

MROQC Prostate Project: Clinical Tip Sheet



Prostate Eligibility Criteria

Inclusion Criteria:

- Diagnosis of prostate adenocarcinoma
- Patient treated with a curative intent with radiotherapy to at least the prostate or prostate bed (includes radiation for intact prostate cancer and post-prostatectomy treatment delivered as adjuvant or salvage radiation with or without hormone therapy).
- Patients with Localized +/- regional metastatic disease are eligible (regional lymph node metastases are still eligible for inclusion, which include obturator, internal iliac, external iliac, and common iliac lymph node stations).
- Patients without email addresses can still be included if a paper data collection process is in place to collect baseline and follow-up data.

Exclusion Criteria:

- Prior pelvic radiation as part of a different treatment course (patients treated with combination therapy of EBRT and brachytherapy at the same institution are eligible)
- Prior focal therapy (cryotherapy, HIFU, or focal laser ablation)
- Neuroendocrine or small cell prostate cancer confirmed by pathology
- The patient refused to complete surveys
- Metastatic disease. Metastatic disease is defined as any of the following:
 - Any bone metastasis
 - Any nodal metastasis above the common iliacs (e.g., para-aortic, mediastinal/hilar, supraclavicular)
 - Any visceral metastasis (e.g., lung, liver, brain)
- Second active cancer currently receiving therapy or planned therapy within the next 12 months.

Data Collection Timepoints

Time Points	Baseline	EOT	6 Months After RT	12 Months After RT	24 Months After RT	36 Months After RT	60 Months After RT
CDA	P4		P6	P6	P6	P6	P6
Physician Form	P3						
Patient Questionnaires	P1/P2		P5	P5	P5	Х	P5
Physics		PRTD					

Data Collection Matched vs. Non-Matched

M= matched

Matched Status	Submit Baseline Forms	Collect Follow-up Data	
M + P1/P2 survey completed	Yes	Yes	
M + P1/P2 survey NOT completed	Yes	No	
No Match	Yes	No	

Project Upgrade Dates

Version #	Upgrade Date		
V 1- Project Start Date	July 7, 2020		
V 1→V 2	March 9, 2021		

Project Changes

- 3/9/21: 3-month follow-up timepoint removed
- 5/27/2021: Wording changed on questions 5 and 6 on the P3 form. Added wording "prior to starting radiation or hormone therapy".
- **10/12/2021:** Added ability to send patient P5 survey on demand and the database will display if the patient has opted out of email surveys.
- 12/3/21: Smoking questions were added to the P3 survey
- 6/22/22: Paper P5 survey added. Changing the eligibility criteria so patients without emails can be included.
- 6/22/22: Cannabis use questions added to the P1 and P2 surveys
- 6/22/22: tobacco intervention question added to the P3 survey
- 6/22/22: Reasons why the P6 form is not completed were added to the database.
- 9/9/22: New response options added to question 9 on the P3 form
- 12/8/22: Cannabis question response options
- 12/8/22: New matching status categories added in the database (yes, no and pending)
- 10/23/2023: RT dates added to SE1 and genomic test scores added to P3.

Reminders

- Enroll both eligible and ineligible patients in the database
- The FTE case count will include all eligible patients regardless of the patient's match status.
- Patients should complete their baseline survey (paper or email) within 2weeks of starting treatment.
- The P7 form should only be completed by sites without a referring MUSIC practice.



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MR QC PROSTATE WORKING GROUP

Frequently Asked Questions

Project Questions

What does MUSIC stand for?

MUSIC stands for Michigan Surgery Improvement Collaborative. MUSIC is BCBSM-BCN sponsored collaborative quality initiative (CQI) comprised of urology practices across Michigan.

Should I have access to the MUSIC database?

MROQC CDAs will not have access to the MUSIC database.

Patient Matching

What does matching mean?

Matching is the process of validating that a patient enrolled in the MROQC database is also enrolled within the MUSIC database. Three data elements on the SE1 are used to confirm if an MROQC patient is also a MUSIC patient: date of birth, prostate status, and biopsy or surgery date.

The matching process takes a minimum of 24 hours to occur. We will begin counting the matching time once the patient is enrolled in the database. We will give a patient 27 weeks from the date they were enrolled to match with a MUSIC patient. The patient will be assigned the PENDING status while we wait for the match to occur. If a match takes place before the 27-week mark, the patient's status will be changed to YES. If a match does not happen by the 27-week mark, the patient's status will be turned to NO.

MROQC receives a data file from MUSIC every Wednesday and updates the prostate database during the nightly data run. CDAs should review a patient's match status 24-hours after enrollment and continue monitoring the patient weekly (suggest every Thursday or Friday) until the match is complete.

How will I know my patient has matched?

The patient's match status displays on the enrollment form under the "matched" field. You can also review the status of all enrolled patients by reviewing the patient list on the home screen. On the main page, change the response in the "matched" drop-down to yes. This will display all current patient matches.

What happens if my patient never matches with a MUSIC patient?

If a patient has not matched with a MUSIC patient and the patient has reached 27 weeks form the time of their enrollment. The patient's matched status will change to "no". Follow-up data collection and physics data is not required, and the patient's status can be changed to "completed". An SE2 Form is not required.

Enrollment/Eligibility

Will my site receive credit towards our case count if an eligible patient does not match with a MUSIC patient?

Yes, sites will receive credit for all enrolled eligible patients, including patients who do not match with a MUSIC patient.

A patient with a matched status of "no" should not have their status changed to "not eligible". To receive credit for this case, you must leave the status as active or completed.

Data Collection

Can patients complete baseline surveys by paper?

Yes, patients can complete baseline surveys by paper or email.

When should I send out email surveys to patients?

Ideally, patient surveys should be given to patients before their treatment start date. However, patients should complete their baseline survey within 2-weeks of starting treatment.

What happens if a patient agrees to complete surveys at enrollment but does not complete their baseline survey?

If a patient does not complete their baseline survey, the CDA should submit the P3 and P4 survey, and depending on their matched status; physics will submit the PRTD and DICOM data.

When does the baseline email survey go out to the patient?

The baseline email is sent 24 hours after the survey is scheduled.

Are in-person visits required for follow-up data collection?

No, follow-up data collection is not tied to a patient visit. Patient follow-up surveys are sent by email only, and CDA data collection is complete through chart abstraction.

Updated: 10/24/23 For general project questions or inquiries, please email mroqc@support.org