

National Ovarian Cancer Audit State of the Nation Report 2026: Methodology Supplement

An audit of care received by women diagnosed with ovarian cancer between 1 January 2023 and 31 December 2023 in England and 1 January 2024 and 31 December 2024 in Wales.

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The British Gynaecological Cancer Society (BGCS) is the professional home of health providers working and researching the area of gynaecological cancers. The BGCS members consist of medical practitioners, clinical nurse specialists and other allied professionals, including scientists who have an interest in gynaecological cancers. Registered Charity no: 290959.



This work uses data that has been provided by patients and collected by the NHS as part of their care and support. For patients diagnosed in England, the data is collated, maintained and quality assured by the National Disease Registration Service (NDRS), which is part of NHS England. Access to the data was facilitated by the NHS England Data Access Request Service.



NHS Wales recently implemented Cancer Dataset Forms with the latest implementation date being January 2025. These have been designed to improve the data capture and reporting capabilities of NHS Wales. This implementation has impacted the data quality within NHS Wales. NHS Wales has committed to continue to submit audit data annually until data submissions are sourced exclusively from the new cancer informatics solution. This will be from 2027 onwards that NHS Wales will be able to supply quarterly data using this new integrated, and more accessible digital platform.

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1. Introduction

This document provides supporting material to the 2026 State of the Nation (SotN) Report for the National Audit of Ovarian Cancer (NOCA) and its data tables and data viewer. The document describes the data used in the report with details on sources of data, criteria for inclusion and how data completeness, patient characteristics and performance indicators are derived and reported.

2. Sources of Data

The audit uses information from routine national health care datasets in England and Wales. These datasets capture details on the diagnosis, management, treatment and outcome of every patient newly diagnosed with cancer in the NHS in England and Wales.

For England, the audit received information from the National Disease Registration Service (NDRS) at a tumour level for this State of the Nation report. The information held in the NCRD is compiled from a variety of sources including the Cancer Outcomes and Services Dataset (COSD), Hospital Episode Statistics admitted patient care (HES APC) records, the Systemic Anti-Cancer Therapy dataset (SACT) and data submitted by pathology laboratories. The audit also received linked information from COSD (linked at tumour level), HES APC, HES Outpatients data (HES OP), SACT and RTDS (all linked at patient level). Appendix 1 provides more detail on the data sources listed below and the information they contain.

The English data received by the National Cancer Audit Collaborating Centre (NATCAN) included data on patients registered with cancer up to 31 December 2023.

As with cancer registries in other countries, cancer registrations in England can take up to 5 years after the end of a given calendar year to reach 100% completeness and stability. NDRS uses an active system of gathering information on cancer diagnoses from multiple sources across the patient pathway. Completeness varies by tumour type because different patient pathways provide different opportunities for data flows into NDRS. The 'Gold standard' cancer registration dataset that is used in cancer statistics bulletins and available for analysis outside of NDRS contains over 98% of all the people that will eventually be found by the registration process, and the completeness for a calendar year of data increases over time. More information about the cancer registration process can be found [here](#).

For Wales, the audit was provided with registration datasets at patient level for patients diagnosed with cancer in 2024. Welsh cancer registration data is captured through a national system, Cancer Information System for Wales (CaNISC) and the new Welsh Clinical Portal (CDF). The audit also received linked datasets of records from the Patient Episode Database for Wales (PEDW) containing information on inpatient and day case activity, and mortality data from the Office for National Statistics (ONS).

Preparation of patient-level datasets for England and Wales was managed separately and combined for analysis.

3. Inclusion and Exclusion Criteria

The data submitted by NDRS and WCN is checked and filtered for eligible participants, tables 3.1 and 3.2 explain the process in defining the final cohort to be used in the audit.

People were included for analysis within the SotN Report if they met the following inclusion and not the exclusion criteria:

Table 3.1: Audit Inclusion Criteria	
Inclusion Criteria	Details
Ovarian (including fallopian tube and primary peritoneal) cancer	ICD-10 codes C48 (Malignant neoplasm of retroperitoneum and peritoneum), C56 (Malignant neoplasm of ovary), C57 (Malignant neoplasm of other and unspecified female genital organs) or D39.1 (Neoplasm of uncertain or unknown behaviour of female genital organs - ovary).
Adults	Age >=18

Females	Gender recorded as female
Valid Diagnosis Date	1/1/2023 to 31/12/2023 (England) and 1/1/2024 to 31/12/2024 (Wales)
First ovarian cancer diagnosis	No earlier (since 1/1/2015) eligible ovarian tumour recorded in NCRD (England)
Eligible organisation	Diagnosed at an eligible NHS trust (England) or Health Board (Wales).

Table 3.2: Audit Exclusion Criteria

<u>Exclusion Criteria</u>	<u>Details</u>
Type of cancer	Sarcomas with ICD-10 code C48 (ICD-O-2 morphology 8693, 8800, 8801, 8802, 8803, 8804, 8805, 8806, 8963, 8990, 8991, 9040, 9041, 9042, 9043, 9044, 8810, 8811-8921, 9120-9373, 9490, 9500, 9530-9582) Borderline tumours as defined by the NDRS morphology lookup via https://nhsd-ndrs.shinyapps.io/get_data_out/
Reported by death certificate only	For English data: dco = Y (tumour registered from a death certificate only) For Welsh data: DiagnosisDate = DeathDate

4. Key Data Items

Details of the variables and datasets used to compile the data completeness are shown below in Table 4.1. If patients in Wales were included in both CaNISC and CDF the CDF data were used.

