The Cancer Program Practice Profile Reports (CP₃R) provide retrospective and comparative information to assess adherence to and consideration of standard of care therapies for major cancers. The aim is to empower clinicians, administrators and other staff to work cooperatively and collaboratively to identify problems in practice and deliver and to implement best practices which will diminish disparities in care across CoC accredited cancer programs.

Current estimated performance rates are included for breast, colon and rectum cases diagnosed 2004-2010. This application allows programs to first assess longitudinal annual reported compliance, to assess and update specific case compliance and to compare reported compliance to other CoC accredited cancer programs.

### Reported Performance Measures

- Radiation therapy is administered within one year (365 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer.
- Combination chemotherapy is considered or administered within four months (120 days) of diagnosis for women under age 70 with AJCC T1cN0M0 or Stage II or III hormone receptor negative breast cancer.
- Tamoxifen or third generation aromatase inhibitor is considered or administered within one year (365 days) of diagnosis for women with AJCC T1cN0M0 or Stage II or III hormone receptor positive breast cancer.
- At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer.
- Adjuvant chemotherapy is considered or administered within four months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer.
- Radiation therapy is considered or administered within six months (180 days) of diagnosis for patients under the age of 80 with clinical or pathologic AJCC T4N0M0 or Stage III and who are receiving surgical resection for rectal cancer.
How to interpret longitudinal estimated performance rates:

The first screen in the CP³R application shows reported compliance to the included measures from 2004-2010. This information can be assessed for changes in reported compliance over time.

NOTE: Programs may observe lower than expected compliance rates when data is initially uploaded in the CP³R application, as in the figure above. This may signify that data validation is required to ensure complete adjuvant therapy information is documented. Individual case review may be initiated by clicking on the associated measure abbreviation under the right column ‘Case Review.’

Running the Report:

Comparisons of reported compliance may be generated by:

- Clicking on the reported compliance for a specific measure and diagnosis year of interest.