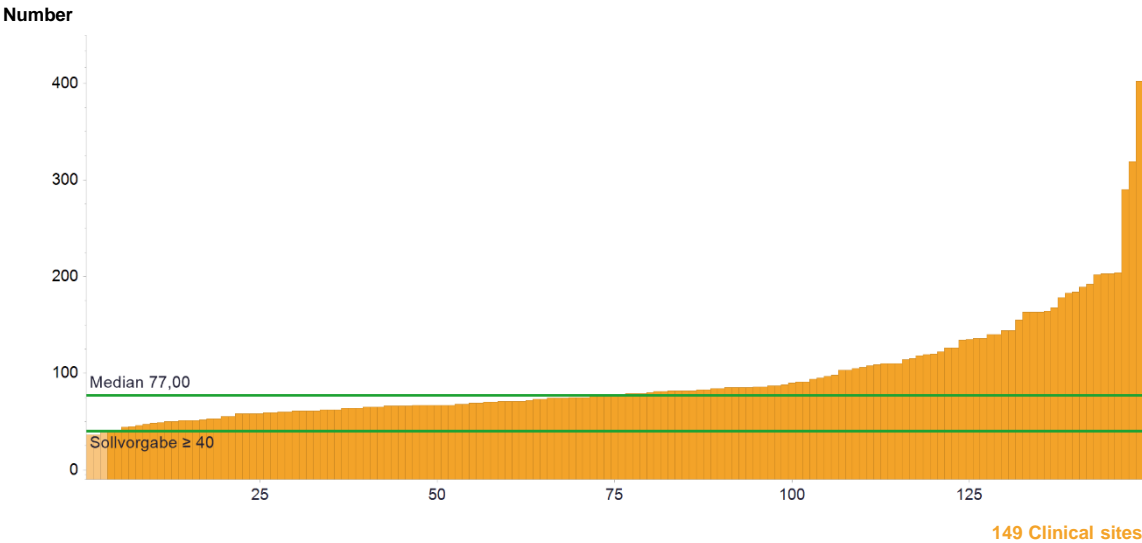
| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|--------|--------|--------|--------|--------|
| Max | 274.00 | 240.00 | 332.00 | 364.00 | 352.00 |
| 95 th percentile | 165.60 | 173.00 | 172.85 | 164.20 | 184.20 |
| 75 th percentile | 109.25 | 111.00 | 107.50 | 105.00 | 103.00 |
| Median | 79.00 | 79.00 | 75.50 | 77.00 | 78.00 |
| 25 th percentile | 65.75 | 65.00 | 65.00 | 65.00 | 66.00 |
| 5 th percentile | 56.00 | 55.20 | 52.35 | 52.90 | 52.80 |
| Min | 51.00 | 47.00 | 45.00 | 43.00 | 42.00 |

| Clinical sites with evaluable data | | Clinical sites meeting the target value | |
|------------------------------------|---------|---|--------|
| Number | % | Number | % |
| 149 | 100.00% | 144 | 96,64% |

Comments:

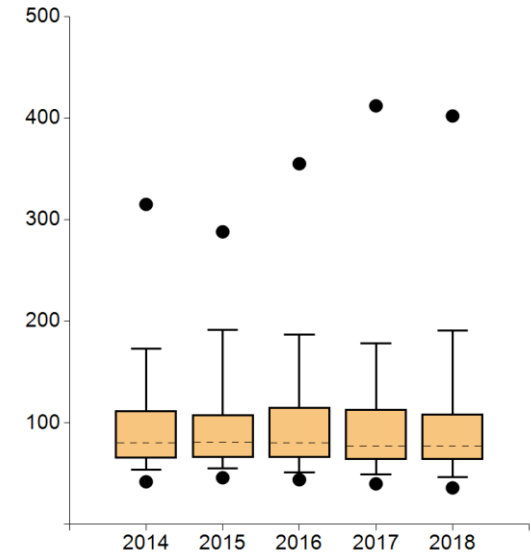
In comparison with previous years, the number of primary cases per Centre remains at a constant level. Overall, the primary case numbers of all Centres (previous year: 12,937) increased by 6.4%. 5 Centres (previous year: 3) missed the target value of 50 patients, 3 of which also missed the total number of cases (see indicator 5). In one case, the re-audit showed that on average, over the last 3 years the target value was reached. The 4 remaining Centres were in the surveillance audit and therefore did not have to achieve the case numbers. The reason for the shortfall was mainly due to personnel bottlenecks/restructuring. To remedy this, the audits recommended the recruitment and qualification of personnel and the improvement of relations with the referring physicians.

7. Surgical cases with a gynecological genital malignoma



Sollvorgabe = target value

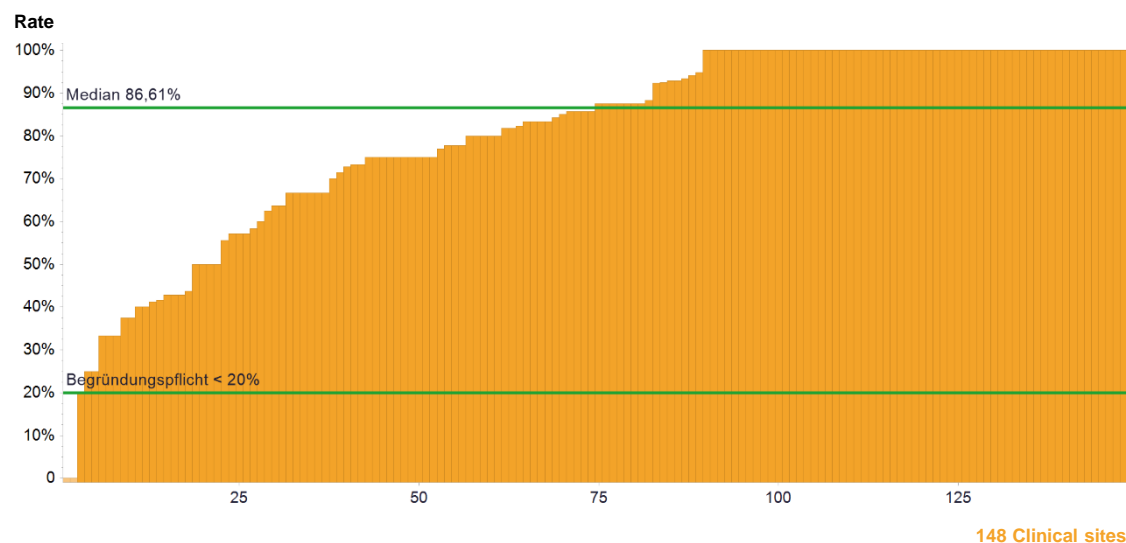
| | Indicator definition | All clinical sites 2018 | | |
|--------|--|-------------------------|----------|----------------|
| | | Median | Range | Patients Total |
| Number | Surgical cases with a genital malignoma (Def. 5.2.6) | 77 | 36 - 402 | 14,021 |
| | Target value ≥ 40 | | | |



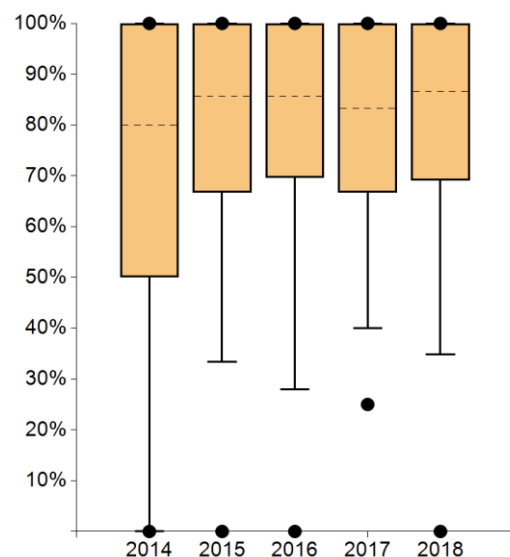
| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|--------|--------|--------|--------|--------|
| Max | 315.00 | 288.00 | 355.00 | 412.00 | 402.00 |
| 95 th percentile | 172.70 | 191.60 | 186.55 | 178.10 | 190.80 |
| 75 th percentile | 111.75 | 108.00 | 115.25 | 113.50 | 109.00 |
| Median | 80.50 | 81.00 | 80.50 | 77.00 | 77.00 |
| 25 th percentile | 65.00 | 66.00 | 66.00 | 64.00 | 64.00 |
| 5 th percentile | 54.00 | 55.00 | 51.00 | 48.90 | 46.40 |
| Min | 42.00 | 46.00 | 44.00 | 40.00 | 36.00 |

| Clinical sites with evaluable data | | Clinical sites meeting the target value | |
|---|---------|---|--------|
| Number | % | Number | % |
| 149 | 100.00% | 146 | 97.99% |
| Comments: After 100% fulfilment in the previous year, 3 Centres miss the target value of at least 40 operative cases in indicator year 2018. These Centres also do not reach the required number of primary cases (cf. indicator 6). Similarly, staff changes were the main reason for the shortfall, which is to be countered with comparable measures (new hires, qualifications, referral management). | | | |

8. Surgical staging early ovary carcinoma (GL ovary QI 1)



Begründungspflicht = mandatory statement of reasons



| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|--------|--------|--------|--------|--------|
| Max | 100% | 100% | 100% | 100% | 100% |
| 95 th percentile | 100% | 100% | 100% | 100% | 100% |
| 75 th percentile | 100% | 100% | 100% | 100% | 100% |
| Median | 80.00% | 85.71% | 85.71% | 83.33% | 86.61% |
| 25 th percentile | 50.00% | 66.67% | 69.69% | 66.67% | 69.17% |
| 5 th percentile | 0.00% | 33.33% | 27.92% | 40.00% | 34.79% |
| Min | 0.00% | 0.00% | 0.00% | 25.00% | 0.00% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|--|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Surgical primary cases with an ovary carcinoma FIGO I-IIIa and surgical staging (Def. see Indicator Sheet) | 6* | 0 - 37 | 954 |
| Denominator | Surgical primary cases with an ovary carcinoma FIGO I-IIIa | 7* | 1 - 40 | 1,196 |
| Rate | Mandatory statement of reasons*** < 20% | 86.61% | 0.00% - 100% | 79.77%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|--------|
| Number | % | Number | % |
| 148 | 99.33% | 146 | 98.65% |

Comments:

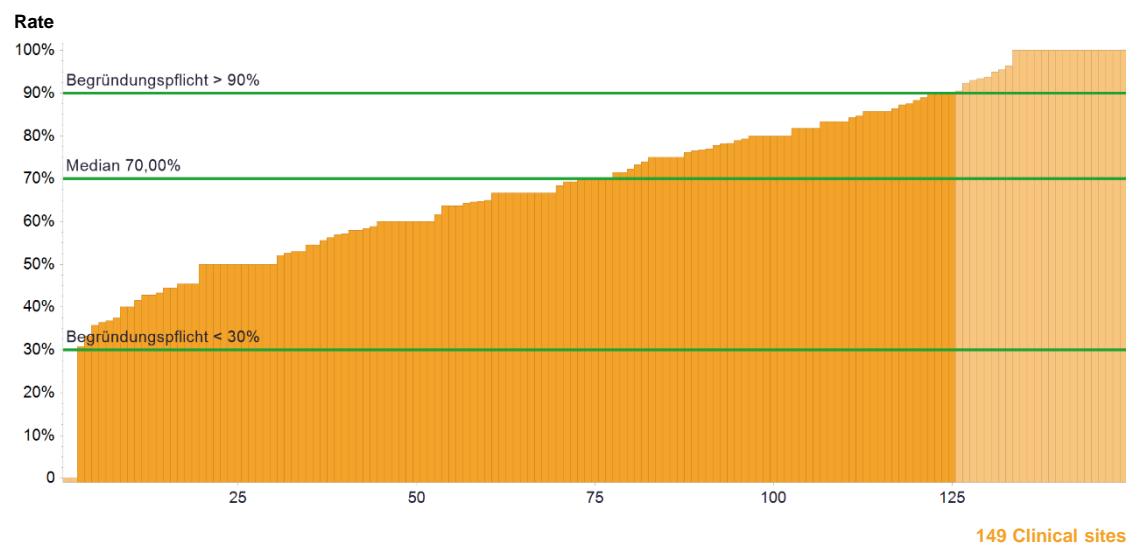
The median has risen slightly compared to the previous year, with a continued widespread (and low patient numbers). The degree of fulfilment of this indicator has improved significantly to just under 99% (previous year: 66%), which can be explained by the elimination of 100% fulfilment of the obligation to give reasons. Only 2 of the Centres treating stage I-IIIa ovarian cancer did not perform surgical staging in accordance with the data sheet. These cases could be validated for plausibility within the scope of the audits: for example, the ovarian cancer was an incidental diagnosis in the context of an operation because of an ovarian cyst.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