Table 4.1: Data Completeness Variables

<u>Data Item</u>	<u>Source</u>			
	England		Wales	
	<u>Data field</u>	<u>Dataset</u>	<u>Data field</u>	<u>Dataset</u>
Age at diagnosis	age	NCRD	AgeAtDiag AgeAtDiagnosis	CaNISC CDF
Ethnicity	ethnicity	NCRD	EthnicGroupCategory	PEDW
Stage at Diagnosis	stage_best	NCRD	StageOther; StageGroup. FIGOStageGroupIntegrated, FIGOStageGroupPathological, FIGOFinalPreTreatment	CaNISC CDF
Grade	grade	NCRD	GradeOfDifferentiationAtDiagnosis	CDF
Performance status	performancestatus	COSD	PerformanceStatus	CaNISC, CDF
Basis of diagnosis	basisofdiagnosis	NCRD	DiagnosisBasis PrimaryDiagnosisBasis	CaNISC CDF

Patients with the following ICD-O-2 morphology codes are excluded from the denominator for data completeness for grade because they are not usually graded: 8044, 8320, 8590, 8591, 8592, 8594, 8620, 8622, 8623, 8630, 8632, 8670, 8897, 9000, 9060, 9064, 9071, 9073, 9085, 9090, 9100.

Patients with no recorded grade and one of the following ICD-O-2 morphology codes are categorised as complete with an inferred grade: 8460, 8931 (low grade), 8249, 8631 (intermediate grade), 8020, 8021, 8033, 8041, 8045, 8120, 8310, 8313, 8461, 8490, 8634, 8805, 8891, 8950, 8951, 8980, 9120, 9364 (high grade).

Details of the variables and datasets used to compile the patient characteristics are shown below in Table 4.2.

Table 4.2: Patient Characteristics Variables				
Data Item	England		Wales	
	Data field	Dataset	Data field	Dataset
Age at diagnosis	See Table 4.1		See Table 4.1	
Index of multiple deprivation	<i>imd19_quintile_Isoas</i>	NCRD	<i>DeprivationQuintile</i>	PEDW
Performance status	See Table 4.1		See Table 4.1	Registration
Stage at Diagnosis	See Table 4.1		See Table 4.1	
Grade	See Table 4.1		See Table 4.1	
Morphology	Derived from <i>morph_icd10_o2</i> and <i>site_icd10_3char</i> using the NDRS morphology lookup	NCRD	Derived from <i>Histology</i> and <i>PrimarySite</i> using the NDRS morphology lookup Derived from <i>MorphologyDiagnosis</i> and <i>DiagnosisICD10Code</i> using the NDRS morphology lookup	CaNISC CDF

5. Indicator Definitions

The audit uses key indicators to monitor progress against its healthcare improvement goals. These indicators align with national guidelines and standards. Definitions of how the indicators included in the SotN report were derived from data for England and Wales are described below.

5.1 Performance Indicator 1: Emergency admission prior to diagnosis

This indicator measures the percentage of patients who had an emergency admission in the 4 weeks prior to their diagnosis.

Emergency admissions prior to diagnosis were derived by linking the date of diagnosis recorded in registration data with hospital admission records for England (HES) and Wales (PEDW).

Table 5.1: Patients who have an emergency admission in the 4 weeks prior to diagnosis		
	England	Wales
Dates of diagnosis:	1/1/2023 to 31/12/2023	1/1/2024 to 31/12/2024
Numerator:	Number of patients with an admission date (<i>admidate</i>) and an emergency admission (<i>admimeth</i>)	Number of patients with an admission category (<i>AdmissionMethodCategory</i>) coded "Emergency" and admission date

Number of patients with an emergency admission in the 28 days prior to diagnosis.	field with first character 2) recorded in a linked HES APC episode up to 28 days prior to the date of diagnosis (<i>diagnosisdatebest</i>) recorded in NCRD.	(<i>AdmissionDate</i>) recorded in a linked PEDW record up to 28 days prior to the date of diagnosis (<i>DiagnosisDate</i> in CaNISC, <i>DateOfPrimaryDiagnosis</i> in CDF) recorded in the registration extract.
Denominator: Number of patients diagnosed with ovarian cancer	Final cohort as described in patient inclusion / exclusion.	Final cohort as described in patient inclusion / exclusion.
Construction notes		
Country reporting:	England & Wales combined	
Organisational reporting level:	NHS trust	Health Board
Subgroup reporting:	No	No
Risk adjusted:	No	
Outlier reporting:	No	

5.2 Performance Indicator 2: Receipt of any treatment for women with an emergency admission prior to diagnosis

This indicator measures the percentage of patients with an emergency admission in the 4 weeks prior to their diagnosis who received any type of treatment (surgery and/or chemotherapy) within 1 month prior to 3 months following diagnosis.

Emergency admissions prior to diagnosis were derived by linking the date of diagnosis recorded in registration data with hospital admission records for England (HES) and Wales (PEDW).

