



Indicator Analysis 2025

Annual Report of the Certified Skin Cancer Centres

Audit year 2024 / Indicator year 2023

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General information

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Indicator No. 4: Melanoma: Psycho-oncological counselling.....
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Indicator No. 6: Melanoma: Patients enrolled in a study.....

Quality indicators of the guidelines (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. These quality indicators are based on the strong recommendations of the guidelines and were derived from the guidelines groups in the context of the German Guideline Programme in Oncology (GGPO). Further information: www.leitlinienprogramm-onkologie.de *

The quality indicators refer to version 3.3 of the S3-GL for the diagnosis, treatment and aftercare of melanoma.

Basic Data Indicator:

The definition of the **numerator**, **denominator** and the **target value** are taken from the data sheet.

The **median** for numerator and denominator does not refer to an existing centre but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

Range specifies the value range for the numerator, denominator and ratio of all centres.

The column **Patients Total** displays the total of all patients treated according to the indicator and the corresponding quota.

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Patients of the denominator who were presented at the tumour board	33*	2 - 199	3461
Denominator	Patients with stage shift / recurrence and primary cases with extracutaneous melanoma	34*	2 - 204	3537
Rate	Target value ≥ 95%	100%	92.31% - 100%	97.85%**

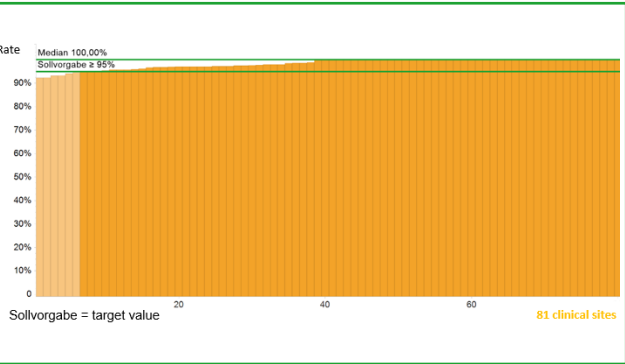
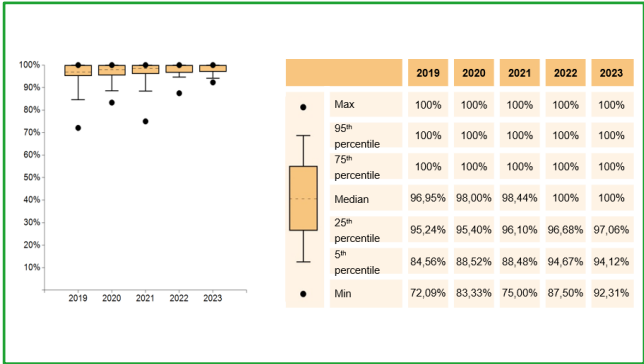


Diagram:

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

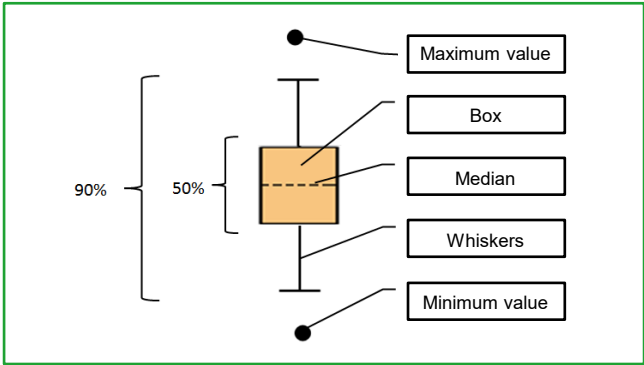
*For further information on the methodological approach see „Development of guideline-based quality indicators” (https://www.leitlinienprogramm-onkologie.de/fileadmin/user_upload/Downloads/Methodik/QIEP_OL_Version2_english.pdf)

General information



Cohort development:

The **Cohort development** in the years **2019, 2020, 2021, 2022** and **2023** is presented in a box plot diagram.



Boxplot:

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 Skin Cancer Centres 2024

	31.12.2024	31.12.2023	31.12.2022	31.12.2021	31.12.2020	31.12.2019
Ongoing Procedures	0	2	1	3	3	3
Certified Centres	80	78	78	75	71	70
Certified Clinical Sites	82	80	80	77	73	70

Clinical sites taken into account

	31.12.2024	31.12.2023	31.12.2022	31.12.2021	31.12.2020	31.12.2019
Sites included in the Annual Report	81	79	78	76	72	67
Correspond to	98.78%	98.75%	97.50%	98.70%	98.63%	95.71%
Primary cases total*	18,228	16,736	15,838	14,442	14.665	13.740
Primary cases per site (mean)*	225.0	211.8	203.0	190.0	203.7	205.1
Primary cases per site (median)*	184.0	173.0	168.5	157.0	181.5	176.0

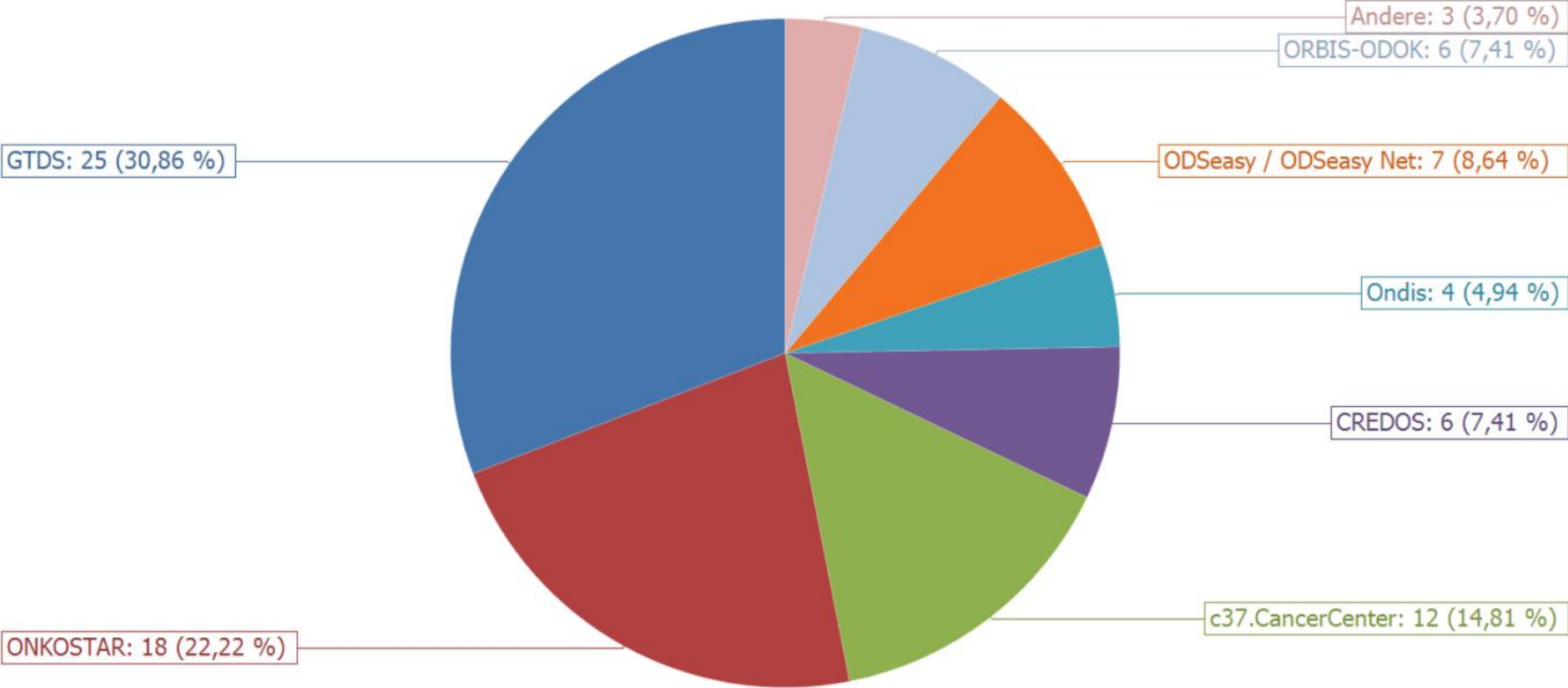
* The numbers refers to the malignant melanomas treated in the clinical sites included in the Annual Report

This Annual Report looks at the Skin Cancer Centres certified in the certification system of the German Cancer Society. The basis for the diagrams in the Annual Report is the Data Sheet.

The Annual Report includes 81 of 82 certified centre sites. Excluded is one clinical site that underwent initial certification in 2024 (data mapping for the entire calendar year is not mandatory for initial certifications). A total of 18,344 primary cases of malignant melanoma were treated at all 82 clinical sites. An up-to-date overview of all certified sites is available at www.oncomap.de.

The indicators published here refer to the Indicator Year 2023 and represent the evaluation basis for the audits conducted in 2024.

Tumour documentation systems in the centre's clinical sites



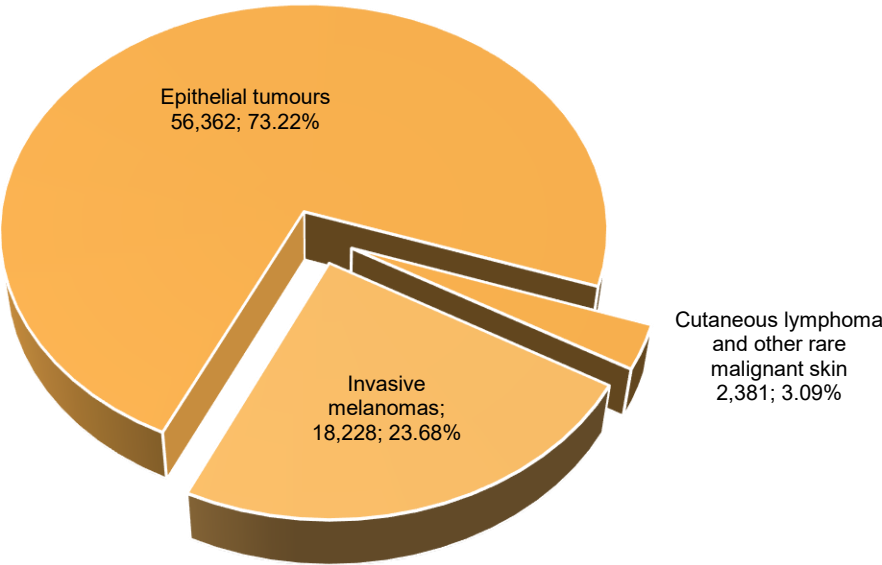
Andere = other
Eigenentwicklung = Intrinsic development

Legende:	
Other	Systems only used at one clinical site

The details on the tumour documentation system was taken from the Data Sheet (Basic Data Sheet). It is not possible to use 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.

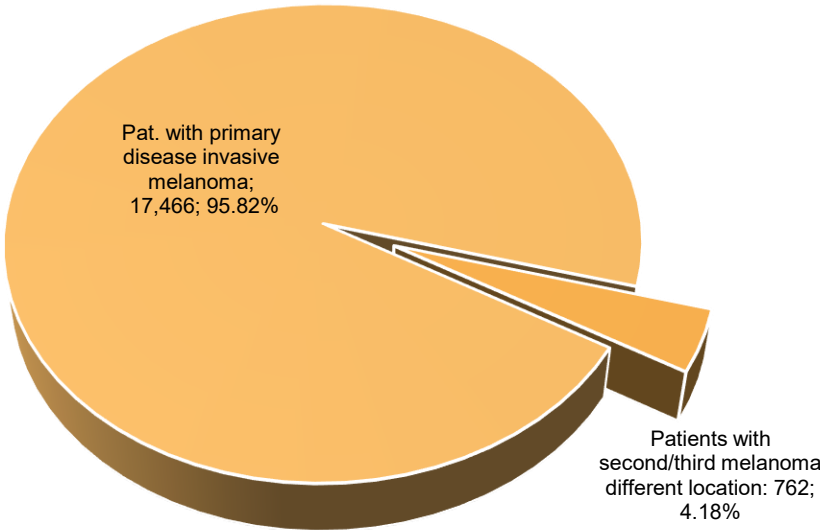
Basic data – Stage distribution primary cases

