



Indicator Analysis 2026

Annual Report of the Certified Centre for Haematological Neoplasms

Audit year 2025 / Indicator year 2024

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General Information

Indicator No. 13: Hepatitis and HIV serology before starting therapy.....	(GL QI DLBCL)
Indicator No. 14: Dental examination before bisphosphonates/denosumab in patients with haematological neoplasms.....	(GL QI DLBCL)
Indicator No. 15: R-CHOP at first diagnosis in patients ≤ 80 years of age with curative treatment intent.....	(GL QI DLBCL)
Indicator No. 16: Radiotherapy for PET-positive residual disease after first-line immunochemotherapy.....	(GL QI DLBCL)

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. 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 (QIs) refer to Version 1.0 of the S3 Guideline on the diagnosis, treatment and follow-up of patients with CLL, Version 3.2 of the S3 Guideline on the diagnosis, treatment and follow-up of Hodgkin lymphoma in adult patients, and Version 1.0 of the S3 Guideline on the diagnosis, treatment and follow-up of adult patients with diffuse large B-cell lymphoma and related entities.

	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Primary cases of the denominator that were presented pre-therapeutically at the tumour board	70*	25 - 288	12,021	10,554
Denominator	Primary cases with Hodgkin's lymphoma, non-Hodgkin's lymphoma, Burkitt's ALL, Burkitt's lymphoma or plasma cell neoplasia	72*	27 - 332	12,410	10,887
Rate	Target value ≥ 95%	97.9%	75% - 100%	96.9%**	96.9%

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.

*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

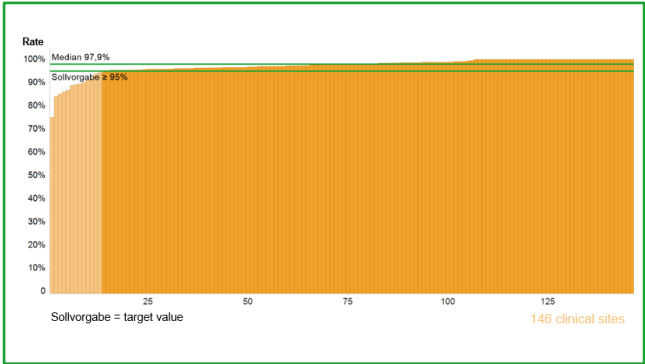
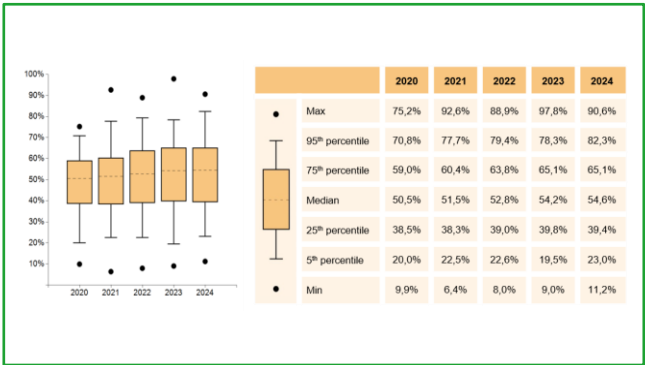


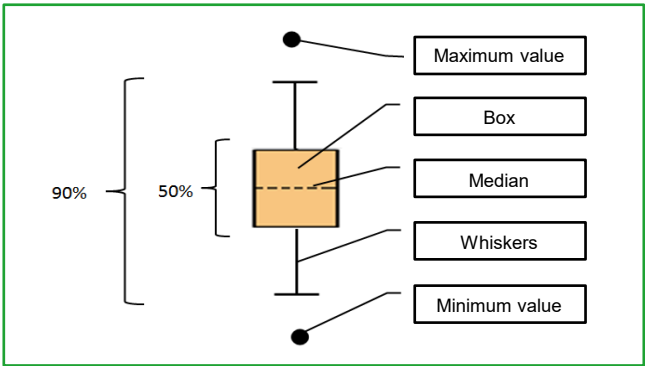
Diagram:

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.



Cohort development:

The **Cohort development** in the years **2020, 2021, 2022, 2023 and 2024** 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 cover 90% of the centres. The extreme values are depicted here as dots.

Status of the certification system for Haematological Neoplasms 2025

	31.12.2025	31.12.2024	31.12.2023	31.12.2022	31.12.2021
Ongoing certification procedures	12	8	12	20	19
Certified centres	151	137	119	100	73
Certified clinical sites	153	139	121	102	73

Clinical sites taken into account

	31.12.2025	31.12.2024	31.12.2023	31.12.2022	31.12.2021
Sites included in the Annual Report	146	129	117	86	53
Correspond to	95.4%	92.8%	96.7%	84.3%	72.6%
Primary cases total*	25,722	22,624	20,493	16,173	9,725
Primary cases per site (mean)*	176.2	175.4	175.2	188.1	183.5
Primary cases per site (median)*	145	142	142	153	153

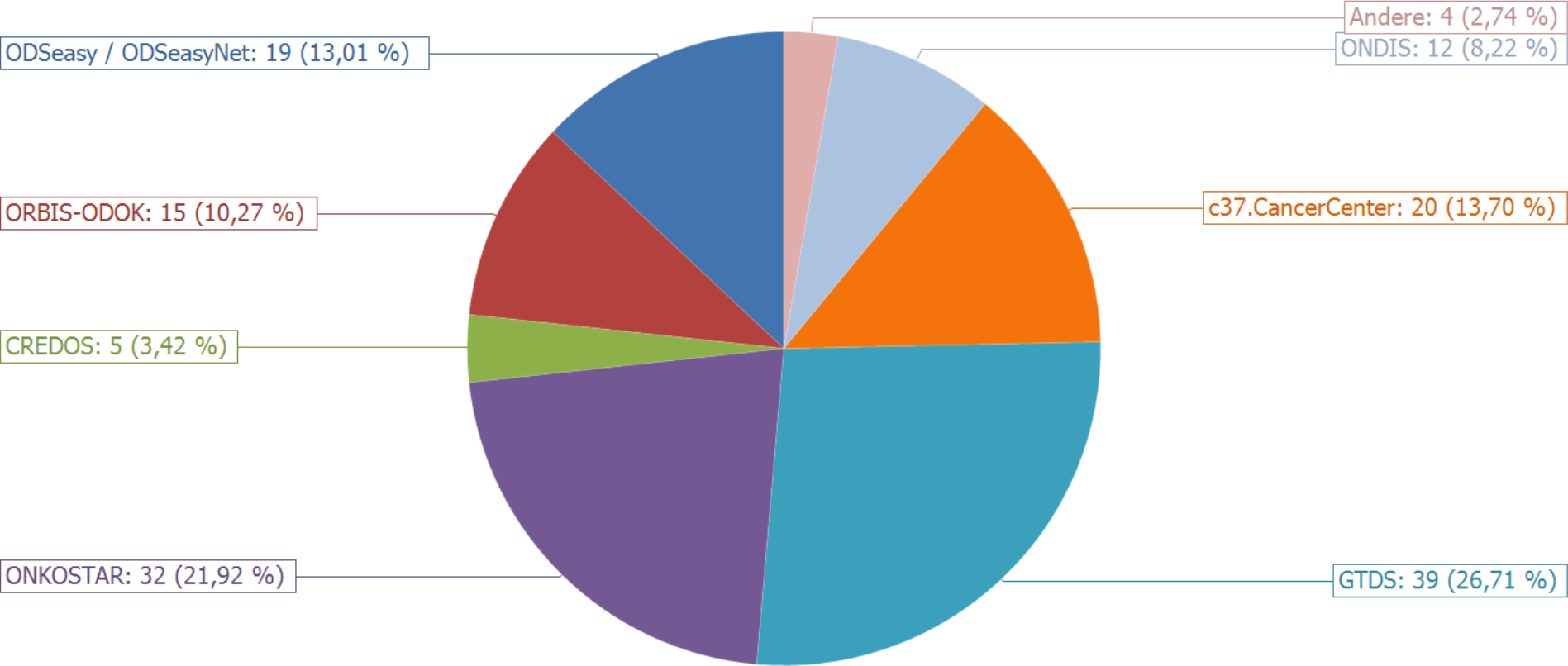
* The figures refer to all certified centres in the Annual Report.

This annual report covers the Centres for Haematological Neoplasms of the German Cancer Society audited in 2025. The diagrams in the annual report are based on the data sheet.

The annual report includes 146 of the 153 certified centre sites. Excluded are 7 sites that were certified for the first time in 2025 (reporting data for a complete calendar year is not mandatory for initial certifications).
A total of 26,463 patient cases were treated at all 153 sites. An up-to-date overview of all certified sites is available at www.oncomap.de.

The key figures published here refer to the indicator year 2024. They form the basis for assessment in the audits conducted in 2025.