Table 5.2: Patients who receive any type of treatment (surgery and/or chemotherapy) within 1 month prior to 3 months following diagnosis		
	England	Wales
Dates of diagnosis:	1/1/2023 to 31/12/2023	1/1/2024 to 31/12/2024
Numerator: Number of patients with a record of treatment (surgery and/or chemotherapy) in the period one month prior to three months after diagnosis.	<p>Number of patients with a record of an eligible OPCS code for surgery in the NCRD treatment table or HES APC and/or an eligible chemotherapy record in the NCRD treatment table, SACT or HES APC.</p> <p>Surgery (HES): any eligible OPCS code (appendix 2) appearing in <i>opertn_nn</i> with <i>opdate_nn</i> within -30 to +91* days of <i>diagnosisdatebest</i> in NCRD. <i>admidate</i> was substituted for a missing or invalid <i>opdate_nn</i></p> <p>Surgery (NCRD treatment table): any eligible OPCS code appearing in <i>opcs4_code</i> and <i>eventdate</i> within -30 to +91* days of <i>diagnosisdatebest</i> in NCRD.</p> <p>Chemotherapy (HES APC and OP):</p>	<p>Number of patients with a record of an eligible OPCS code for surgery in the registration extracts or PEDW and/or an eligible chemotherapy record in the registration extracts or PEDW.</p> <p>Surgery (PEDW): any eligible OPCS code appearing in <i>Operationnnn</i> with <i>OperationnnnDate</i> within -30 to +91* days of <i>DiagnosisDate</i> in the registration extracts.</p> <p>Surgery (CaNISC registration extract): any eligible OPCS code appearing in <i>SurgicalProcedures</i> with <i>SurgeryDate</i> within -30 to +91* days of <i>DiagnosisDate</i>. Surgery (CDF registration extract): any eligible OPCS code appearing in <i>PrimaryProcedureOPCS</i> or <i>PrimaryProcedureOPCSCode</i> with <i>DateSurgery</i> within -30 to +91*</p>

	<p>any eligible OPCS code (see Appendix 3) appearing in <i>opertn_nn</i> or eligible ICD10 code appearing in <i>diag_nn</i> with <i>epistart</i> within -30 to +91* days of <i>diagnosisdatebest</i> in NCRD.</p> <p>Chemotherapy (NCRD treatment table): any record including 'cytotoxic' in <i>eventdesc</i> with an <i>eventcode</i> 02, 02_15 or 02_21 and <i>eventdate</i> within -30 to +91* days of <i>diagnosisdatebest</i> in NCRD.</p> <p>Chemotherapy (SACT): any event with <i>start_date_of_regimen</i> within -30 to +91* days of <i>diagnosisdatebest</i> in NCRD. NCRD treatment tables are linked by tumour ID and the above was applied to additional tumours for patients with >1 tumour.</p>	<p>days of <i>PrimaryDiagnosisDate</i>.</p> <p>Chemotherapy (PEDW): any eligible OPCS code appearing in <i>Operationnnn</i> with <i>OperationnnnDate</i> within -30 to +91* days of <i>DiagnosisDate</i> in the registration extracts OR any eligible ICD10 code appearing in <i>Diagnosisnn</i> with <i>EpisodeStartDate</i> within -30 to +91* days of <i>DiagnosisDate</i> in the registration extracts.</p>
Denominator: Number of patients patients who had an emergency admission in the 28 days prior to diagnosis.	See numerator definition in Table 5.1.	See numerator definition in Table 5.1.
Construction notes		
Country reporting:	England & Wales Combined	
Organisational Reporting level:	Gynaecological Cancer System	Gynaecological Cancer System
Subgroup reporting:	No	No
Risk adjusted:	No	
Outlier reporting:	No	

* +273 days for indicators 3 to 6

5.3 Performance Indicator 3: Receipt of any treatment (surgery or chemotherapy)

This indicator measures the percentage of patients who received any type of treatment (surgery and/or chemotherapy) within 1 month prior to 9 months following diagnosis.

Table 5.3: Patients who receive any type of treatment (surgery and/or chemotherapy) within 1 month prior to 9 months following diagnosis		
	<u>England</u>	<u>Wales</u>
Dates of diagnosis:	1/1/2023 to 31/12/2023	1/1/2024 to 31/12/2024
Numerator: Number of patients with a record of treatment (surgery and/or chemotherapy) in the period one month prior to nine months after diagnosis.	See numerator definition in Table 5.2	See numerator definition Table 5.2
Denominator: Number of patients	Final cohort as described in patient inclusion / exclusion with additional exclusion of Stage at Diagnosis = 1 (see Table 4.2)	Final cohort as described in patient inclusion / exclusion with additional exclusion of Stage at Diagnosis = 1 (see Table 4.2).

patients diagnosed with stage 2-4 or unstaged ovarian cancer.		
Construction notes		
Country reporting:	England & Wales Combined	
Organisational Reporting level:	Gynaecological Cancer System	Gynaecological Cancer System
Subgroup reporting:	No	No
Risk adjusted:	No	
Outlier reporting:	No	

5.4 Performance Indicator 4: Receipt of surgery

This indicator measures the percentage of patients who received surgery within 1 month prior to 9 months following diagnosis.

Table 5.4: Patients who receive any type of treatment (surgery and/or chemotherapy) within 1 month prior to 9 months following diagnosis		
	<u>England</u>	<u>Wales</u>
Dates of diagnosis:	1/1/2023 to 31/12/2023	1/1/2024 to 31/12/2024
Numerator: Number of patients with a record of treatment (surgery and/or chemotherapy) in the period one month prior to nine months after diagnosis.	See numerator definition in Table 5.2 (surgery component only)	See numerator definition Table 5.2 (surgery component only)
Denominator: Number of patients diagnosed with stage 2-4 or unstaged ovarian cancer.	Final cohort as described in patient inclusion / exclusion with additional exclusion of Stage at Diagnosis = 1 (see Table 4.2)	Final cohort as described in patient inclusion / exclusion with additional exclusion of Stage at Diagnosis = 1 (see Table 4.2).
Construction notes		
Country reporting:	England & Wales Combined	
Organisational Reporting level:	Gynaecological Cancer System	Gynaecological Cancer System
Subgroup reporting:	No	No
Risk adjusted:	No	
Outlier reporting:	No	

5.5 Performance Indicator 5: Receipt of chemotherapy

This indicator measures the percentage of patients who received any type of treatment (surgery and/or chemotherapy) within 1 month prior to 9 months following diagnosis.

