### Measure Description
- Percentage of surgical pathology reports for biopsies or radical resections of primary prostate cancer that include histologic type, Gleason patterns used in determining the Gleason score, total Gleason score, and grade group classification.

### Denominator Statement
- Surgical pathology reports for prostate biopsies and radical resections for carcinoma of the prostate.
  - CPT: 88305 (Prostate—Needle biopsy)
  - 88309 (Prostate – Radical resection)
  - OR
  - HCPCS: G0416 (Surgical pathology, gross and microscopic examination, for prostate needle biopsy, any method)
  - AND
  - ICD10: C61 Malignant neoplasm of prostate

### Denominator Exclusions
- Transurethral resection of the prostate (TURP)

### Denominator Exceptions
- Documentation of medical reason(s) for not including required data elements. For example:
  - Specimen contains metastatic carcinoma (not a primary neoplasm)
  - Specimen has documented neoadjuvant hormone therapy/treatment effects that hinder histologic assessments
  - Resection specimen has no residual cancer

### Numerator Statement
- Surgical pathology reports for biopsies and radical resections of carcinoma of the prostate that include:
  - Gleason patterns used in determining the Gleason score (primary and secondary if applicable)
  - Total Gleason score (2-10)
  - Grade group classification (1-5)

### Numerator Exclusions
- None

### Measure Information

#### NQS Domain
- Communication and Care Coordination

#### Meaningful Measures Area(s)
- Transfer of Health Information and Interoperability

#### Meaningful Measure Rationale
- The 9 Gleason scores (2-10) have been variably lumped into different groups for prognosis and patient management purposes. Epstein and associates...
proposed grouping scores into 5 prognostic categories, grade groups 1-5. (1) This grade grouping strongly correlates with biochemical recurrence and have been incorporated into the new Partin tables. (1-3) At the 2014 ISUP Consensus Conference, details of this prognostic system were clarified, and it was recommended for usage together with the Gleason system. (4) This grade grouping has also been subsequently validated by other independent studies in surgical and radiation cohorts show significant correlation with survival. (5-7) The new grade grouping has been endorsed in the 2016 WHO classification and updated in 2019 by the ISUP. (8-9) The grade grouping has also been endorsed by ISUP and is referred to as ISUP grade in some publications. Like Gleason scoring in needle biopsies, the grade group can be applied at core, specimen, or case levels.

<table>
<thead>
<tr>
<th>Measure Type</th>
<th>Process</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Source</td>
<td>Laboratory Information Systems; pathology reports</td>
</tr>
<tr>
<td>Summary of Performance Gap Evidence</td>
<td>Recent updates to the Gleason grading system (1) have provided pathologists with a structured system to describe individual architectural patterns of prostate cancer (2). However, “notable interobserver variation among pathologists” remains (2). It is therefore recommended that in addition to Gleason grade, full score and pattern are recorded for every patient. However, studies suggest “differences in Gleason grading by pathologists practicing in different facility categories and variations in their promptness of adopting International Society of Urological Pathology recommendations.” (3). Furthermore, studies show that continuing use of terms such as “tertiary grade pattern” instead of summing together the most common and highest grade patterns introduces confusion (4-5). It is therefore all the more important for pathologists to discretely report Gleason pattern, score, and grade group classification.</td>
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</tbody>
</table>

| Measure Owner | College of American Pathologists |
| NQF ID | N/A |
| Number of Performance Rates | 1 |
| Overall Performance Rate | 1st Performance Rate |
### CAP QCDR Measure
Prostate Cancer Gleason Pattern, Score and Grade Group

<table>
<thead>
<tr>
<th>High-priority</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improvement Notation</td>
<td>Higher is better</td>
</tr>
<tr>
<td>Care Setting and Specialty</td>
<td>Care Setting: Other—Laboratories; Telehealth not applicable. Specialty: Pathology</td>
</tr>
</tbody>
</table>
Measure Flow

Denominator

Start: 100 cases

Not in Eligible Population/Denominator

Procedure as listed in denominator (CPT 88305, 88309, HCPCS G0416): 100 cases

Pathology report includes Gleason pattern, score and grade group

Diagnosis as listed in denominator: ICD-10 C61

Transurethral resection of the prostate (TURP): 10 cases (a)

Eligible Population/Denominator: 90 cases (x)

Numerator

Pathology report includes Gleason pattern, score and grade group

Documentation of medical reason for not including required data elements

Pathology report does not include Gleason pattern, score and grade group, reason not given

Numerator/Performance Met: 60 cases (b)

Denominator Exception: 10 cases (c)

Performance Not Met: 10 cases (d)

Data Completeness:
Denominator Exceptions (c)+Met (b)+ Not Met (d) = 10+60+10
Eligible Population (x) = 90

Performance Rate:
\[
\text{Met (b)} = \frac{60}{90} = 0.6667
\]

Data Completeness Numerator – Denominator Exceptions (c) = 80