Distribution primary case patients



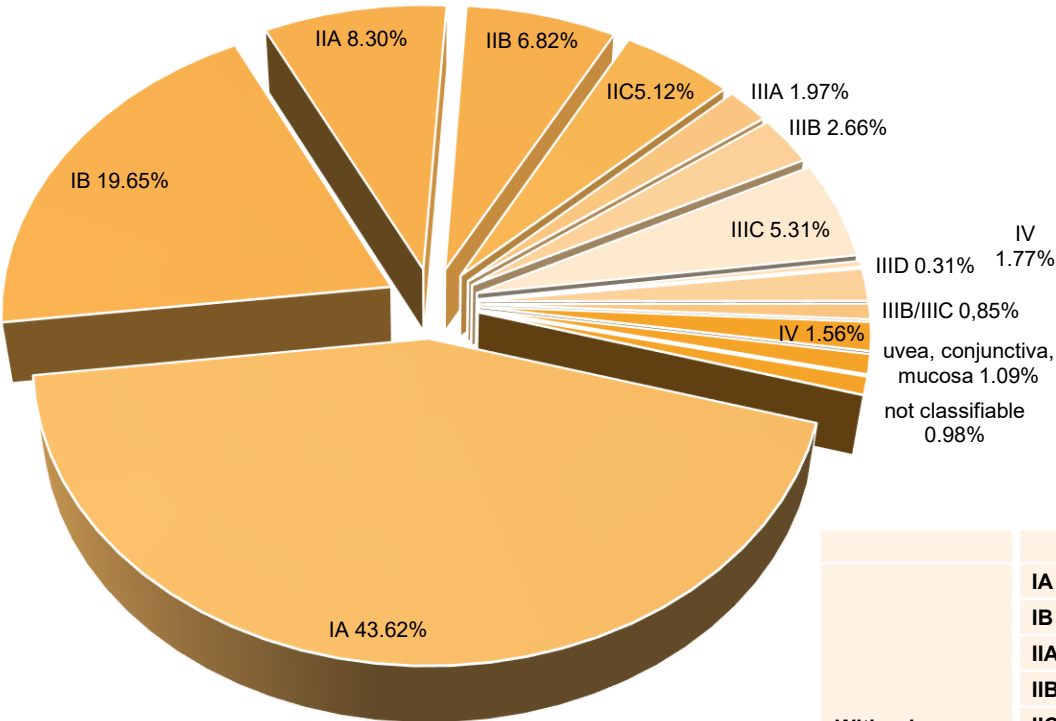
Invasive malignant melanomas	18,228 (23.68%)
Epithelial tumours (excl. <i>in situ</i>)	56,362 (73.22%)
Cutaneous lymphomas and other rare malignant skin tumours (angiosarcoma. Merkel, DFSP. etc.)	2,381 (3.09%)
Total	76,971 (100%)

Distribution primary case patients invasive melanoma



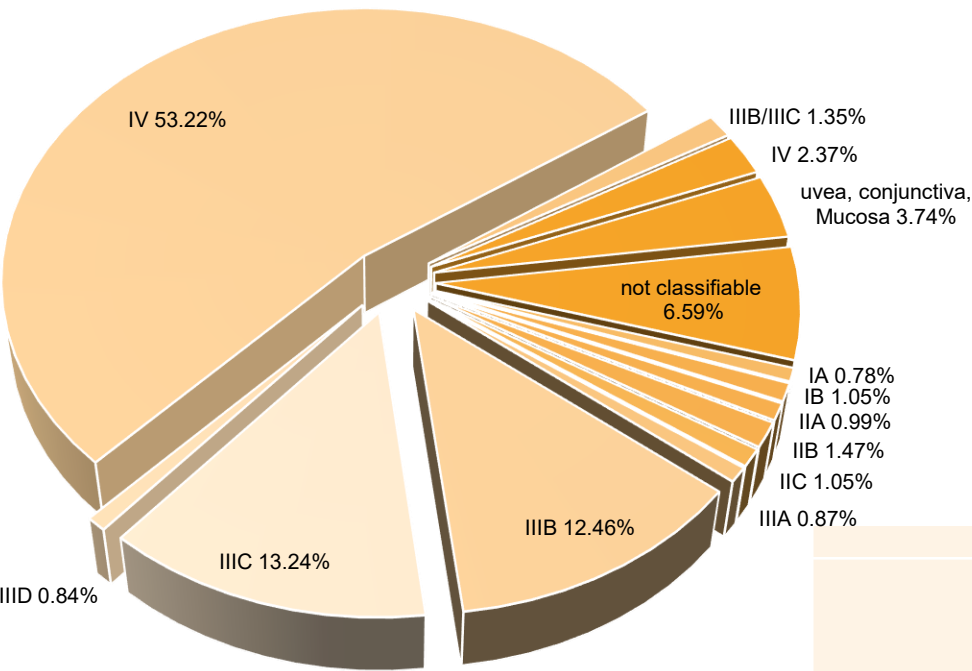
Patients with primary disease invasive melanoma	17,466 (95.82%)
Patients with second/third melanoma different location	762 (4,18%)
Total	18,228 (100%)

Basic data – Stage distribution primary cases invasive melanoma



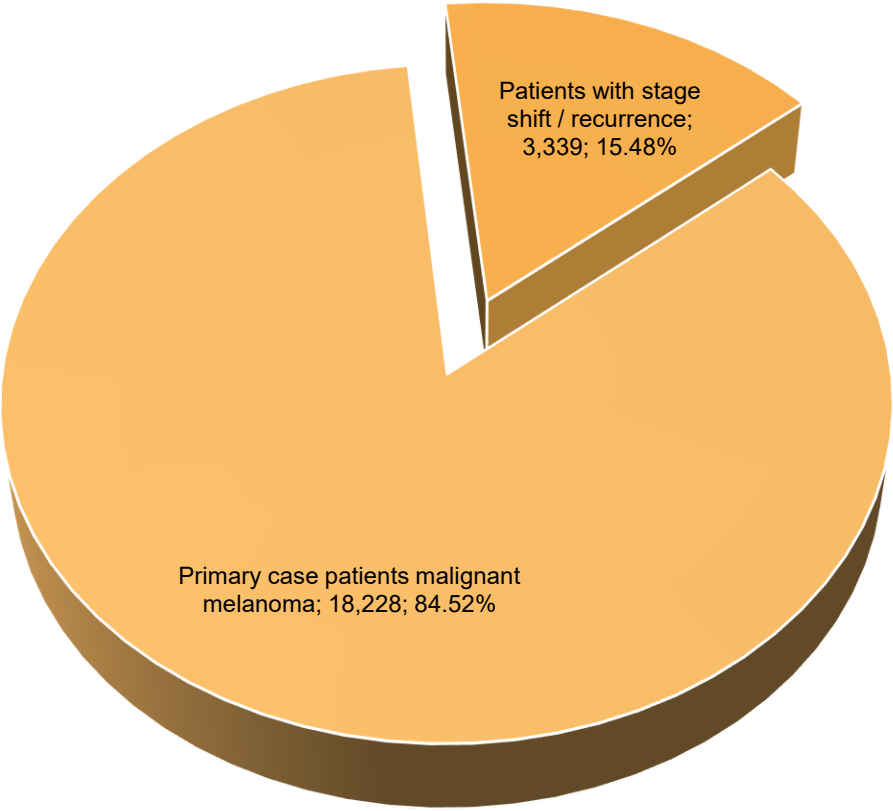
		Audit Year 2024	Audit Year 2023	Audit Year 2022	Audit Year 2021
With primary tumour	IA	7,951 (43.62%)	7,204 (43.04%)	6,710 (42.37%)	6,197 (42.91%)
	IB	3,582 (19.65%)	3,292 (19.67%)	2,872 (18.13%)	2,577 (17.84%)
	IIA	1,513 (8.30%)	1,465 (8.75%)	1,393 (8.80%)	1,227 (8.50%)
	IIB	1,243 (6.82%)	1,139 (6.81%)	1,135 (7.17%)	1,041 (7.21%)
	IIC	933 (5.12%)	803 (4.80%)	791 (4.99%)	721 (4.99%)
	IIIA	360 (1.97%)	333 (1.99%)	315 (1.99%)	289 (2.00%)
	IIIB	484 (2.66%)	394 (2.35%)	444 (2.80%)	403 (2.79%)
	IIIC	967 (5.31%)	918 (5.49%)	941 (5.94%)	916 (6.34%)
	IIID	57 (0.31%)	63 (0.38%)	64 (0.40%)	60 (0.42%)
	IV	322 (1.77%)	308 (1.84%)	342 (2.16%)	284 (1.97%)
Without primary tumour	IIIB/IIIC	155 (0.85%)	117 (0.70%)	131 (0.83%)	154 (1.07%)
	IV	285 (1.56%)	268 (1.60%)	261 (1.65%)	237 (1.64%)
	uvea, conjunctiva, mucosa	198 (1.09%)	239 (1.43%)	237 (1.50%)	199 (1.38%)
	not classifiable	178 (0.98%)	193 (1.15%)	202 (1.28%)	137 (0.95%)
	Total	18,228 (100%)	16,736 (100%)	15,838 (100%)	14,442 (100%)

Basic data – Stage distribution stage shift / recurrence in melanoma



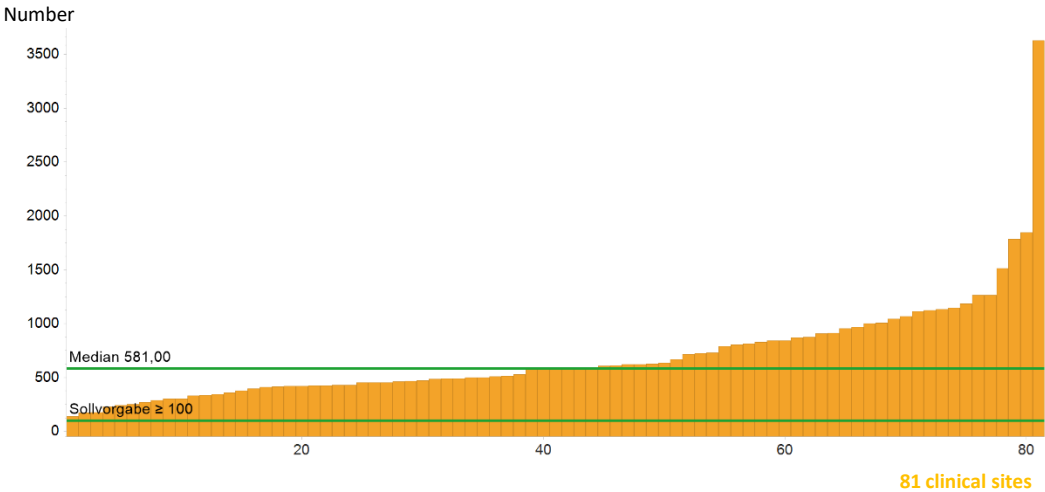
		Audit Year 2024	Audit Year 2023	Audit Year 2022	Audit Year 2021
with primary tumour	IA	26 (0.78%)	25 (0.76%)	28 (0.84%)	27 (0.85%)
	IB	35 (1.05%)	31 (0.94%)	22 (0.66%)	27 (0.85%)
	IIA	33 (0.99%)	27 (0.82%)	18 (0.54%)	28 (0.88%)
	IIB	49 (1.47%)	38 (1.15%)	23 (0.69%)	21 (0.66%)
	IIC	35 (1.05%)	36 (1.09%)	28 (0.84%)	28 (0.88%)
	IIIA	29 (0.87%)	41 (1.24%)	40 (1.20%)	32 (1.01%)
	IIIB	416 (12.46%)	391 (11.84%)	363 (10.89%)	321 (10.13%)
	IIIC	442 (13.24%)	453 (13.71%)	447 (13.42%)	445 (14.04%)
	IIID	28 (0.84%)	26 (0.79%)	35 (1.05%)	34 (1.07%)
	IV	1,777 (53.22%)	1,743 (52.77%)	1,756 (52.70%)	1,503 (47.41%)
without primary tumour	IIIB/IIIC	45 (1.35%)	18 (0.54%)	34 (1.02%)	81 (2.56%)
	IV	79 (2.37%)	64 (1.94%)	59 (1.77%)	241 (7.60%)
	uvea, conjunctiva, mucosa	125 (3.74%)	131 (3.97%)	159 (4.77%)	157 (4.95%)
	not classifiable	220 (6.59%)	279 (8.45%)	320 (9.60%)	225 (7.10%)
	Total	3,339 (100%)	3,303 (100%)	3,332 (100%)	3,170 (100%)

Basic data – Centre patients melanoma



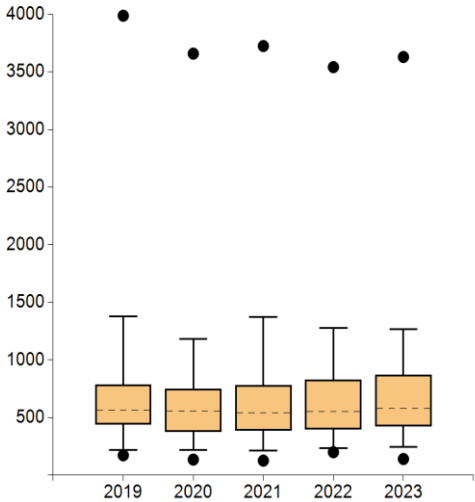
Primary case patients malignant melanoma	Patients with stage shift / recurrence	Centre patients
18,228 (84.52%)	3,339 (15.48%)	21,567 (100%)

1.1. Epithelial tumours (excl. *in situ*, incl. *inter alia* basal cell carcinomas, squamous cell carcinomas)



Sollvorgabe = target value

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Number	Primary cases (Def. see 1.1.3)	581	141 - 3629	56362
	Target value ≥ 100			