Table 5.5: Patients who receive any type of treatment (surgery and/or chemotherapy) within 1 month prior to 9 months following diagnosis		
	<u>England</u>	<u>Wales</u>
Dates of diagnosis:	1/1/2023 to 31/12/2023	1/1/2024 to 31/12/2024
Numerator: Number of patients with a record of chemotherapy	See numerator definition in Table 5.2 (chemotherapy component only)	See numerator definition Table 5.2 (chemotherapy ocomponent only)

treatment in the period one month prior to nine months after diagnosis.		
Denominator: Number of patients diagnosed with stage 2-4 or unstaged ovarian cancer.	Final cohort as described in patient inclusion / exclusion with additional exclusion of Stage at Diagnosis = 1 (see Table 4.2)	Final cohort as described in patient inclusion / exclusion with additional exclusion of Stage at Diagnosis = 1 (see Table 4.2).
Construction notes		
Country reporting:	England & Wales Combined	
Organisational Reporting level:	Gynaecological Cancer System	Gynaecological Cancer System
Subgroup reporting:	No	No
Risk adjusted:	No	
Outlier reporting:	No	

5.6 Performance Indicator 6: Receipt of platinum-based chemotherapy

This indicator measures the percentage of patients who received platinum-based chemotherapy within 1 month prior to 3 months following diagnosis.

Table 5.6: Patients who receive platinum-based chemotherapy within 1 month prior to 3 months following diagnosis

	<u>England</u>	<u>Wales</u>
Dates of diagnosis:	1/1/2023 to 31/12/2023	N/A
Numerator: Number of patients with a record of treatment (surgery and/or chemotherapy) in the period one month prior to nine months after diagnosis.	<p>The presence of any platinum-based chemotherapy record in SACT or Hospital Episode Statistics APC or OP within -1 month (up to 30 days before) and +3 months (up to 91 days after) <i>diagnosisdatebest</i> in NCRD.</p> <p>Chemotherapy (SACT): presence of an event reporting platinum-based chemotherapy regimen / drug (carboplatin, oxaliplatin, cisplatin) identified in variables <i>analysis_group</i> or <i>drug_group</i> linked by <i>patient_pseudo_id</i>.</p> <p>Chemotherapy (HES APC, HES OP): presence of any of the OPCS code combinations for platinum-based chemotherapy drug procurement and delivery (Appendix 3) as defined from National Tariff for Chemotherapy Regimens[2], in the <i>opcs4_code</i> linked by <i>patient_pseudo_id</i>.</p>	N/A
Denominator: Number of patients diagnosed with a stage 2-4 or unstaged malignant Epithelial ovarian cancer	Patients with a stage at diagnosis (<i>stage_best</i>) including 2, 3, 4 or any missing or unknown AND a malignant epithelial morphology, see Table 4.2.	N/A
Construction notes		N/A

Country reporting:	England only	
Organisational reporting level:	Gynaecological Cancer System	N/A
Subgroup reporting:	No	N/A
Risk adjusted:	No	
Outlier reporting:	No	

5.7 Performance Indicator 7a: One-year survival

This indicator measures the percentage of patients who survived for at least one year following their ovarian cancer diagnosis. It does not measure net survival.

Table 5.7: Patients who survive for one year following an ovarian cancer diagnosis		
	England	Wales
Dates of diagnosis:	1/1/2023 to 31/12/2023	1/1/2023 to 31/12/2023
Numerator: Number of patients without death recorded in the first year following diagnosis.	Survival (NCRD): patients with <i>vitalstatusdate</i> >365 days after <i>diagnosisdatebest</i> .	No record of <i>DeathDate</i> within 365.25 days of <i>DiagnosisDate</i> (linked ONS data) and no record of <i>DeathDate</i> within 365.25 days of <i>DiagnosisDate</i> (CaNISC) or <i>PrimaryDiagnosisDate</i> (CDF) from the registration extracts.
Denominator: Number of patients diagnosed with ovarian cancer.	Final cohort as described in patient inclusion / exclusion with additional exclusion if vital status at one year is missing.	Final cohort as described in patient inclusion / exclusion.
Construction notes		
Country reporting:	England & Wales Combined	
Organisational Reporting level:	Gynaecological Cancer System	Gynaecological Cancer System
Subgroup reporting:	No	No
Risk adjusted:	Yes (age, age-squared, ethnicity, deprivation, morphology, grade, stage, comorbidity, frailty)	
Outlier reporting:	Yes	

5.8 Performance Indicator 7b: Two-year survival

This indicator measures the percentage of patients who survived at least two years following their ovarian cancer diagnosis. It does not measure net survival.

Table 5.8: Patients who survive for two years following an ovarian cancer diagnosis		
	England	Wales
Dates of diagnosis:	1/1/2022 to 30/12/2022	1/1/2022 to 31/12/2022
Numerator: Number of patients without death recorded in the first year following diagnosis.	Survival (NCRD): patients with <i>vitalstatusdate</i> >730 days after <i>diagnosisdatebest</i> .	No record of <i>DeathDate</i> within 730.5 days of <i>DiagnosisDate</i> (linked ONS data) and no record of <i>DeathDate</i> within 730.5 days of <i>DiagnosisDate</i> (CaNISC) or <i>PrimaryDiagnosisDate</i> (CDF) from the registration extracts.
Denominator:	Final cohort as described in patient inclusion / exclusion.	Final cohort as described in patient inclusion / exclusion.

