

## Cancer Stage Documented

### Physician Quality Reporting System Data Collection Sheet

Patient's Name	Practice Medical Record Number (MRN)	Birth Date (mm/dd/yyyy) / /	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
National Provider Identifier (NPI)		Date of Service	

Clinical Information			Billing Information
<b>Step 1 Is patient eligible for this measure?</b>			
	<b>Yes</b>	<b>No</b>	<b>Code Required on Claim Form</b>
Any patient regardless of age.	<input type="checkbox"/>	<input type="checkbox"/>	Verify date of birth on claim form.
Patient has a diagnosis of breast, colon, or rectal cancer.	<input type="checkbox"/>	<input type="checkbox"/>	Refer to coding specifications document for list of applicable codes. Codes determining a patient's eligibility must be reported on the same claim as the quality code(s) identified below.
There is a CPT Code for this visit.	<input type="checkbox"/>	<input type="checkbox"/>	
If <b>No</b> is checked for any of the above, STOP. Do not report a CPT category II code.			
<b>Step 2 Does patient meet or have an acceptable reason for not meeting the measure?</b>			
<b>AJCC Cancer Stage<sup>1</sup> OR Metastatic Cancer</b>	<b>Yes</b>	<b>No</b>	<b>Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)</b>
AJCC Cancer Stage <sup>1</sup> Documented	<input type="checkbox"/>	<input type="checkbox"/>	3300F
Cancer documented as metastatic	<input type="checkbox"/>	<input type="checkbox"/>	3301F
			If <b>No</b> is checked for <b>all</b> of the above, report 3301F-8P (Cancer stage not documented, reason not otherwise specified.)

<sup>1</sup>Cancer stage refers to stage at diagnosis