Tumour documentation systems in the centre's clinical sites

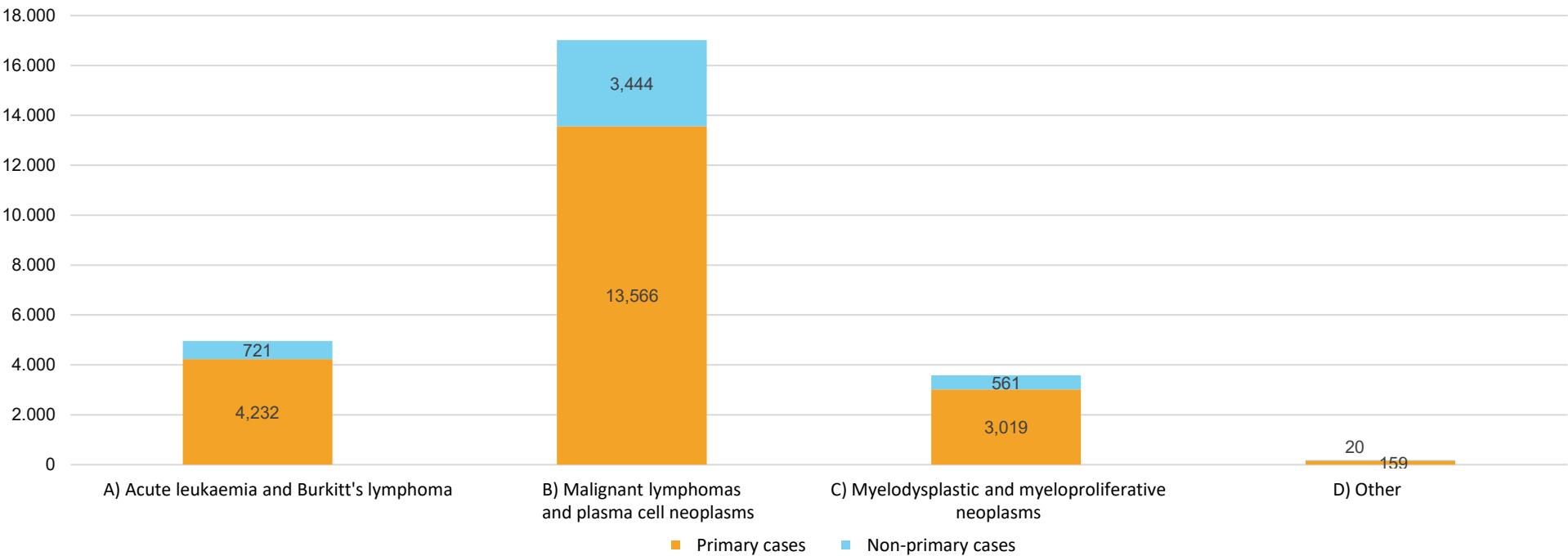


Andere = other
KIS-Erweiterung = KIS extension

Legend:	
Other	Systems only used at one clinical site

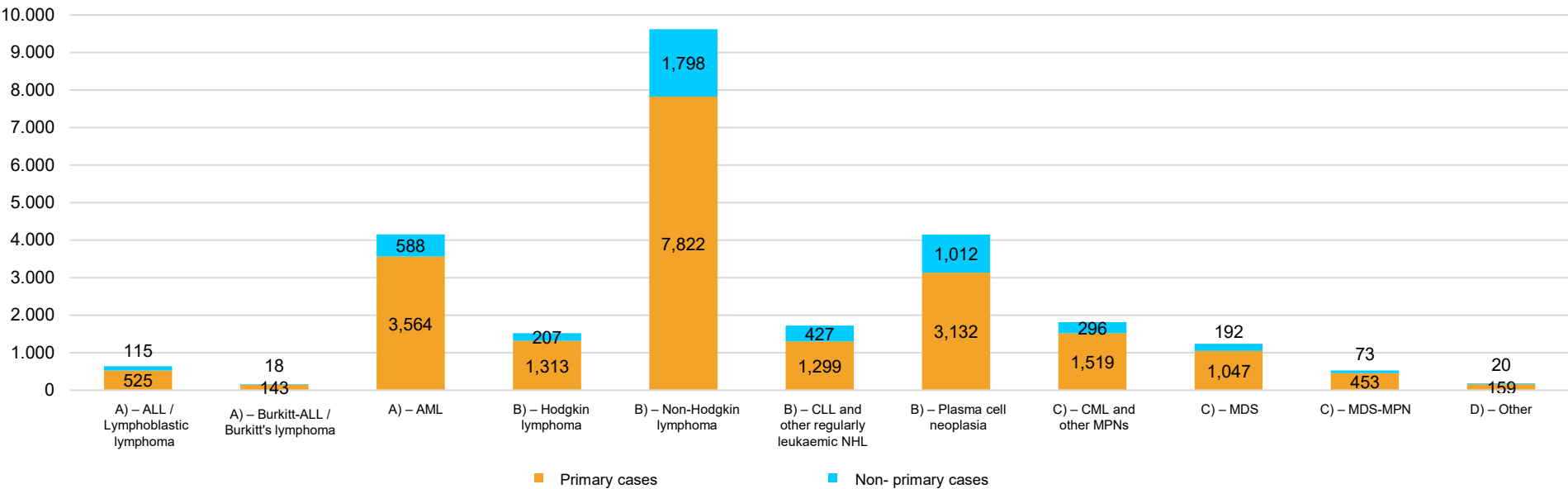
The information on the tumour documentation system was taken from the data sheet (Basic Data worksheet). It is not possible to specify multiple systems. In many cases, support is provided by the cancer registries, or a direct connection to the cancer registry may be available via a specific tumour documentation system.

Basic data – distribution of patient cases and primary cases of haematological neoplasms



	Patient cases	Thereof primary cases	Thereof patients who are not primary cases and present to the centre for the first time
A) Acute leukaemia and Burkitt's lymphoma	4,953 (19.3%)	4,232 (20.2%)	721 (15.2%)
B) Malignant lymphomas and plasma cell neoplasms	17,010 (66.1%)	13,566 (64.7%)	3,444 (72.6%)
C) Myelodysplastic and myeloproliferative neoplasms	3,580 (13.9%)	3,019 (14.4%)	561 (11.8%)
D) Others	179 (0.7%)	159 (0.8%)	20 (0.4%)
Total	25,722 (100%)	20,976 (100%)	4,746 (100%)

Basic data – distribution of patient cases and primary cases of haematological neoplasms

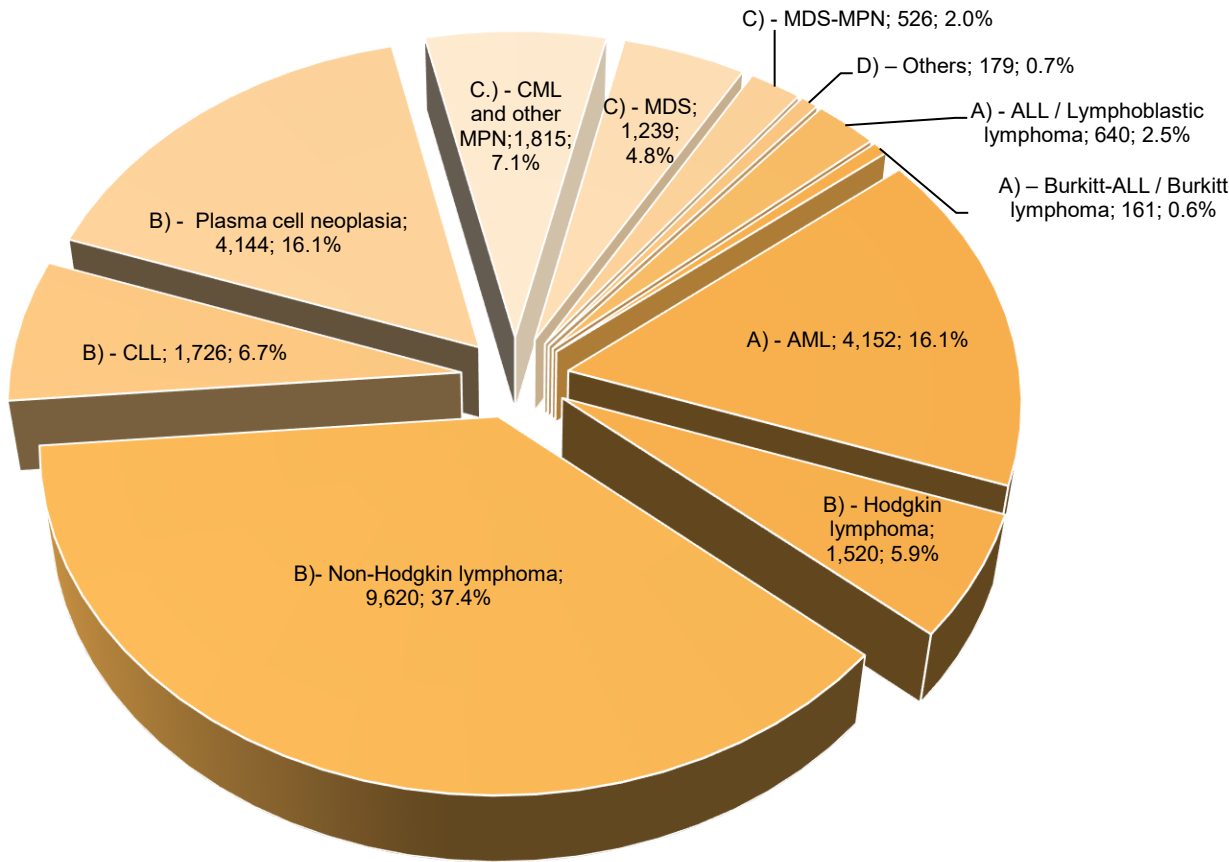


	A) Acute leukaemia and Burkitt's lymphoma			B) Malignant lymphomas and plasma cell neoplasia				C) Myelodysplastic and myeloproliferative neoplasms			D) Other	Total
	ALL / Lymphoblastic lymphoma	Burkitt-ALL / Burkitt's lymphoma	AML	Hodgkin lymphoma	Non-Hodgkin lymphoma	CLL	Plasma cell neoplasia	CML and others MPN	MDS	MDS-MPN	Other	
Patient cases	640 (2.5%)	161 (0.6%)	4,152 (16.1%)	1,520 (5.9%)	9,620 (37.4%)	1,726 (6.7%)	4,144 (16.1%)	1,815 (7.1%)	1,239 (4.8%)	526 (2.0%)	179 (0.7%)	25,722 (100%)
Thereof primary cases	525 (2.5%)	143 (0.7%)	3,564 (17.0%)	1,313 (6.3%)	7,822 (37.3%)	1,299 (6.2%)	3,132 (14.9%)	1,519 (7.2%)	1,047 (5.0%)	453 (2.2%)	159 (0.8%)	20,976 (100%)
Thereof patients who are not primary cases and present to the centre for the first time	115 (2.4%)	18 (0.4%)	588 (12.4%)	207 (4.4%)	1,798 (37.9%)	427 (9.0%)	1,012 (21.3%)	296 (6.2%)	192 (4.0%)	73 (1.5%)	20 (0.4%)	4,746 (100%)

ALL = Acute lymphoblastic leukaemia AML = Acute myeloblastic leukaemia CLL = Chronic lymphocytic leukaemia CML = Chronic myeloid leukaemia MPN = Myeloproliferative Neoplasms MDS = Myelodysplastic syndrome MDS-MPN = Myelodysplastic-Myeloproliferative Neoplasms

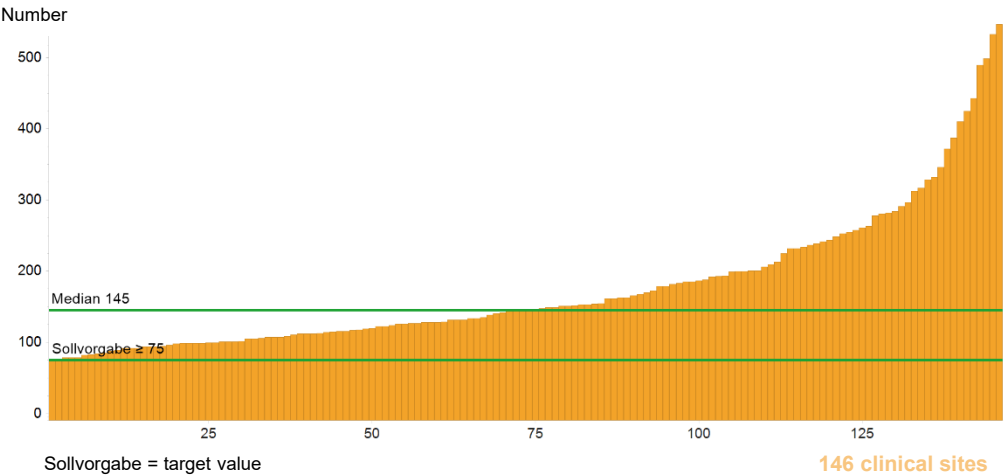
Basic data – distribution of patient cases and primary cases of haematological neoplasms