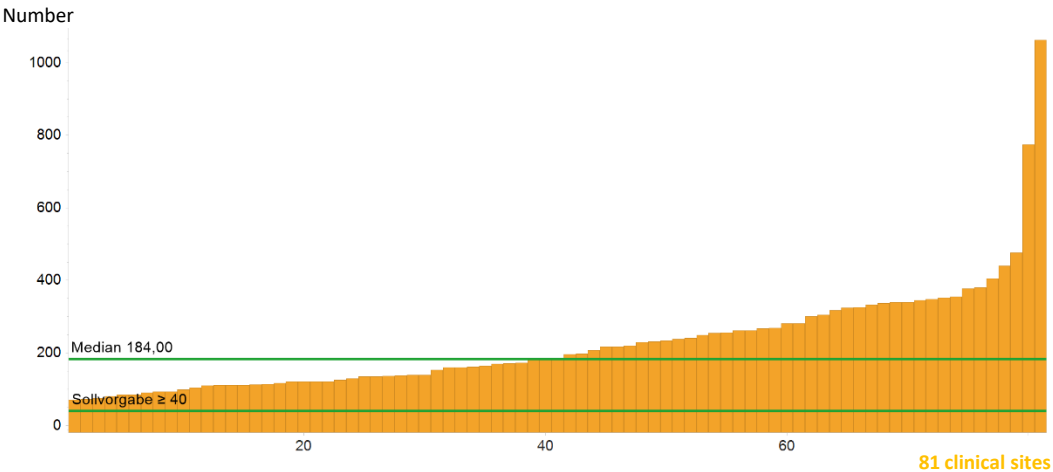
		2019	2020	2021	2022	2023
●	Max	3987,00	3658,00	3724,00	3541,00	3629,00
	95 th percentile	1378,85	1182,00	1373,25	1277,10	1267,00
	75 th percentile	783,50	745,50	777,75	825,00	871,00
	Median	564,00	557,50	540,00	551,00	581,00
	25 th percentile	443,00	377,75	388,75	399,50	426,00
	5 th percentile	216,45	217,50	215,30	235,80	243,00
●	Min	173,00	136,00	127,00	200,00	141,00

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	81	100.00%

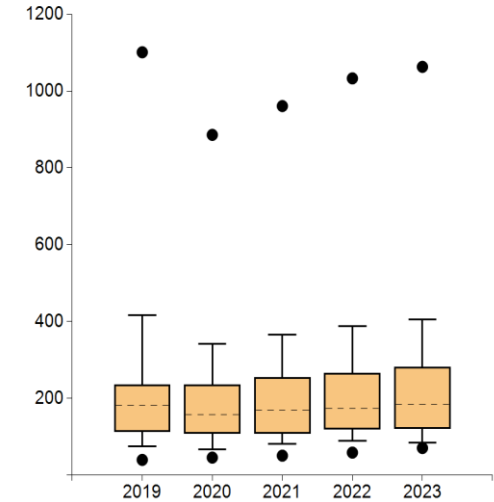
Comments:

As in previous years, all clinical sites achieved the target value of ≥ 100 primary cases with epithelial tumours. Compared to the previous indicator year, there was an increase in the median from n = 551 to 581 primary cases. The total number of primary cases rose by 7% compared to the previous indicator year (to 56,362), with an increase of n = 2 clinical sites (corresponding to +2.5%).

1.2. Invasive malignant melanomas (incl. malignant uveal, conjunctival, choroidal and mucosal melanomas) Certification



Sollvorgabe = target value



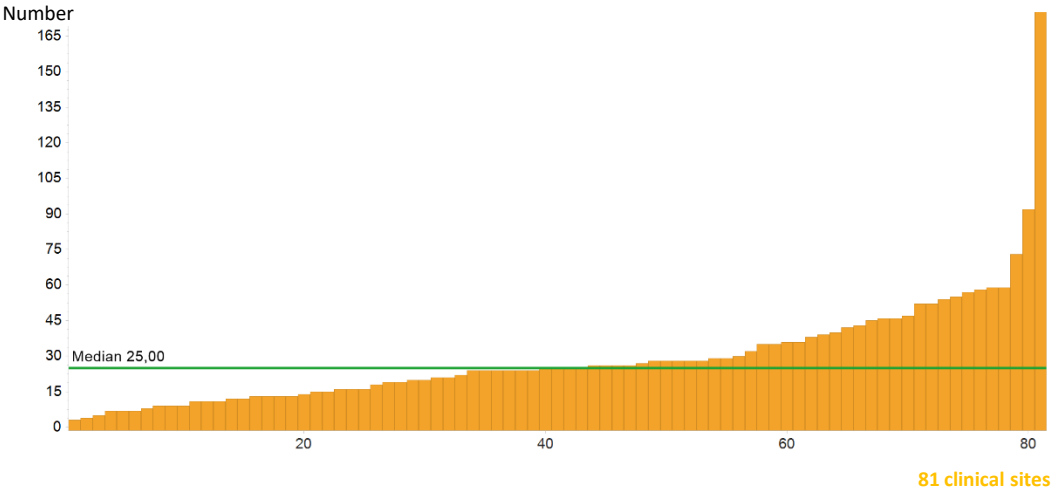
		2019	2020	2021	2022	2023
●	Max	1101,00	886,00	961,00	1033,00	1063,00
	95 th percentile	416,70	341,25	366,20	387,30	405,00
	75 th percentile	236,00	236,25	255,00	265,50	282,00
	Median	181,50	157,00	168,50	173,00	184,00
	25 th percentile	113,75	107,75	108,00	119,50	122,00
	5 th percentile	74,75	68,00	82,10	89,80	85,00
●	Min	40,00	46,00	51,00	59,00	71,00

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Number	Primary cases (Def. see 1.1.3)	184	71 - 1063	18228
	Target value ≥ 40			

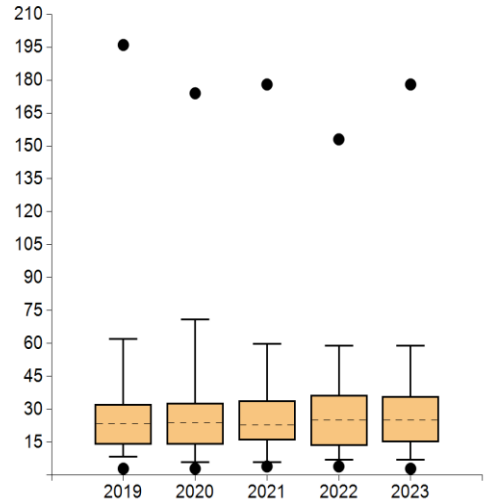
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	81	100.00%

Comments:
All centres meet the target value of $n \geq 40$ primary cases of invasive malignant melanoma. Since 2020, there has been a continuous increase in the median number of primary cases of invasive malignant melanoma in the centres, now at $n = 184$. The total number of these primary cases has increased by approximately 8.9% to 18,228 compared to the previous indicator year.

1.3. Cutaneous lymphoma and other rare, malignant skin tumours (angiosarcoma, Merkel cell carcinoma, etc.) Certification



	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Number	Primary cases (Def. see 1.1.3)	25	3 - 178	2381
	No target value			



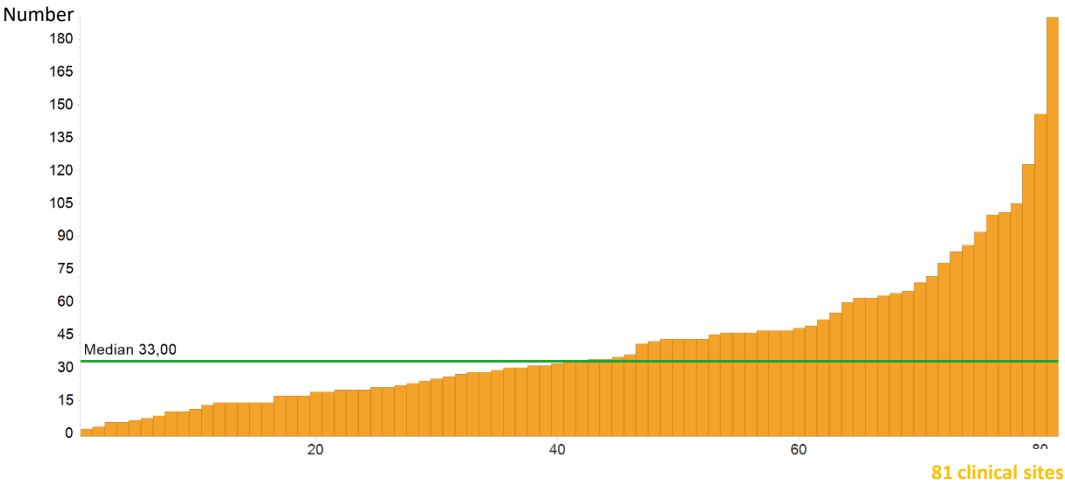
		2019	2020	2021	2022	2023
●	Max	196,00	174,00	178,00	153,00	178,00
	95 th percentile	62,00	71,00	59,90	59,00	59,00
	75 th percentile	32,25	33,00	34,00	36,50	36,00
	Median	23,50	24,00	23,00	25,00	25,00
	25 th percentile	14,00	14,00	16,00	13,50	15,00
	5 th percentile	8,55	6,00	6,00	7,00	7,00
●	Min	3,00	3,00	4,00	4,00	3,00

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	----	----

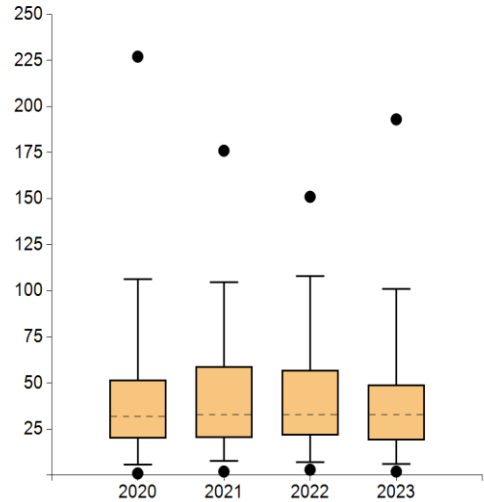
Comments:

As in the previous indicator year, a median of 25 primary cases of cutaneous lymphoma and other rare malignant skin tumours were treated in the centres. The range is between 3 and 178 cases per clinical site. There is no target value for this indicator. The total number of primary cases with rare skin tumours has risen slightly compared to the previous indicator year (+166).

1.4. Patients with stage shift / recurrence



	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Number	Patients with stage shift / recurrence	33	2 - 193	3339
	No target value			

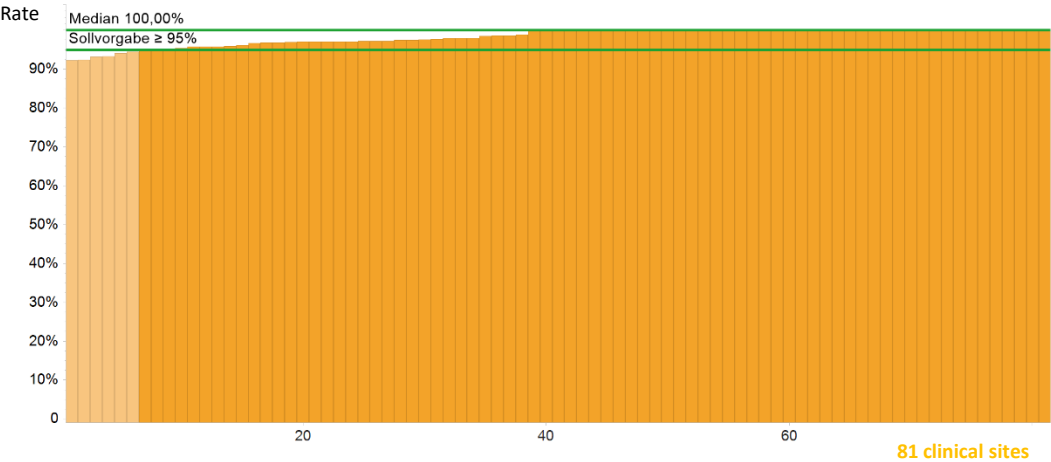


		2019	2020	2021	2022	2023
●	Max	----	227,00	176,00	151,00	193,00
	95 th percentile	----	106,25	104,65	107,90	101,00
	75 th percentile	----	51,75	59,00	57,00	49,00
	Median	----	32,00	33,00	33,00	33,00
	25 th percentile	----	20,00	20,25	21,50	19,00
	5 th percentile	----	5,75	7,70	7,00	6,00
●	Min	----	1,00	2,00	3,00	2,00

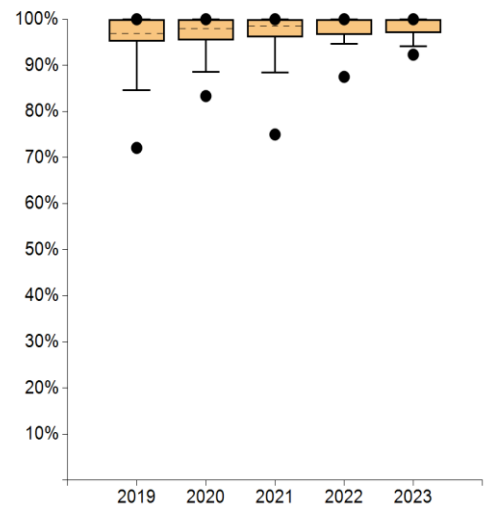
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	----	----

Comments:
The median number of melanoma patients with stage shift or recurrence has remained almost unchanged for years. The total number of patients has risen slightly compared with the previous year (n = +36), with an increase of 2 centres.