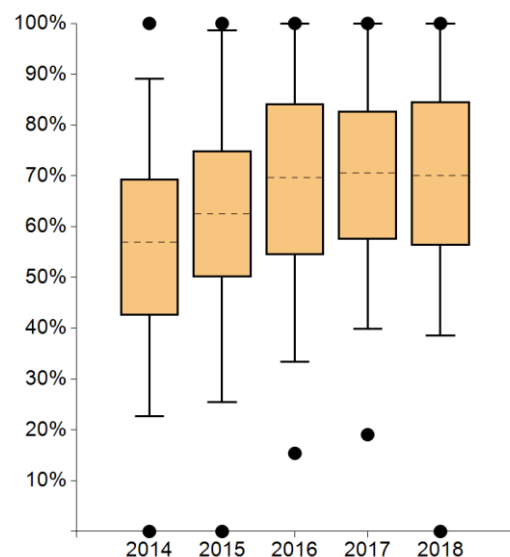
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

9. Macroscopic complete resection of advanced ovary carcinoma (GL ovary QI 3)



Begründungspflicht = mandatory statement of reasons



| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|--------|--------|--------|--------|--------|
| ● | Max | 100% | 100% | 100% | 100% | 100% |
| | 95 th percentile | 89.15% | 98.62% | 100% | 100% | 100% |
| | 75 th percentile | 69.42% | 75.00% | 84.16% | 82.74% | 84.62% |
| | Median | 56.91% | 62.50% | 69.66% | 70.59% | 70.00% |
| | 25 th percentile | 42.56% | 50.00% | 54.49% | 57.52% | 56.25% |
| | 5 th percentile | 22.69% | 25.45% | 33.33% | 39.87% | 38.50% |
| ● | Min | 0.00% | 0.00% | 15.38% | 19.05% | 0.00% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|--|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Surgical primary cases ovary carcinoma FIGO IIB-IV with macroscopic complete resection | 8* | 0 - 118 | 1,663 |
| Denominator | Surgical primary cases ovary carcinoma FIGO IIB-IV | 12* | 1 - 154 | 2,365 |
| Rate | Mandatory statement of reasons*** <30% and >90% | 70.00% | 0.00% - 100% | 70.32%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|---------|---|--------|
| Number | % | Number | % |
| 149 | 100.00% | 123 | 82.55% |

Comments:

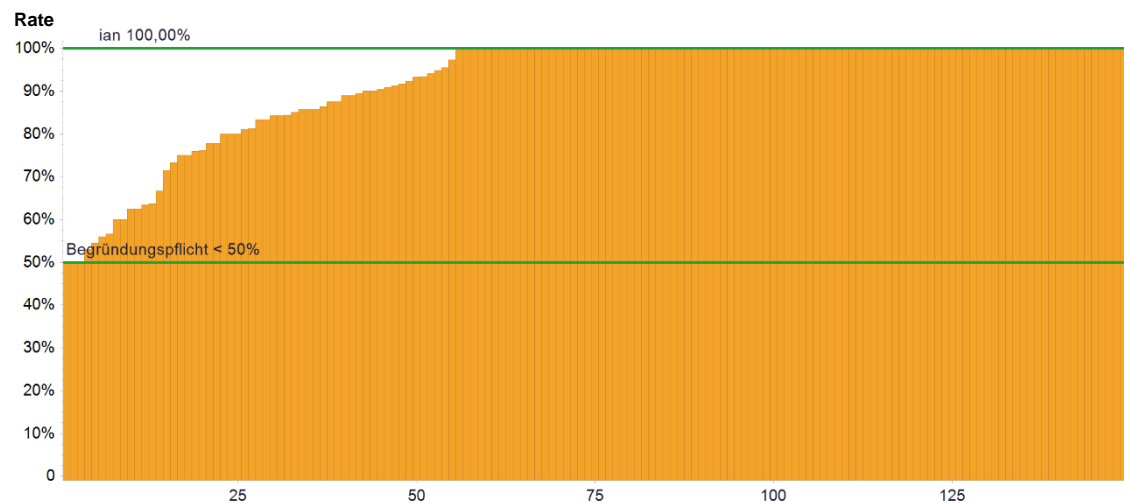
Both the number of Centres within the plausibility limits and the quotas of the individual Centres remain roughly at the previous year's level. With a continued high dispersion of the quotas, which must also be seen against the background of partly low case numbers, 123 Centres (previous year: 121) are within the plausibility limits. Only 2 Centres fell below the rate of 0% each, which was due to low patient numbers, who also showed an advanced or inoperable clinical picture. 24 Centres reported macroscopic R0 rates of over 90%. In the audits, these above-average rates were justified both by low case numbers and by the high level of specialist and surgical expertise in the Centres.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

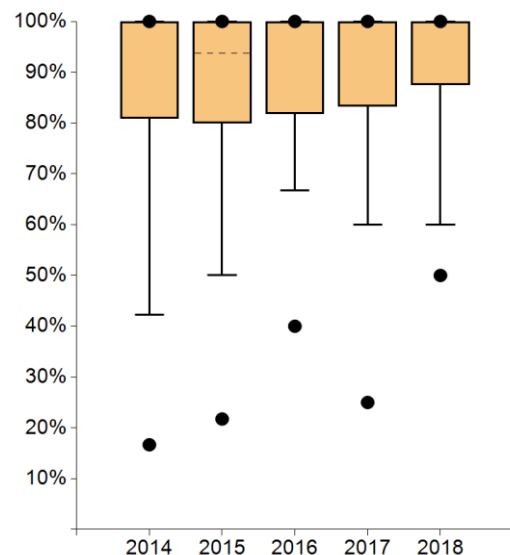
*** If value is outside the plausibility corridor, centres have to give an explanation.

10. Surgery advanced ovary carcinoma (GL ovary QI 4)



149 Clinical sites

Begründungspflicht = mandatory statement of reasons



| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|--------|--------|--------|--------|--------|
| Max | 100% | 100% | 100% | 100% | 100% |
| 95 th percentile | 100% | 100% | 100% | 100% | 100% |
| 75 th percentile | 100% | 100% | 100% | 100% | 100% |
| Median | 100% | 93.75% | 100% | 100% | 100% |
| 25 th percentile | 80.85% | 80.00% | 81.82% | 83,33% | 87.50% |
| 5 th percentile | 42.30% | 50.00% | 66.67% | 59,93% | 60.00% |
| Min | 16.67% | 21.74% | 40.00% | 25,00% | 50.00% |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|---------|---|---------|
| Number | % | Number | % |
| 149 | 100-00% | 149 | 100.00% |

Comments:

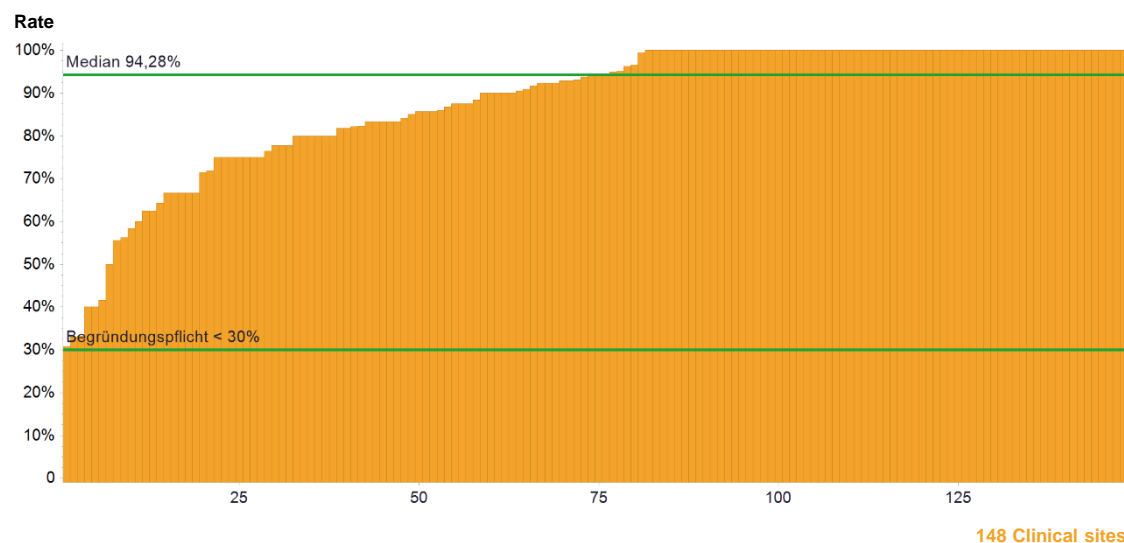
The rate of operations performed by gynaecologic oncologists, which was within the plausibility limits, rose sharply from 45% to 100% compared to the previous year. The reason for this is that a rate of 100% is no longer considered as requiring substantiation. None of the Centres fell below the rate of 50% (previous year: 2). The indicator shows an increasingly better fulfilment and lower dispersion over the years.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

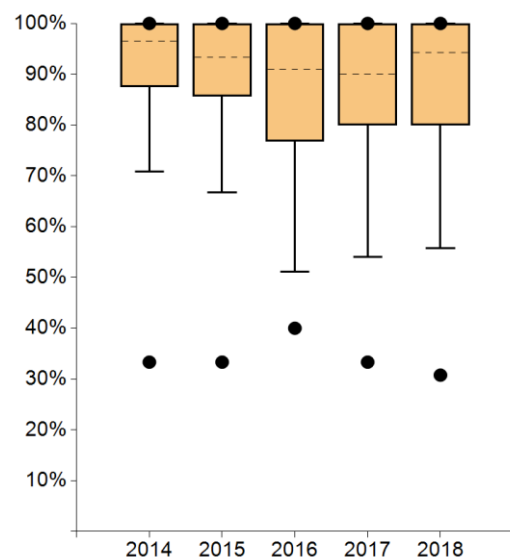
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

11. Post-surgical chemotherapy advanced ovary carcinoma (GL ovary QI 5)



Begründungspflicht = mandatory statement of reasons



| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|--------|--------|--------|--------|--------|
| Max | 100% | 100% | 100% | 100% | 100% |
| 95 th percentile | 100% | 100% | 100% | 100% | 100% |
| 75 th percentile | 100% | 100% | 100% | 100% | 100% |
| Median | 96.44% | 93.33% | 90.91% | 90.00% | 94.28% |
| 25 th percentile | 87.50% | 85.71% | 76.74% | 80.00% | 80.00% |
| 5 th percentile | 70.79% | 66.67% | 51.17% | 54.10% | 55.80% |
| Min | 33.33% | 33.33% | 40.00% | 33.33% | 30.77% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|---|-------------------------|---------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Surgical primary cases ovary carcinoma FIGO IIB-IV with post-operative chemotherapy | 10* | 1 - 153 | 1,837 |
| Denominator | Surgical primary cases ovary carcinoma FIGO IIB-IV and chemotherapy | 11* | 1 - 154 | 2,122 |
| Rate | Mandatory statement of reasons*** < 30% | 94.28% | 30.77% - 100% | 86.57%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|---------|
| Number | % | Number | % |
| 148 | 99.33% | 148 | 100.00% |

Comments:

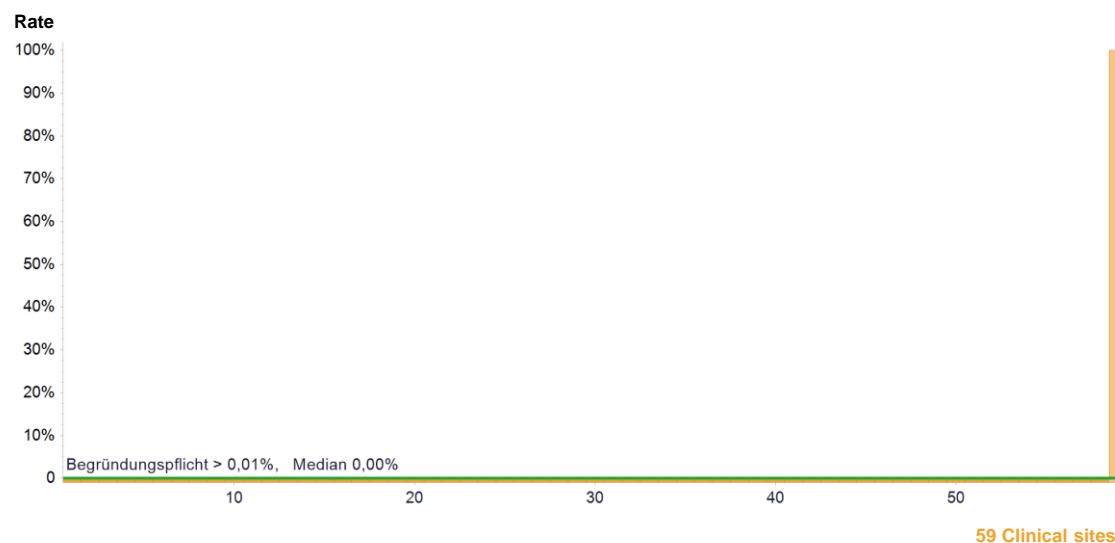
Comparable to the development of indicator 10, the elimination of the obligation to state reasons in the case of 100% fulfilment led to the fact that all Centres are within the plausibility limits in indicator year 2018. The median increases further to 80%. At the same time, the number of Centres with a rate of 30% to 50% has risen to 6 Centres (previous year: 1). These Centres tend to have lower case numbers in the denominator.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

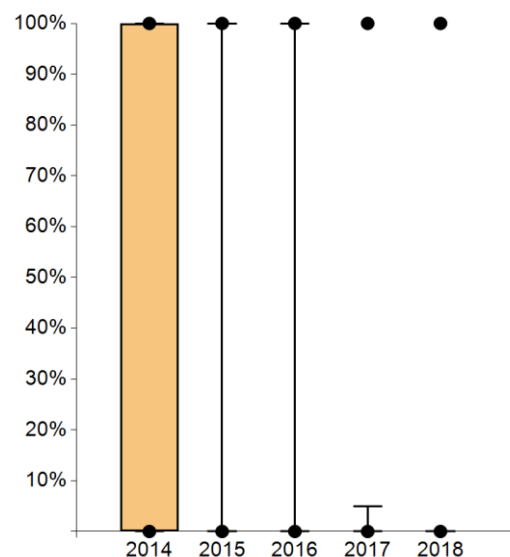
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

12. No adjuvant chemotherapy of early ovary carcinoma (GL ovary QI 6)



Begründungspflicht = mandatory statement of reasons



| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|-------|-------|-------|-------|-------|
| ● | Max | 100% | 100% | 100% | 100% | 100% |
| | 95 th percentile | 100% | 100% | 100% | 5.00% | 0.00% |
| | 75 th percentile | 100% | 0.00% | 0.00% | 0.00% | 0.00% |
| | Median | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |
| | 25 th percentile | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |
| | 5 th percentile | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |
| ● | Min | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|--------|
| Number | % | Number | % |
| 59 | 39.60% | 58 | 98.31% |

Comments:

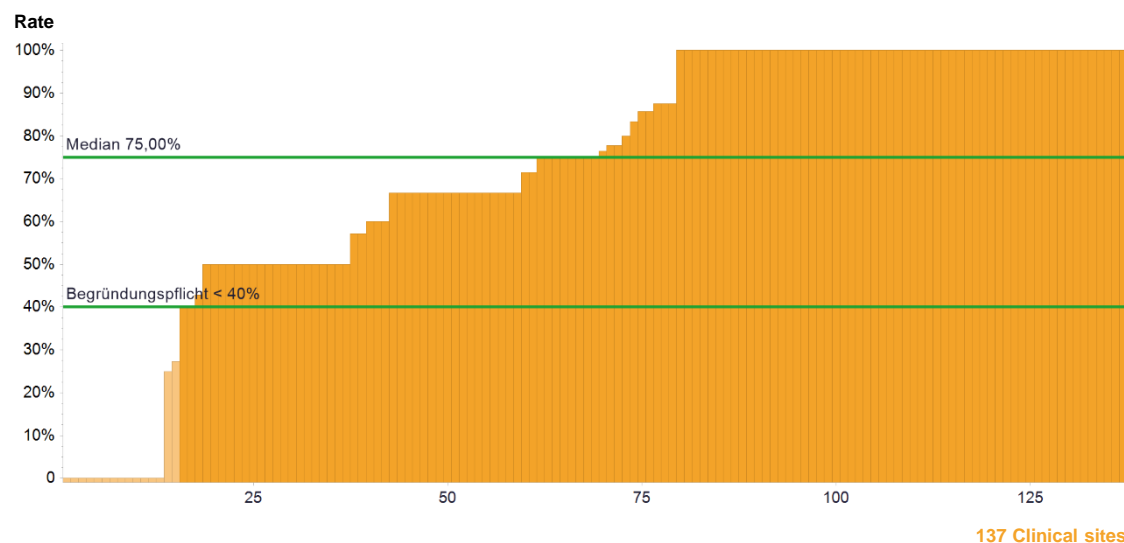
This indicator was collected in indicator year 2018 for the last time. With the exception of one Centre, all Centres that treated at least one patient of the denominator group refrained from adjuvant chemotherapy. The remaining Centre treated only one patient with ovarian cancer FIGO IA, grade 1 and complete surgical staging. In this case, histology showed a focal transition to an invasive mucinous adenocarcinoma. At the patient's request chemotherapy was performed.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

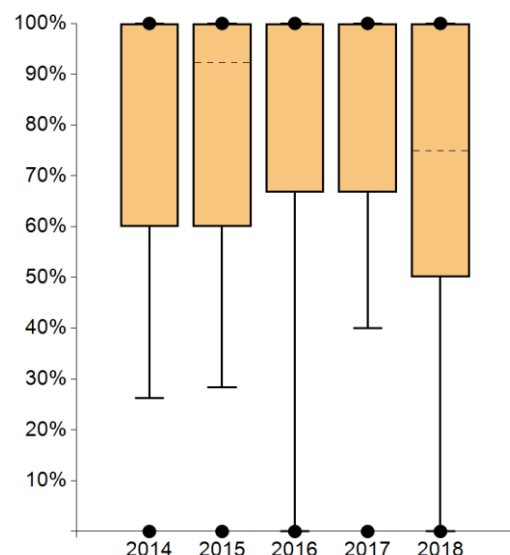
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

13. Platinum-containing chemotherapy of an early ovary carcinoma (GL ovary QI 7)



Begründungspflicht = mandatory statement of reasons



| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|--------|--------|--------|--------|--------|
| ● | Max | 100% | 100% | 100% | 100% | 100% |
| | 95 th percentile | 100% | 100% | 100% | 100% | 100% |
| | 75 th percentile | 100% | 100% | 100% | 100% | 100% |
| | Median | 100% | 92.31% | 100% | 100% | 75.00% |
| | 25 th percentile | 60.00% | 60.00% | 66.67% | 66.67% | 50.00% |
| | 5 th percentile | 26.25% | 28.33% | 0.00% | 40.00% | 0.00% |
| ● | Min | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|--|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Primary cases ovary carcinoma FIGO 1A/1B grade 3 and FIGO IC with platinum-containing chemotherapy | 2* | 0 - 13 | 341 |
| Denominator | Primary cases ovary carcinoma FIGO 1A-1B grade 3 and FIGO IC | 3* | 1 - 20 | 477 |
| Rate | Mandatory statement of reasons*** < 40% | 75.00% | 0.00% - 100% | 71.49%** |

Clinical sites with evaluable data

| Number | % |
|--------|--------|
| 137 | 91.95% |

Clinical sites within the plausibility limits

| Number | % |
|--------|--------|
| 122 | 89.05% |

Comments:

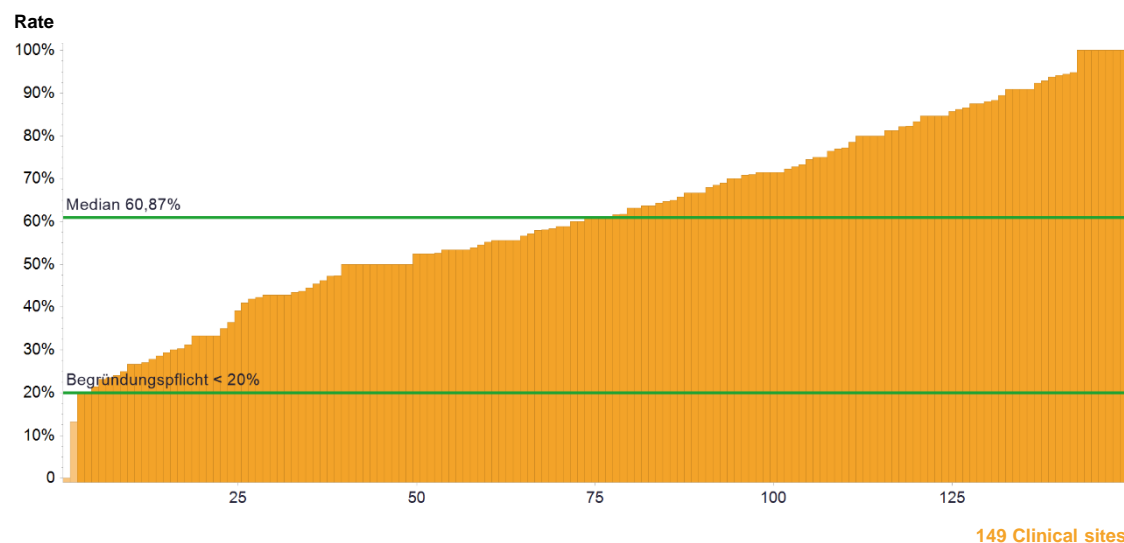
This indicator was also collected in 2018 for the last time. The fulfilment was very good over many years. Due to the high compliance rate in recent years, the obligation to give reasons was limited to undercuts of the corridor, as a result of which, at 89%, significantly more Centres were within the plausibility limits than in the previous year (44%). Of the 15 Centres that had a rate of less than 40% with platin-containing chemotherapy for ovarian cancer FIGO IA-IB Grade 3 and FIGO IC, only 2 were also obliged to give reasons in the previous year. Contraindications such as renal insufficiency, rejection by the patient or external performance of chemotherapy were predominantly given as reasons for the shortfalls.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

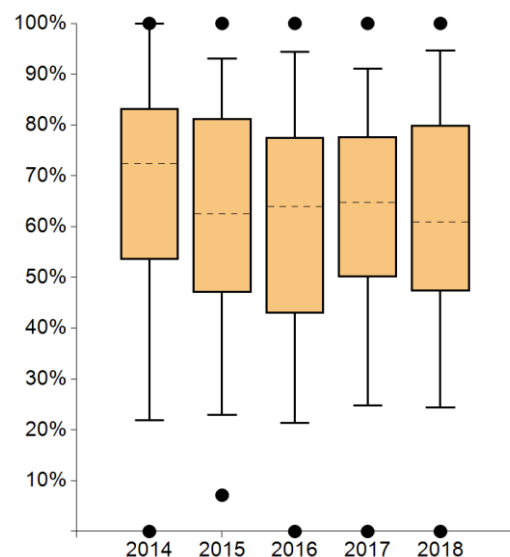
*** If value is outside the plausibility corridor, centres have to give an explanation.