Patient cases

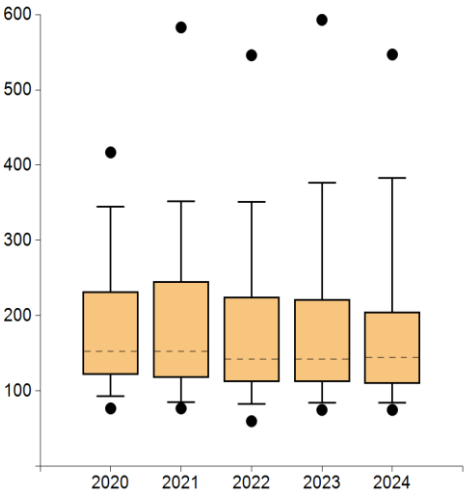


	Patient cases
A) - ALL / Lymphoblastic lymphoma	640 (2.5%)
A) - Burkitt-ALL / Burkitt lymphoma	161 (0.6%)
A) - AML	4,152 (16.1%)
B) - Hodgkin lymphoma	1,520 (5.9%)
B) - Non-Hodgkin lymphoma	9,620 (37.4%)
B) - CLL	1,726 (6.7%)
B) - Plasma cell neoplasia	4,144 (16.1%)
C) - CML and other MPN	1,815 (7.1%)
C) - MDS	1,239 (4.8%)
C) - MDS-MPN	526 (2.0%)
D) Others	179 (0.7%)
Total patient cases	25,722 (100%)

1. Patient cases



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Number	Patient cases with a haematological neoplasms (according to CR section 1.2.1)	145	75 - 547	25,722	22,624
	Target value ≥ 75				

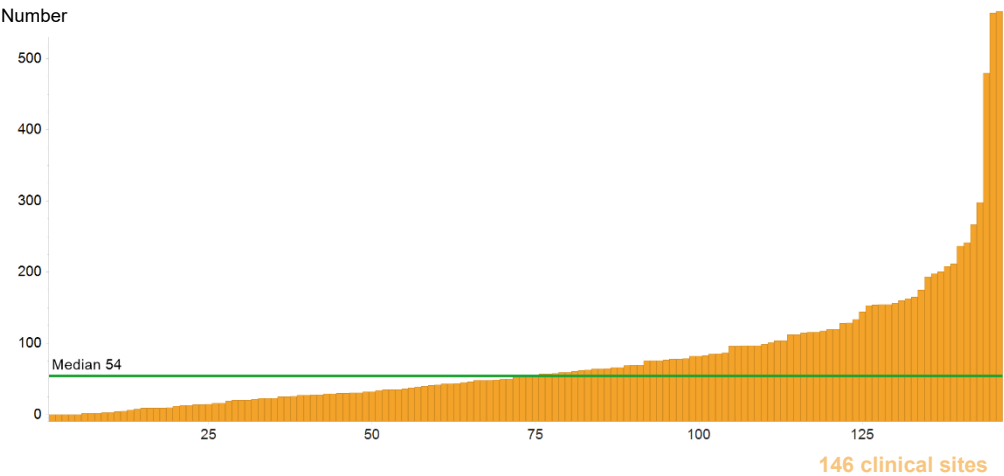


		2020	2021	2022	2023	2024
Max		417	583	546	593	547
95 th percentile		345.2	352.3	351	376.8	383.3
75 th percentile		232	245.3	225	222	204.8
Median		153	153	142	142	145
25 th percentile		122	118	112	112	109.5
5 th percentile		92.8	85	82.8	84.4	84.3
Min		77	77	60	75	75

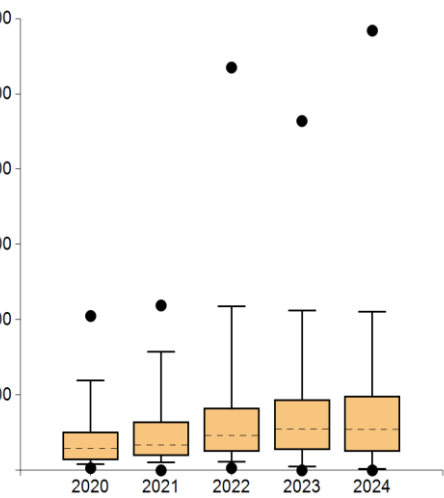
Clinical sites with evaluable data				Clinical sites meeting the target value			
2024		2023		2024		2023	
146	100%	129	100%	146	100%	129	100%

Comments:
All 146 clinical sites meet the target value of ≥ 75 patient cases. The median stands at 145 patient cases. Compared with the previous indicator year, the annual report includes 17 more certified clinical sites, representing an increase of around 3,000 patient cases. The distribution across the various haematological neoplasms (slide no. 9) remains largely unchanged compared with the previous year.

2. Number of complex diagnostics for myeloid and lymphatic neoplasms



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Number	Number of complex diagnostics for myeloid and lymphatic neoplasms (procedures analogous to *OPS: 1-941)	54	0 - 584	11,431	9,569
	No target value				



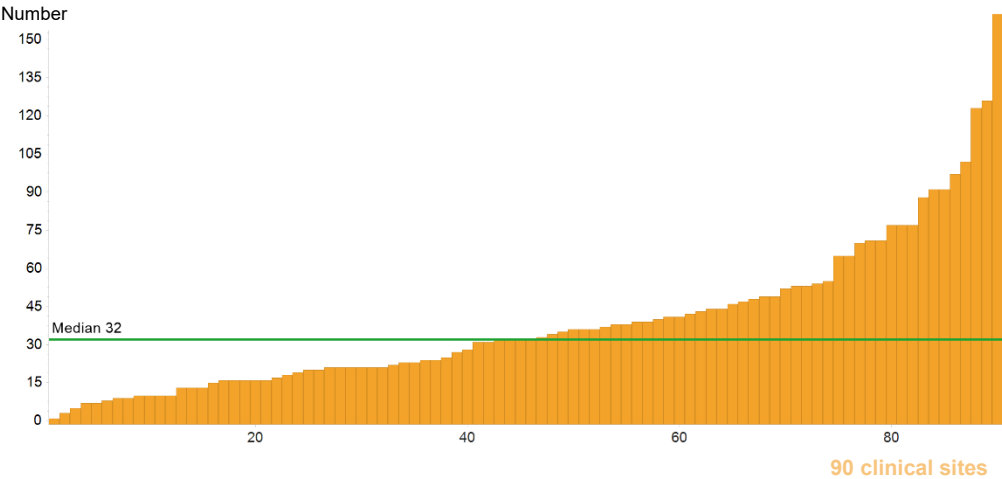
		2020	2021	2022	2023	2024
	Max	205	219	535	464	584
	95 th percentile	119,2	157.5	218	212	211
	75 th percentile	51	64.8	82.5	94	98.5
	Median	29	33.5	46	55	54
	25 th percentile	14	19.3	24.8	27	25.3
	5 th percentile	8.6	10.3	11.3	5	2.3
	Min	3	0	3	0	0

Clinical sites with evaluable data				Clinical sites meeting the target value			
2024		2023		2024		2023	
146	100%	129	100%	----	----	----	----

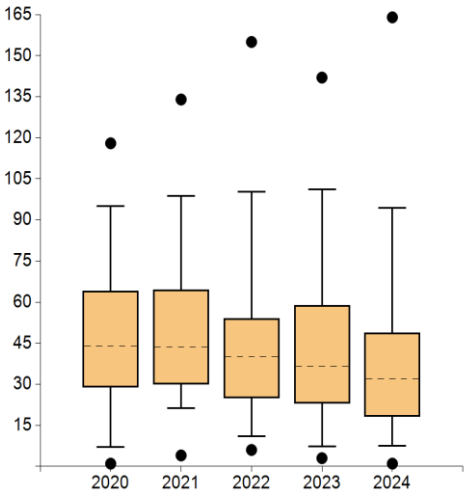
Comments:
Compared with the previous indicator year, the number of complex diagnostic procedures for myeloid and lymphatic neoplasms (OPS: 1-941) increased by 1,862, while the number of certified sites also increased (129 → 146). The median changed only marginally compared with the previous year. No target value or plausibility threshold is defined for this indicator.

*OPS-Code 1-941 corresponds to OPS complex diagnostics: Complex diagnostics for myeloid and lymphatic neoplasms

3. Autologous stem cell transplantation



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Number	Autologous stem cell transplantation (*OPS: 5-411.0, 8-805.0) (performed at the centre)	32	1 - 164	3,486	3,524
	No target value				



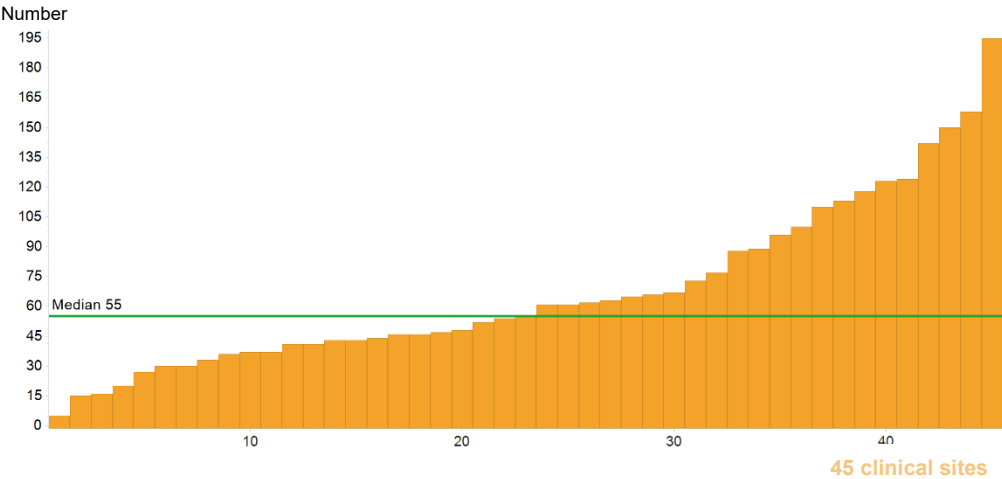
		2020	2021	2022	2023	2024
	Max	118	134	155	142	164
	95 th percentile	95	98.7	100.2	101.2	94.3
	75 th percentile	64	64.5	54	58.8	48.8
	Median	44	43.5	40	36.5	32
	25 th percentile	29	30	25	23	18.3
	5 th percentile	7	21.3	11	7.2	7.5
	Min	1	4	6	3	1

Clinical sites with evaluable data				Clinical sites meeting the target value			
2024		2023		2024		2023	
90	61.6%	82	63.6%	----	----	----	----

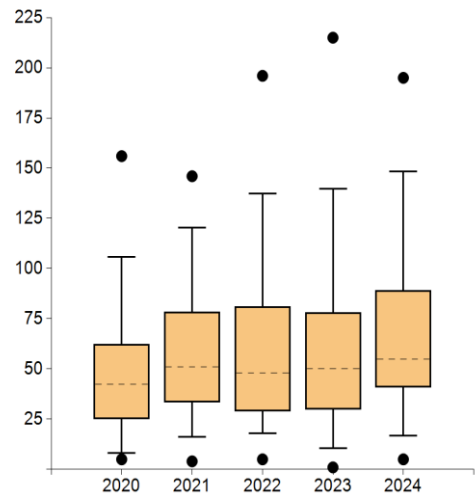
Comments:
Approximately 62% of the certified sites performed autologous stem cell transplantations at their own site. Although the number of centres performing these procedures continued to increase, the absolute number of stem cell transplantations performed decreased for the second consecutive year: a total of 3,486 autologous stem cell transplantations were performed at 90 of the 146 certified sites. The median has continuously decreased from 44 in 2020 to currently 32.