Number of patients diagnosed with ovarian cancer.		
Construction notes		
Country reporting:	England & Wales combined	
Organisational Reporting level:	Gynaecological Cancer System	Gynaecological Cancer System.
Subgroup reporting:	No	No
Risk adjusted:	Yes (age, age-squared, ethnicity, deprivation, morphology, grade, stage, comorbidity, frailty)	
Outlier reporting:	No	

6. NHS organisations

The main organisational unit for audit reporting is the gynaecological cancer system (GCS). This was recommended as a level for reporting performance indicators in the [British Gynaecological Cancer Society's recommendations for evidence-based, population data derived quality performance indicators for ovarian cancer](#). This choice of unit acknowledges that decisions about ovarian cancer care are not always attributable to an individual NHS Trust such as the trust or hospital where a woman is diagnosed. It also avoids the problem of reporting indicators for individual trusts or hospitals that may diagnose a small number of patients each year.

Cancer systems were defined following a service mapping exercise that examined where patients were diagnosed with ovarian cancer and where they received surgery or chemotherapy. Cancer systems work on a 'hub and spoke' model with each system made up of a gynaecological cancer centre ('hub') and cancer units ('spokes') that typically refer some patients to the cancer centre for surgery.

In England, cancer systems were based around 40 specialist gynaecological cancer centres in 2021 as listed in the Ovarian Cancer Audit Feasibility Pilot, see appendix 12 at [Ovarian Cancer Audit Feasibility Pilot](#). Patients with ovarian cancer were assigned to a cancer system using, in order, the following process:

- (i) If patients were diagnosed in 38 of the 40 listed cancer centres then they were assigned to that cancer centre's cancer system. The two exceptions were Mid and South Essex NHS Foundation Trust and University Hospitals Sussex NHS Foundation Trust (see below).
- (ii) If patients were diagnosed in a NHS Trust that was not a cancer centre but received surgery (as defined in the 'any treatment' indicator) at one of the 38 cancer centres above then they were assigned to that cancer centre's cancer system.
- (iii) If patients were diagnosed at a NHS Trust (*diag_trust*) forming part of a cancer system they were included in that cancer system. The mapping of these NHS Trusts was based on where the majority of referrals to a cancer centre for surgery were made and are shown in Appendix 5.
- (iv) Seven NHS Trusts routinely refer patients for surgery to more than once cancer centre that largely reflects historical referral patterns prior to a NHS Trust merger. These patients are assigned to a cancer system based on the typical surgery referral pattern for the hospital where they were diagnosed (*diag_hosp*). The seven NHS Trusts comprise five cancer units (Bedfordshire Hospitals NHS Foundation Trust, Chelsea and Westminster Hospital NHS Foundation Trust, County Durham and Darlington NHS Foundation Trust, Frimley Health NHS Foundation Trust, and York and Scarborough Teaching Hospitals NHS Foundation Trust) and two cancer centres (Mid and South Essex NHS Foundation Trust and University Hospitals Sussex NHS Foundation Trust). The mapping of these hospitals is shown in Appendix 5 marked with an asterisk.
- (v) Manchester is currently reported as a single system with Manchester University NHS Foundation Trust and The Christie NHS Foundation Trust as cancer centres.
- (vi) For a small proportion of patients, around 0.8%, information on the NHS trust is missing or the NHS organisation is atypical, e.g., a community or non-relevant tertiary NHS trust. Patients are assigned to a cancer system using (ii) above, if applicable, and are unassigned if not applicable.

There are three cancer systems in Wales. Patients diagnosed with ovarian cancer in Wales in 2022 are assigned to a cancer system using the mapping between the hospital where they were diagnosed (*TrustSiteCode*) and the three cancer systems.

Many patients diagnosed in the three NHS Trusts in the Oxford University Hospitals NHS Foundation Trust cancer system, including at the cancer centre, were referred to Imperial College Healthcare NHS Trust for surgery in 2022. Process (ii) above was not applied to patients diagnosed in these Trusts who received surgery at Imperial. Instead, patients were assigned under (i) and (iii) to the Oxford cancer system with an acknowledgement that the system includes referrals for surgery to both Oxford and Imperial.

Appendix 4 shows the mapping for 2023 (2024 for Wales) between the trusts or hospitals of diagnosis and cancer systems and the number of patients included in the audit. All major mapping of trusts or hospitals under processes (i), (iii) and (iv) are shown. Patients assigned to a cancer system under (ii) from a trust or hospital mapped to another cancer system are included under 'Other' in the appendix.

7. Statistical Analysis

All statistical analyses were conducted using Stata version 17.

Most results in the SotN Report are descriptive. The results of categorical data items are reported as percentages (%). Results are typically provided as an overall figure and broken down by NHS organisation of diagnosis (see NHS organisations section). Note that within tables in the SotN Report, the total percentage may not equal 100%, due to rounding.

7.1 Suppression

- Data completeness results have not been suppressed.
- Organisations with indicator denominator values less than 5 have been suppressed.

7.2 Risk-adjustment of indicators

The tables of performance indicators state whether risk adjustment has been performed.

Table 7.1 below provides details on the datasets and variables used to compile the variable used for risk adjustment

Table 7.1: Risk Adjustment Variables		
Data Item	Source	
	England	Wales
Age at diagnosis	See Table 4.1 (adjusted for age and age-squared)	See Table 4.1 (adjusted for age and age-squared)
Ethnicity	See Table 4.1	See Table 4.1
Deprivation	See Table 4.1	See Table 4.1
Morphology	See Table 4.2	See Table 4.2

