



A MULTIDISCIPLINARY
PROGRAM OF THE
AMERICAN COLLEGE OF SURGEONS



>ACS Home

National Cancer Data Base (NCDB)



Cancer Program Practice Profile Reports (CP³R) for Colon Cancers Diagnosed 2004 - 2006



Rice Memorial Hospital, Willmar, MN

FACILITY SELECTION

ALL MEASURES SUMMARY

THIS MEASURE SUMMARY

At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer. [12RLN]	Diagnosis Year: 2006 (Last Update: Aug 21, 2009)		
	Perf. Rate	95% CI	Cases
My Facility	79.2 %	(63 - 95.4)	24
My State (MN)	76.7 %	(73.4 - 80)	643
My ACS Division (Mid-West)	72 %	(69.9 - 74.1)	1734
My Census Region (Midwest)	69.2 %	(67.5 - 70.9)	2740
My CoC Program Type (CHCP)	59.2 %	(58.1 - 60.3)	7222
All CoC Approved Programs (ALL)	68 %	(67.5 - 68.5)	36080

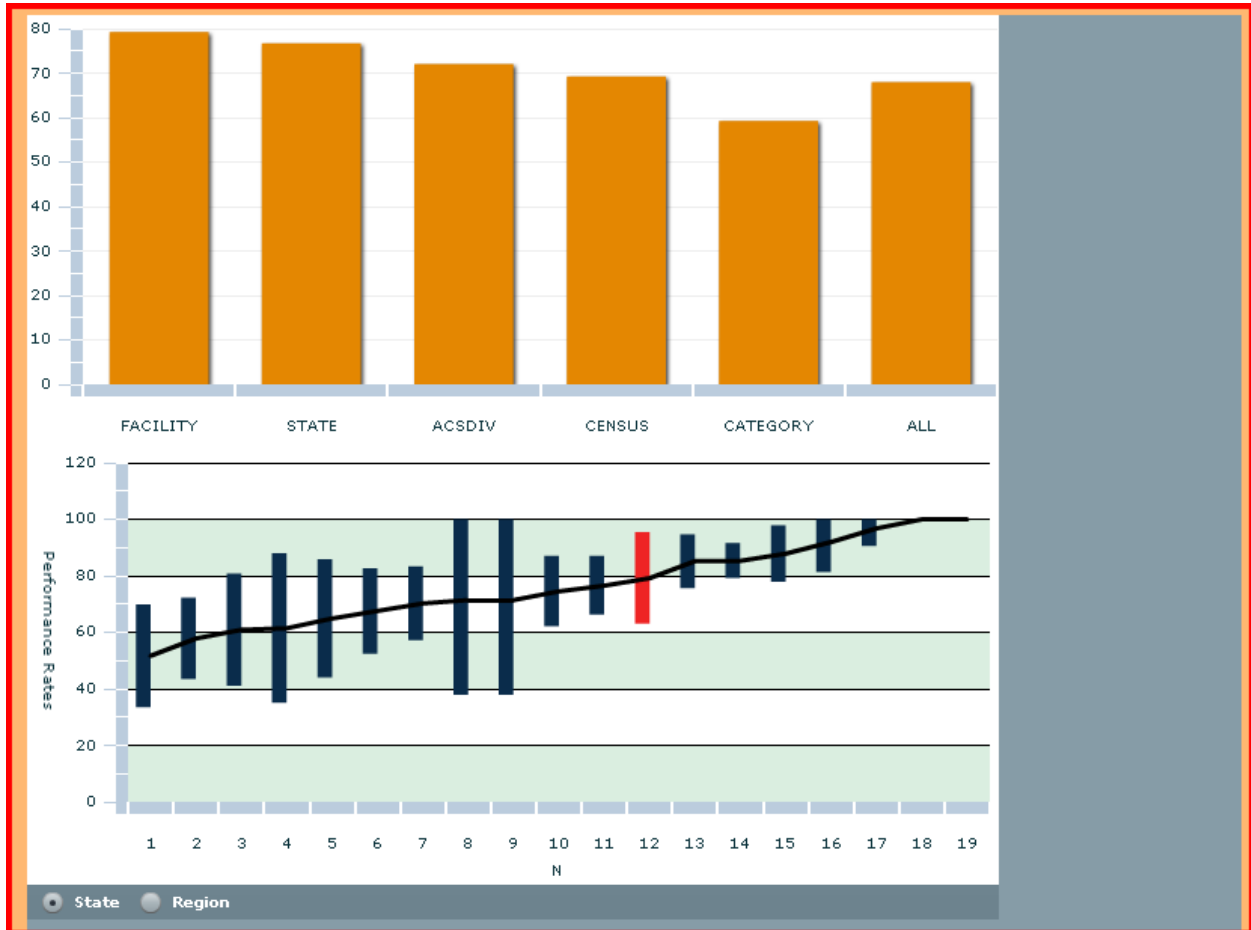
Interpreting this table: The estimated performance rates shown in this table provides your cancer program with an indication of the proportion of patients undergoing colon resection that had an adequate lymph node examination. These rates are computed based on data directly reported from your registry to the NCDB using specifications endorsed by the NQF. Comparison groups include other CoC-approved cancer programs that are classified with the same approvals category (community cancer program, comprehensive community cancer program, or teaching/research center), and by geographic location (state, US census region, or nationally). Rates are computed based on data directly reported from CoC approved cancer program registries to the NCDB. The performance rates, 95% confidence intervals around those rates, and the number of cases included in the denominator are updated nightly for each comparison group.