2a. Melanoma: Discussion of cases- Patients with stage shift / recurrence and primary cases with extracutaneous melanoma (GL QI Melanoma)



Sollvorgabe = target value



		2019	2020	2021	2022	2023
●	Max	100%	100%	100%	100%	100%
	95 th percentile	100%	100%	100%	100%	100%
	75 th percentile	100%	100%	100%	100%	100%
	Median	96,95%	98,00%	98,44%	100%	100%
	25 th percentile	95,24%	95,40%	96,10%	96,68%	97,06%
	5 th percentile	84,56%	88,52%	88,48%	94,67%	94,12%
●	Min	72,09%	83,33%	75,00%	87,50%	92,31%

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Patients of the denominator who were presented at the tumour board	33*	2 - 199	3461
Denominator	Patients with stage shift / recurrence and primary cases with extracutaneous melanoma	34*	2 - 204	3537
Rate	Target value ≥ 95%	100%	92.31% - 100%	97.85%**

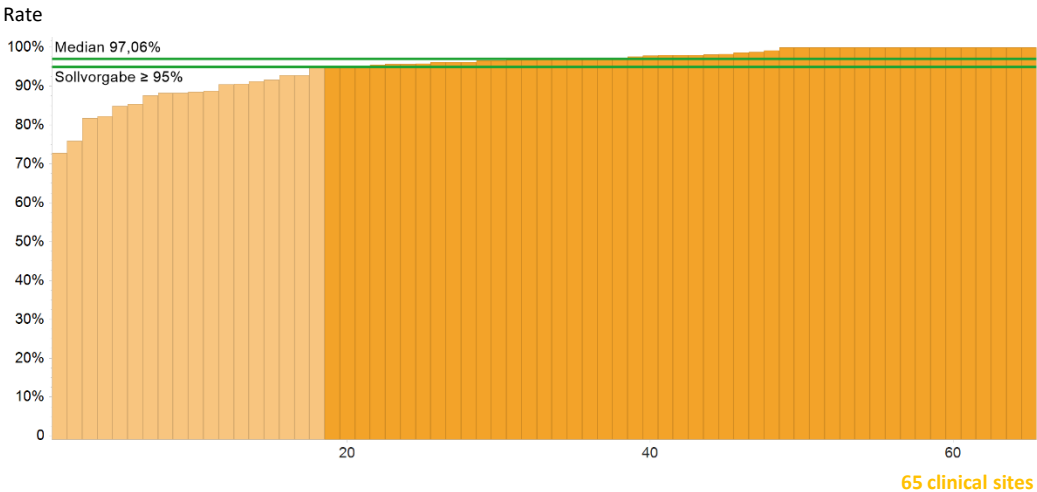
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	75	92.59%

Comments:

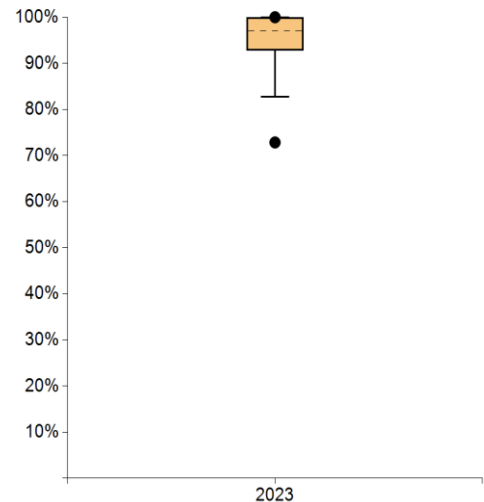
93% (n = 75) of all clinical sites meet the target value for this GL-QI and present ≥ 95% of patients as defined by the denominator in the tumour board. Six of 81 clinical sites (previous year n = 5) fell short of the target value. The reasons for a rate < 95% included refusal of presentation by patients and death before presentation at the tumour board. The reasons given by the centres were reviewed by the auditors and found to be plausible and comprehensible. No deviations were reported.

* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.

2b: Melanoma: Fallbesprechung - Primary cases melanoma stage IIB - IV (GL QI Melanoma)



Sollvorgabe = target value



		2019	2020	2021	2022	2023
●	Max	----	----	----	----	100%
	95 th percentile	----	----	----	----	100%
	75 th percentile	----	----	----	----	100%
	Median	----	----	----	----	97.06%
	25 th percentile	----	----	----	----	92.86%
	5 th percentile	----	----	----	----	82.75%
●	Min	----	----	----	----	72.84%

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Patients of the denominator who were presented in the tumour board	48*	19 - 183	3623
Denominator	Primary cases melanoma stage IIB - IV	49*	19 - 232	3885
Rate	Target value ≤ 95%	97,06%	72.84% - 100%	93.26%**

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
65	80.25%	47	72.31%

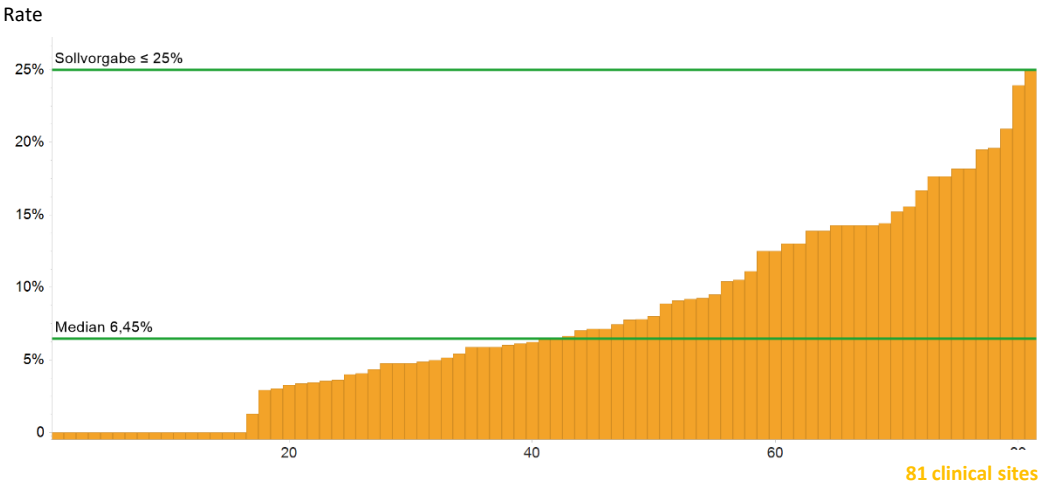
Comments:

The denominator of the indicator was modified and expanded from stage IIC-IV to IIB to IV. Evaluable data are available from 65 of the 81 clinical sites for this indicator, which was initially optional due to the modification. The target value of ≥ 95% is achieved at 72% of the clinical sites with evaluable data. The reasons given for not achieving this were: rejection of the presentation at the tumour board (n = 2) or further therapy by the patient (n = 9), contraindications for possible therapies (n = 1), loss to follow-up (n = 4) or death of the patient before presentation (n = 2). Errors in staging were found at one centre. Seven centres stated that the change in the denominator had been overlooked and not implemented comprehensively (7 mentions).

* The indication of the median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

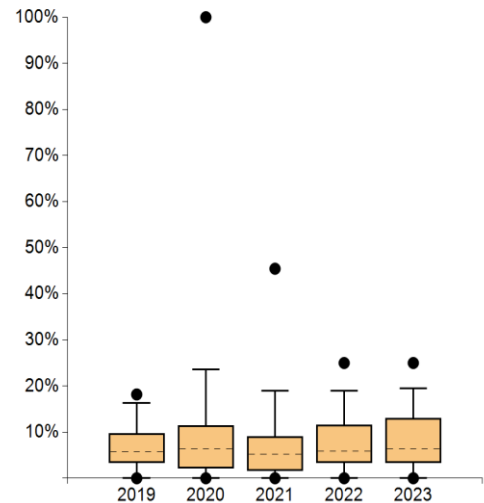
** Percentage of total patients treated in centres according to the indicator.

3. Melanoma: Therapy deviation from tumour board recommendation



Sollvorgabe = target value

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Patients of the denominator in whom a treatment deviation was made	2*	0 - 39	306
Denominator	Patients with stage shift / recurrence and primary cases with extracutaneous melanoma which were presented in the tumour board (= numerator Indicator 2a)	33*	2 - 199	3461
Rate	Target value ≤ 25%	6.45%	0.00% - 25.00%	8.84%**



		2019	2020	2021	2022	2023
●	Max	18.18%	100%	45.45%	25.00%	25.00%
	95 th percentile	16.30%	23.60%	18.96%	19.01%	19.51%
	75 th percentile	9.69%	11.43%	9.09%	11.52%	13.04%
	Median	5.75%	6.46%	5.26%	5.88%	6.45%
	25 th percentile	3.38%	2.15%	1.58%	3.41%	3.39%
	5 th percentile	0.00%	0.00%	0.00%	0.00%	0.00%
●	Min	0.00%	0.00%	0.00%	0.00%	0.00%

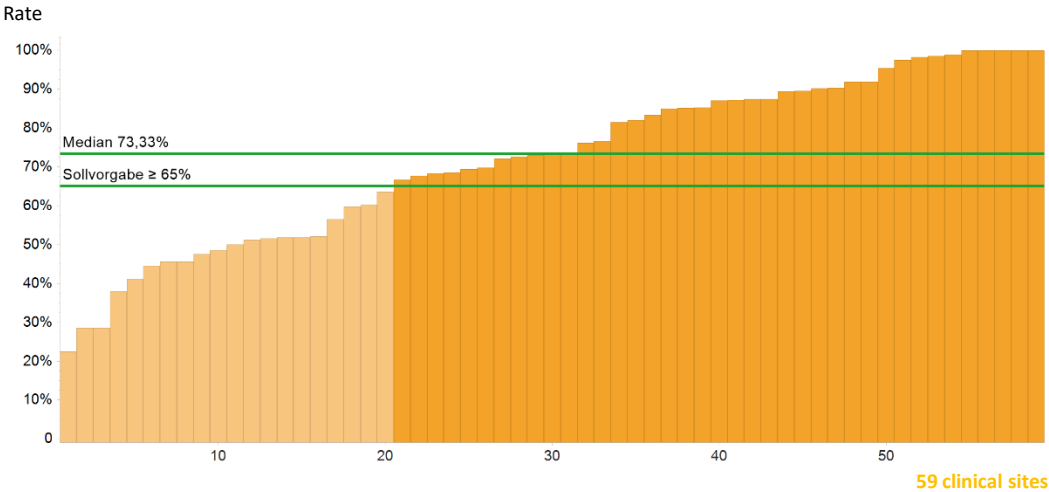
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	81	100.00%

Comments:

All centres meet the target value of ≤ 25%. The centres that voluntarily provided reasons for deviations from therapy stated that the patients refused/did not want the recommended therapy. In 306 of 3,461 patients in the denominator (8.8%), there was a deviation from the therapy recommendation of the tumour board.

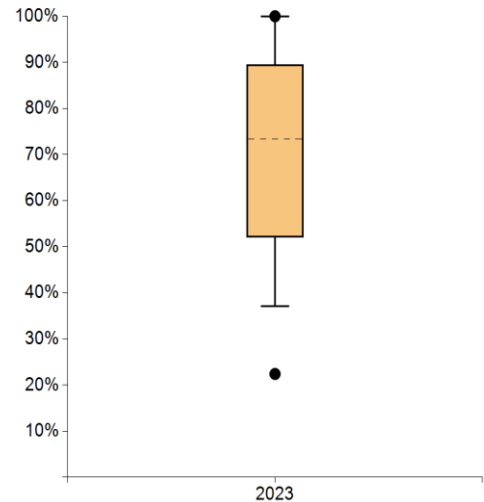
* The indication of the median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.

