Breast Centres Certification Procedure

According to the Eusoma guidelines "The requirements of a specialist breast centre"

Eusoma Quality Indicators for Breast Centre Certification

based on "Quality indicators in breast cancer care: An update from the EUSOMA working group" EJC 86 (2017): 59-81

In the transitory period (until 31.12.2018) if the Breast Centre does not fulfil the new/modified indicators a Recommendation will be issued. Anyway, the Breast Centre must fulfill the old minimum standard and the parameters unchanged; otherwise, a Major non Conformity will be issued.
In case of a recommendation on a new/modified indicator issued in the transitory period, the Breast Centre will be asked to send the corrective action proposal and Breast Centres Certification will monitor the status asking a prospective data transfer based on 3/6 months data.

	Indicator	2017 Vs 2010	Recommended/ Mandatory	Minimum Standard	Target
1	Proportion of women with breast cancer (invasive or in situ) who had a pre-operative histologically or cytologically confirmed malignant diagnosis (B5 or C5)	Minimum Standard modified	M	85%	90%
2	Proportion of invasive cancer cases for which the following prognostic/predictive parameters have been recorded: histological type (according to WHO Classification of Tumours of the Breast), grading (according to WHO and EU Guidelines: Elston and Ellis modified Bloom and Richardson-Grading system Elston, CW et al. 1991), ER, PgR*, HER-2/neu, Proliferation index (Ki67)* *this marker is recommended but not mandatory, and does not need to be included in the calculation for compliance with the QI For patients receiving primary systemic treatment (PST), characterization on core biopsy prior to therapy is mandatory. For patients receiving primary surgery, characterization may be performed on the surgical specimen only. In addition to the above parameters, the following parameters must be recorded after surgery: Pathological stage (pT and pN, or ypT and ypN in case of PST), Size in mm for the invasive component, Peritumoral vascular invasion (L,V), Distance to nearest radial margin	QI and Minimum Standard Modified	M	95%	98%
3	Proportion of non-invasive cancer cases for which the following prognostic/predictive parameters have been recorded: Grading (according to WHO Classification of Tumours of the Breast), dominant histologic pattern, size in mm (best pathology or radiology estimate if 2 stage pathology), distance to nearest radial margin, ER.	QI and Minimum Standard Modified	M	95%	98%

4	Proportion of patients with invasive breast cancer (M0) who received post-operative radiation therapy (RT) after surgical resection of the primary tumor and appropriate axillary staging/surgery in the framework of BCT	Unchanged	M	90 %	95 %
5	Proportion of patients (BRCA1 and BRCA2 patients excluded) with invasive breast cancer not greater than 3 cm (total size, including DCIS component) who underwent BCT as primary treatment.	Unchanged	M	70%	80%
6	Proportion of patients with non-invasive breast cancer not greater than 2cm who underwent BCT	Minimum Standard Modified	M	80%	90%
7	Proportion of patients with DCIS only who do not undergo axillary clearance	Minimum Standard Modified	M	97%	99%
8	Proportion of patients with endocrine sensitive invasive cancer who received endocrine therapy	Minimum Standard Modified	M	85%	90%
9	Proportion of patients with ER– (T > 1 cm or Node+) invasive carcinoma who received adjuvant chemotherapy	Minimum Standard Modified	M	85%	95%
10	Proportion of patients (invasive cancer only) who received a single (breast) operation for the primary tumor (excluding reconstruction)	Unchanged	M	80%	90%
11	Proportion of patients (DCIS only) who received just one operation (excluding reconstruction)	New QI	M	70%	90%
12	Proportion of patients with invasive cancer and clinically negative axilla who underwent sentinel lymph-node biopsy (SLNB) only (excluding patients who received PST)	QI and Minimum Standard Modified	M	90%	95%
13	Proportion of patients receiving immediate reconstruction after mastectomy	New QI	R	40%	NA
14	Proportion of patients with invasive cancer who underwent sentinel lymph-node biopsy with no more than 5 nodes excised	New QI	M	90%	95%
15	Proportion of patients with HER2 positive (IHC 3+ or in situ hybridisation positive FISH +) invasive carcinoma (T > 1 cm or N+) treated with chemotherapy who received adjuvant trastuzumab	New QI	M	85%	95%
16	Proportion of treated patients for which the breast centre collects data on life status and recurrence rate (for at least 5 years)	New QI	R	80%	90%
17*	Ratio of benign to malignant diagnoses based on definitive pathology report (surgery only, non-operative biopsies excluded) –	Minimum Standard Modified	M	1:4	1:5

***For this indicator, the procedure foresees a check onsite**

For the complete description of each of the above indicators, please refer to the Eusoma document "Quality indicators in breast cancer care: An update from the EUSOMA working group" EJC 86 (2017): 59-81, available at www.eusoma.org