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BUILD UP A DEDICATED TEAM TO CONTRIBUTE TO THE IASLC STAGING PROJECT: EXPERIENCES FROM LIAONING CANCER HOSPITAL & INSTITUTE

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Abstract

We will introduce our experiences on how to build up a team to contribute to the IASLC staging project. First, we introduce the outline of our work. We started submitted application in December, 2017. We entered the first case to IASLC database on January 4th, 2018. We entered 100 cases on May 24th 2018, and 500 cases on June 9th 2019. 1270 cases have been submitted until now. Second, we have built up a team which consist of more than 18 members for the database. Standard postoperative surveillance is critical for building up a team for IASLC staging project. Our team leader assigned a nurse specially for follow-up. We also learned a lot from the database. We noticed that nodal extracapsular involvement was vital for the staging of the tumor which was often ignored by surgeons and pathologists. We recommended our pathologists to give more information about nodal extracapsular involvement which is important for patient's diagnosis and therapy. In addition, we have advocations and questions for the database. We recommend to add MVV and DLCO for pulmonary function test and delete X-ray and add the option of PET/CT for Pre-treatment/Evaluative N Category Method of measurement. We recommend to add the station and size of largest suspected metastatic lymph node. In Pre-Treatment TNM Test part, please add ultrasound examination of abdomen if possible. If one patient received two primary lung cancer operations, we could not add the information of the second operation. Please delete #3aL, and make prevascular#3a only. Should we add the information of possibly metastatic intrapulmonary nodes in different lobe from the primary tumor? (e.g. A patient was diagnosed with lung cancer in the right lower lobe, but there were suspected metastatic intrapulmonary lymph nodes in the right upper lobe.) In summary, it is great honor for our team to participate in the IASLC staging project and we learn a lot from the database. We would like to make our best to keep contributing to IASLC database.