4. Psycho-oncological distress screening



Sollvorgabe = target value

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Patients of the denominator who were psycho-oncologically screened	60*	12 - 279	4083
Denominator	Primary cases melanoma stage IIB - IV + patients with stage shift/recurrence	88*	26 - 402	6117
Rate	Target value ≤ 65%	73.33%	22.41% - 100%	66.75%**



		2019	2020	2021	2022	2023
●	Max	----	----	----	----	100%
	95 th percentile	----	----	----	----	100%
	75 th percentile	----	----	----	----	89.51%
	Median	----	----	----	----	73.33%
	25 th percentile	----	----	----	----	52.01%
	5 th percentile	----	----	----	----	37.04%
●	Min	----	----	----	----	22.41%

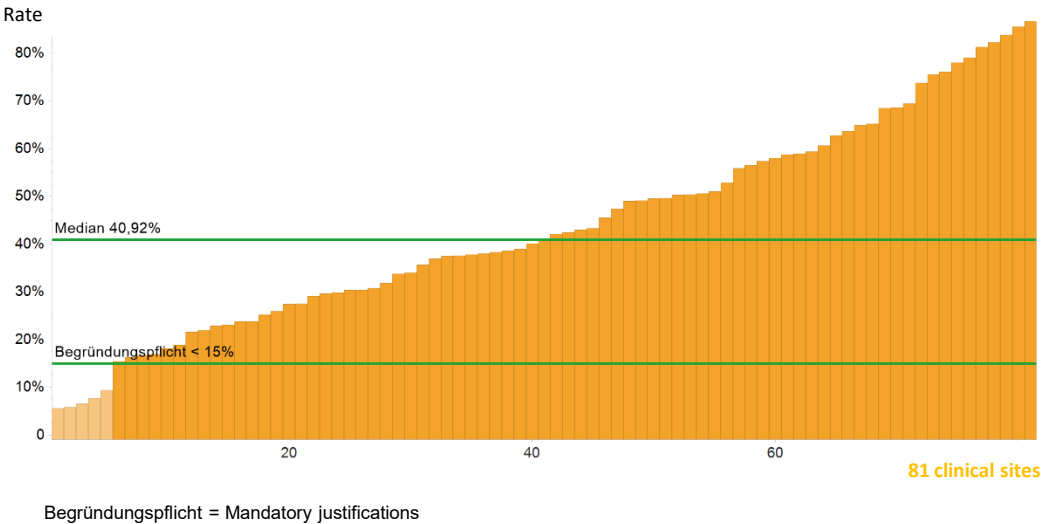
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
59	72.84%	39	66.10%

Comments:

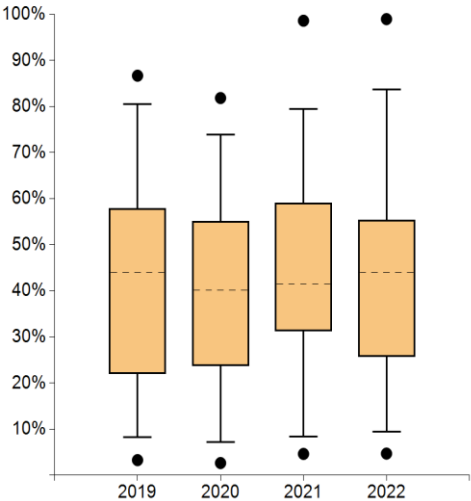
Due to modifications to the numerator and denominator of this indicator, disclosure was optional in the indicator year 2023. Evaluable results were available from 59 of the 81 clinical sites. Of these 59 sites, 39 (approx. 66%) achieved the target value of ≥ 65%. The main reasons given for non-compliance were challenges with restructuring for screening (18 mentions). One centre stated that patients who received counselling were not screened.

* Die Angabe des Medians für Zähler und Nenner bezieht sich nicht auf ein bestehendes Zentrum, sondern gibt den Median aller Zähler der Kohorte und den Median aller Nenner der Kohorte wieder.
** Prozentzahl der in Zentren insgesamt gemäß der Kennzahl behandelten Pat.

5. Melanoma: Social service counselling (GL Melanoma QI)



	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Patients of the denominator who received counselling from social services on an inpatient or outpatient setting	91*	7 - 345	8813
Denominator	Primary cases (= Indicator 1.2) + patients with stage shift / recurrence (=basic data R34)	224*	80 - 1168	21567
Rate	Mandatory justifications *** <15%	40.92%	5.58% - 88.82%	40.86%**



	2019	2020	2021	2022	2023
Max	86.67%	81.82%	98.59%	98.94%	88.82%
95 th percentile	80.49%	73.83%	79.40%	83.68%	81.29%
75 th percentile	57.91%	55.12%	59.04%	55.40%	58.80%
Median	44.02%	40.12%	41.42%	44.00%	40.92%
25 th percentile	22.04%	23.68%	31.21%	25.76%	27.50%
5 th percentile	8.26%	7.18%	8.41%	9.41%	9.47%
Min	3.28%	2.65%	4.63%	4.70%	5.58%

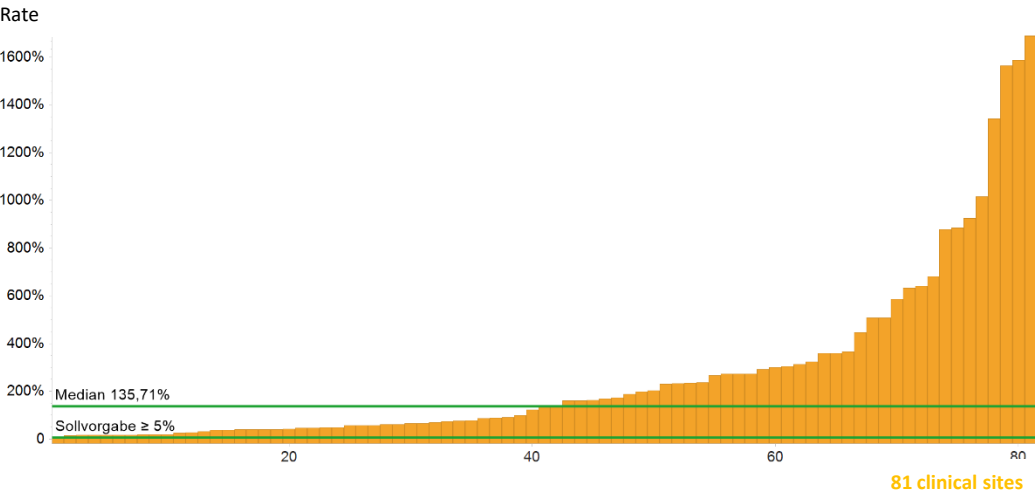
Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
81	100.00%	76	93.83%

Comments:

Compared with the previous indicator year, 94% more centres are within the plausibility limits for this indicator (2022: 89.9%). Five centres were required to provide a mandatory statement of reasons. One centre with a rate of less than 15% was located in a German-speaking country outside Germany, where different legal bases and responsibilities apply. Four centres were able to plausibly demonstrate the services offered to patients and, in some cases, also made additional post-discharge calls and offers, which were not requested by the patients.

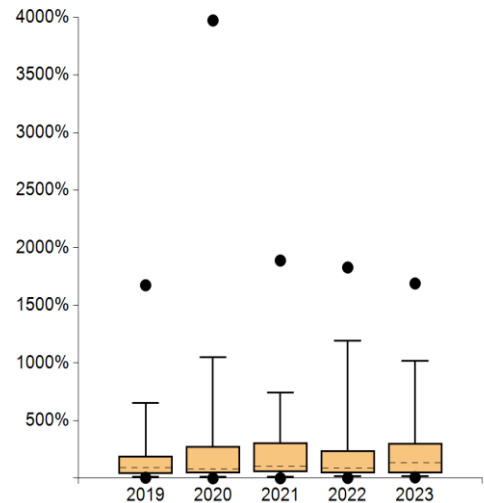
* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.
*** In the case of values outside the plausibility limit(s), the centres are obliged to provide justification.

6. Melanoma: Patients enrolled in a study



Sollvorgabe = target value

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Patients with a melanoma who were included in a study with an ethical vote	34*	1 - 751	6824
Denominator	Primary cases with a melanoma stages III - IV	30*	6 - 155	2679
Rate	Target value ≥ 5%	135.71%	7.69% - 1,690.00%	254.72%**



	2019	2020	2021	2022	2023
Max	1,674.60%	3,972.00%	1,888.89%	1,828.57%	1,690.00%
95 th percentile	655.00%	1,051.04%	741.97%	1,194.17%	1,016.67%
75 th percentile	192.94%	277.52%	308.21%	242.27%	304.44%
Median	89.68%	80.75%	100%	88.89%	135.71%
25 th percentile	36.71%	44.23%	54.71%	42.08%	45.71%
5 th percentile	12.46%	10.70%	12.07%	17.90%	16.77%
Min	4.76%	0.00%	0.00%	2.63%	7.69%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	81	100.00%

Comments:
The required rate of study enrolments is achieved by all centres (81 out of 81 clinical sites).

* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.

Individual Annual Report - Benchmark

Individual Annual Report: Evaluation of site-specific key figures

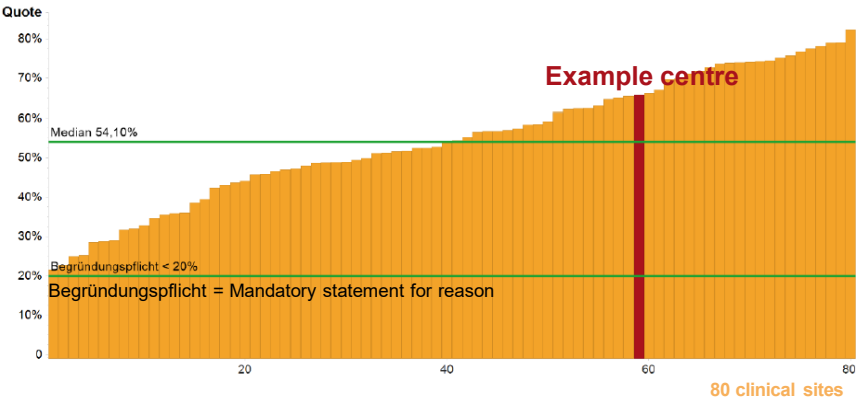
What is the individual Annual Report?

In the individual annual report, the site-specific centre data is shown and compared to the other certified centres in the respective certification system of the German Cancer Society. In addition, the individual development of the centre is presented over the course of time.

The content and design of an individual Annual Report are based on the general Annual Reports. An example of an individual Annual Report is available at www.onkozert.de under General Information / Annual Reports.

Who can receive the individual Annual Report?

The prerequisite for the preparation of the individual annual report is the publication of the general annual report (announcement on www.onkozert.de) as well as the depiction of the own centre in the general Annual Report (for example, centres with initial certification are not depicted in the audit year).In the case of multi-site centres, each site is shown in its own individual Annual Report. Only the general Annual Report is currently available for oncology centres.



Example centre (red bar) compared to the other certified centres

	Indicator definition	Example centre				
		2019	2020	2021	2022	2023
Numerator	Patients referred by the denominator who received inpatient or outpatient counselling from social services	219	263	220	240	237
Denomintor	Primary cases (= indicator 1a) + patients with newly occurring recurrence (local, regional LN metastases) and/or distant metastases (= indicator 1b)	321	362	331	355	360
Rate	Mandatory statement for reason*** <20%	68,22%	72,65%	66,47%	67,61%	65,83%

Individual development of the example centre over time

Extract from an individual Annual Report
(indicator counselling social service)

Individual Annual Report - Benchmark

How can I receive the individual Annual Report?

The individual Annual Report is made available for download as an electronic PowerPoint file on the [Data-WhiteBox](#) platform.

Access to an individual Annual Report differs depending on the certification system::

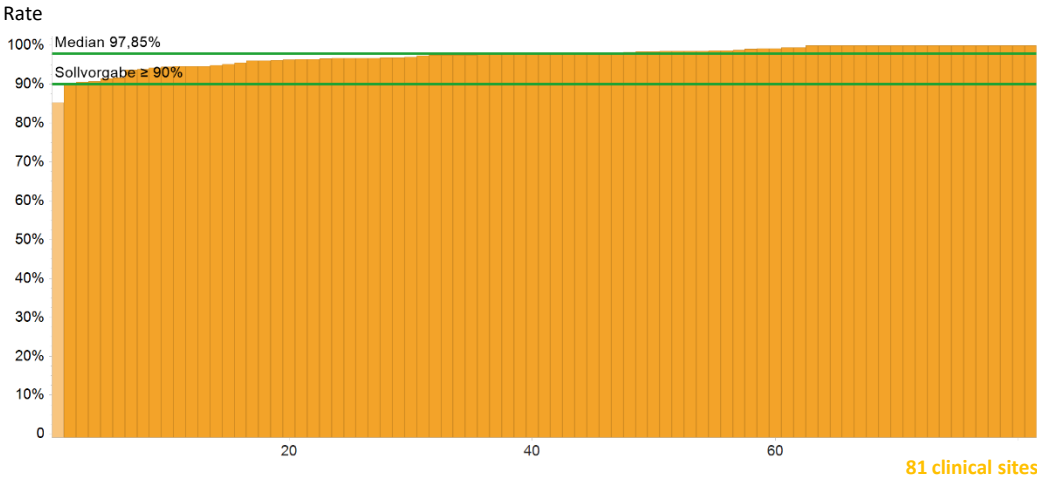
Colorectal, Prostate and Gynaecological Cancer Centres

- The individual Annual Report is made available for all Colorectal, Prostate and Gynaecological Cancer Centres by decision of the respective Certification Commission.
- The centres (centre management and centre coordination) are informed by email by OnkoZert about the availability of the respective individual Annual Report.
- The centres (centre management and centre coordination) are informed by email by OnkoZert about the availability of the respective individual Annual Report.