14. First-line chemotherapy of advanced ovary carcinoma (GL ovary QI 8)



Begründungspflicht = mandatory statement of reasons

| | Indicator definition | All clinical sites 2018 | | |
|-------------|--|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Primary cases ovary carcinoma FIGO IIB-IV with 6 cycles first-line chemotherapy carboplatin AUC 5 and paclitaxel 175 mg/m ² | 10* | 0 - 157 | 1,901 |
| Denominator | Primary cases ovary carcinoma FIGO IIB-IV | 16* | 4 - 169 | 3,063 |
| Rate | Mandatory statement of reasons*** < 20% | 60.87% | 0.00% - 100% | 62.06%** |



| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|--------|--------|--------|--------|--------|
| ● | Max | 100% | 100% | 100% | 100% | 100% |
| | 95 th percentile | 100% | 93.05% | 94.42% | 91.09% | 94.62% |
| | 75 th percentile | 83.33% | 81.25% | 77.60% | 77.78% | 80.00% |
| | Median | 72.37% | 62.50% | 63.97% | 64.71% | 60.87% |
| | 25 th percentile | 53.51% | 47.06% | 42.86% | 50.00% | 47.22% |
| | 5 th percentile | 21.93% | 22.95% | 21.32% | 24.85% | 24.40% |
| ● | Min | 0.00% | 7.14% | 0.00% | 0.00% | 0.00% |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|---------|---|--------|
| Number | % | Number | % |
| 149 | 100.00% | 1147 | 98.66% |

Comments:

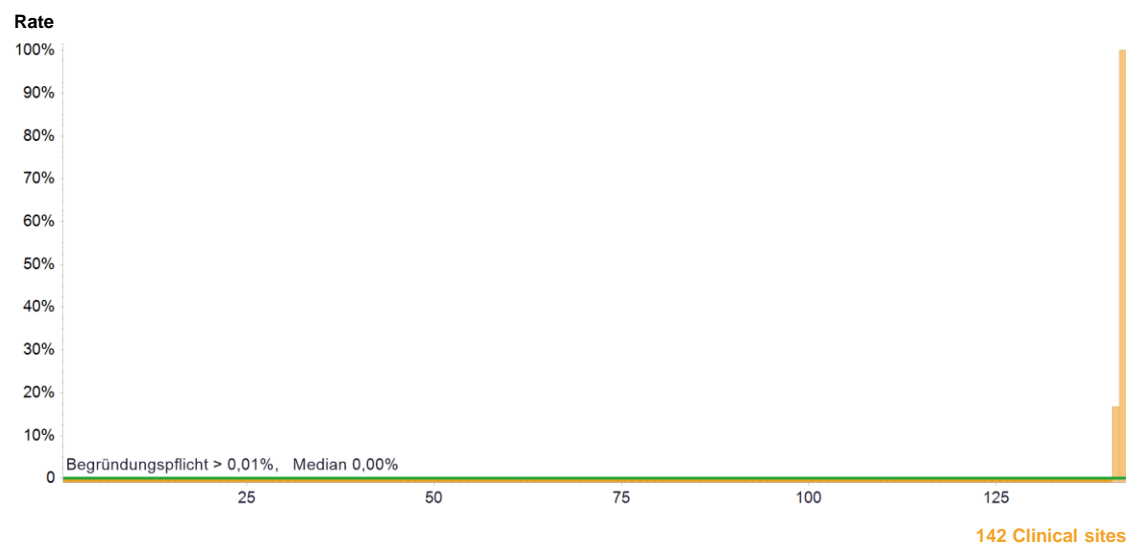
The indicator is still implemented by the vast majority of Centres. Quotas requiring substantiation were only measured for 2 Centres, as 100% fulfilment was no longer required. One of them already had to provide reasons in the previous year but was able to increase its quota. The quotas <20% were explained by, among other things, the discontinuation of therapy due to comorbidities, participation in studies and alternative therapy regimens (6x carboplatin AUC5 and paclitaxel 18x 80 mg/m² weekly).

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

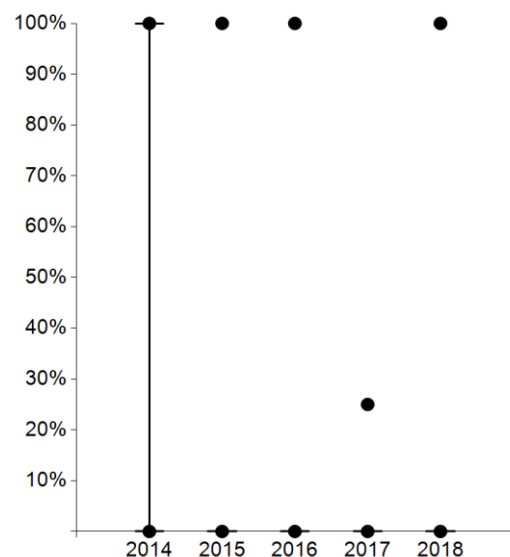
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

17. No adjuvant chemotherapy of BOT (GL ovary QI 12)



Begründungspflicht = mandatory statement of reasons



| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|-------|-------|-------|-------|-------|
| Max | 100% | 100% | 100% | 25% | 100% |
| 95 th percentile | 100% | 0.00% | 0.00% | 0.00% | 0.00% |
| 75 th percentile | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |
| Median | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |
| 25 th percentile | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |
| 5 th percentile | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |
| Min | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|---|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Primary cases borderline tumour ovary (BOT) with adjuvant therapy | 0* | 0 - 2 | 3 |
| Denominator | Primary cases borderline tumour ovary (BOT) | 5* | 1 - 33 | 859 |
| Rate | Mandatory statement of reasons*** > 0.01% | 0,00% | 0.00% - 100% | 0.35%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|--------|
| Number | % | Number | % |
| 142 | 95.30% | 140 | 98.59% |

Comments:

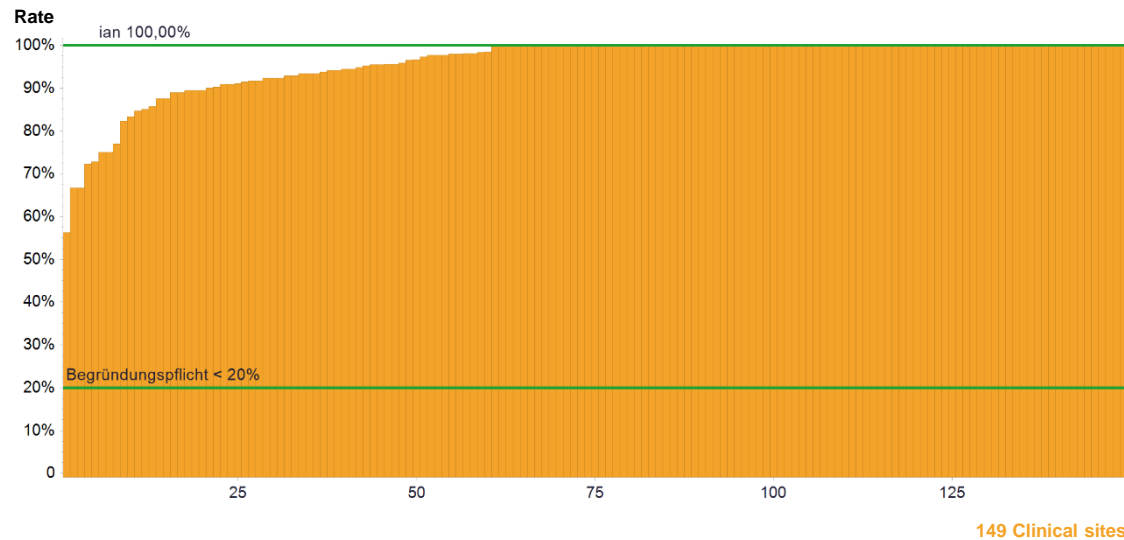
Of those Centres that treated a borderline ovarian tumour in indicator year 2018, the indicator was still excellently fulfilled. This indicator will therefore no longer be recorded in the future. The two Centres that had carried out adjuvant therapy were able to give clear reasons for this in the audit. One patient underwent chemotherapy due to intra-abdominal miliar tumour seeding, significantly increased tumour markers and the explicit will of the patient.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

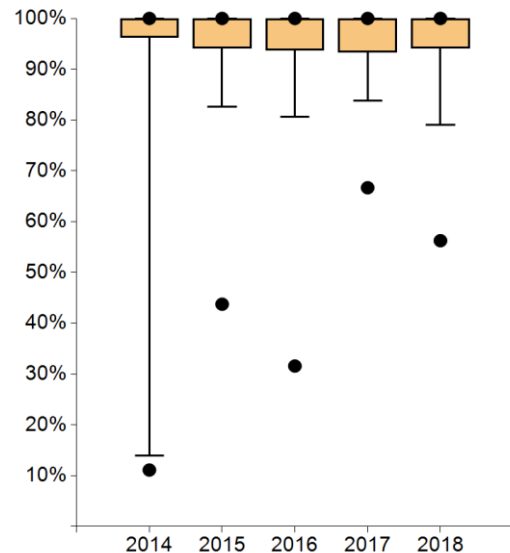
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

18. Presentation at the tumour board (GL cervix QI 1)



Begründungspflicht = mandatory statement of reasons



| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|--------|--------|--------|--------|--------|
| ● | Max | 100% | 100% | 100% | 100% | 100% |
| | 95 th percentile | 100% | 100% | 100% | 100% | 100% |
| | 75 th percentile | 100% | 100% | 100% | 100% | 100% |
| | Median | 100% | 100% | 100% | 100% | 100% |
| | 25 th percentile | 96.25% | 94.12% | 93.75% | 93.33% | 94.12% |
| | 5 th percentile | 13.89% | 82.55% | 80.64% | 83.82% | 79.09% |
| ● | Min | 11.11% | 43.75% | 31.58% | 66.67% | 56.25% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|---|-------------------------|---------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Patients (primary cases and "non-primary cases") presented at the tumour conference | 17* | 4 - 81 | 3,053 |
| Denominator | Patients with an initial diagnosis, recurrence or new remote metastasis of a cervical carcinoma | 17* | 4 - 81 | 3,165 |
| Rate | Mandatory statement of reasons*** < 20% | 100% | 56.25% - 100% | 96.46%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|---------|---|---------|
| Number | % | Number | % |
| 149 | 100.00% | 149 | 100.00% |

Comments:

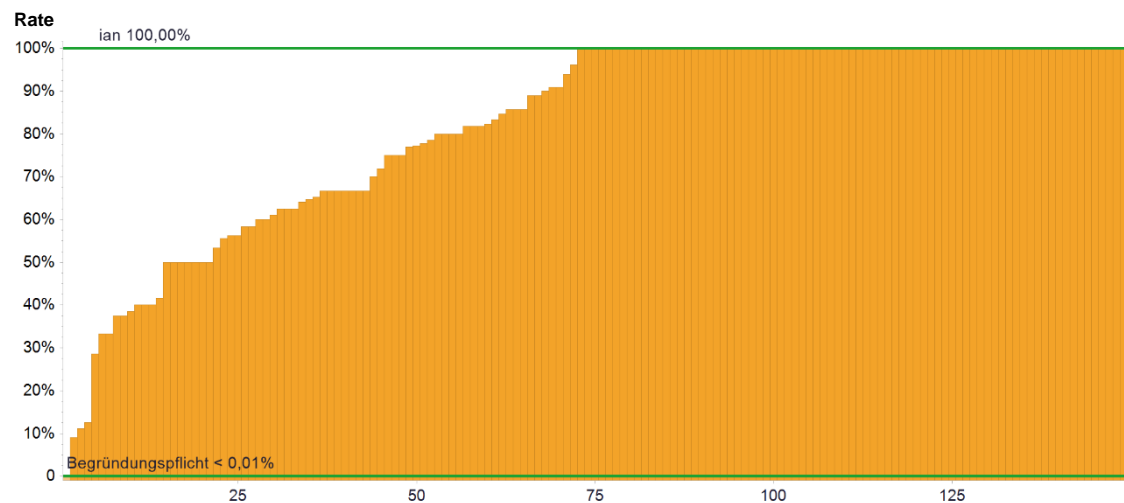
As in previous years, the Centres are implementing this indicator very well. 88 Centres (previous year: 87) presented all patients with a cervical carcinoma at the tumour board. Since indicator year 2015, none of the Centres has fallen below the 20% quota.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

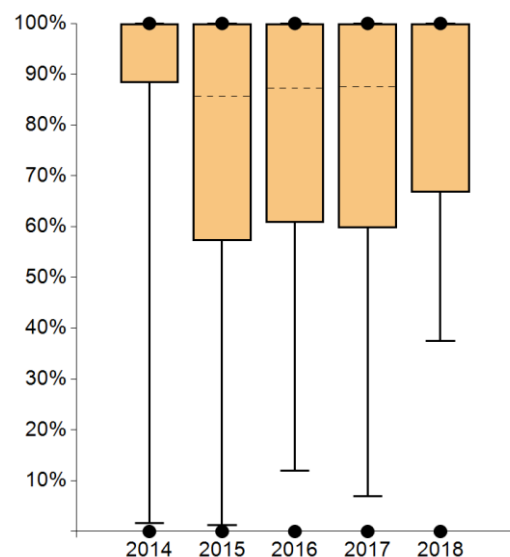
*** If value is outside the plausibility corridor, centres have to give an explanation.