Grade	See Table 4.1 (categorised as low, intermediate, high or morphology not graded).	Inferred from morphology only as described in Section 4.
Stage at diagnosis	See Table 4.1	See Table 4.1
Charlson comorbidity index	<p>Derived using the Royal College of Surgeons Charlson Score using ICD-10 diagnosis codes from HES APC (England) or PEDW (Wales) as described at: Armitage JN, van der Meulen JH. Identifying co-morbidity in surgical patients using administrative data with the Royal College of Surgeons Charlson Score. Br J Surg 2010;97:772-81. doi https://doi.org/10.1002/bjs.6930</p> <p>The following changes were applied:</p> <ul style="list-style-type: none"> • All diagnosis codes in an eligible episode were used • Used hospital episodes in the 2 years prior to diagnosis and, in the absence of an index treatment episode, up to 30 days post-diagnosis • Malignancy, metastatic cancer and HIV/AIDS (suppressed in HES/PEDW) were excluded as comorbidities • Comorbidity coded as missing if there is no eligible episode 	
Secondary care administrative records frailty (SCARF) index	<p>Derived using ICD-10 diagnosis codes from HES APC (England) or PEDW (Wales) as described at: Jauhari Y, Gannon MR, Dodwell D et al. Construction of the secondary care administrative records frailty (SCARF) index and validation on older women with operable invasive breast cancer in England and Wales: a cohort study. BMJ Open 2020;10:e035395. doi: https://doi.org/10.1136/bmjopen-2019-035395</p> <p>The following changes were applied:</p> <ul style="list-style-type: none"> • In the absence of an index treatment episode an episode up to 30 days post-diagnosis was used • Frailty coded as missing if there is no eligible episode 	

7.3 Handling of missing data

For the risk-adjustment, missing values were imputed using multiple imputation by chained equations to ensure all included people contributed to the statistical models.

8. Outlier Process

The outlier process can be found in the separate audit [outlier policy](#).

Appendix 1: Routine data sources

Overview of the data sources used for the SotN Report.

Country	Data source	Content
England	Cancer registry (NCRD and RCRD)	Data on all aspects of the cancer registration including information from hospital pathology systems.
England	COSD	Cancer Outcomes and Services dataset (COSD) items, are submitted routinely by service providers via multidisciplinary team (MDT) electronic data collection systems to the National Cancer Data Repository (NCDR) on a monthly basis.
England	SACT	Systemic Anti-Cancer Therapy (SACT) data contains information on chemotherapy dates, regimen(s) and dose(s).
England	HES	Hospital Episode Statistics (HES) is the administrative database of all NHS hospital admissions in England; records were supplied by NHS Digital to NCRAS.
Wales	CaNISC	Cancer Network Information System Cymru (Canisc) contains data on all aspects of the cancer registration including investigations. (OLD SYSTEM)
Wales	CDF	Clinical Dataset Form (CDF) contains data on all aspects of the cancer registration including investigations (NEW SYSTEM)
Wales	PEDW	Patient Episode Database for Wales (PEDW) is the administrative database of all NHS hospital admissions in Wales.
England & Wales	ONS	Office for National Statistics (ONS) death data including date of death and cause of death.

Appendix 2: OPCS4 and ICD10 codes used to define surgery

OPCS

Code	Description
H331	Abdominoperineal excision of rectum and end colostomy
H332	Proctectomy and anastomosis of colon to anus
H333	Anterior resection of rectum and anastomosis of colon to rectum using staples
H334	Anterior resection of rectum and anastomosis NEC
H335	Rectosigmoidectomy and closure of rectal stump and exteriorisation of bowel
H336	Anterior resection of rectum and exteriorisation of bowel
H337	Perineal resection of rectum HFQ
H338	Other specified excision of rectum
H339	Unspecified excision of rectum
Q071	Abdominal hysterocolpectomy and excision of periuterine tissue
Q072	Abdominal hysterectomy and excision of periuterine tissue NEC
Q073	Abdominal hysterocolpectomy NEC
Q074	Total abdominal hysterectomy NEC
Q075	Subtotal abdominal hysterectomy
Q078	Other specified abdominal excision of uterus
Q079	Unspecified abdominal excision of uterus
Q081	Vaginal hysterocolpectomy and excision of periuterine tissue
Q082	Vaginal hysterectomy and excision of periuterine tissue NEC
Q083	Vaginal hysterocolpectomy NEC
Q088	Other specified vaginal excision of uterus
Q089	Unspecified vaginal excision of uterus
Q221	Bilateral salpingoophorectomy
Q223	Bilateral oophorectomy NEC
Q231	Unilateral salpingoophorectomy NEC
Q232	Salpingoophorectomy of remaining solitary fallopian tube and ovary
Q235	Unilateral oophorectomy NEC
Q236	Oophorectomy of remaining solitary ovary NEC
Q241	Salpingoophorectomy NEC
Q243	Oophorectomy NEC
Q438	Other specified partial excision of ovary
Q439	Unspecified partial excision of ovary
Q473	Open biopsy of lesion of ovary
Q478	Other specified other open operations on ovary
Q491	Endoscopic extirpation of lesion of ovary NEC
T331	Open excision of lesion of peritoneum
T332	Open destruction of lesion of peritoneum
T338	Other specified open extirpation of lesion of peritoneum
T339	Unspecified open extirpation of lesion of peritoneum
T361	Omentectomy
T362	Excision of lesion of omentum
X141	Total exenteration of pelvis
X142	Anterior exenteration of pelvis
X143	Posterior exenteration of pelvis
X148	Other specified clearance of pelvis
X149	Unspecified clearance of pelvis

Source: [Ovarian Cancer Audit Feasibility Pilot second report appendix 7](#)