*OPS code 5-411.0 corresponds to OPS Surgery on the spleen and bone marrow: Transplantation of haematopoietic stem cells from the bone marrow: Autogenous, OPS-Code 8-805.5 corresponds to OPS Transfusion of blood cells: Transfusion of peripherally derived haematopoietic stem cells: Allogeneic, HLA-identical, unrelated donor

4. Allogeneic stem cell transplantation



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Number	Allogeneic stem cell transplantation (OPS: 5-411.2, 5-411.3, 5-411.4, 5-411.5, 8-805.2, 8-805.3, 8-805.4 or 8-805.5*) (performed at the centre location)	55	5 - 195	3,047	2,759
	No target value				



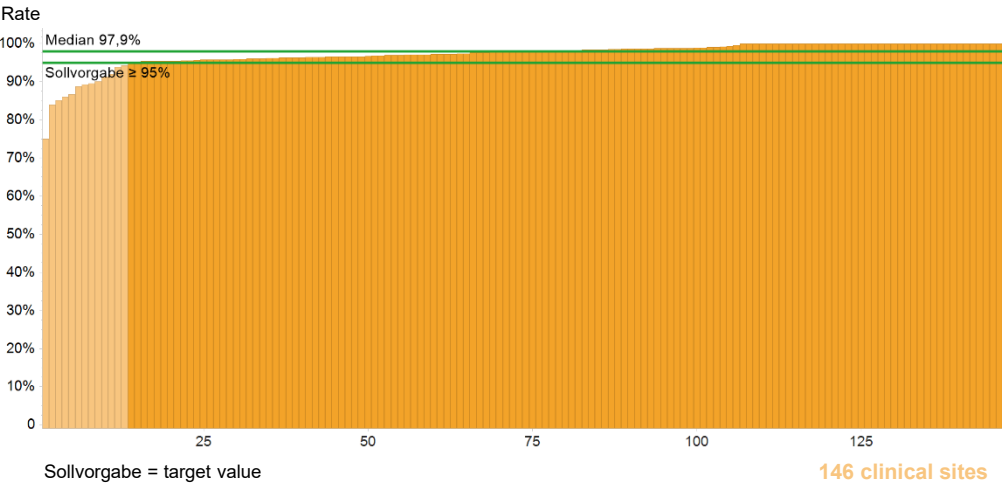
		2020	2021	2022	2023	2024
	Max	156	146	196	215	195
	95 th percentile	105.8	120.3	137.2	139.8	148.4
	75 th percentile	62.3	78.5	81	78	89
	Median	42.5	51	48	50	55
	25 th percentile	25	33.5	29	30	41
	5 th percentile	8	16.1	18.1	10.6	16.8
	Min	5	4	5	1	5

Clinical sites with evaluable data				Clinical sites meeting the target value			
2024		2023		2024		2023	
45	30.8%	45	34.9%	----	----	----	----
Comments: 45 of the 146 certified sites also performed allogeneic stem cell transplantations in the indicator year under review (corresponding to approximately 31% of the sites; previous indicator year: 35%). No target value is defined for this indicator. The G-BA has defined an annual minimum volume of 40 allogeneic stem cell transplantations. For the calendar years 2023 and 2024, a transitional minimum volume of 25 procedures per hospital site applies. At 11 sites, the number of allogeneic stem cell transplantations in the 2024 indicator year was < 40; at 4 sites, it was < 25.							

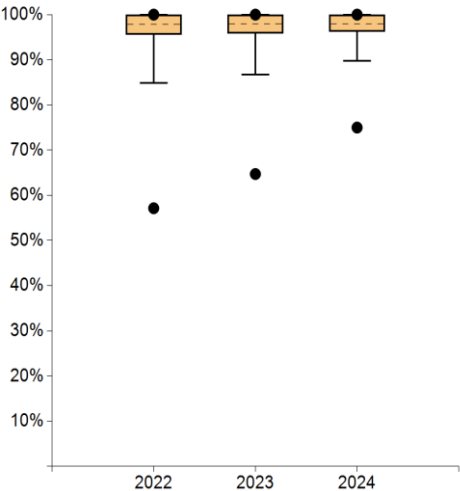
*OPS-Code 5-411.2 corresponds to OPS Surgery on the spleen and bone marrow: Transplantation of haematopoietic stem cells from bone marrow: allogeneic, non-HLA-identical, related donor, OPS-Code 5-411.3 corresponds to OPS Surgery on the spleen and bone marrow: Transplantation of haematopoietic stem cells from bone marrow: allogeneic, non-HLA-identical, unrelated donor, OPS-Code 5-411.4 corresponds to OPS Surgery on the spleen and bone marrow: Transplantation of haematopoietic stem cells from bone marrow: allogeneic, HLA-identical, related donor, OPS-Code 5-411.5 corresponds to OPS Surgery on the spleen and bone marrow: Transplantation of haematopoietic stem cells from bone marrow: allogeneic, HLA-identical, unrelated donor,

OPS-Code 8-805.2 corresponds to OPS Transfusion of blood cells: Transfusion of peripherally derived haematopoietic stem cells: Allogeneic, non-HLA-identical, related donor, OPS-Code 8-805.3 corresponds to OPS Transfusion of blood cells: Transfusion of peripherally derived haematopoietic stem cells: Allogeneic, non-HLA-identical, unrelated donor, OPS-Code 8-805.4 corresponds to OPS Transfusion of blood cells: Transfusion of peripherally derived haematopoietic stem cells: Allogeneic, HLA-identical, related donor, OPS-Code 8-805.5 corresponds to OPS Transfusion of blood cells: Transfusion of peripherally derived haematopoietic stem cells: Allogeneic, HLA-identical, unrelated donor

5a. Presentation tumour board (primary cases)



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Primary cases of the denominator that were presented pre-therapeutically at the tumour board	70*	25 - 288	12,021	10,554
Denominator	Primary cases with Hodgkin's lymphoma, non-Hodgkin's lymphoma, Burkitt's ALL, Burkitt's lymphoma or plasma cell neoplasia	72*	27 - 332	12,410	10,887
Rate	Target value ≥ 95%	97.9%	75% - 100%	96.9%**	96.9%



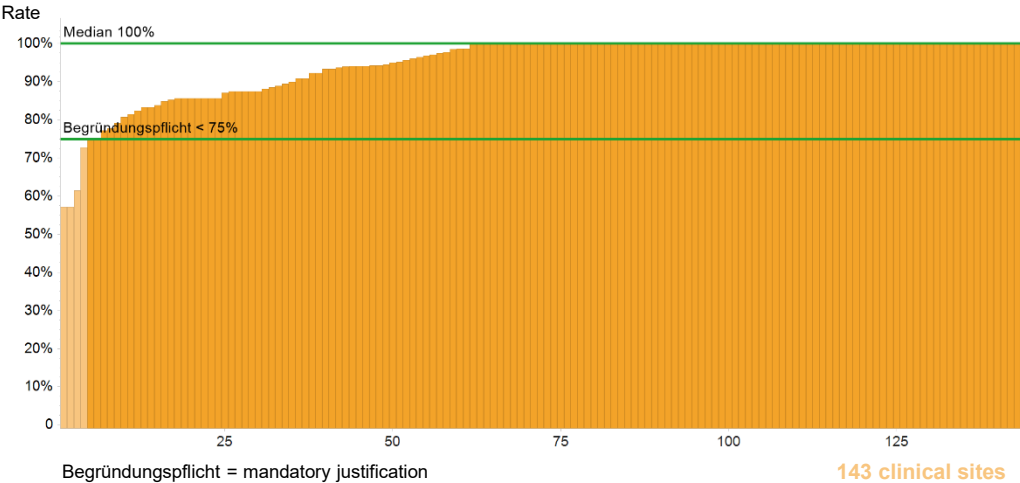
	2020	2021	2022	2023	2024
Max	----	----	100%	100%	100%
95 th percentile	----	----	100%	100%	100%
75 th percentile	----	----	100%	100%	100%
Median	----	----	97.9%	98.0%	97.9%
25 th percentile	----	----	95.6%	95.9%	96.3%
5 th percentile	----	----	84.9%	86.7%	89.7%
Min	----	----	57.1%	64.7%	75.0%

Clinical sites with evaluable data				Clinical sites meeting the target value			
2024		2023		2024		2023	
146	100%	129	100%	133	91.1%	116	89.9%
Comments: Approximately 91% of the sites achieve the target value of ≥ 95%. 13 centres fell below the target value, mainly attributing this to urgent initiation of therapy/emergency indications. This could be verified during the audits. In some exceptional cases, failure to present patients was also attributed to organisational reasons. Where organisational reasons were reported, the centres conducted an internal review and provided training for the specialist staff involved. The auditors issued remarks, but no deviations.							

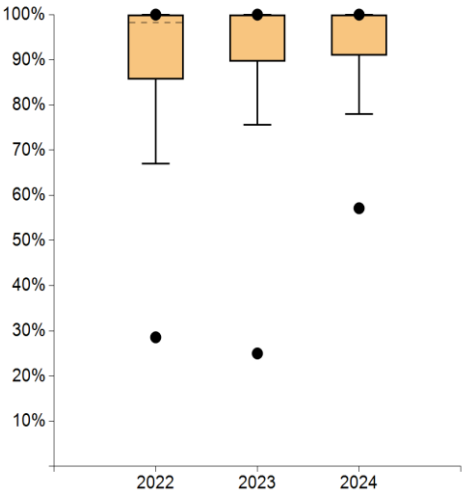
* The median for numerator and denominator does not refer to an existing centre but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.



5b. Presentation tumour board (additional)



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Patients of the denominator who were presented in the tumour board meeting	13*	1 - 107	2,864	2,588
Denominator	Patient cases (except primary cases) with Hodgkin's lymphoma, non-Hodgkin's lymphoma, Burkitt's ALL, Burkitt's lymphoma or plasma cell neoplasms	14*	1 - 107	3,035	2,758
Rate	Mandatory justification*** < 75%	100%	57.1% - 100%	94.4%**	93.8%



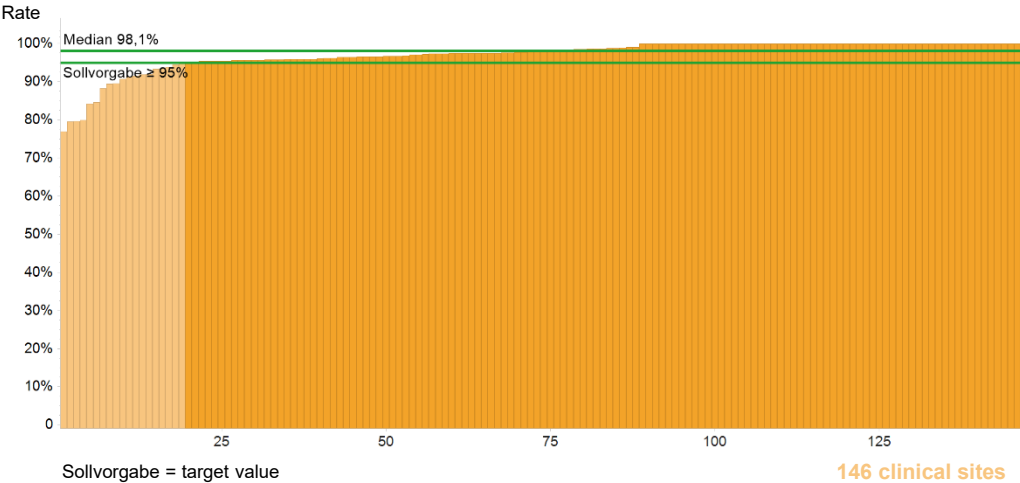
	2020	2021	2022	2023	2024
Max	----	----	100%	100%	100%
95 th percentile	----	----	100%	100%	100%
75 th percentile	----	----	100%	100%	100%
Median	----	----	98.2%	100%	100%
25 th percentile	----	----	85.7%	89.6%	90.9%
5 th percentile	----	----	67.0%	75.6%	77.9%
Min	----	----	28.6%	25.0%	57.1%

Clinical sites with evaluable data				Clinical sites meeting the plausibility limits			
2024		2023		2024		2023	
143	98%	126	97.7%	139	97.2%	122	96.8%
Comments: Approximately 97% of the sites achieve presentation rates of ≥ 75% for this indicator. At 82 centres (corresponding to approximately 56% of the sites), all patients in the population under consideration were presented at the tumour board. Three centres did not treat any cases of the neoplasms included in the denominator during the indicator year under review. Four centres with presentation rates < 75% were required to provide justification (none in the previous indicator year).							