All other Organ Cancer Centres / Modules

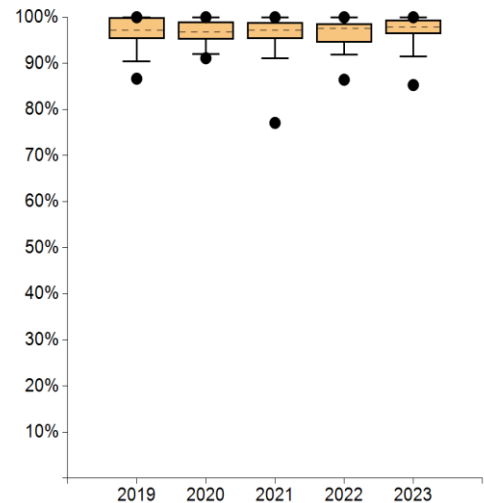
- The centres (centre management and centre coordination) are informed by email by OnkoZert about the basic availability of the individual Annual Reports. From this point onwards, an individual Annual Report can optionally be ordered for a fee.
- The 'Individual Annual Report Order Form' is available at www.onkoziert.de under General Information / Annual Reports. Orders can only be placed by persons who are registered with OnkoZert as contact persons (e.g. centre management, centre coordination, QMB, etc.)
- The costs for the respective individual Annual Reports are listed on the form.
- The preparation time is approx. 3 weeks after receipt of order.

7. Sentinel node biopsy (SNB)



Sollvorgabe = target value

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	SNB surgeries of the denominator with sentinel lymph node confirmed intraoperatively	83*	22 - 370	8082
Denominator	SNB surgeries (multiple mentioning per patient possible)	85*	24 - 370	8288
Rate	Target value ≥ 90%	97.85%	85.29% - 100%	97.51%**



		2019	2020	2021	2022	2023
●	Max	100%	100%	100%	100%	100%
	95 th percentile	100%	100%	100%	100%	100%
	75 th percentile	100%	99.08%	98.90%	98.62%	99.40%
	Median	97.22%	96.76%	97.17%	97.59%	97.85%
	25 th percentile	95.32%	95.17%	95.30%	94.52%	96.43%
	5 th percentile	90.44%	91.96%	91.14%	91.91%	91.49%
●	Min	86.67%	91.11%	77.08%	86.44%	85.29%

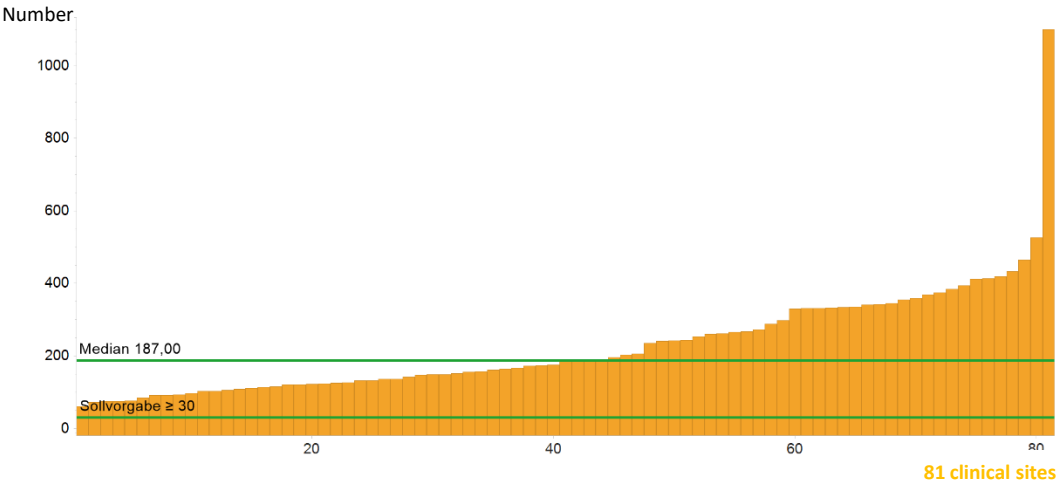
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	80	98.77%

Comments:

As in previous years, the median of SNB operations with intraoperative identification of the sentinel LN remained at a high level. As in the previous year, only one centre fell below the target value of 90%.

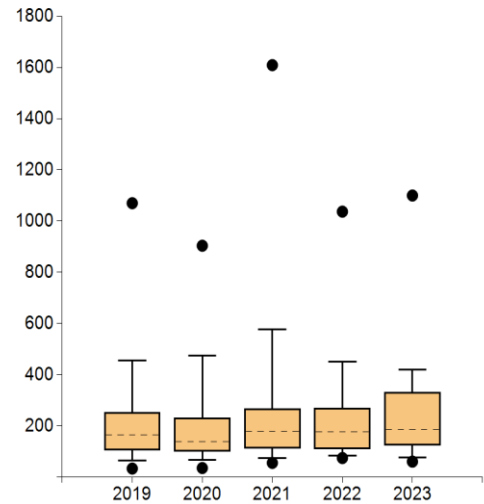
* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.

8. Surgical interventions with GL-defined safety distance



Sollvorgabe = target value

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Number	Surgeries with a safety margin for primary cases (= malignant melanomas, Merkel cell carcinoma, sarcomas and other rare, malignant skin tumours)	187	61 - 1100	18460
	Target value ≥ 30			

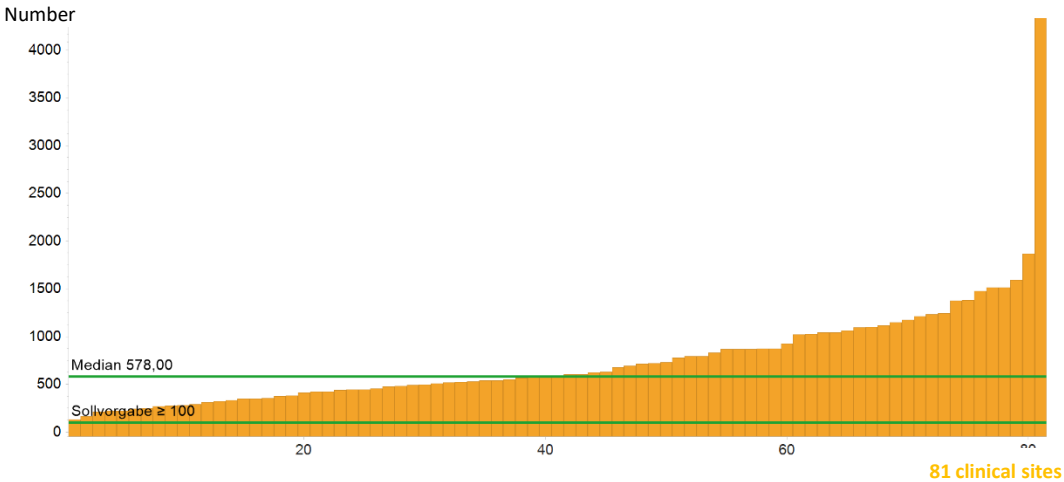


		2019	2020	2021	2022	2023
●	Max	1070,00	904,00	1609,00	1037,00	1100,00
	95 th percentile	455,90	475,75	576,85	450,80	419,00
	75 th percentile	253,50	232,00	267,25	269,50	331,00
	Median	164,50	140,00	179,50	176,00	187,00
	25 th percentile	106,00	100,75	113,25	111,00	124,00
	5 th percentile	65,30	67,75	75,70	84,90	77,00
●	Min	34,00	36,00	56,00	75,00	61,00

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	81	100.00%

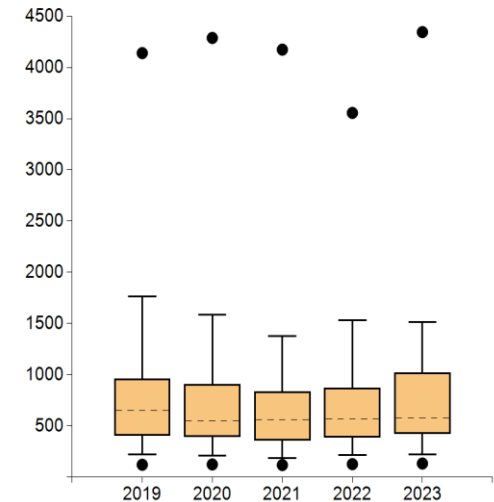
Comments:
As in the previous indicator years, all centres achieved the target value. While the number of these surgical procedures declined in the smaller centres, it rose significantly in some of the medium-sized centres (25th to 75th percentile).

9. Surgical interventions with histological margin control (= epithelial tumours)



Sollvorgabe = target value

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Number	Surgical interventions with histological margin control in primary cases (= epithelial tumours)	578	134 - 4345	60400
	Target value ≥ 100			



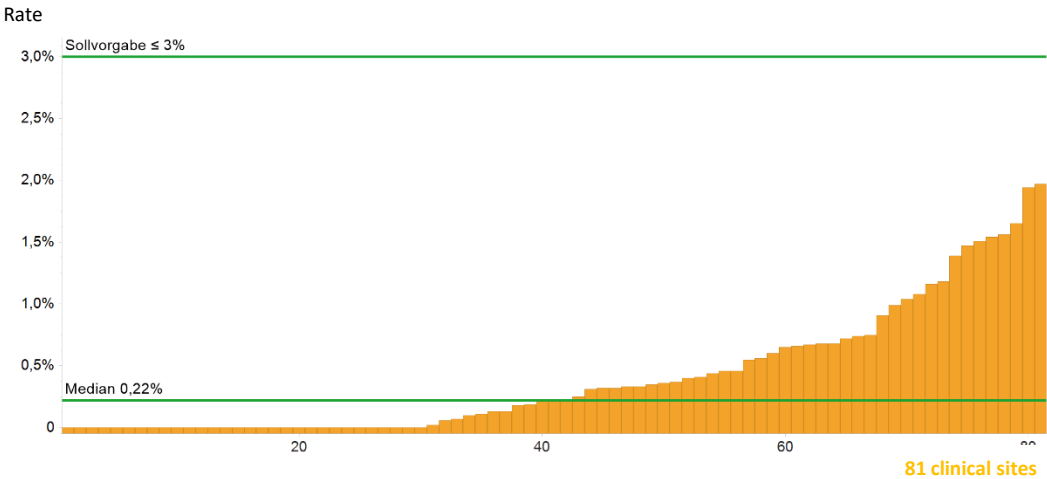
		2019	2020	2021	2022	2023
●	Max	4140,00	4288,00	4174,00	3556,00	4345,00
	95 th percentile	1766,55	1586,00	1375,20	1529,40	1512,00
	75 th percentile	963,00	906,50	835,25	870,00	1023,00
	Median	653,50	551,50	559,50	568,00	578,00
	25 th percentile	408,25	395,25	360,00	389,50	423,00
	5 th percentile	223,70	212,25	186,50	216,10	224,00
●	Min	122,00	125,00	119,00	128,00	134,00

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	81	100.00%

Comments:

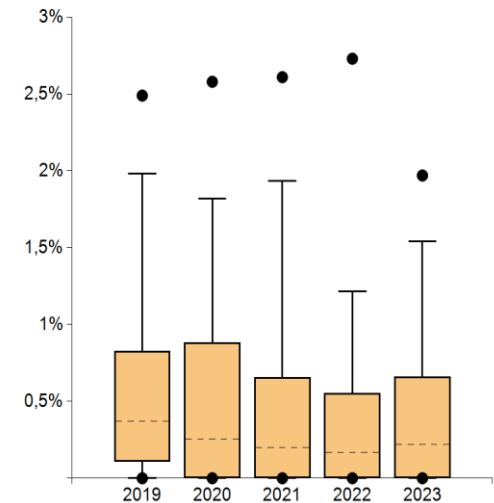
As in previous years, the target value of at least 100 procedures with histological margin control was easily achieved by all centres. Across the entire spectrum, there was a significant increase in the number of surgical procedures.

10. Revision surgery after secondary bleeding



Sollvorgabe = target value

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Revision surgery (OPS: 5-983) because of intra- or post-operative secondary bleeding (T81.0) after surgeries of the denominator	1*	0 - 30	342
Denominator	Sum numerators Indicators 8 + 9	857*	272 - 5445	78860
Rate	Target value ≤ 3%	0.22%	0.00% - 1.97%	0.43%**



		2019	2020	2021	2022	2023
●	Max	2.49%	2.58%	2.61%	2.73%	1.97%
	95 th percentile	1.98%	1.82%	1.93%	1.22%	1.54%
	75 th percentile	0.83%	0.88%	0.66%	0.56%	0.66%
	Median	0.37%	0.26%	0.20%	0.17%	0.22%
	25 th percentile	0.11%	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%

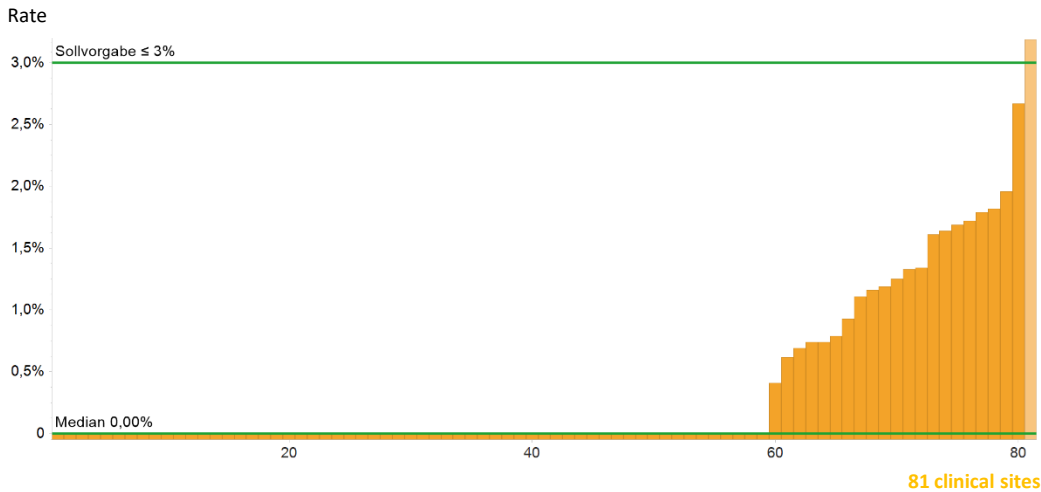
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	81	100.00%

Comments:

All centres remain below the target value of 3%. At 30 of the 81 clinical sites (approx. 37%), there was not a single haemorrhage-related revision surgery. The number of haemorrhage-related revision procedures following resections has remained low for many years.