Appendix 3: OPCS4 and ICD10 codes used to define any chemotherapy

OPCS

code	Description
X701	Procurement of drugs for chemotherapy for neoplasm for regimens in Band 1
X702	Procurement of drugs for chemotherapy for neoplasm for regimens in Band 2
X703	Procurement of drugs for chemotherapy for neoplasm for regimens in Band 3
X704	Procurement of drugs for chemotherapy for neoplasm for regimens in Band 4
X705	Procurement of drugs for chemotherapy for neoplasm for regimens in Band 5
X708	Other specified procurement of drugs for chemotherapy for neoplasm in Bands 1-5
X709	Unspecified procurement of drugs for chemotherapy for neoplasm in Bands 1-5
X711	Procurement of drugs for chemotherapy for neoplasm for regimens in Band 6
X712	Procurement of drugs for chemotherapy for neoplasm for regimens in Band 7
X713	Procurement of drugs for chemotherapy for neoplasm for regimens in Band 8
X714	Procurement of drugs for chemotherapy for neoplasm for regimens in Band 9
X715	Procurement of drugs for chemotherapy for neoplasm for regimens in Band 10
X718	Other specified procurement of drugs for chemotherapy for neoplasm in Bands 6-10
X719	Unspecified procurement of drugs for chemotherapy for neoplasm in Bands 6-10
X721	Delivery of complex chemotherapy for neoplasm including prolonged infusional treatment at first attendance
X722	Delivery of complex parenteral chemotherapy for neoplasm at first attendance
X723	Delivery of simple parenteral chemotherapy for neoplasm at first attendance
X724	Delivery of subsequent element of cycle of chemotherapy for neoplasm
X728	Other specified delivery of chemotherapy for neoplasm
X729	Unspecified delivery of chemotherapy for neoplasm
X731	Delivery of exclusively oral chemotherapy for neoplasm
X738	Other specified delivery of oral chemotherapy for neoplasm
X739	Unspecified delivery of oral chemotherapy for neoplasm
X748	Other specified other chemotherapy drugs
X749	Unspecified other chemotherapy drugs
X352	Intravenous chemotherapy
X373	Intramuscular chemotherapy
X384	Subcutaneous chemotherapy

ICD10

code	Description
Z082	Follow-up exam after chemotherapy for malignant neoplasm
Z292	Other prophylactic chemotherapy
Z511	Chemotherapy session for neoplasm
Z512	Other chemotherapy
Z542	Convalescence following chemotherapy

Source: [Boyle et al 2021](#)[9]

Appendix 3: OPCS4 code combinations used to define platinum-based chemotherapy

Component Drug name	Procurement OPCS	Delivery OPCS
Carboplatin	X70.2	X72.3
Carboplatin	X70.2	X72.2
Carboplatin	X70.2	X72.1
Carboplatin	X70.3	X72.3
Carboplatin	X70.3	X72.1
Carboplatin	X70.3	X72.2
Carboplatin	X70.4	X72.3
Carboplatin	X70.4	X72.1
Carboplatin	X70.4	X72.2
Carboplatin	X70.5	X72.3
Carboplatin	X71.1	X72.2
Carboplatin	X71.1	X72.1
Carboplatin	X71.2	X72.1
Carboplatin	X71.3	X72.2
Carboplatin	X71.4	X72.2
Carboplatin	X71.4	X72.1
Carboplatin	X71.5	X72.1
Carboplatin	X71.5	X72.2
Carboplatin	X70.5	X72.2
Cisplatin	X70.1	X72.1
Cisplatin	X70.2	X72.1
Cisplatin	X70.2	X72.3
Cisplatin	X70.3	X72.1
Cisplatin	X70.4	X72.1
Cisplatin	X70.5	X72.1
Cisplatin	X71.1	X72.1
Cisplatin	X71.2	X72.1
Cisplatin	X71.3	X72.1
Cisplatin	X71.4	X72.1
Cisplatin	X71.5	X72.1
Oxaliplatin	X70.4	X72.2
Oxaliplatin	X70.4	X72.1
Oxaliplatin	X70.5	X72.1
Oxaliplatin	X70.5	X72.2
Oxaliplatin	X71.1	X72.2
Oxaliplatin	X71.1	X72.1
Oxaliplatin	X71.2	X72.1
Oxaliplatin	X71.4	X72.1
Oxaliplatin	X71.5	X72.1
Oxaliplatin	X71.5	X72.1

Appendix 4: Mapping of gynaecological cancer systems with their constituent trusts or hospitals (location of diagnosis) and number of patients diagnosed and included in the audit

Gynaecological cancer system and NHS trusts/hospitals	
Manchester University NHS FT/ The Christie NHS FT	
Manchester University NHS Foundation Trust	72
The Christie NHS Foundation Trust	21
Mid Cheshire Hospitals NHS Foundation Trust	33
East Cheshire NHS Trust	20
Northern Care Alliance NHS Foundation Trust	82
Bolton NHS Foundation Trust	31
Tameside and Glossop Integrated Care NHS Foundation Trust	31
Wrightington, Wigan and Leigh NHS Foundation Trust	26
Stockport NHS Foundation Trust	29
Other	3
<i>Total</i>	<i>348</i>
University Hospitals Dorset NHS Foundation Trust	
University Hospitals Dorset NHS Foundation Trust	79
Dorset County Hospital NHS Foundation Trust	10
Salisbury NHS Foundation Trust	16
<i>Total</i>	<i>105</i>
Barts Health NHS Trust	
Barts Health NHS Trust	77
Barking, Havering and Redbridge University Hospitals NHS Trust	42
Homerton Healthcare NHS Foundation Trust	4
Other	1
<i>Total</i>	<i>124</i>
Royal Surrey County Hospital NHS Foundation Trust	
Royal Surrey County Hospital NHS Foundation Trust	52
Ashford and St Peter's Hospitals NHS Foundation Trust	28
Surrey and Sussex Healthcare NHS Trust	26
*Frimley Health NHS Foundation Trust (Frimley Park)	22
Other	1
<i>Total</i>	<i>129</i>
University Hospitals Bristol and Weston NHS Foundation Trust	
University Hospitals Bristol and Weston NHS Foundation Trust	58
North Bristol NHS Trust	34
<i>Total</i>	<i>92</i>
Mid and South Essex NHS Foundation Trust	
*Mid and South Essex NHS Foundation Trust (South Essex)	72
Other	1
<i>Total</i>	<i>73</i>