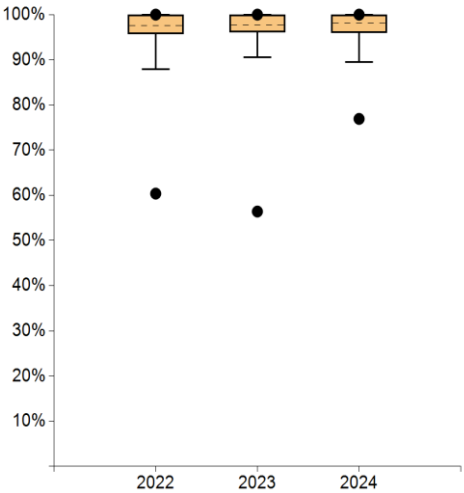
* The median for numerator and denominator does not refer to an existing centre but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.
*** For values outside the plausibility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



6. Haematology and oncology cases review



	Definition of Indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Patients of the denominator with a pre-therap. case review in haematology and oncology (according to CR, section 1.2.2) (alternatively: pre-therap. presentation in the tumour board according to CR, section 1.2.3)	56.5*	16 - 211	9,953	8,662
Denominator	Patient cases with a haematological neoplasia (except: Hodgkin's lymphoma, non-Hodgkin's lymphoma, Burkitt's ALL, Burkitt's lymphoma or plasma cell neoplasia)	57*	16 - 215	10,277	8,979
Rate	Target value ≥ 95%	98.1%	76.9% - 100%	96.8%**	96.5%



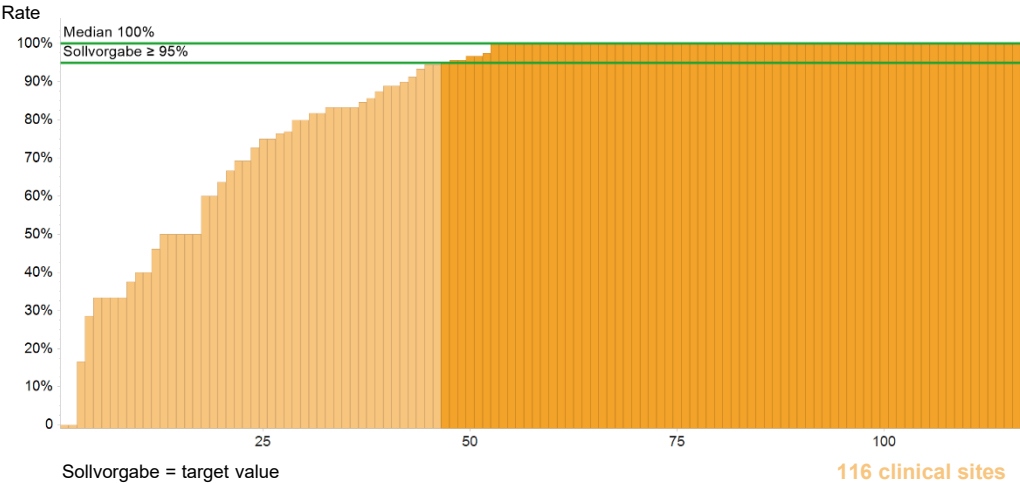
	2020	2021	2022	2023	2024
Max	----	----	100%	100%	100%
95 th percentile	----	----	100%	100%	100%
75 th percentile	----	----	100%	100%	100%
Median	----	----	97.6%	97.7%	98.1%
25 th percentile	----	----	95.7%	96.1%	96.0%
5 th percentile	----	----	87.9%	90.5%	89.5%
Min	----	----	60.4%	56.4%	76.9%

Clinical sites with evaluable data				Clinical sites meeting the target value			
2024		2023		2024		2023	
146	100%	129	100%	127	87%	114	88.4%
Comments: 87% of the sites achieve the target value of ≥ 95%. The 19 centres that did not achieve the target value attributed this, among other reasons, to patients having already been presented at the pre-therapeutic tumour board, life-threatening and/or palliative situations, or patients dying before the planned case discussion. Further reasons included documentation issues despite case discussions having been conducted and, in some cases, organisationally related omissions.							

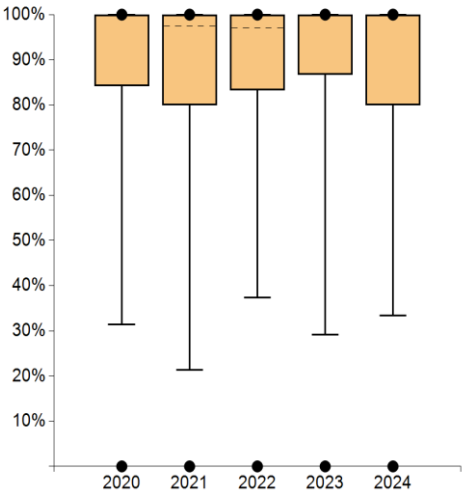
* The median for numerator and denominator does not refer to an existing centre but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.



7. Transplantation meeting (for allogenic transplantation at their own clinical site, included in 6)



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Patients of the denominator with transplantation meeting within three weeks of initial or recurrent diagnosis	8*	0 - 77	1,312	1,210
Denominator	Patient cases with acute leukaemia < 70 years of age	9*	1 - 79	1,443	1,311
Rate	Target value ≥ 95%	100%	0% - 100%	90.9%**	92.3%

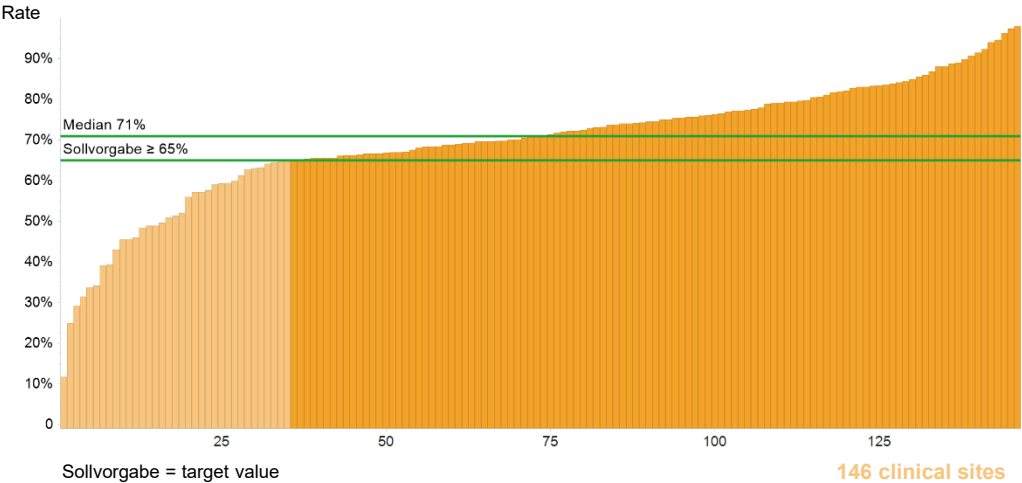


		2020	2021	2022	2023	2024
●	Max	100%	100%	100%	100%	100%
	95 th percentile	100%	100%	100%	100%	100%
	75 th percentile	100%	100%	100%	100%	100%
	Median	100%	97.4%	97.1%	100%	100%
	25 th percentile	84.2%	80.0%	83.3%	86.7%	80.0%
	5 th percentile	31.4%	21.3%	37.3%	29.2%	33.3%
●	Min	0.0%	0.0%	0.0%	0.0%	0.0%

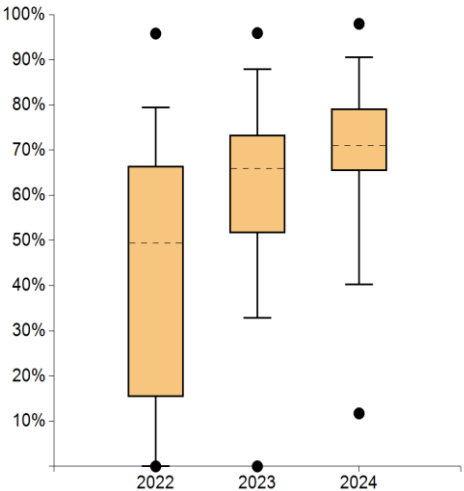
Clinical sites with evaluable data				Clinical sites meeting the target value			
2024		2023		2024		2023	
116	79.4%	97	75.2%	70	60.3%	60	61.9%
Comments: 46 sites fell below the target value of ≥ 95%. At one site, a deviation was issued during the audit. Reasons provided by centres with rates < 95% included patient preference (n = 3), patients dying before presentation (n = 10), contraindications or treatment in the intensive care unit (n = 4), transfer of patients to another centre with presentation there (n = 4), and patients with acute leukaemia for whom transplantation was not indicated according to the guideline (n = 4). Eight centres cited reduced performance status or comorbidities as reasons. At the 2024 committee meeting, it had been emphasised that all patients < 70 years of age with acute leukaemia should be presented, irrespective of comorbidities. Nine centres reported that case discussions had taken place, but not within 3 weeks, attributing this, among other reasons, to pending diagnostic procedures as well as organisational issues. The latter were addressed by revising the relevant processes.							

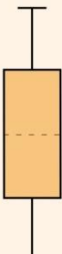
* The median for numerator and denominator does not refer to an existing centre but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.