The vertical bar chart is simply a graphical representation of the rates reported in the preceding table.

The Hi-Low chart illustrates a cancer program's relative position, when compared to other programs located in the same state. The x-axis of the chart represents each of the cancer programs. Your cancer program will be displayed as a red vertical bar. The y-axis represents the proportion of cases with at least 12 regional lymph nodes pathologically examined. Cancer programs are displayed in ascending order from left to right; the programs with the lowest proportion of patients having at least 12 nodes examined on the left, and the highest proportion of patients with at least 12 RLN examined on the right.

2006 Performance Rate Comparisons Rice Memorial Hospital, Willmar, MN

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FACILITY SELECTION	ALL MEASURES SUMMARY	THIS MEASURE SUMMARY	
Adjuvant chemotherapy is considered or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer. [ACT]		Diagnosis Year: 2006 (Last Update: Aug 21, 2009)	
		Perf. Rate	95% CI
My Facility	100 %	(100 - 100)	4
My State (MN)	90 %	(85.6 - 94.4)	180
My ACS Division (Mid-West)	93.6 %	(91.3 - 95.9)	424
My Census Region (Midwest)	90.1 %	(87.9 - 92.3)	720
My CoC Program Type (CHCP)	81.3 %	(79.6 - 83)	1949
All CoC Approved Programs (ALL)	83 %	(82.3 - 83.7)	10525

Interpreting this table: The estimated performance rates shown in this table provides your cancer program with an indication of the proportion of colon cancer patients under 80 with Stage III disease receiving or considered for adjuvant chemotherapy, according to recognized standards of care. These rates are computed based on data directly reported from your registry to the NCDB using specifications endorsed by the NQF. Comparison groups include other CoC-approved cancer programs that are classified with the same approvals category (community cancer program, comprehensive community cancer program, or teaching/research center), and by geographical location (state, US census region, or nationally). Rates are computed based on data directly reported from CoC approved cancer program registries to the NCDB. The performance rates, 95% confidence intervals around those rates, and the number of cases included in the denominator are updated nightly for each comparison group.

The vertical bar chart is simply a graphical representation of the rates reported in the preceding table.

The Hi-Low chart illustrates a cancer program's relative position, when compared to other programs located in the same state. The x-axis of the chart represents each of the cancer programs. Your cancer program will be displayed as a red vertical bar. The y-axis represents the proportion of cases receiving adjuvant chemotherapy. Cancer programs are displayed in ascending order from left to right; the programs with the lowest proportion of patients receiving chemotherapy on the left, and the highest proportion of patients being administered or considered for chemotherapy on the right.

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