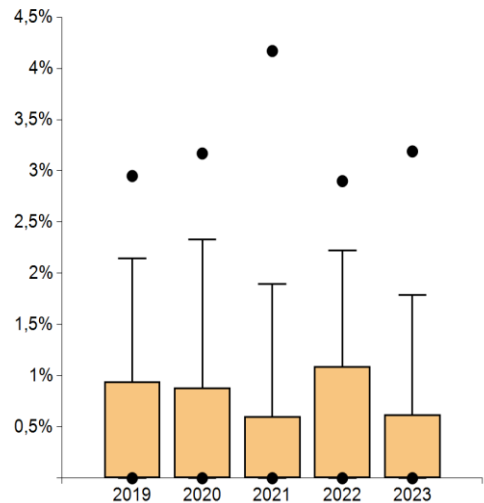
* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.

11. Revision surgery in the case of secondary bleeding after SNB and Lymphadenectomy (LAD)



Sollvorgabe = target value

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Revision surgery (OPS: 5-893) because of post-operative secondary bleeding (T81.0) after surgeries of the denominator	0*	0 - 6	34
Denominator	SNB surgeries (= denominator indicator 7) + therapeutic LADs for stages III (multiple mentioning per patient possible)	86*	28 - 385	8926
Rate	Target value ≤ 3%	0.00%	0.00% - 3.19%	0.38%**



	2019	2020	2021	2022	2023
Max	2.95%	3.17%	4.17%	2.90%	3.19%
95 th percentile	2.15%	2.33%	1.90%	2.23%	1.79%
75 th percentile	0.94%	0.89%	0.61%	1.09%	0.62%
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%

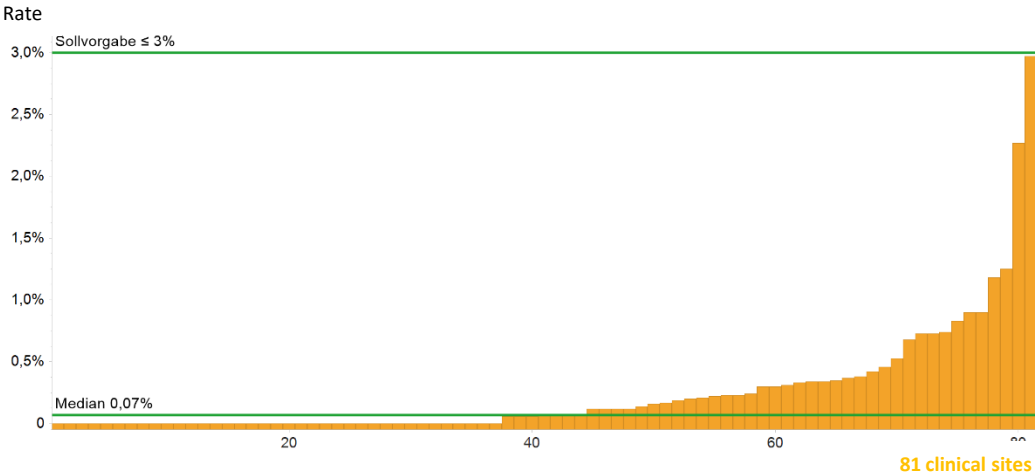
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	80	98.77%

Comments:

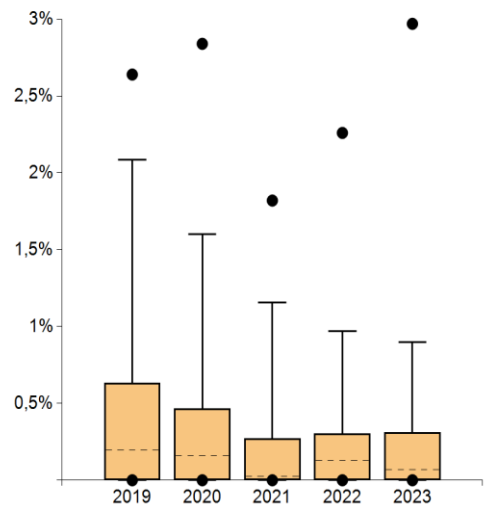
One centre exceeded the target value of a maximum of 3% and justified this with difficult localisation in cases of elevated BMI and diabetes. Otherwise, the rate of revision procedures due to bleeding following SNB and/or LAD has been very low for a long time. At 59 of the 81 clinical sites (approx. 73%), no patients required revision due to bleeding.

* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.

12. Revision surgery after post-operative wound infections



Sollvorgabe = target value



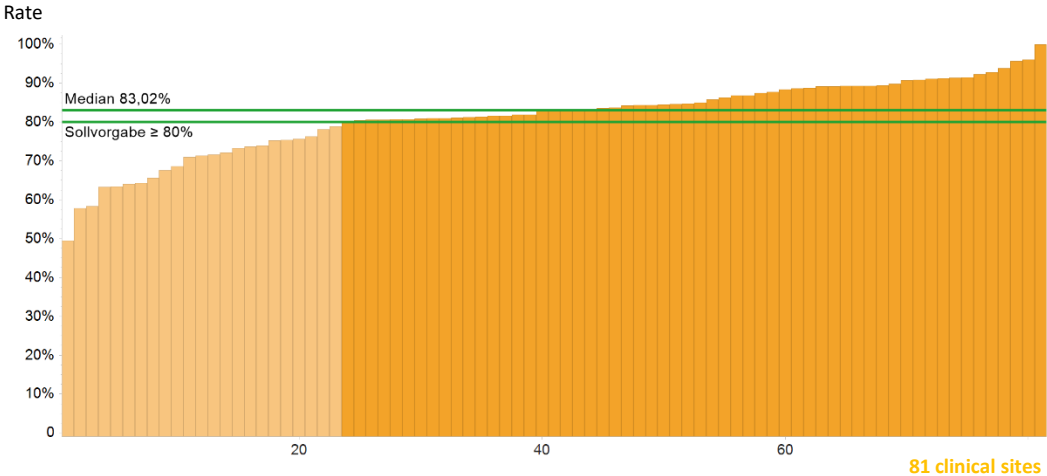
		2019	2020	2021	2022	2023
●	Max	2.64%	2.84%	1.82%	2.26%	2.97%
	95 th percentile	2.09%	1.60%	1.16%	0.97%	0.90%
	75 th percentile	0.63%	0.47%	0.27%	0.31%	0.31%
	Median	0.20%	0.16%	0.03%	0.13%	0.07%
	25 th percentile	0.00%	0.00%	0.00%	0.00%	0.00%
	5 th percentile	0.00%	0.00%	0.00%	0.00%	0.00%
●	Min	0.00%	0.00%	0.00%	0.00%	0.00%

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Revision surgery (OPS: 5-893) because of post-operative wound infections (T81.4) after surgeries of the denominator	1*	0 - 30	174
Denominator	Sum numerators Indicators 8 + 9	857*	272 - 5445	78860
Rate	Target value ≤ 3%	0.07%	0.00% - 2.97%	0.22%**

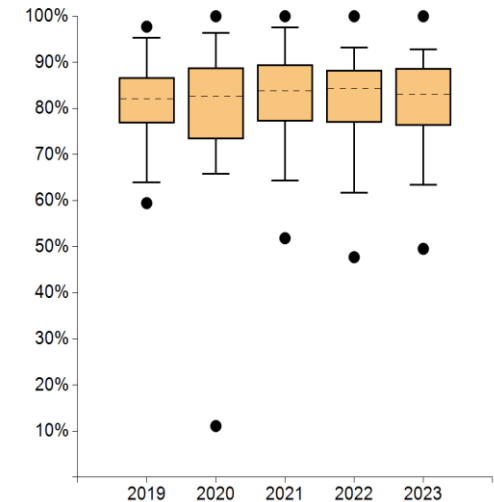
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	81	100.00%
Comments: Revision surgery due to postoperative wound infections remains very rare. All centres remain below the target value of ≤ 3%. At 37 of 81 clinical sites (approx. 46%), no revision surgery was performed due to wound infection.			

* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.

13. Melanoma: Sentinel node biopsy (GL Melanoma QI)



Sollvorgabe = target value



		2019	2020	2021	2022	2023
●	Max	97.73%	100%	100%	100%	100%
	95 th percentile	95.37%	96.31%	97.57%	93.24%	92.86%
	75 th percentile	86.71%	88.85%	89.52%	88.24%	88.68%
	Median	82.02%	82.56%	83.77%	84.39%	83.02%
	25 th percentile	76.73%	73.29%	77.12%	76.98%	76.30%
	5 th percentile	63.92%	65.77%	64.30%	61.76%	63.44%
●	Min	59.46%	11.11%	51.85%	47.73%	49.55%

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Primary cases of the denominator where SNB is carried out	58*	14 - 253	5526
Denominator	Primary cases cutaneous melanoma with a tumour density ≥ pT2a and no sign of locoregional or distant metastasis (cN0, cM0)	72*	19 - 309	6845
Rate	Target value ≥ 80%	83.02%	49.55% - 100%	80.73%**

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
81	100.00%	58	71.60%

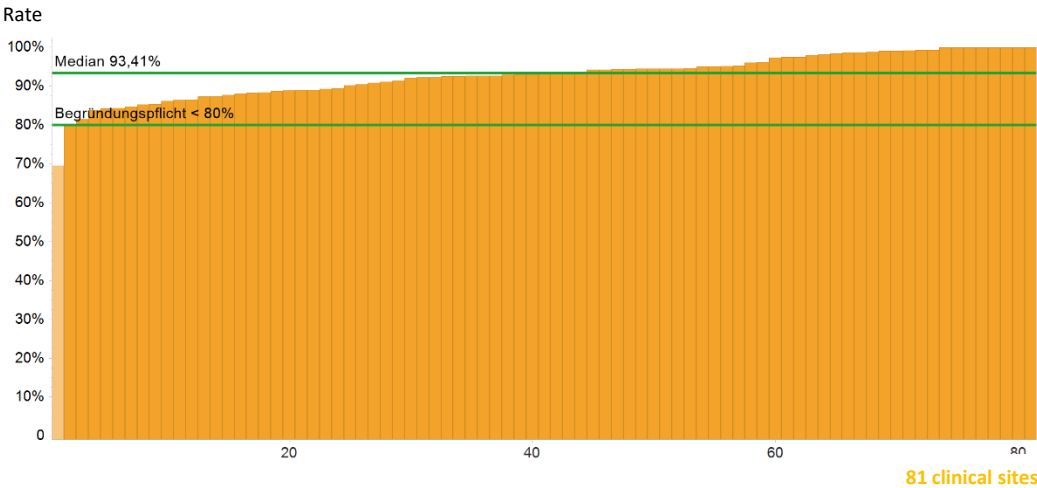
Comments:

58 of 81 clinical sites (approx. 72%) meet the target value for this GL-QI. A SNB is performed in approximately 81% of eligible patients (median 83%). 23 clinical sites fell short of the target value, due to patient refusal (22 mentions), age and comorbidities (13x), anatomical location (5x), a palliative situation due to a malignancy of another entity (2x) and non-visualisable sentinel nodes (7x). The reasons were found to be plausible in the audits, and no deviations were noted by the auditors.

* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

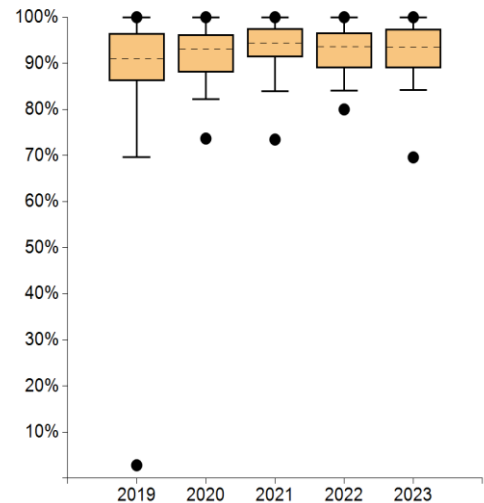
** Percentage of total patients treated in centres according to the indicator.

