

Hewitt M, Simone JV, eds. *Ensuring Quality Cancer Care*. National Cancer Policy Board, Institute of Medicine and National Research Council. Washington, DC: National Academies Press; 1999.

Ensuring quality cancer care offers wide-ranging data and information in clear context. As the baby-boomers approach the years when most cancer occurs, this volume will be of special interest to health policy makers, public and private health care purchasers, medical professionals, patient advocates, researchers, and individuals with cancer.

Gordon DB, Dahl JL, Miaskowski C, et al. **American Pain Society recommendations for improving the quality of acute and cancer pain management: American Pain Society Quality of Care Task Force.** *Arch Intern Med*. 2005;165(14):1574-1580.

Guidelines for acute and cancer pain management in different care settings are clearly outlined.

Neuss MN, Desch CE, McNiff KK, et al. **A process for measuring the quality of cancer care: the Quality Oncology Practice Initiative.** *J Clin Oncol*. 2005;23(25): 6233-6239.

Pilot results indicate that the Quality Oncology Practice Initiative process provides a rapid and objective measurement of practice quality that allows comparisons among practices and over time. It also provides a mechanism for measuring concordance with published guidelines. Most importantly, it provides a tool for practice self-examination that can promote excellence in cancer care.

Malin JL, Schneider EC, Epstein AM, et al. **Results of the National Initiative for Cancer Care Quality: how can we improve the quality of cancer care in the United States?** *J Clin Oncol*. 2006;24(4):626-634.

Initial management of patients with breast and colorectal cancer in the United States seemed consistent with evidence-based practice; however, substantial variation in adherence to some quality measures points to significant opportunities for improvement.

Desch CE, McNiff KK, Schneider EC, et al. **American Society of Clinical Oncology/National Comprehensive Cancer Network Quality Measures.** *J Clin Oncol*. 2008;26(21):3631-3637.

The American Society of Clinical Oncology/National Comprehensive Cancer Network measures can be implemented by health systems, provider groups, or payors for improvement or accountability using local tumor registries to provide data on staging and treatment.

Earle CC, Landrum MB, Souza JM, et al. **Aggressiveness of cancer care near the end of life: is it a quality-of-care issue?** *J Clin Oncol*. 2008;26(23): 3860-3866.

This article reviews the literature and updates analyses pertaining to the aggressiveness of cancer care near the end of life. The authors discuss trends and factors responsible for chemotherapy overuse in patients very near death and the underutilization of hospice services. Whether the concept of overly aggressive treatment represents a quality-of-care issue that is acceptable to all involved stakeholders is an open question.

Hassett MJ, Hughes ME, Niland JC, et al. **Selecting high priority quality measures for breast cancer quality improvement.** *Med Care*. 2008;46(8):762-770.

This simple, explicit approach is a significant departure from methods used previously and effectively identifies breast cancer quality measures that have broad clinical relevance. Systematically prioritizing quality measures could increase the efficiency and efficacy of quality improvement efforts and substantially improve outcomes.

Spencer BA, Miller DC, Litwin MS, et al. **Variations in quality of care for men with early-stage prostate cancer.** *J Clin Oncol*. 2008;26(22):3735-3742.

The significant and unwarranted variations observed for these quality indicators by census division and hospital type illustrate the inconsistencies in prostate cancer care and represent potential targets for quality improvement. The lack of racial disparities suggests equity in care once a patient initiates treatment.

Blayney DW, McNiff K, Hanauer D, et al. **Implementation of the Quality Oncology Practice Initiative at a University Comprehensive Cancer Center.** *J Clin Oncol*. 2009;27(23):3802-3807.

Measuring and showing performance data to physicians was sufficient to change some aspects of physician behavior. Improvement in other measures requires structural practice changes. The Quality Oncology Practice Initiative, an oncologist-developed system, can be adapted for use in practice improvement at an academic medical center.

Raval MV, Bilimoria KY, Stewart AK, et al. **Using the NCDB for cancer care improvement: an introduction to available quality assessment tools.** *J Surg Oncol*. 2009;99(8):488-490.

This review describes how the National Cancer Database (NCDB) can be utilized to improve the quality of cancer care in the United States through a variety of benchmarking reports and data feedback mechanisms available to hospitals approved by the Commission on Cancer.