19. Details in the test report on initial diagnosis and tumour resection (GL cervix QI 2)



149 Clinical sites

Begründungspflicht = mandatory statement of reasons



| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|--------|--------|--------|--------|--------|
| ● | Max | 100% | 100% | 100% | 100% | 100% |
| | 95 th percentile | 100% | 100% | 100% | 100% | 100% |
| | 75 th percentile | 100% | 100% | 100% | 100% | 100% |
| | Median | 100% | 85.71% | 87.23% | 87.50% | 100% |
| | 25 th percentile | 88.31% | 57.14% | 60.74% | 59.73% | 66.67% |
| | 5 th percentile | 1.67% | 1.18% | 12.02% | 6.98% | 37.50% |
| ● | Min | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|--|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | "Surgical primary cases" cervical carcinoma with complete test reports | 6* | 0 - 31 | 1175 |
| Denominator | "Surgical primary cases" with cervical carcinoma and tumour resection | 8* | 2 - 36 | 1461 |
| Rate | Mandatory statement of reasons*** < 0.01% | 100% | 0.00% - 100% | 80.42%** |

*

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|---------|---|--------|
| Number | % | Number | % |
| 149 | 100.00% | 148 | 99.33% |

Comments:

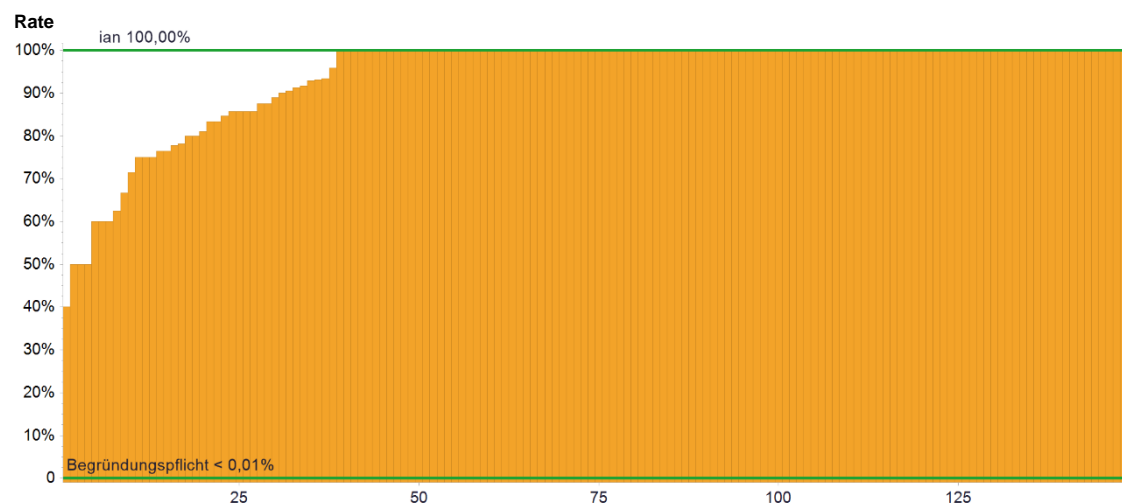
The degree of fulfilment of this indicator has continued to rise at a high level. The Centre with the missing complete diagnostic reports (denominator= 3) has carried out a quality circle with the pathology department, so that a better rate will be achieved in the next audit.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

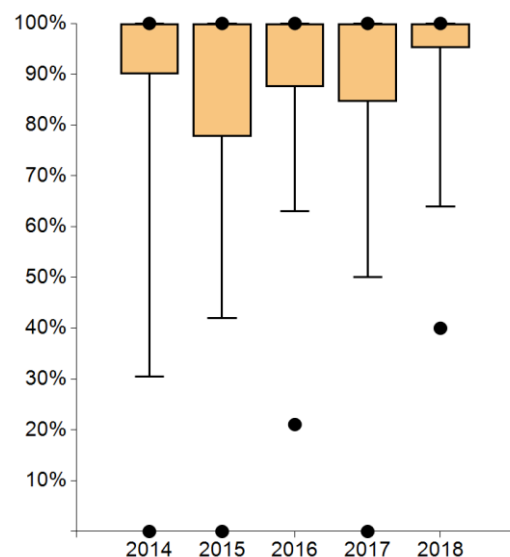
*** If value is outside the plausibility corridor, centres have to give an explanation.

20. Details in the pathology report for lymphonodectomy (GL cervix QI 3)



148 Clinical sites

| | Indicator definition | All clinical sites 2018 | | |
|-------------|--|-------------------------|---------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | "Surgical cases" with a pathology report with details on the lymph nodes | 5,5* | 1 - 32 | 1,137 |
| Denominator | "Surgical cases" with cervical carcinoma and lymphonodectomy | 6* | 1 - 32 | 1,210 |
| Rate | Mandatory statement of reasons*** <0.01% | 100% | 40.00% - 100% | 93.97%** |



| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|--------|--------|--------|--------|--------|
| Max | 100% | 100% | 100% | 100% | 100% |
| 95 th percentile | 100% | 100% | 100% | 100% | 100% |
| 75 th percentile | 100% | 100% | 100% | 100% | 100% |
| Median | 100% | 100% | 100% | 100% | 100% |
| 25 th percentile | 90.00% | 77.78% | 87.50% | 84.62% | 95.21% |
| 5 th percentile | 30.48% | 42.00% | 63.08% | 50.00% | 63.96% |
| Min | 0.00% | 0.00% | 21.05% | 0.00% | 40.00% |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|---------|
| Number | % | Number | % |
| 148 | 99.33% | 148 | 100.00% |

Comments:

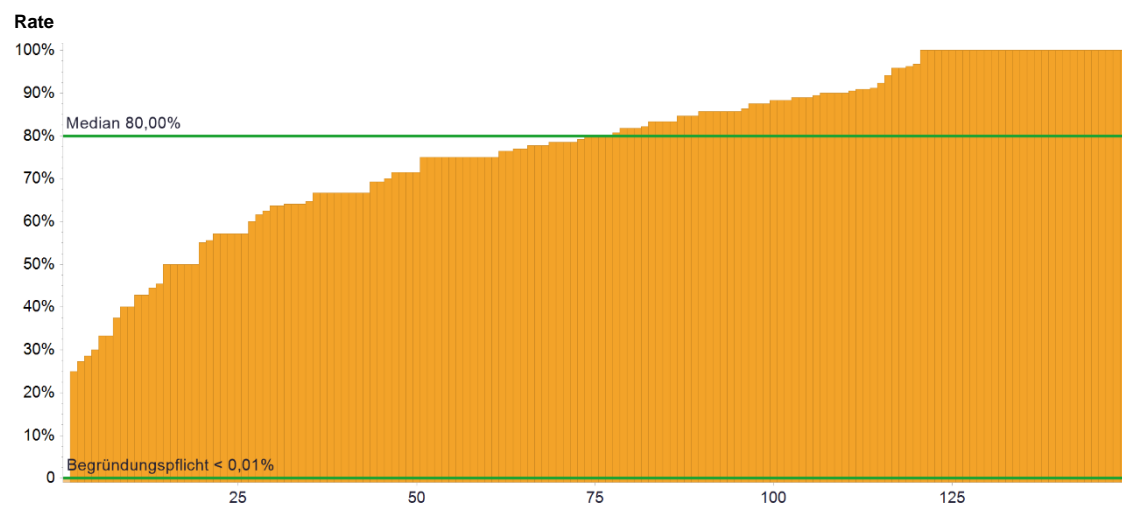
The rate of complete diagnostic reports after lymphonodectomy continues to rise in the Centres. In 109 of the 148 Centres (74%) with evaluable data, all diagnostic reports were complete. In the previous year, this rate was 64% (88 of 137 Centres).

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

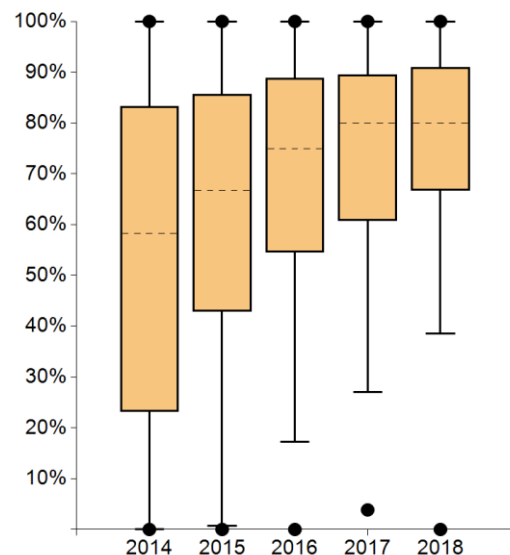
*** If value is outside the plausibility corridor, centres have to give an explanation.

21. Cytological/histological lymph node staging (GL cervix QI 4)



149 Clinical sites

Begründungspflicht = mandatory statement of reasons



| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|--------|--------|--------|--------|--------|
| ● | Max | 100% | 100% | 100% | 100% | 100% |
| | 95 th percentile | 100% | 100% | 100% | 100% | 100% |
| | 75 th percentile | 83.34% | 85.71% | 88.89% | 88.45% | 90.91% |
| | Median | 58.33% | 66.67% | 75.00% | 80.00% | 80.00% |
| | 25 th percentile | 23.22% | 42.86% | 54.55% | 60.77% | 66.67% |
| | 5 th percentile | 0.00% | 0.71% | 17.29% | 27.04% | 38.50% |
| ● | Min | 0.00% | 0.00% | 0.00% | 3.85% | 0.00% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|--|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | "Total cases" with cytological/histological lymph node staging | 6* | 0 - 37 | 1,346 |
| Denominator | "Total cases" with cervical carcinoma FIGO stages ≥ IA2-IVA | 9* | 1 - 50 | 1,702 |
| Rate | Mandatory statement of reasons*** <0.01% | 80.00% | 0.00% - 100% | 79.08%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|---------|---|--------|
| Number | % | Number | % |
| 149 | 100.00% | 148 | 99.33% |

Comments:

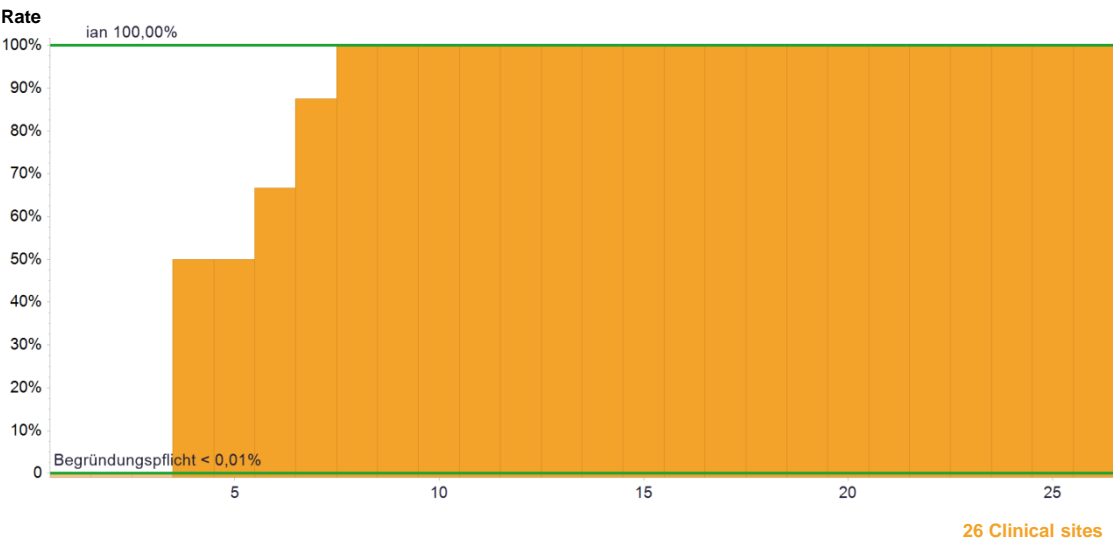
The very good fulfilment of this indicator continues in indicator year 2018. As in the previous year, the majority of the Centres (76) were able to improve their ratios. One Centre did not perform lymph node staging, explaining this with the age and/or comorbidities of the 3 eligible patients. The auditor reviewed this approach in the audit.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