14. Melanoma: Safety margin (1 cm) in the case of radical excision (GL Melanoma QI)



Begründungspflicht = Mandatory justifications

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Primary cases of the denominator with radical excision with a safety margin of 1 cm	117*	17 - 612	11021
Denominator	Primary cases cutaneous melonoma with a curative radical excision in case of a tumour density ≤ 2 mm	124*	18 - 643	11899
Rate	Mandatory justifications ***<80%	93.41%	69.60% - 100%	92.62%**



	2019	2020	2021	2022	2023
Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	96.56%	96.29%	97.55%	96.61%	97.46%
Median	90.98%	93.10%	94.40%	93.64%	93.41%
25 th percentile	86.15%	88.10%	91.38%	88.97%	89.00%
5 th percentile	69.64%	82.20%	83.93%	84.10%	84.21%
Min	2.82%	73.68%	73.47%	80.00%	69.60%

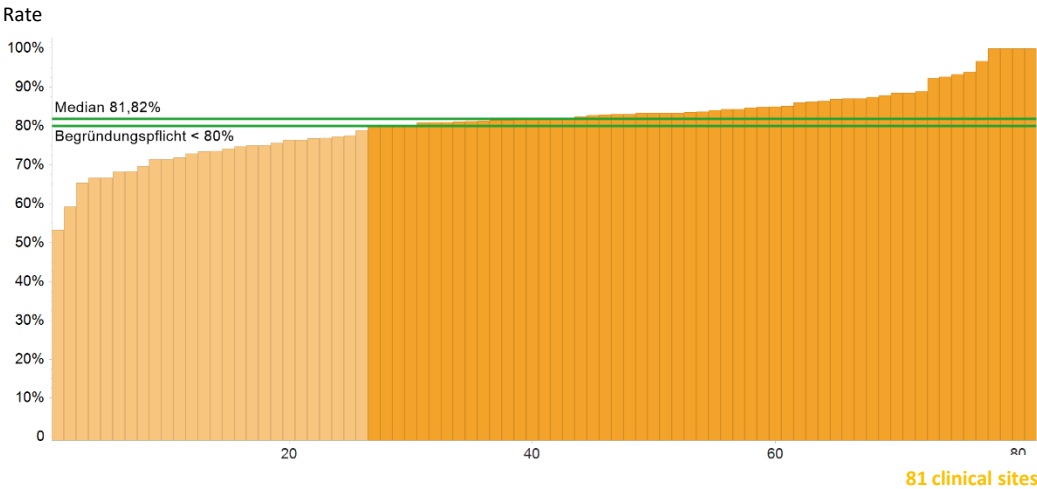
Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
81	100.00%	80	98.77%

Comments:

The median for this indicator has been > 90% in the last 5 indicator years. With the exception of one centre, all centres are within the plausibility corridor > 80%. The centre stated that for a good quarter of their patients, it was not possible to maintain the safety margin due to the location of the lesion and that subsequent excision with 3D histology was performed or that the patients refused subsequent resection.

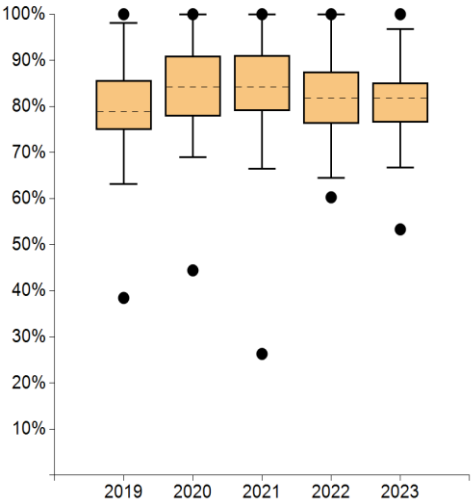
* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.
*** In the case of values outside the plausibility limit(s), the centres are obliged to provide justification.

15. Melanoma: Safety margin (2 cm) in the case of radical excision (GL Melanoma QI)



Begründungspflicht = Mandatory justifications

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Primary cases of the denominator with radical excision with a safety margin of 2 cm	40*	13 - 161	3479
Denominator	Primary cases cutaneous melonoma with a curative radical excision in case of a tumour density > 2 mm	46*	15 - 198	4297
Rate	Mandatory justifications ***<80%	81.82%	53.33% - 100%	80.96%**



	2019	2020	2021	2022	2023
Max	100%	100%	100%	100%	100%
95 th percentile	98.11%	100%	100%	100%	96.74%
75 th percentile	85.65%	90.91%	91.02%	87.50%	85.19%
Median	78.95%	84.14%	84.14%	81.82%	81.82%
25 th percentile	74.89%	77.88%	79.04%	76.31%	76.47%
5 th percentile	63.22%	69.02%	66.42%	64.43%	66.67%
Min	38.46%	44.44%	26.32%	60.29%	53.33%

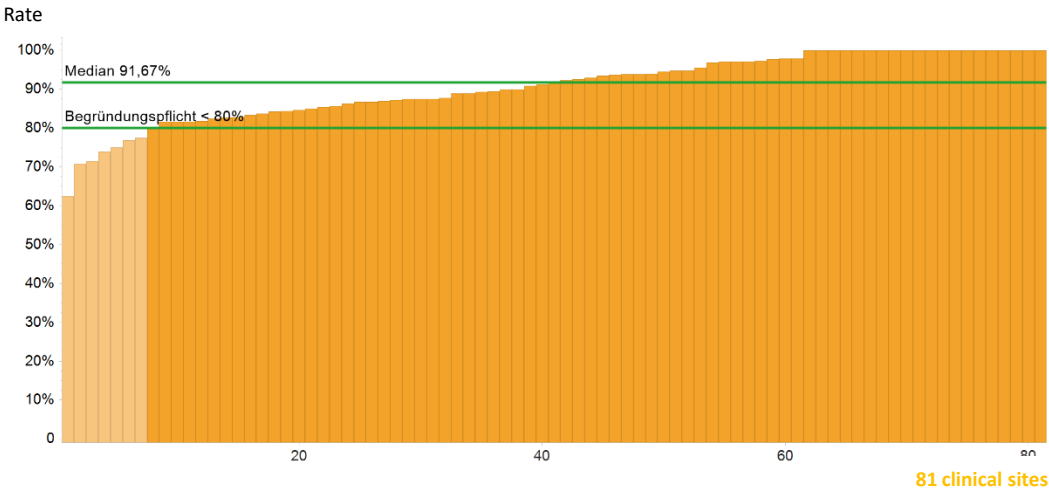
Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
81	100.00%	55	67.90%

Comments:

The target safety margin of 2 cm was achieved in just under 81% of primary cases (previous year: approx. 82%). 55 of 81 clinical sites (approx. 68%) are within the plausibility limits. Four centres achieved the safety margin in all cases. 26 clinical sites (previous year: 30) had to validate their results in the audits. The reasons given were: lower distance due to location (e.g. face, extremities, perianal area) (22 mentions), refusal of re-excision by the patient (14x), waiver of re-excision in cases of relevant comorbidities (5x) or advanced tumour disease/distant metastasis (11x).

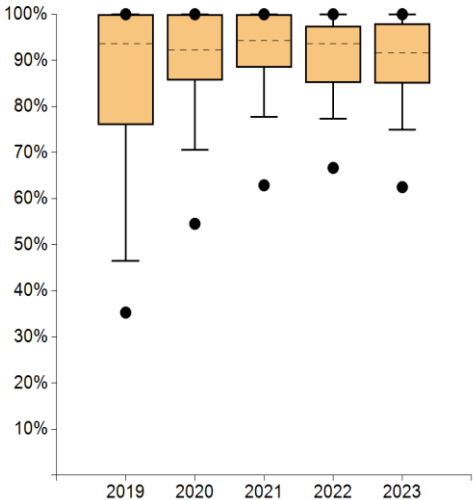
* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.
*** In the case of values outside the plausibility limit(s), the centres are obliged to provide justification.

16. Melanoma: Mutation analysis for BRAF



Begründungspflicht = Mandatory justifications

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Primary cases of the denominator with mutation analysis for BRAF	27*	6 - 116	2376
Denominator	Primary cases with cutaneous melanoma from stage III	30*	6 - 151	2630
Rate	Mandatory justifications ***<80%	91.67%	62.50% - 100%	90.34%**



	2019	2020	2021	2022	2023
Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	97.44%	97.92%
Median	93.54%	92.21%	94.28%	93.62%	91.67%
25 th percentile	75.94%	85.71%	88.37%	85.17%	85.00%
5 th percentile	46.43%	70.56%	77.69%	77.30%	75.00%
Min	35.29%	54.55%	62.90%	66.67%	62.50%

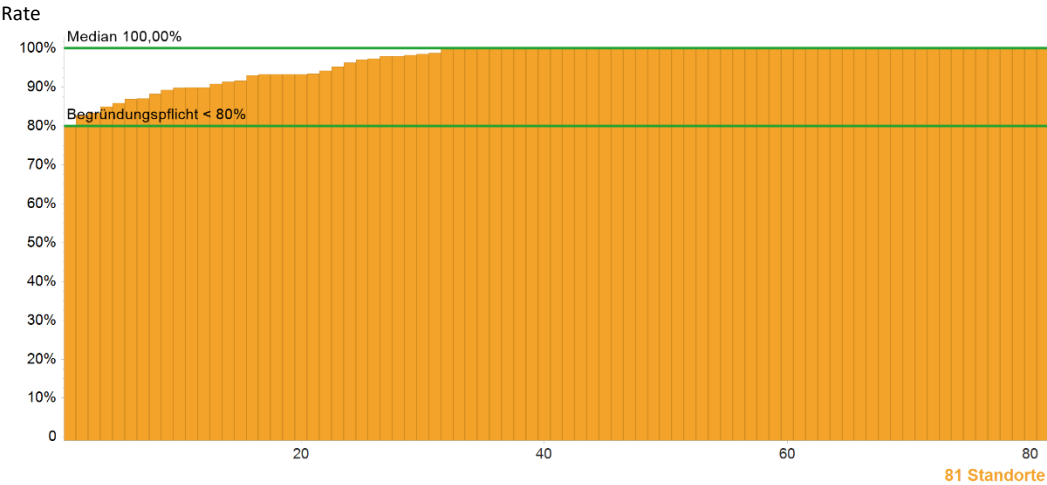
Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
81	100.00%	74	91.36%

Comments:

Following positive developments in previous years, results in the current indicator year stabilised at the previous year's level: on average, approximately 92% of primary cases with cutaneous melanoma stage III underwent BRAF mutation analysis (previous year: 93.6%). 74 of 81 clinical sites are within the plausibility limits (approx. 91%). Seven clinical sites were subject to a mandatory statement of reasons with a rate of < 80% (previous year: 8). The reasons given for falling below the 80% mark were insufficient tumour material (mentioned 3 times), patient request (2 times) and comorbidities (3 times). The reasons were deemed plausible in the audits and no deviations or remarks were made.

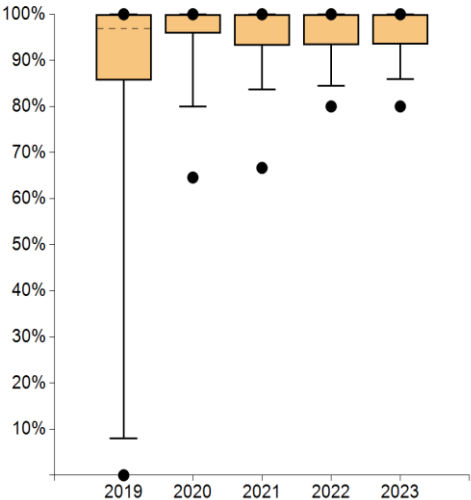
* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.
*** In the case of values outside the plausibility limit(s), the centres are obliged to provide justification.

17. Melanoma: LDH determination (GL Melanoma QI)



Begründungspflicht = Mandatory justifications

	Indicator definition	All clinical sites 2023		
		Median	Range	Patients total
Numerator	Patients of the denominator with LDH determination	24*	1 - 108	2353
Denominator	Primary cases and patients with a stage shift/recurrence with melanoma developing into stage IV	24*	1 - 127	2463
Rate	Mandatory justifications ***<80%	100%	80.00% - 100%	95.53%**



	2019	2020	2021	2022	2023
Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%
Median	96.92%	100%	100%	100%	100%
25 th percentile	85.71%	95.85%	93.25%	93.29%	93.42%
5 th percentile	8.00%	80.00%	83.62%	84.49%	85.86%
Min	0.00%	64.58%	66.67%	80.00%	80.00%

Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
81	100.00%	81	100.00%

Comments:
As in the two previous indicator years, all clinical sites are within the plausibility limit.

* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.
*** In the case of values outside the plausibility limit(s), the centres are obliged to provide justification.

WISSEN AUS ERSTER HAND FIRST HAND KNOWLEDGE



More information at www.krebsgesellschaft.de

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