

Cervical Cancer Screening (NQF 0032)

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| EMeasure Name | Cervical Cancer Screening | EMeasure Id | Pending |
| Version Number | 1 | Set Id | Pending |
| Available Date | No information | Measurement Period | January 1, 20xx through December 31, 20xx |
| Measure Steward | National Committee for Quality Assurance | | |
| Endorsed by | National Quality Forum | | |
| Description | The percentage of women 21-64 years of age who received one or more Pap tests to screen for cervical cancer. | | |
| Measure scoring | Proportion | | |
| Measure type | Process | | |
| Rationale | <p>This measure assesses the percentage of women in a specific age demographic who receive appropriate screening for cervical cancer. The American Cancer Society predicted that in 2009, nearly 11,270 women would be newly diagnosed with cervical cancer and 4,070 women would die of cervical cancer. The financial burden is also noteworthy: treatment for cervical cancer cost about \$2 billion in 2004 (CDC). The American Cancer Society reported that screening can save lives, stating that the overall five-year survival rate for cervical cancer is nearly 71%, with a survival rate of 92% for detection in the earliest stage (2010). This evidence is corroborated by the fact that from 1955–1992, the mortality rate from cervical cancer declined by 74% because of screening. This measure facilitates efforts toward early detection of cervical cancer and acceleration of treatment upon diagnosis.</p> | | |
| Clinical Recommendation Statement | <p>American Cancer Society (ACS, Nov 2002): Test approximately 3 years after onset of vaginal intercourse, but no later than age 21; intervals annually, every 2-3 years for women ≥ 30 with 3 negative cytology tests.</p> <p>U. S. Preventive Services Task Force (USPSTF, Jan 2003): Test within 3 years of onset of sexual activity or age 21, whichever comes first; intervals of at least every 3 years.</p> <p>American College of Obstetricians and Gynecologists (ACOG, Aug 2003): Approximately 3 years after onset of sexual intercourse, but no later than age 21; annually, every 2-3 years for women ≥ 30 with 3 negative cytology tests.</p> | | |
| References | <p>USPSTF. <i>Screening for Cervical Cancer</i>. Jan 2003. Available at: http://www.ahcpr.gov/clinic/uspstf/uspscerv.htm</p> <p>American Cancer Society. <i>Cancer Facts & Figures 2005</i>. Atlanta: American Cancer Society; 2005.</p> | | |
| Definitions | | | |

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Please refer to the spreadsheet for this measure for detail regarding data criteria and code lists.

Population criteria

- **Initial Patient Population =**
 - AND: "Patient characteristic: birth date" (age) ≥ 23 and ≤ 63 years to expect screening for patients within three years after reaching 21 years and then every three years until 64 years;
- **Denominator =**
 - AND: =1 count(s) of:
 - OR: "Encounter: encounter OB/GYN" ≤ 2 years before the "measurement end date";
 - OR: "Encounter: encounter outpatient" ≤ 2 years before the "measurement end date";
 - AND NOT: "Procedure performed: hysterectomy";
- **Numerator =**
 - AND: "Laboratory test result: pap test" ≤ 3 years before the "measurement end date";
- **Exclusions =**
 - None;

Data criteria (QDS data elements)

- **Initial Patient Population =**
 - "Patient characteristic: birth date" using "birth date code list" before the "measurement period";
- **Denominator =**
 - All patients in the initial patient population;
 - "Encounter: encounter outpatient" using "encounter outpatient code list grouping" before or simultaneously to the "measurement end date";
 - "Encounter: encounter OB/GYN" using "encounter OB/GYN code list" before or simultaneously to the "measurement end date";
 - "Procedure performed: hysterectomy" using "hysterectomy code list grouping" before or simultaneously to the "measurement end date";
- **Numerator =**

- “Laboratory test result: pap test” using “pap test code list grouping” before the “measurement end date”;
- **Exclusions =**
 - None;

Summary calculation

Calculation is generic to all measures:

- Calculate the final denominator by adding all that meet denominator criteria.
- Subtract from the final denominator all that do not meet numerator criteria yet also meet exclusion criteria. Note some measures do not have exclusion criteria.
- The performance calculation is the number meeting numerator criteria divided by the final denominator.
- For measures with multiple patient populations, repeat this process for each patient population and report each result separately.
- For measures with multiple numerators, calculate each numerator separately within each population using the paired exclusion.

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| Measure set | CLINICAL QUALITY MEASURE SET 2011-2012 |
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