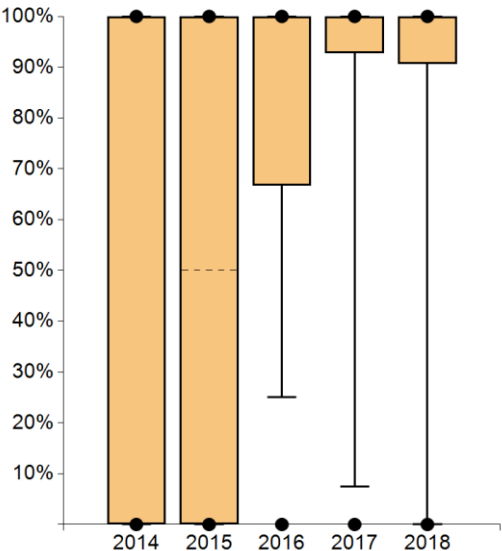
22. Exenteration (GL cervix QI 9)



Begründungspflicht = mandatory statement of reasons

| | Indicator definition | All clinical sites 2018 | | |
|-------------|---|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | "Surgical non-primary cases" with local R0 resection | 1* | 0 - 7 | 36 |
| Denominator | "Surgical non-primary cases" with a cervical carcinoma and tumour recurrence and exenteration | 1* | 1 - 8 | 43 |
| Rate | Mandatory statement of reasons*** < 0.01% | 100% | 0.00% - 100% | 83.72%** |

*



| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|-------|--------|--------|--------|--------|
| ● | Max | 100% | 100% | 100% | 100% | 100% |
| | 95 th percentile | 100% | 100% | 100% | 100% | 100% |
| | 75 th percentile | 100% | 100% | 100% | 100% | 100% |
| | Median | 0.00% | 50.00% | 100% | 100% | 100% |
| | 25 th percentile | 0.00% | 0.00% | 66.67% | 92.86% | 90.63% |
| | 5 th percentile | 0.00% | 0.00% | 25.00% | 7.50% | 0.00% |
| ● | Min | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|--------|
| Number | % | Number | % |
| 26 | 17.45% | 23 | 88.46% |

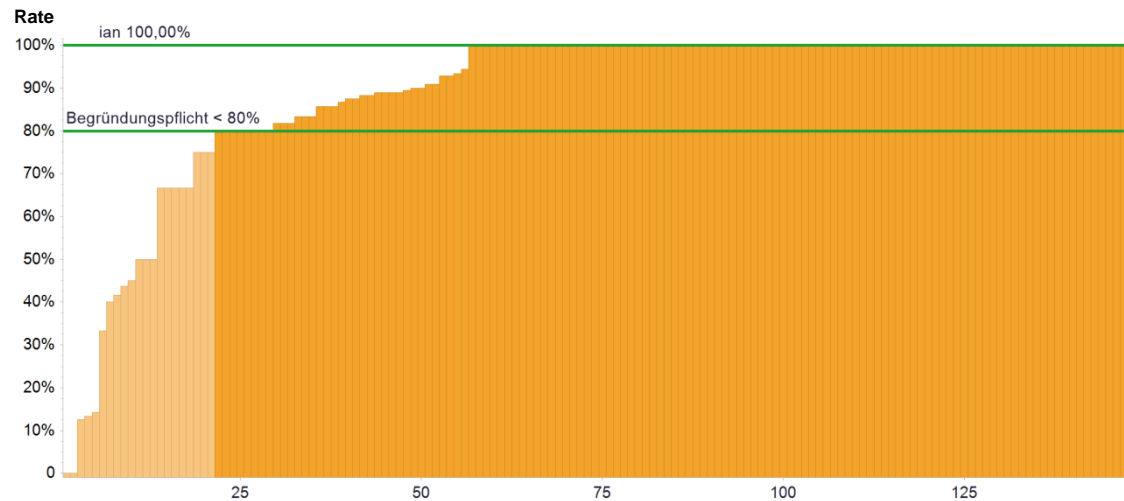
Comments:
123 Centres did not carry out any exenterations in indicator year 2018. 19 of the remaining 26 Centres achieved a R0 resection rate of 100%. The 3 Centres with a 0% rate only performed an exenteration on 1 patient each in the key year (denominator = 1). The cases were considered in the audit. Due to the good implementation and at the same time low patient numbers in the denominator, the indicator is no longer included in the data sheet from 2020.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

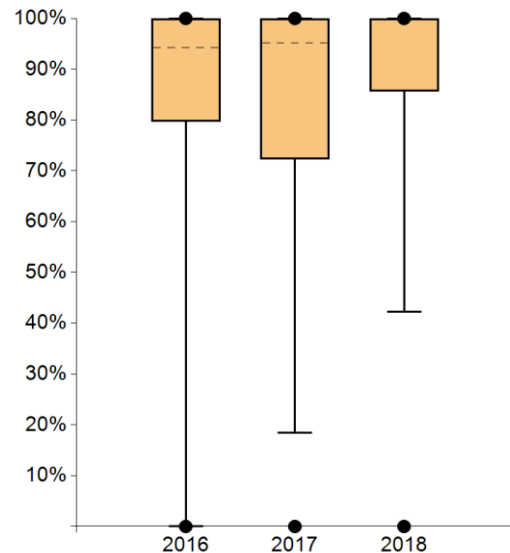
*** If value is outside the plausibility corridor, centres have to give an explanation.

23. Details in pathology report in the case of initial diagnosis and tumour resection (GL vulva QI 1)



147 Clinical sites

Begründungspflicht = mandatory statement of reasons



| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|------|------|--------|--------|--------|
| ● | Max | ---- | ---- | 100% | 100% | 100% |
| | 95 th percentile | ---- | ---- | 100% | 100% | 100% |
| | 75 th percentile | ---- | ---- | 100% | 100% | 100% |
| | Median | ---- | ---- | 94.26% | 95.22% | 100% |
| | 25 th percentile | ---- | ---- | 79.64% | 72.32% | 85.71% |
| | 5 th percentile | ---- | ---- | 0.00% | 18.44% | 42.29% |
| ● | Min | ---- | ---- | 0.00% | 0.00% | 0.00% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|---|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Patients with pathology reports (def. see Data Sheet) | 7* | 0 - 62 | 1,155 |
| Denominator | Patients with initial diagnosis vulvar carcinoma and tumour resection | 7* | 1 - 62 | 1,329 |
| Rate | Mandatory statement of reasons*** <80% | 100% | 0.00% - 100% | 86.91%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|--------|
| Number | % | Number | % |
| 147 | 98.66% | 126 | 85.71% |

Comments:

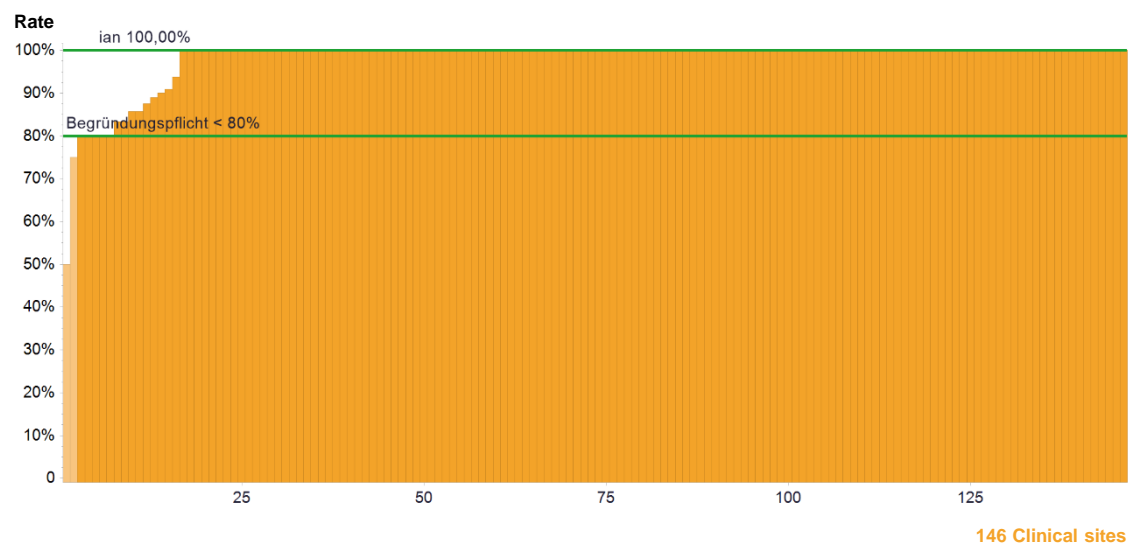
The indicator continues to develop positively, with 59 Centres improving their ratio compared to the previous year. 90 Centres (previous year: 66) were able to present complete diagnostic reports after vulvar cancer resections throughout. 21 Centres had less than 80% complete diagnostic reports. Frequently, information on perineural infiltration and three-dimensional tumour size was missing. In multimorbid patients, lymph node staging (pNx) was sometimes not done. In the audits, it was accordingly agreed to discuss the incomplete reports with the pathology staff (for example in quality circles) and to work towards a complete report.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

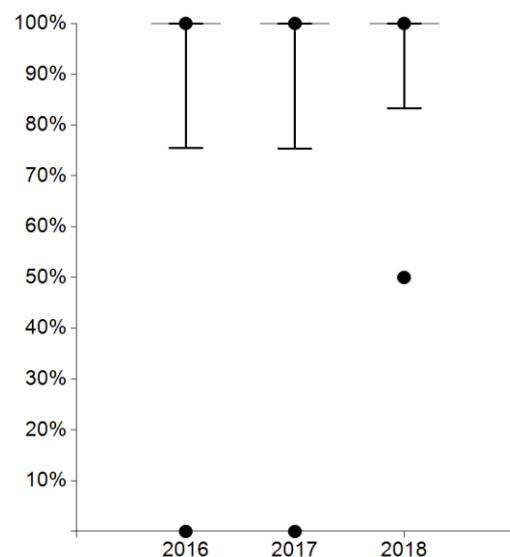
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

24. Details in pathology report in the case of lymphonodectomy (GL vulva QI 2)



Begründungspflicht = mandatory statement of reasons



| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|------|------|--------|--------|--------|
| ● | Max | ---- | ---- | 100% | 100% | 100% |
| | 95 th percentile | ---- | ---- | 100% | 100% | 100% |
| | 75 th percentile | ---- | ---- | 100% | 100% | 100% |
| | Median | ---- | ---- | 100% | 100% | 100% |
| | 25 th percentile | ---- | ---- | 100% | 100% | 100% |
| | 5 th percentile | ---- | ---- | 75.50% | 75.33% | 83.33% |
| ● | Min | ---- | ---- | 0.00% | 0.00% | 50.00% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|--|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Patients with pathology reports (def. see Data Sheet) | 4* | 1 - 46 | 812 |
| Denominator | Patients with initial diagnosis vulvar carcinoma and lymphonodectomy | 4* | 1 - 46 | 830 |
| Rate | Mandatory statement of reasons*** <80% | 100% | 0.00% - 100% | 97.83%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|--------|
| Number | % | Number | % |
| 146 | 97.99% | 144 | 98.63% |