8. Psycho-oncological Distress Screening



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Patients of the denominator who were screened psycho-oncologically	99*	19 - 344	17,667	13,697
Denominator	Patient cases (= Indicator 1)	145*	75 - 547	25,722	22,624
Rate	Target value ≥ 65%	71%	11.7% - 98%	68.7%**	60.5%

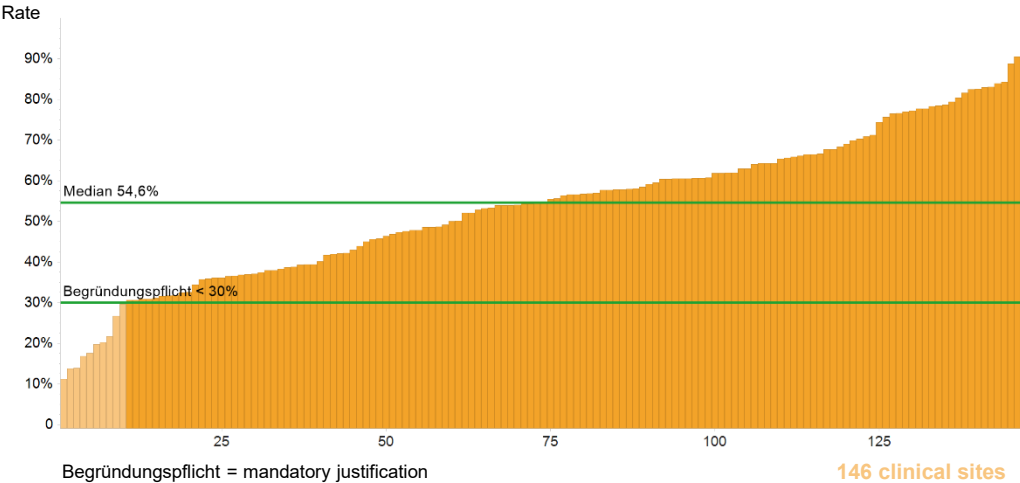


		2020	2021	2022	2023	2024	Clinical sites with evaluable data				Clinical sites meeting the target value			
	Max	----	----	95.8%	95.9%	98.0%	2024		2023		2024		2023	
	95 th percentile	----	----	79.5%	88.0%	90.5%	146	100%	129	100%	111	76%	72	55.8%
	75 th percentile	----	----	66.4%	73.4%	79.2%	Comments: For this indicator, a clear increase in the number of centres achieving the target value can be observed. 76% of the sites achieve the target value of ≥ 65% (previous indicator year: approximately 56%). 35 centres were required to provide justification. Common reasons included failure to return the distributed screening questionnaires and missing or delayed documentation of completed questionnaires. Only a few centres still experienced challenges with the general implementation of screening. Some centres reported technical problems following the implementation of digital screening or during the introduction of digitally supported screening. In some cases, refusal by the patient was given as a reason.							
	Median	----	----	49.4%	65.9%	71.0%								
	25 th percentile	----	----	15.5%	51.7%	65.4%								
	5 th percentile	----	----	0.0%	32.9%	40.3%								
	Min	----	----	0.0%	0.0%	11.7%								

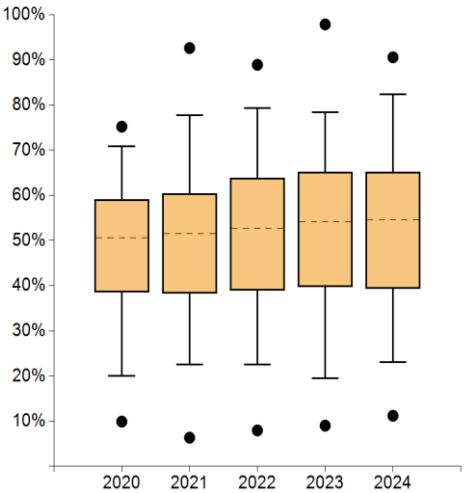
* The median for numerator and denominator does not refer to an existing centre but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.



9. Social service counselling



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Patients of the denominator who received counselling from social services in an inpatient or outpatient setting	78*	13 - 323	13,853	11,853
Denominator	Patient cases with a haematological neoplasm	145*	75 - 547	25,722	22,624
Rate	Mandatory justification*** < 30%	54.6%	11.2% - 90.6%	53.9%**	52.4%

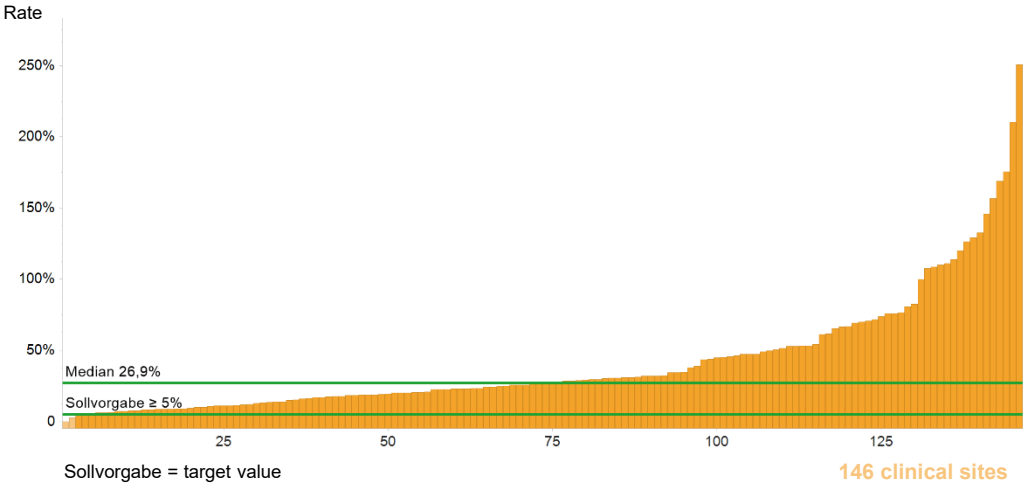


		2020	2021	2022	2023	2024
Max		75.2%	92.6%	88.9%	97.8%	90.6%
95 th percentile		70.8%	77.7%	79.4%	78.3%	82.3%
75 th percentile		59.0%	60.4%	63.8%	65.1%	65.1%
Median		50.5%	51.5%	52.8%	54.2%	54.6%
25 th percentile		38.5%	38.3%	39.0%	39.8%	39.4%
5 th percentile		20.0%	22.5%	22.6%	19.5%	23.0%
Min		9.9%	6.4%	8.0%	9.0%	11.2%

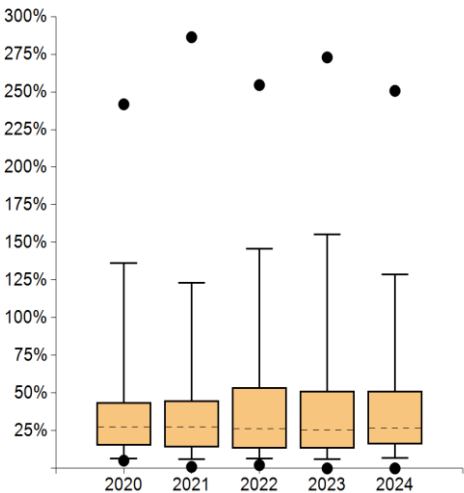
Clinical sites with evaluable data				Clinical sites meeting the plausibility limits			
2024		2023		2024		2023	
146	100%	129	100%	136	93.2%	116	89.9%
Comments: Overall, approximately 54% of all patient cases with a haematological neoplasm received counselling from social services.Ten of the certified sites have rates < 30% and were required to provide justification. Seven of these are located outside Germany, where different regulations apply and social work-related issues are covered by other professional groups. Three centres are located in Germany. Remarks were issued during the audits.							

* 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.
*** For values outside the plausibility limit(s), the centres are required to provide a justification.

10. Patients enrolled in a study



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Patients enrolled in a study with an ethical vote	32.5*	0 - 509	10,482	9,795
Denominator	Primary cases	124*	40 - 482	20,976	18,255
Rate	Target value ≥ 5%	26.9%	0% - 250.7%	50%**	53.7%



		2020	2021	2022	2023	2024
Max		241.8%	286.3%	254.6%	272.9%	250.7%
95 th percentile		136.3%	123.3%	145.6%	155.3%	128.6%
75 th percentile		43.8%	45.0%	53.6%	51.5%	51.4%
Median		27.5%	27.4%	26.3%	25.6%	26.9%
25 th percentile		15.4%	14.0%	13.3%	13.2%	16.1%
5 th percentile		6.5%	6.3%	6.3%	6.2%	6.9%
Min		5.2%	1.0%	2.2%	0.0%	0.0%

Clinical sites with evaluable data				Clinical sites meeting the target value			
2024		2023		2024		2023	
146	100%	129	100%	144	98.6%	125	96.9%
Comments: 50% of primary cases were enrolled in a study with ethics committee approval (previous indicator year: approximately 54%). With the exception of two centres, all centres achieved the target value of ≥ 5%. One centre attributed the failure to achieve the target value to temporary staffing shortages, which have since been resolved. A deviation was issued during one audit.							

* 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

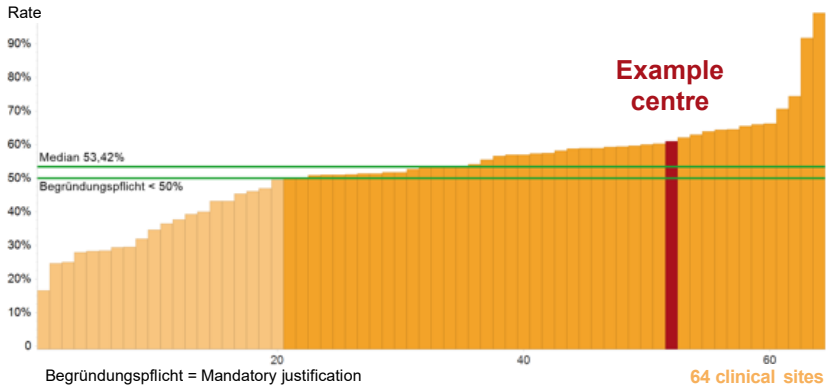
Individual Annual Report: Evaluation of site-specific key figures

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 (announced, among other places, on www.onkozert.de) and the inclusion of the respective centre in the general annual report (for example, centres undergoing initial certification in the audit year are not included). For centres with multiple sites, each site is presented in a separate individual annual report. For Oncology Centres, only the general annual report is currently available.



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

	Indicator definition	Example centre				
		2020	2021	2022	2023	2024
Numerator	Patients referred by the denominator who received inpatient or outpatient counselling from social services	185	198	176	170	186
Denominator	Primary cases (= indicator 1a) + patients with newly occurring recurrence (local, regional LN metastases) and/or distant metastases (= indicator 1b)	305	338	333	335	305
Rate	Mandatory justification*** <20%	60.66%	58.58%	52.85%	50.75%	60.98%

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::

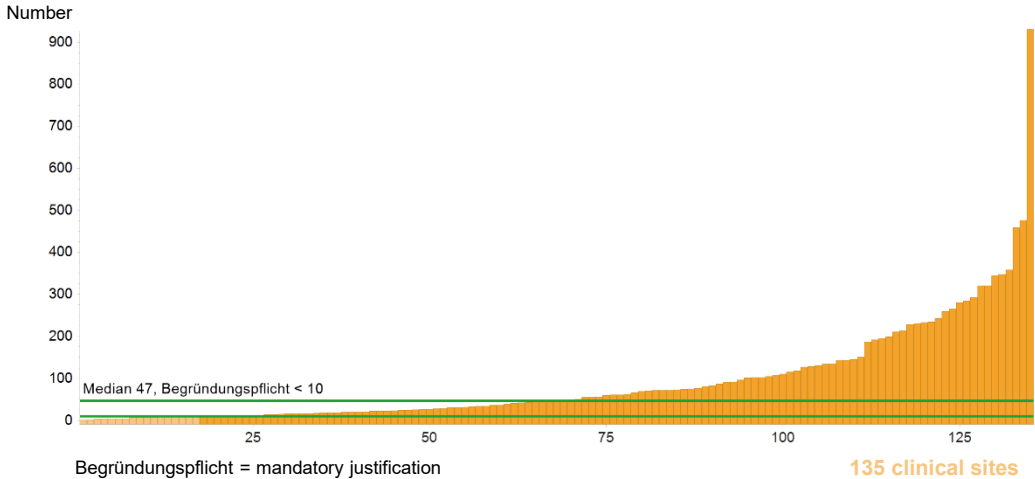
Colorectal, Prostate and Gynaecological Cancer Centres

- 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.

