

The National Prostate Cancer Register (NPCR)

All fields are mandatory

Hospital, clinic

Date of reporting
Year Month Day

WORK UP AND TREATMENT

Personal identity number

Name

Send to:
Regional Cancer Center

Clinic where prostate cancer was diagnosed (if different than treating clinic)

Has the patient been assigned a clinical nurse specialist? No Yes Not applicable

Imaging investigations

Prostate No Yes **MRI** No Yes
If performed - specify the resulting T-stage T1 T2 T2/T3 T3-T4 TX

Pelvic lymph nodes No Yes **CT** No Yes **PET-CT** No Yes **MRI** No Yes
If performed - specify the resulting N-stage N0 N1 NX

Bone No Yes **Bone scan** No Yes **CT** No Yes **PET-CT** No Yes **MRI** No Yes
Plain x-ray No Yes
If performed - specify the resulting M-stage M0 M1

Extended investigation/ assessment

Re-biopsy performed before treatment decision No Yes

Assessment and information by more than one physician before treatment decision No Yes **If yes specify**

Two urologists at the same clinic Urologists at different clinics Urologist and oncologist Urologist and oncologist at joint meeting
 Other specialist

Multidisciplinary team meeting No Yes

Lymph node dissection No Yes (Tick no, if no note of lymph node dissection in patient record)

If performed - specify resulting pN-stage pN0 pN1 Missing
Number of microscopically examined lymph nodes Missing Number of lymph nodes with cancer Missing

Patient participating in clinical trial No Yes Name of study _____

Treatment specify chosen strategy below

Conservative therapy (deferred treatment, no active primary treatment planned, leave date for treatment decision blank)

Curative treatment Prolonged wait due to patient's choice

Date for treatment decision Year Month Day

Non-curative therapy, hormonal therapy or symptoms relief (Enter date for treatment decision)

Deceased before treatment decision (leave date for treatment decision blank)

No treatment decision within 12 months following diagnosis (leave the rest blank)

Conservative therapy

Active surveillance (no initial active treatment, curative treatment if progressing)

Watchful waiting (non-curative therapy if progressing)

Strategy for conservative therapy missing

Curative treatment

Hospital/clinic and date of referral only to be reported if prostatectomy at another clinic than reporting clinic

Radical prostatectomy

Hospital /clinic _____

Date of referral Year Month Day

Referral for radiotherapy treatment decision to:

Hospital /clinic _____

Date of referral Year Month Day

Cystoprostatectomy

Other curative treatment, specify _____

Non-curative therapy, hormonal therapy or symptoms relief (multiple options can be selected)

Orchiectomy No Yes Missing

GnRH-analogue or GnRH-antagonist No Yes Missing

Antiandrogens No Yes Limited period (≤ 1 month) Continuous Missing

Other hormonal therapy No Yes Missing

Bisphosphonates No Yes Missing

Other non-curative therapy No Yes Missing

WORK UP AND TREATMENT. For detailed instructions, see manual, Cancercentrum.se / INCA /

Data should be reported as soon as a treatment decision has been made.

Patient referred to another hospital/clinic for additional investigation/treatment Report name of hospital/clinic

Clinical nurse specialist name and phone number should have been given to the patient

Imaging - prostate MRI. When performed report the resulting T-stage.

T1 No tumour visible on image.

T2 Tumour confined to the prostate.

T2/T3 Tumour spread not possible to assess

T3-T4 Growing outside the capsule, into the seminal vesicles, bladder neck, pelvic wall, pelvis, or rectum.

TX Tumour presence not possible to assess.

Imaging – pelvic lymph nodes CT, PET-CT or MRI. When performed report the resulting N-stage. Report suspected changes as N1

N0 No signs of regional lymph node metastasis.

N1 Signs of regional lymph node metastasis.

NX Not possible to assess.

Imaging - bone Refers to occurrence of metastases on bone scan, CT, PET-CT or MRI. When performed report M-stage. Report suspected changes as M1.

M0 No signs of distant metastasis.

M1 Signs of distant metastasis.

Re-biopsy before treatment decision

Additional biopsy session/-s after the first diagnostic biopsy showing cancer before treatment decision. If a re-biopsy within 6 months from diagnosis changes the treatment decision from active surveillance to prostatectomy or radiotherapy, the curative treatment decision should be reported to NPCR.

Information and assessment by more than one physician before treatment decision.

If the patient has met more than one physician to get information about different treatment options - report which specialists the patient has met. Patients who have met a specialist in urology at one clinic (or private practice) and then been referred to another urology clinic are considered to have met two urologists.

Multidisciplinary team meeting

Patient case conferred at a multidisciplinary team meeting with at least a urologist and an oncologist present.

Lymph node dissection - lymphadenectomy

Regional and juxta-regional lymph nodes are surgically extirpated and histopathologically examined.

Mark No if no record of lymph node dissection is found in the patient record. When performed enter pN-stage.

pN0 No regional or juxta-regional lymph node metastases

pN1 Pelvic lymph node metastases (N1-N3)

Report number of lymph nodes that have been examined and number of lymph nodes with cancer according to histopathological examination

Participation in clinical trial

Refers only to studies concerning treatment/treatment outcome.

Date for treatment decision

Report the date for notification to surgery or date of referral to radiotherapy. When hormonal therapy is chosen report the date when the decision was made in consultation with patient. The date can be left empty when a cystoprostatectomy has been performed. If year and month are known but day for treatment decision is unknown report 15.

Active surveillance

Treatment alternative for localized prostate cancer with close monitoring of the PSA-level, possibly also re-biopsies. No initial treatment, if sign of progression curative treatment will be initialized.

Watchful waiting

Treatment option for localised or non-localised prostate cancer where palliative therapy is given at symptoms progression or PSA-progression alternatively where no treatment is given.

Radical prostatectomy- report the hospital/clinic where the prostatectomy will be performed and date for referral. Data from surgery should be reported on a separate form.

Radiotherapy treatment- only includes primary treatment, not adjuvant postoperative.

Non-curative therapy – progression prevention or palliative therapy

Antiandrogen (time-limited): Is given as flare-protection at the start of GnRH-analogue treatment

Antiandrogen (continuous): Mark when monotherapy with antiandrogen. Mark along with GnRH-analogue when total androgen blockade is given.

Treatment with 5-alpha -reductase inhibitors should not be reported.

Other non-curative therapy: Prophylactic irradiation of the mammary glands should not be registered.