Comments:

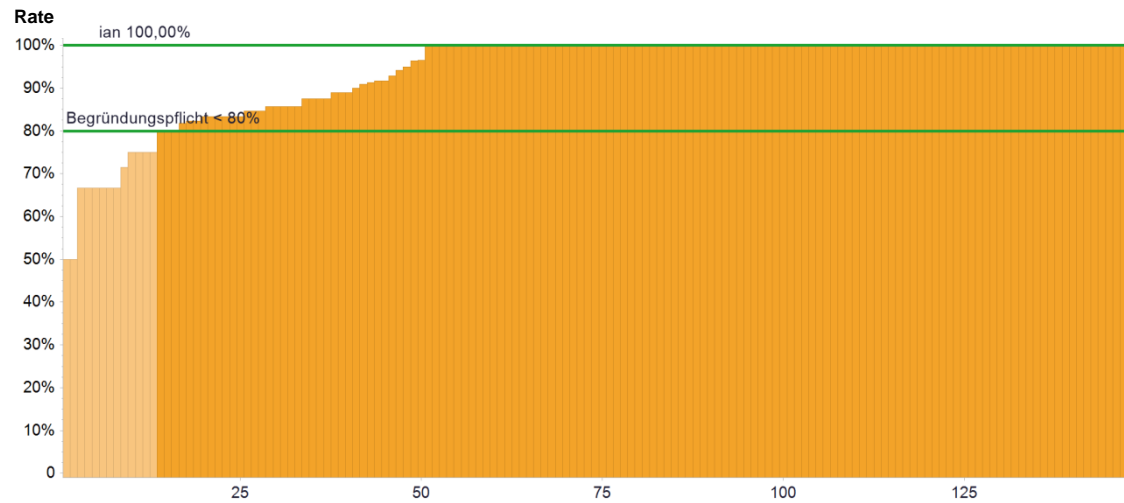
The indicator for the complete diagnostic reports after lymphonodectomy in the case of vulvar cancer continues to develop positively. 24 Centres continued to improve their ratios, 107 (previous year: 105) even reached 100%. Only 2 Centres (previous year: 7) fell below the quota of 80%. In two of the three Centres concerned, information on the capsule rupture of the lymph node metastasis was missing.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

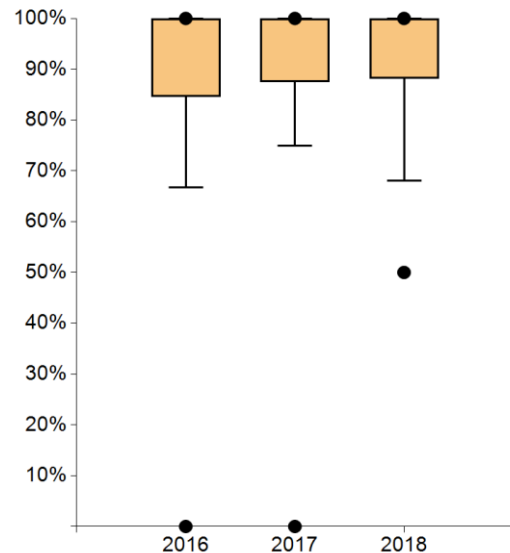
*** If value is outside the plausibility corridor, centres have to give an explanation.

25. Local radical excision (GL vulva QI 4)



147 Clinical sites

Begründungspflicht = mandatory statement of reasons



| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|-------|-------|--------|--------|--------|
| Max | ----- | ----- | 100% | 100% | 100% |
| 95 th percentile | ----- | ----- | 100% | 100% | 100% |
| 75 th percentile | ----- | ----- | 100% | 100% | 100% |
| Median | ----- | ----- | 100% | 100% | 100% |
| 25 th percentile | ----- | ----- | 84,62% | 87.50% | 88.20% |
| 5 th percentile | ----- | ----- | 66,67% | 75.00% | 68.10% |
| Min | ----- | ----- | 0.00% | 0.00% | 50.00% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|--|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Patients with local resection with a clear resection margin | 6* | 1 - 53 | 1,128 |
| Denominator | Patients with initial diagnosis vulvar carcinoma and a T1a or T1b tumour | 7* | 1 - 55 | 1,207 |
| Rate | Mandatory statement of reasons*** < 80% | 100% | 0.00% - 100% | 93.45%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|--------|
| Number | % | Number | % |
| 147 | 98.66% | 134 | 91.16% |

Comments:

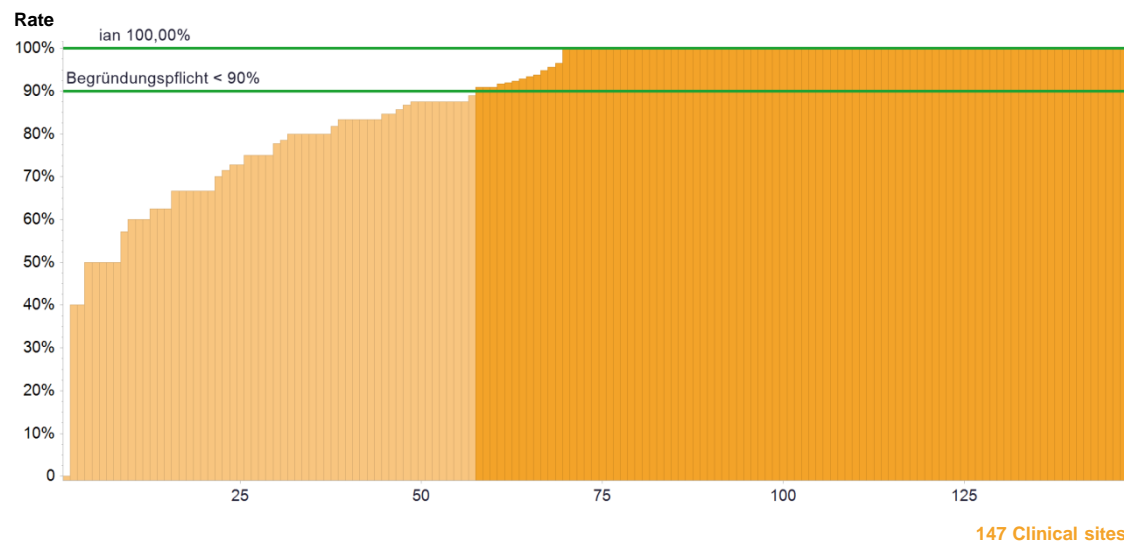
The plausibility limits were changed from $\geq 90\%$ and $< 100\%$ to $< 80\%$ compared to indicator year 2017. Also due to the many Centres that already achieved local resection with a tumour-free margin in all patients of the denominator in previous years, more than 91.16% of the Centres (previous year: 28.99%) now meet the specified quota. 13 Centres had to justify R0 rates of less than 80%. In the audits, they frequently stated that primary surgery or second-look resection was refused by the patients (e.g. due to old age) or that a complete vulvectomy was necessary, for example in the case of extensive expansion despite T1a/b or large accompanying vulval intraepithelial neoplasia (VIN).

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

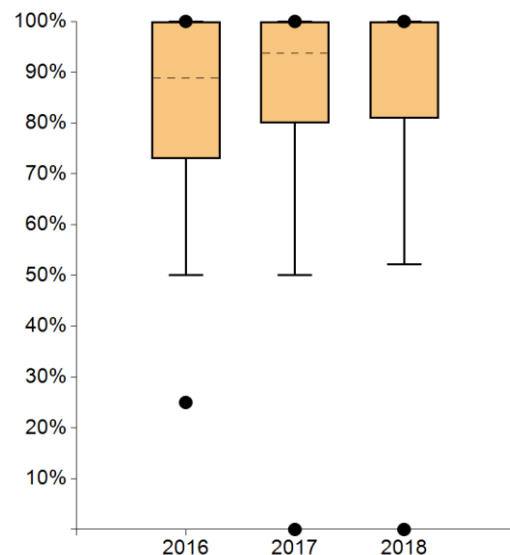
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

26. Conduct inguinofemoral staging (GL vulva QI 6)



Begründungspflicht = mandatory statement of reasons



| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|-------|-------|--------|--------|--------|
| Max | ----- | ----- | 100% | 100% | 100% |
| 95 th percentile | ----- | ----- | 100% | 100% | 100% |
| 75 th percentile | ----- | ----- | 100% | 100% | 100% |
| Median | ----- | ----- | 88.89% | 93.75% | 100% |
| 25 th percentile | ----- | ----- | 72.92% | 80.00% | 80.91% |
| 5 th percentile | ----- | ----- | 50.00% | 50.00% | 52.14% |
| Min | ----- | ----- | 25.00% | 0.00% | 0.00% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|---|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Patients with surgical staging of inguinofemoral lymph nodes | 5* | 0 - 43 | 943 |
| Denominator | Patients with initial diagnosis vulvar carcinoma \geq pT1b (no basal cell carcinoma and no verrucous carcinoma) | 6* | 1 - 45 | 1,057 |
| Rate | Mandatory statement of reasons*** < 90% and =100% | 100% | 0.00% - 100% | 89.21%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|--------|
| Number | % | Number | % |
| 147 | 98.66% | 90 | 61.22% |

Comments:

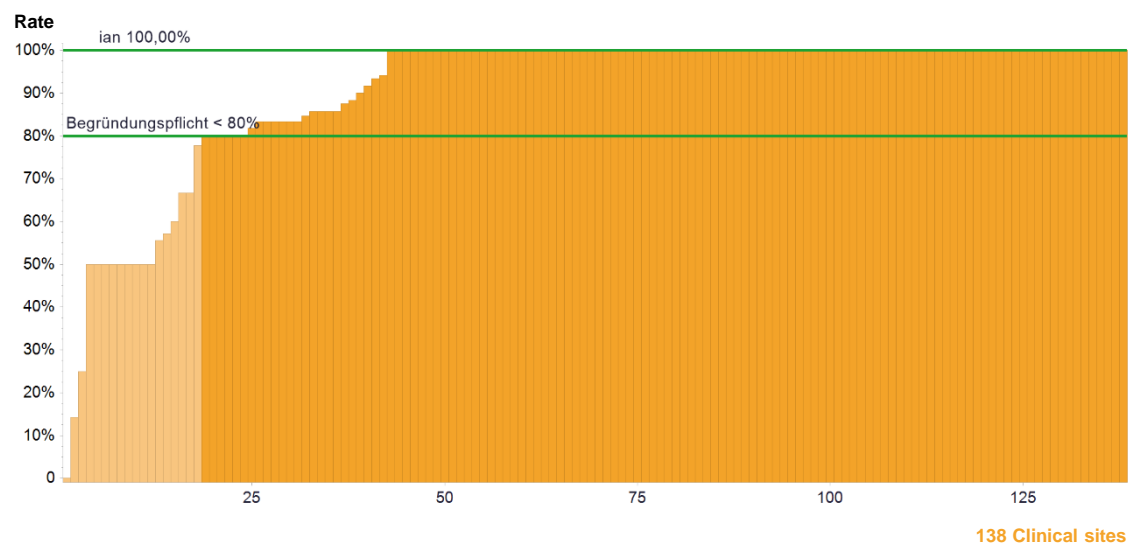
The median has further increased to 100%. The dispersion of the values remains high, which is probably also due to the low numbers in the denominator. The inclusion of the 100% rate in the plausibility limits significantly reduces the number of Centres requiring a substantiation (previous year: 7.3% within the target values). 57 Centres had to substantiate quotas of less than 90% in the audits, which in the vast majority of cases were caused by advanced age, comorbidities, advanced stage of the disease (e.g. primarily metastasized, infestation of paraortic lymph nodes) and/or rejection by the patient.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

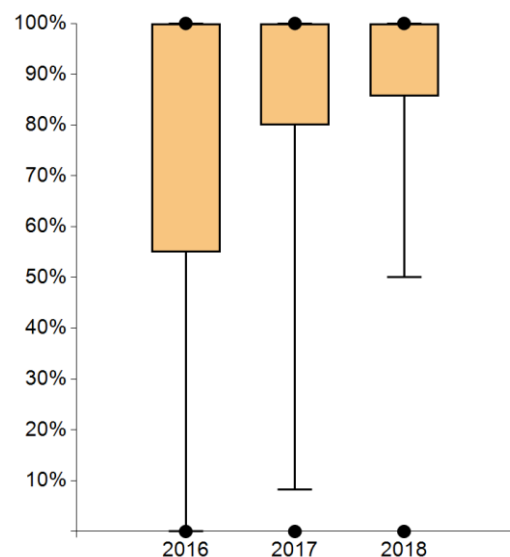
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