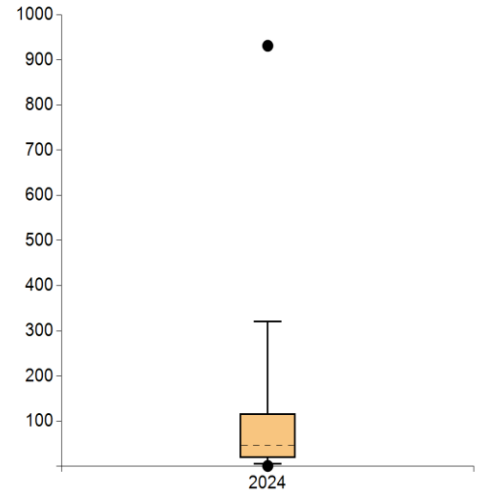
All other Organ Cancer Centres / Modules

- 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.

11. Number of highly complex and intensive block chemotherapy treatments in patients with a haematological neoplasm



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Number	Number of highly complex and intensive block chemotherapy treatments in patients with a haematological neoplasm (according to Basic Data and OPS 8-544)	47	1 - 931	12,599	----
	Mandatory justification* < 10				-----



		2020	2021	2022	2023	2024	Clinical sites with evaluable data				Clinical sites meeting the target value			
		2024		2023			2024		2023		2024		2023	
	Max	----	----	----	----	931	135	92.5%	----	----	118	87.4%	----	----
	95 th percentile	----	----	----	----	321								
	75 th percentile	----	----	----	----	117								
	Median	----	----	----	----	47								
	25 th percentile	----	----	----	----	18.5								
	5 th percentile	----	----	----	----	6.4								
	Min	----	----	----	----	1								

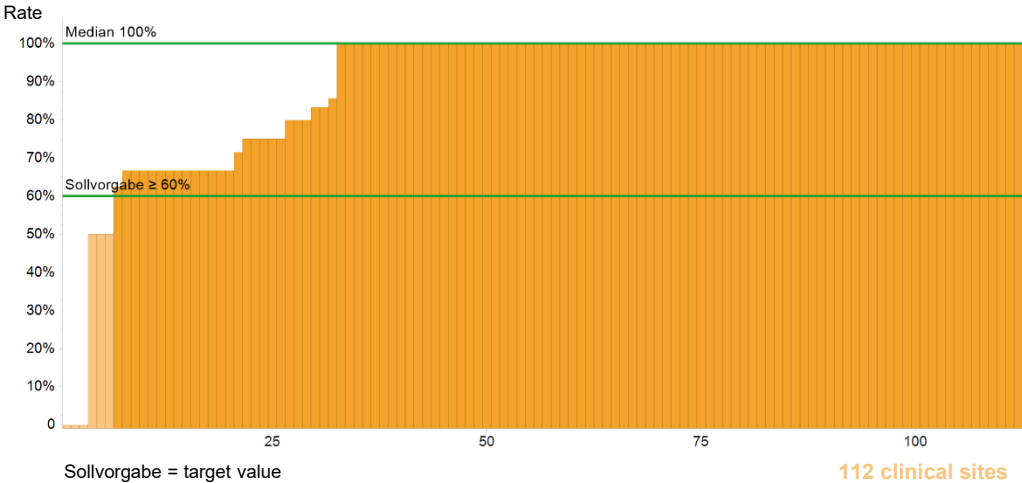
Comments:

According to the 2024 Certification Committee meeting, the number of highly complex and intensive block chemotherapy treatments in patients with a haematological neoplasm (according to Basic Data and OPS 8-544) is reported in the indicator data sheet for the first time. Eleven centres did not perform any (n = 0) complex/intensive block chemotherapy treatments in the year under review. This was partly attributed to patients with AML/ALL being promptly transferred to a cooperating centre and receiving treatment there. At a further 17 sites with fewer than 10 treatments, reasons given included contraindications and comorbidities or an overall low number of patients for whom such treatment was indicated.

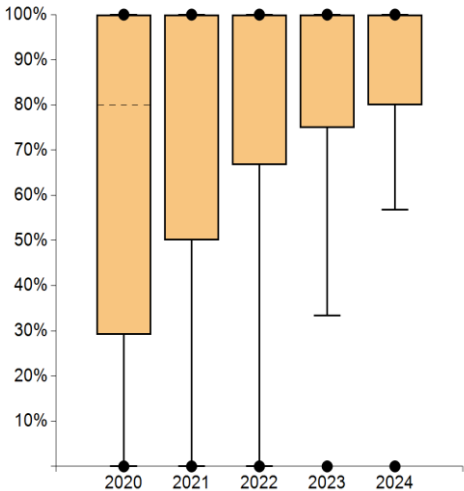
* For values outside the plausibility threshold(s), centres are required to provide justification.



12. Determination of TP53 deletion and mutation status before first systemic CLL therapy (GL QI CLL)



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Primary cases of the denominator with determination of TP53 deletion and mutation status (FISH) with regard to del17p and TP53 mutation analysis ≤ 12 weeks before the start of therapy	2*	0 - 11	299	222
Denominator	Primary cases with CLL and first systemic therapy	3*	1 - 12	338	262
Rate	Target value ≥ 60%	100%	0% - 100%	88.5%**	84.7%

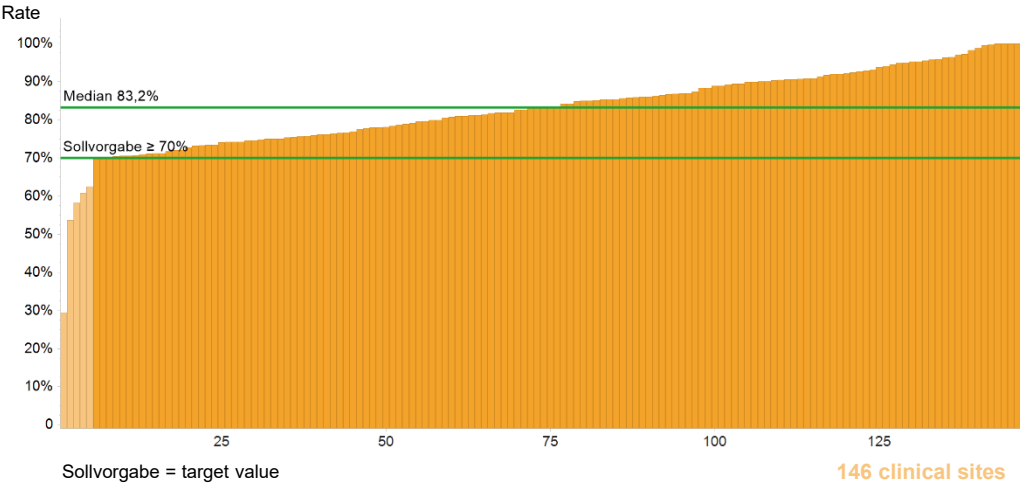


		2020	2021	2022	2023	2024
	Max	100%	100%	100%	100%	100%
	95 th percentile	100%	100%	100%	100%	100%
	75 th percentile	100%	100%	100%	100%	100%
	Median	80.0%	100%	100%	100%	100%
	25 th percentile	29.2%	50.0%	66.7%	75.0%	80.0%
	5 th percentile	0.0%	0.0%	0.0%	33.3%	56.9%
	Min	0.0%	0.0%	0.0%	0.0%	0.0%

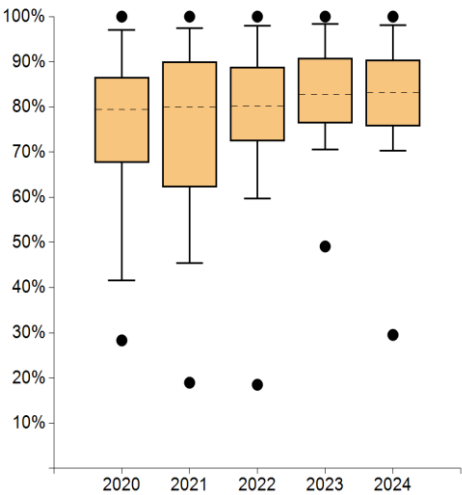
Clinical sites with evaluable data				Clinical sites meeting the target value			
2024		2023		2024		2023	
112	76.7%	105	81.4%	106	94.6%	92	87.6%
Comments: In just under 89% of all primary cases with CLL receiving first systemic therapy, TP53 deletion and mutation status (FISH) was determined with regard to del17p and TP53 mutation analysis ≤ 12 weeks before the start of therapy. At 34 centres, no patients from the population under consideration were treated. This was either because no patients with CLL were treated (n = 13) or because patients with CLL were treated but were undergoing watch & wait. The six centres that treated patients from the population under consideration but did not perform the testing and therefore fell below the target value attributed this to patient comorbidities or results already available from external institutions.							

* 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. Hepatitis and HIV serology before starting therapy



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Patients of the denominator with hepatitis B, C and HIV serology before systemic therapy	91*	13 - 853	17,099	14,617
Denominator	Patient cases with haematological neoplasms and systemic antineoplastic therapy	112.5*	19 - 855	20,216	17,309
Rate	Target value ≥ 70%	83.2%	29.6% - 100%	84.6%**	84.4%



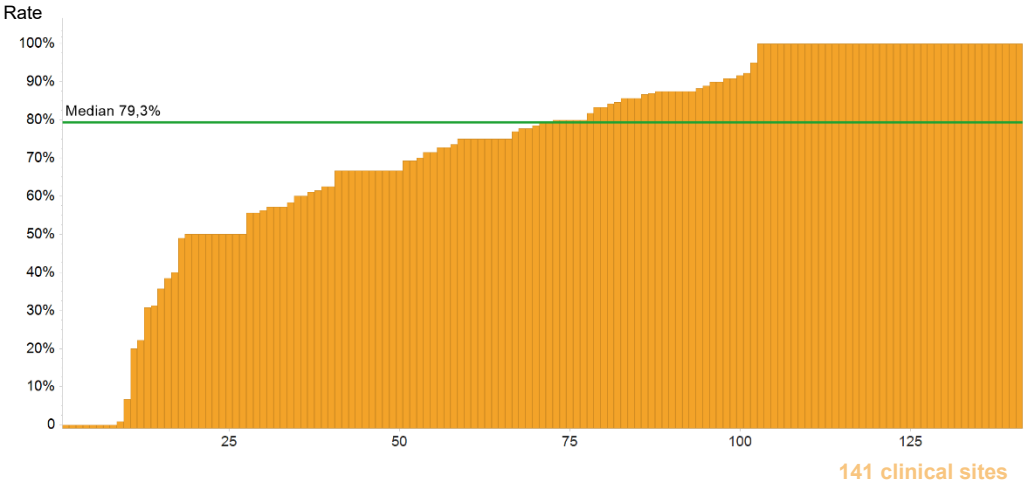
	2020	2021	2022	2023	2024
Max	100%	100%	100%	100%	100%
95 th percentile	97.1%	97.4%	98.0%	98.4%	98.1%
75 th percentile	86.6%	90.0%	88.8%	90.8%	90.4%
Median	79.5%	80.0%	80.2%	82.8%	83.2%
25 th percentile	67.7%	62.2%	72.4%	76.4%	75.7%
5 th percentile	41.5%	45.4%	59.7%	70.5%	70.4%
Min	28.3%	19.0%	18.5%	49.1%	29.6%

Clinical sites with evaluable data				Clinical sites meeting the target value			
2024		2023		2024		2023	
146	100%	129	100%	141	96.6%	123	95.3%
Comments: In just under 85% of patient cases with a haematological neoplasm and systemic antineoplastic therapy, hepatitis B, hepatitis C and HIV serology was performed prior to systemic therapy. Approximately 97% of the centres achieved the target value of ≥ 70%. Five centres were required to provide justification. At these centres, failure to achieve the target value was mostly due to missing HIV serology. Remarks were issued during the audits.							

