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| Cancer Care Ontario |
| Midostaurin Manual Data Collection Data Dictionary |
| **High Cost Drug** |
| **8/30/2019** |

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# Version Control

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| --- | --- | --- | --- |
| Date | Description | TFS# | Owner |
| August 30, 2019 | Data Dictionary Drafted | n/a | Cassandra McKay |
|  |  |  |  |
|  |  |  |  |

# Data Elements for Midostaurin

| **#** | **Data Element** | **COLUMN\_NAME** | **Definition (Description)** | **Format** | **Valid values(Notes)** | **Applies to** | **Purpose and Use**  | **Mandatory** | **Business key (Uniqueness)** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1 | Number of AML patients with a FLT3+ mutation | Number\_AML\_FLT3+ | For each quarter, report on the unique number of AML patients (count) with a FLT3+ mutation. If a patient overlaps quarters, report the patient in the quarter that the diagnosis is identified. | NUM(3) | Valid values: 0-999 | All | Health system planning, quality improvement and funding. | Yes | No |
| 2 | Fiscal Quarter | Fiscal\_Quarter | Fiscal Quarter which the treatment takes place in. | NUM (1) | Valid values: 1-4 | All | Health system planning, quality improvement and funding. | Yes | Yes |
| 3 | Facility Number | Facility\_Number | Submitting facility number | CHAR(3) | Valid Ontario facility number as per MOHLTC classification Valid values listed in Appendix-1 | All | Planning, quality improvement and funding. | Yes | Yes |
| 4 | Patient Identifier | Patient\_Identifier | Patient should be assigned a non-identifiable designation that is unique to that patient (i.e. 001, 002, 003). Please do not include PHI. If patient receives, treatment in more than one quarter, the same patient identifier that is originally assigned should be used. | Unique designation of the submitting facilities choice.  | Unique designation of the submitting facilities choice. Please do not include PHI.  | All | Planning, quality improvement and funding. | Yes | Yes |
| 5 | Total Dose of Administered | Total\_Dose\_Administered | Total dose administered during the reporting period in milligrams.  | NUM(5) | Valid values: 00001-99999 | All | Funding and health system planning.  | Yes | Yes |
| 6 | Treatment Type | Treatment\_type | Indicate the type of treatment the patient was undergoing at the time that midostaurin was taken. | Drop down options:* Induction
* Inpatient Consolidation
 | Must be valid drop down option. | All | Funding and health system planning. | Yes | Yes |

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# Quality Assurance Checks

The QA checks are grouped by number as follows:

100’s - **File level checks**

200’s - **File format errors**: Entire record is rejected.
300’s - **Rejected content errors**: Entire record is rejected.
400’s - **Non-rejected content errors**: Entire record is retained, including erroneous field.
500’s - **Apparent duplicate record warnings**: These are not necessarily errors, but could be.

## Validations: File Level Validations (Level 100)

The following rules will be applied and checked against every file submitted for SSO program.

| **#** | **Type** | **Condition** | **Error Message** | **Reject** |
| --- | --- | --- | --- | --- |
| 101 | Invalid Header | Header list in excel file is incorrect | File Error- Header list is incorrect. | Yes |
| 102 | Incorrect number of columns | Record in file has incorrect number of data elements | File Error- Record has incorrect number of data elements. | Yes |
| 103 | File name mask | File name does not follow the convention for file name mask: **ALMido\_nnn\_ffff\_ffffQx.xlsx**Where:ALMido: a fixed string indicating the program data needed (Acute Leukemia Midostaurin)nnn: the three-digit code of the submitting site (e.g. 567)ffff \_ffff: the two calendar years that make up the fiscal year separated by an underscore character (e.g. 2019\_2020)Q: a fixed character for Quarterx: the quarter within the fiscal, which is always an integer number between 1 and 4 (e.g. 3).xlsx: a fixed string indicating that the file includes comma-separated values.**Example**: ALMido\_567\_2015\_2016Q3.xlsx***Note****: This validation should be non-case-sensitive so that, for example, the string "AA" can also be sent as "aa".* | File Error - File is incorrectly named. | Yes |
| 104 | Empty | File is empty ***Note****: files with only one row (i.e. the header row is present and not patient level data) are considered valid. This error applies only when there is no such header.* | File Error - invalid number of data columns in “&file\_name” file. | Yes |
| 105 | No Data | File includes only one line, and that line is a valid header line.***Note****: This is a valid submission if there were no procedures in the reported quarter, so we issue a warning just to make sure.* | Warning - No data submitted. If there are data records, please resubmit. | No |

