

Measure	Weight	Measure Description	Points earned
#1	10	High Quality Clinical and Physics Data Submission and Completeness¹	
		Four Data Quality Metrics Met	10
		Three Data Quality Metrics Met	8
		Two Data Quality Metrics Met	4
		One Data Quality Metric Met	2
		None of the Data Quality Metrics Met	0
#2	5	Submission of Technical Data (Dose Volume Histogram, DICOM-RT, and Physics Radiotherapy Technical Details Survey)	
		>85% of technical data submitted within six weeks of treatment completion	5
		>85% of technical data submitted within eight weeks	4
		>85% of technical data submitted within twelve weeks	3
		>85% of technical data submitted after twelve weeks	2
		<85% of technical data submitted after twelve weeks	0
#3	14	Collaborative-wide Measure (Task Group-263) Evaluate compliance for the specified structures (heart, lungs, and individual lungs) for the initial DICOM entry for all breast and lung cancer patients	
		>50% compliance for the specified structures	14
		<50% compliance for the specified structures	0
#4	14	Mean heart dose achieved in breast patients not receiving radiotherapy to regional nodes²	
		75% or more of patients meet the appropriate threshold	14
		50-74% of patients meet the appropriate threshold	7
		<50% of patients meet the appropriate threshold	0
#5	14	Use of Accelerated Whole Breast Irradiation (AWBI) on appropriate patients per 2018 ASTRO Guidelines	
		80% or more appropriate patients receive AWBI	14
		65-79%	7
		<65%	0
#6	14	For lung cancer patients, ≥ 95% of the Planning Target Volume (PTV) receives ≥100% of the prescription dose AND the heart mean dose is ≤20 Gray (Gy)	
		≥65% of patients meet target coverage and heart sparing goals	14
		50-64% of patients meet target coverage and heart sparing goals	7
		<50% of patients meet target coverage and heart sparing goals	0

#7	14	80% of patients do not receive >10 fractions for treatment of bone metastasis in accordance with the ASTRO Choosing Wisely guidelines	
		80% of patients do not receive >10 fractions for treatment of bone metastasis in accordance with the ASTRO Choosing Wisely guidelines	14
		60-79%	7
		<60%	0
#8	5	Collaborative Meeting Participation – Clinical Champion (<i>per MROQC CC Attendance Policy</i>)	
		All meetings	5
		Two meetings	3
		One meeting	2
		None	0
#9	5	Collaborative Meeting Participation – Physics Lead (<i>or designee</i>)	
		All meetings	5
		Two meetings	3
		One meeting	2
		None	0
#10	5	Collaborative Meeting Participation – Clinical Data Abstractor (<i>CDA or designee</i>)	
		All meetings	5
		Two meetings	3
		One meeting	2
		None	0

¹Data Quality Metrics

A. Highly accurate data:

- Overall data accuracy as determined by breast and lung audit is $\geq 97\%$.

B. Sufficient audit preparation and follow-up:

- Audit materials are available for review at the time of audit.
- Appropriate staff member (CDA for clinical data audit and physicist or dosimetrist for physics data audit) is in attendance at the audit.
- Corrections identified during clinical or physics data audit are made within 2 weeks of the audit date.

C. Completeness of submitted forms:

- 90% or more of submitted CDA, physician, and physics patients for 2019 patients have no missing data elements as of 12/31/19.

D. Active use of data quality reports:

- Fewer than 5% of 2019 patients* have a data checker error in the data checker problems report as of 12/31/19.

*2019 patients are defined as patients with an RT end date of 10/1/18-9/30/19

²2019 Cardiac Dose Thresholds:

Conventional: ≤ 1.7 Gy (left) ≤ 1 Gy (right)

AWBI: ≤ 1.2 Gy (left) $\leq .7$ Gy (right)