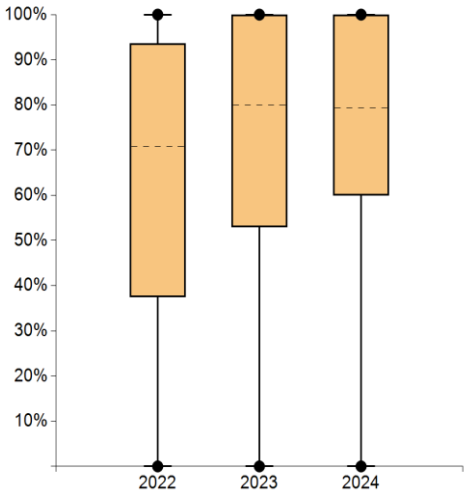
* The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.



14. Dental examination before bisphosphonates/denosumab in patients with haematological neoplasms (GL QI Supp)



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Patients of the denominator with dental examination before starting bisphosphonate or denosumab therapy	6*	0 - 80	1,068	1,030
Denominator	Patient cases with bisphosphonate or denosumab therapy	8*	1 - 107	1,502	1,400
Rate	No target value	79.3%	0% - 100%	71.1%**	73.6%

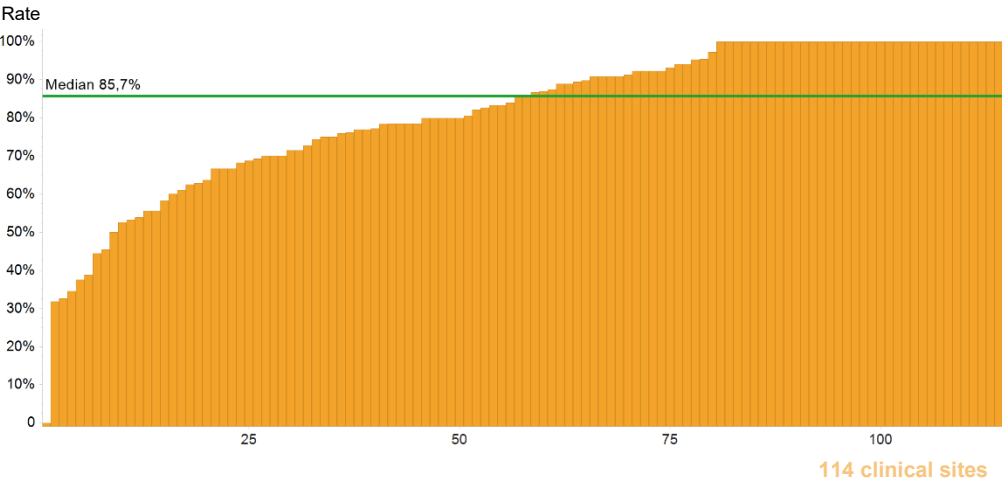


		2020	2021	2022	2023	2024
●	Max	----	----	100%	100%	100%
	95 th percentile	----	----	100%	100%	100%
	75 th percentile	----	----	93.7%	100%	100%
	Median	----	----	70.8%	80.0%	79.3%
	25 th percentile	----	----	37.5%	52.9%	60.0%
	5 th percentile	----	----	0.0%	0.0%	0.0%
●	Min	----	----	0.0%	0.0%	0.0%

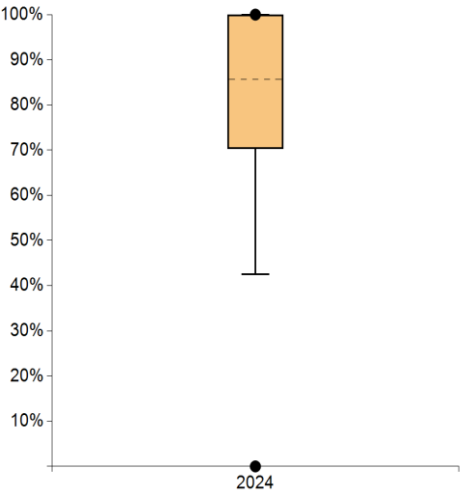
Clinical sites with evaluable data				Clinical sites meeting the target value			
2024		2023		2024		2023	
141	96.6%	121	93.8%	----	----	----	----
Comments: Approximately 71% of patient cases receiving bisphosphonate or denosumab therapy underwent a dental examination before the start of this therapy. No target value is defined for this indicator. Five centres reported that they had not treated any patients with bisphosphonate or denosumab therapy during the indicator year.							

* 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.

15. R-CHOP at first diagnosis in patients ≤ 80 years of age with curative treatment intent (GL QI DLBCL)



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Patients in the denominator receiving immunochemotherapy with R-CHOP (rituximab, cyclophosphamide, doxorubicin, vincristine, prednisone) or an R-CHOP-like regimen	12*	0 - 54	1,658	---
Denominator	Patients ≤ 80 years of age with a first diagnosis of diffuse large B-cell lymphoma (ICD-10 C82.4, C83.3, C83.8, C85.2) and curative treatment intent	15*	2 - 76	2,128	---
Rate	No target value	85.7%	0% - 100%	77.9%**	---



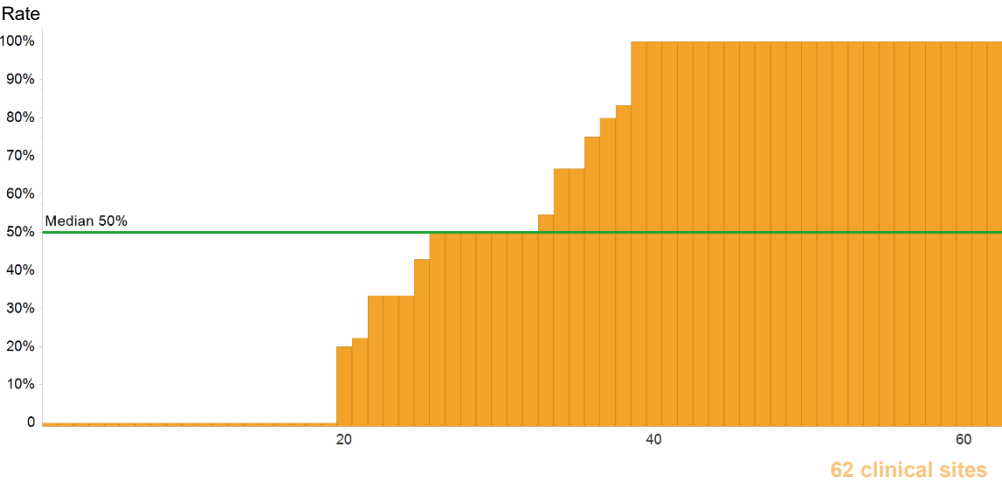
		2020	2021	2022	2023	2024
	Max	---	---	---	---	100%
	95 th percentile	---	---	---	---	100%
	75 th percentile	---	---	---	---	100%
	Median	---	---	---	---	85.7%
	25 th percentile	---	---	---	---	70.4%
	5 th percentile	---	---	---	---	42.5%
	Min	---	---	---	---	0.0%

Clinical sites with evaluable data				Clinical sites meeting the target value			
2024		2023		2024		2023	
114	78.1%	---	---	---	---	---	---
Comments: The indicator, which corresponds to a guideline-based quality indicator, was newly introduced and was still collected on an optional basis. No target value or plausibility threshold has yet been defined for this indicator. Three sites reported that they had not treated any patients from the population specified in the denominator. Approximately 78% of the patients in the denominator received immunochemotherapy with R-CHOP or an R-CHOP-like regimen.							

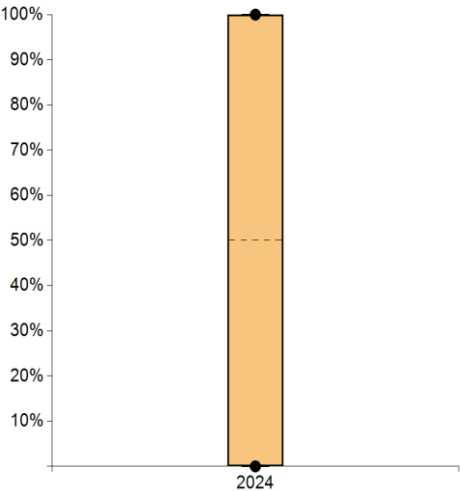
* The median for numerator and denominator does not refer to an existing centre but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.
** Percentage of total patients treated in centres according to the indicator.



16. Radiotherapy for PET-positive residual disease after first-line immunochemotherapy (GL QI DLBCL)



	Definition of indicator	All clinical sites 2024			2023
		Median	Range	Patients Total	Patients Total
Numerator	Patients in the denominator receiving radiotherapy	1*	0 - 6	87	----
Denominator	Patients with a first diagnosis of DLBCL (ICD-10 C82.4, C83.3, C83.8, C85.2), including genetically defined subgroups (DLBCL/high-grade B-cell lymphoma with translocation of MYC, BCL2 and/or BCL6), completed first-line immunochemotherapy, and PET-positive residual disease at final staging	2*	1 - 18	192	----
Rate	No target value	50%	0% - 100%	45.3%**	----



		2020	2021	2022	2023	2024	Clinical sites with evaluable data		Clinical sites meeting the target value			
							2024	2023	2024	2023	2024	2023
●	Max	----	----	----	----	100%	62	42.5%	----	----	----	----
	95 th percentile	----	----	----	----	100%						
	75 th percentile	----	----	----	----	100%						
	Median	----	----	----	----	50.0%						
	25 th percentile	----	----	----	----	0.0%						
	5 th percentile	----	----	----	----	0.0%						
●	Min	----	----	----	----	0.0%						

Comments:
This indicator, which corresponds to a guideline-based QI, was collected for the first time and was still optional. 28 centres reported that they had not treated any patients meeting the criteria specified in the denominator. Overall, approximately 45% of the 192 patients under consideration received radiotherapy. Reasons given for radiotherapy not being performed included that it was planned but still pending or that it had been declined by the patient.

* 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.



Find out more on www.krebsgesellschaft.de

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