## Validations: File Format Errors (Level 200)

| **Number** | **Entity** | **Data Element** | **Condition** | **Error Message** | **Reject** |
| --- | --- | --- | --- | --- | --- |
| 201 | All | All Fields | Data field is too long | Invalid field length | Yes |

## Validations: Content Errors, Record Rejected (Level 300)

| **Number** | **Element #** | **Data Element** | **Column\_Name** | **Condition** | **Error Message** | **Reject** |
| --- | --- | --- | --- | --- | --- | --- |
| 300 | 1 | Number of AML patients with a FLT3+ mutation | Number\_AML\_FLT3+ | Is Null | Invalid - Null Value | Yes |
| 301 | 1 | Number of AML patients with a FLT3+ mutation | Number\_AML\_FLT3+ | Is not a valid number | Invalid Value | Yes |
| 302 | 2 | Fiscal Quarter | Fiscal\_Quarter | Is Null | Invalid - Null Value | Yes |
| 303 | 2 | Fiscal Quarter | Fiscal\_Quarter | Is not a valid value | Invalid Value | Yes |
| 304 | 3 | Facility Number | Facility\_Number | Is Null | Invalid - Null Value | Yes |
| 305 | 3 | Facility Number | Facility\_Number | Does not match any legal entry in **Appendix-1.** Ignore if Null | Invalid Hospital Number - consult lookup table in template. | Yes |
| 306 | 4 | Patient Identifier | Patient\_Identifier | Is Null | Invalid - Null Value | Yes |
| 307 | 5 | Total Dose of Administered | Total\_Dose\_Administered | Is null | Invalid – Null Value | Yes |
| 308 | 5 | Total Dose of Administered | Total\_Dose\_Administered | Is not a valid value (00001-99999) | Invalid – Value for total dose administered. Must be within 0001 and 9999 in milligrams. | Yes |
| 309 | 6 | Treatment Type | Treatment\_type | Is Nule | Invalid - Null Value | Yes |
|  | 6 | Treatment Type | Treatment\_type | Is not a valid value | Is not a valid value from dropdown options | Yes |

# Data Submission Timelines

In 2019/20, Q1, Q2 and Q3 2019/20 data submissions will take place during the Q3 submission window (and optional data resubmission window). Subsequent fiscal quarters and fiscal years will follow the submission timelines included below:

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| --- |
| **Aplastic Anemia Manual Data Collection Submission Timelines**  |
| **Fiscal Quarter** | **Corresponding Time Frame** | **Submission Window** | **Data Resubmission Window Open (Optional)** |
| Q1  | April 1 – June 30 | July 24 - 30 | August 22 – 30  |
| Q2 | July 1 – September 30 | October 24 – 30 | November 22 – 30  |
| Q3  | October 1 – December 31 | January 24 – 30  | February 22 – 30  |
| Q4 | January 1 – March 31 | April 24 – 30 | May 22 – 30 |

# Appendix 1: Facility Numbers

|  |  |  |
| --- | --- | --- |
| **Provider** | **Submitting Site** | **Facility Number** |
| Transplant & Acute Leukemia Service Site | London Health Sciences Centre | 936 |
| Hamilton Health Sciences Centre | 942 |
| University Health Network – Princess Margaret Cancer Centre | 947 |
| Kingston Health Sciences Centre | 978 |
| The Ottawa Hospital | 958 |
| Health Sciences North | 959 |
| Acute Leukemia Service Site | Windsor Regional Hospital | 933 |
| Grand River Hospital | 930 |
| Thunder Bay Regional Health Sciences Centre | 935 |
| Sunnybrook Health Sciences Centre | 953 |

# Appendix 2: MOHLTC Master Numbering System[[1]](#footnote-1)

The Master Numbering System has been developed for the purpose of bringing together all Health Facilities and Programs under one system of identification. The list is a composite of health and health related units, facilities, clinics, programs and services. Each such organization has been assigned a unique four digit identifying code. (For details, please refer Cancer Care Ontario's Data Book, Appendix A: MOHLTC Master Numbering System, at link <https://www.cancercareontario.ca/en/data-book-reporting-standards>).

1. [↑](#footnote-ref-1)