

## Workload Definitions for Communities Oncology Network Sites Revised and Effective 1 April 2012

The following workload indicator definitions refer only to those BCCA Registered Patients seen in your Ambulatory Communities Oncology Network (CON) Centre

### **New Patient Consultation**

This category is to be used when a Specialist or General Practitioner in Oncology (GPO):

- Sees a patient with cancer for the first time; or
- Completes a full medical consultation of an existing patient seen again for a new cancer in a different body site; or
- Sees a patient with recurrent cancer if there has been at least a two year interval since the patient's previous visit.

INCLUDE	DO NOT INCLUDE
Consultant Physician OR GPO first visit	Nursing visit

### **First Parenteral Chemotherapy Start**

Parenteral chemotherapy refers to intravenous, intravesicular, intrathecal, subcutaneous, or intramuscular chemotherapy that is prescribed by the physician and is administered on site.

**A patient to be included in this category only if one of the following criteria is met:**

- Chemo naïve i.e. never received chemotherapy treatment
- New to BC and receives chemotherapy treatment. (may have received chemotherapy treatment outside BC)
- Received chemotherapy treatment over 2 years ago and is now starting on a **different** chemotherapy regimen/protocol.
- Has an existing BCCA ID number and now diagnosed with a new cancer and requires chemotherapy
- Received **1<sup>st</sup> dose of chemotherapy as an inpatient** in one CON site and is continuing on the same treatment protocol as an outpatient at a different CON site.

INCLUDE	DO NOT INCLUDE
<ul style="list-style-type: none"> <li>• First treatment of anti-cancer drugs given IV, intravesicular, intrathecal, subcutaneous, intramuscular (includes BCG's )</li> <li>• Pamidronate when given as an anti-cancer Class II drug (e.g. breast, multiple myeloma)</li> </ul>	<ul style="list-style-type: none"> <li>• Patients who have had a change in parenteral treatment protocol</li> <li>• Cancer patients receiving supportive drugs and procedures e.g. Zometa, hydration, transfusion therapy, symptom management drugs.</li> </ul>

## Workload Definitions for Communities Oncology Network Sites Revised and Effective 1 April 2012

### Second and Subsequent Chemotherapy Visits

Second and subsequent treatments administered at your site for parenteral or mixed parenteral antineoplastic drugs should be recorded in this category.

INCLUDE	DO NOT INCLUDE
<ul style="list-style-type: none"> <li>First treatment of anti-cancer drugs given IV, intravesicular, intrathecal, subcutaneous, intramuscular (includes BCG's )</li> <li>Pamidronate when given as an anti-cancer Class II drug (e.g. breast, multiple myeloma)</li> </ul>	<ul style="list-style-type: none"> <li>Cancer patients receiving supportive drugs and procedures e.g. Zometa, hydration, transfusion therapy, symptom management drugs.</li> </ul>

### Ambulatory Care Visits

Cancer patient visits to the CON Unit that includes a medical assessment by the Specialist/GPO.

INCLUDE	DO NOT INCLUDE
<ul style="list-style-type: none"> <li>Specialist/GPO assessment for cancer patients on active treatment and follow up of same</li> <li>Specialist/GPO assessment of patient in an inpatient setting if on an active chemotherapy protocol and visit is for pre-treatment assessment</li> </ul>	<ul style="list-style-type: none"> <li>Nursing assessment or symptom management (e.g., transfusions, dressing changes, hydration, etc)</li> <li>Patient no longer on active treatment and has become palliative</li> <li>Telehealth visit with a nurse present</li> <li>BCCA physician assessment by videoconferencing ( this will be counted as an ambulatory visit at the site of the physician)</li> <li>Nursing or physician phone calls, emails, or informal consults</li> <li>Nursing visits for care planning of patients in an inpatient setting</li> </ul>

### **Clarification**

If patient is seen by the Specialist/GPO for a medical assessment and then has treatment on the **same day**, this is counted as one ambulatory visit and one (1<sup>st</sup> or subsequent) parenteral treatment.