27. Sentinel lymph nodes biopsy (GL vulva QI 7)



Begründungspflicht = mandatory statement of reasons



| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|-------|-------|--------|--------|--------|
| ● | Max | ----- | ----- | 100% | 100% | 100% |
| | 95 th percentile | ----- | ----- | 100% | 100% | 100% |
| | 75 th percentile | ----- | ----- | 100% | 100% | 100% |
| | Median | ----- | ----- | 100% | 100% | 100% |
| | 25 th percentile | ----- | ----- | 55.00% | 80.00% | 85.71% |
| | 5 th percentile | ----- | ----- | 0.00% | 8.21% | 50.00% |
| ● | Min | ----- | ----- | 0.00% | 0.00% | 0.00% |

| | Indicator definition | All clinical sites 2018 | | |
|-------------|---|-------------------------|--------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | Patients with the presence of the described characteristics (def. see Data Sheet) | 3* | 0 - 41 | 599 |
| Denominator | Patients with primary diagnosis of an invasive vulva carcinoma and a sentinel lymph node biopsy | 4* | 1 - 41 | 675 |
| Rate | Mandatory statement of reasons*** < 80% and =100% | 100% | 0.00% - 100% | 88.74%** |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|--------|
| Number | % | Number | % |
| 138 | 92.62% | 120 | 86.96% |

Comments:

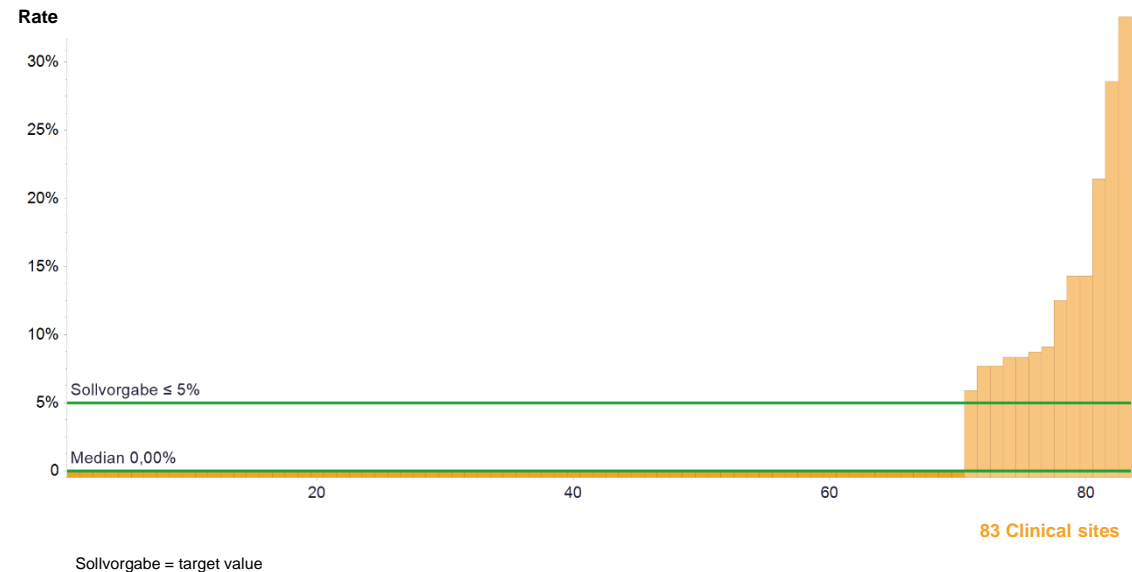
44 Centres were able to improve their rate, i.e. sentinel lymph node biopsy was performed in more patients if the parameters summarised in the numerator were available. The number of Centres with a rate of less than 80% is reduced from 26 in indicator year 2017 to now 18. Some Centres stated in the audits that they had not met individual criteria of the denominator (in particular tumour size <4cm, pathohistological ultrastaging of the lymph nodes, immunohistochemical staging). If this deviation could not be substantiated (e.g. due to young age, inconspicuous lymph nodes, low depth infiltration), measures to sensitise in particular the pathology were agreed upon.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

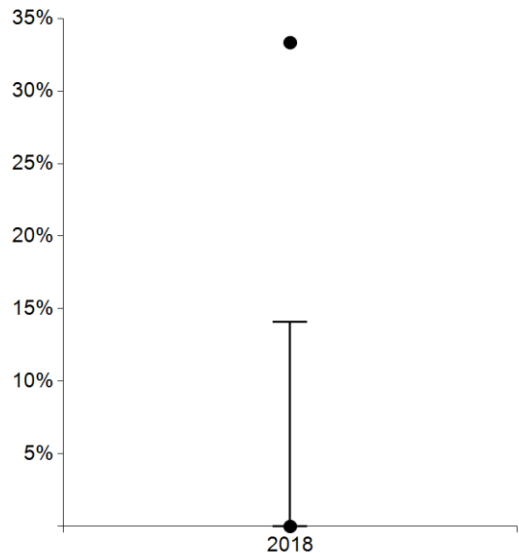
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

28. Systematic lymphadenectomy (LNE) for type-I-endometrial carcinoma (GL Endo QI1)



| | Indicator definition | All clinical sites 2018 | | |
|-------------|--|-------------------------|----------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | No Adjuvant chemotherapy for type-I-endometrial carcinoma pT1a/b G1 cN0/pN0 o. pT1a/b G2 cN0/pN0 | 0* | 0 - 6 | 21 |
| Denominator | Primary cases of the denominator with a systematic lymphadenectomy | 9* | 1 - 28 | 786 |
| Rate | Target value ≤ 5% | 0.00% | 0.00% - 33.33% | 2.67%** |



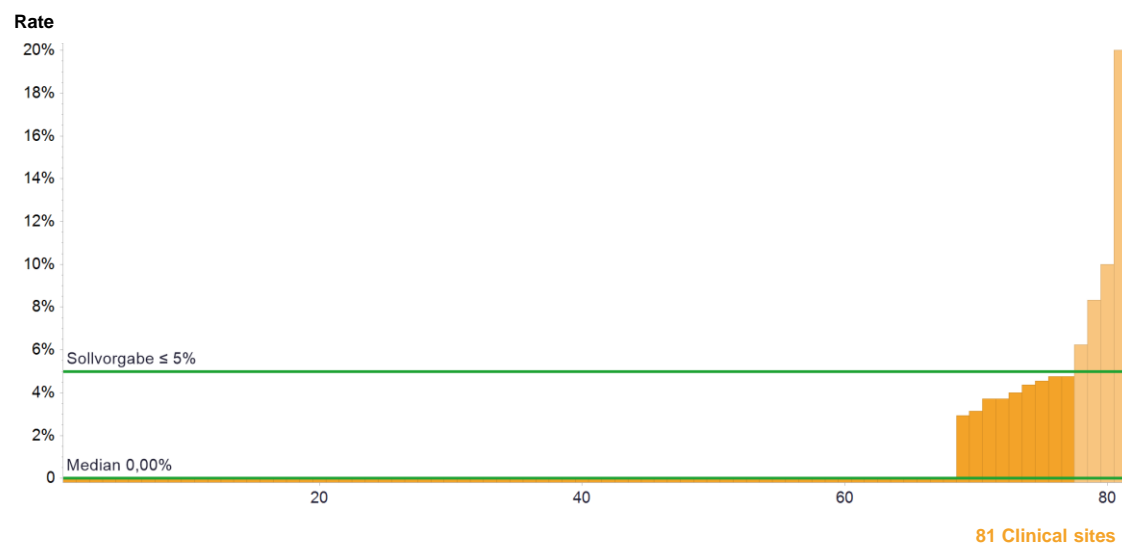
| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|------|------|------|------|--------|
| ● | Max | ---- | ---- | ---- | ---- | 33.33% |
| | 95 th percentile | ---- | ---- | ---- | ---- | 14.11% |
| | 75 th percentile | ---- | ---- | ---- | ---- | 0.00% |
| | Median | ---- | ---- | ---- | ---- | 0.00% |
| | 25 th percentile | ---- | ---- | ---- | ---- | 0.00% |
| | 5 th percentile | ---- | ---- | ---- | ---- | 0.00% |
| ● | Min | ---- | ---- | ---- | ---- | 0.00% |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|--------|
| Number | % | Number | % |
| 83 | 55.70% | 70 | 84.34% |

Comments:
This indicator was first collected in 2019, so that only the voluntarily submitted data from 83 Centres are available. Only 13 of these Centres fell below the rate of more than 5% of systematic lymphadenectomies for type 1 endometrial carcinoma, which is accompanied by an obligation to give reasons. In the vast majority of cases, these rates could be verified for plausibility in the audits: predominant reasons were simultaneous ovarian or tubal carcinomas, enlarged, highly suspect lymph nodes or the patients' wishes.

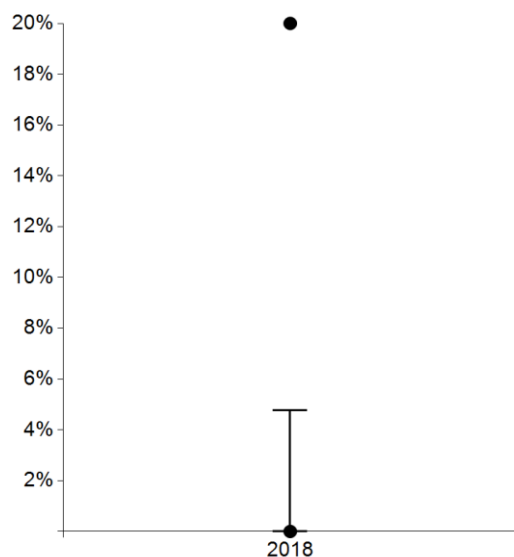
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators
** Percentage of the total number of patients treated in centres according to the indicator.
*** If value is outside the plausibility corridor, centres have to give an explanation.

29. Adjuvant chemotherapy for type-I-endometrial carcinoma (GL Endo QI 2)



Sollvorgabe = target value

| | Indicator definition | All clinical sites 2018 | | |
|-------------|--|-------------------------|----------------|----------------|
| | | Median | Range | Patients Total |
| Numerator | No Adjuvant chemotherapy for type-I-endometrial carcinoma pT1a/b G1 cN0/pN0 o. pT1a/b G2 cN0/pN0 | 0* | 0 - 1 | 13 |
| Denominator | Primary cases of the denominator with adjuvant chemotherapy | 12* | 1 - 34 | 1,112 |
| Rate | Target value ≤ 5% | 0.00% | 0.00% - 20.00% | 1.17%** |



| | | 2014 | 2015 | 2016 | 2017 | 2018 |
|---|-----------------------------|------|------|------|------|--------|
| ● | Max | ---- | ---- | ---- | ---- | 20.00% |
| | 95 th percentile | ---- | ---- | ---- | ---- | 4.76% |
| | 75 th percentile | ---- | ---- | ---- | ---- | 0.00% |
| | Median | ---- | ---- | ---- | ---- | 0.00% |
| | 25 th percentile | ---- | ---- | ---- | ---- | 0.00% |
| | 5 th percentile | ---- | ---- | ---- | ---- | 0.00% |
| ● | Min | ---- | ---- | ---- | ---- | 0.00% |

| Clinical sites with evaluable data | | Clinical sites within the plausibility limits | |
|------------------------------------|--------|---|--------|
| Number | % | Number | % |
| 81 | 54.36% | 77 | 95.06% |

Comments:

The indicator was first collected on a voluntary basis in 2019. 81 Centres submitted data, only 4 Centres performed adjuvant chemotherapy in more than 5% of patients with type 1 endometrial carcinoma. In almost all cases, the Centres justified this with simultaneous ovarian cancer.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

WISSEN AUS ERSTER HAND (FIRST-HAND KNOWLEDGE)



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