Royal United Hospitals Bath NHS Foundation Trust	
Royal United Hospitals Bath NHS Foundation Trust	47
Other	2
<i>Total</i>	<i>49</i>
East Suffolk and North Essex NHS Foundation Trust	
East Suffolk and North Essex NHS Foundation Trust	77
*Mid and South Essex NHS Foundation Trust (Mid Essex)	31
<i>Total</i>	<i>108</i>
Royal Cornwall Hospitals NHS Trust	
Royal Cornwall Hospitals NHS Trust	57
University Hospitals Plymouth NHS Trust	49
<i>Total</i>	<i>106</i>
Liverpool Women's NHS Foundation Trust	
Liverpool Women's NHS Foundation Trust	97
Wirral University Teaching Hospital NHS Foundation Trust	46
Mersey and West Lancashire Teaching Hospitals NHS Trust	51
Liverpool University Hospitals NHS Foundation Trust	18
The Clatterbridge Cancer Centre NHS Foundation Trust	3
Countess of Chester Hospital NHS Foundation Trust	17
Warrington and Halton Teaching Hospitals NHS Foundation Trust	11
Other	1
<i>Total</i>	<i>244</i>
Cambridge University Hospitals NHS Foundation Trust	
Cambridge University Hospitals NHS Foundation Trust	54
North West Anglia NHS Foundation Trust	60
West Suffolk NHS Foundation Trust	30
*Bedfordshire Hospitals NHS Foundation Trust (Bedford)	32
<i>Total</i>	<i>176</i>
Somerset NHS Foundation Trust	
Somerset NHS Foundation Trust	76
Other	1
<i>Total</i>	<i>77</i>
Royal Devon University Healthcare NHS Foundation Trust	
Royal Devon University Healthcare NHS Foundation Trust	76
Torbay and South Devon NHS Foundation Trust	34
<i>Total</i>	<i>110</i>
University Hospital Southampton NHS Foundation Trust	
University Hospital Southampton NHS Foundation Trust	58
Isle of Wight NHS Trust	25
Hampshire Hospitals NHS Foundation Trust	67
Other	1
<i>Total</i>	<i>151</i>
Sheffield Teaching Hospitals NHS Foundation Trust	
Sheffield Teaching Hospitals NHS Foundation Trust	79
Barnsley Hospital NHS Foundation Trust	22
The Rotherham NHS Foundation Trust	27
Chesterfield Royal Hospital NHS Foundation Trust	36
Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust	38

<i>Total</i>	202
Portsmouth Hospitals University National Health Service Trust	
Portsmouth Hospitals University National Health Service Trust	67
Royal Berkshire NHS Foundation Trust	40
*University Hospitals Sussex NHS Foundation Trust (Chichester)	13
<i>Total</i>	120
Guy's and St Thomas' NHS Foundation Trust	
Guy's and St Thomas' NHS Foundation Trust	63
Lewisham and Greenwich NHS Trust	31
King's College Hospital NHS Foundation Trust	22
<i>Total</i>	116
University Hospitals of North Midlands NHS Trust	
University Hospitals of North Midlands NHS Trust	74
The Shrewsbury and Telford Hospital NHS Trust	59
<i>Total</i>	133
University Hospitals Coventry and Warwickshire NHS Trust	
University Hospitals Coventry and Warwickshire NHS Trust	57
South Warwickshire University NHS Foundation Trust	22
George Eliot Hospital NHS Trust	21
Other	7
<i>Total</i>	107
The Royal Wolverhampton NHS Trust	
The Royal Wolverhampton NHS Trust	44
The Dudley Group NHS Foundation Trust	36
Other	5
<i>Total</i>	85
Norfolk and Norwich University Hospitals NHS Foundation Trust	
Norfolk and Norwich University Hospitals NHS Foundation Trust	100
The Queen Elizabeth Hospital, King's Lynn, NHS Foundation Trust	21
James Paget University Hospitals NHS Foundation Trust	25
<i>Total</i>	125
Northampton General Hospital NHS Trust	
Northampton General Hospital NHS Trust	49
Milton Keynes University Hospital NHS Foundation Trust	14
Kettering General Hospital NHS Foundation Trust	17
<i>Total</i>	80
The Royal Marsden NHS Foundation Trust	
The Royal Marsden NHS Foundation Trust	25
Kingston and Richmond NHS Foundation Trust	20
Croydon Health Services NHS Trust	23
St George's University Hospitals NHS Foundation Trust	35
Epsom and St Helier University Hospitals NHS Trust	24
*Chelsea and Westminster Hospital NHS Foundation Trust (Chelsea and Westminster)	22
Other	4
<i>Total</i>	153
Gateshead Health NHS Foundation Trust	
Gateshead Health NHS Foundation Trust	66
South Tyneside and Sunderland NHS Foundation Trust	41

North Cumbria Integrated Care NHS Foundation Trust	29
The Newcastle Upon Tyne Hospitals NHS Foundation Trust	31
Northumbria Healthcare NHS Foundation Trust	44
*County Durham and Darlington NHS Foundation Trust (North Durham)	21
Other	5
Total	237
Leeds Teaching Hospitals NHS Trust	
Leeds Teaching Hospitals NHS Trust	83
Bradford Teaching Hospitals NHS Foundation Trust	43
Harrogate and District NHS Foundation Trust	11
Airedale NHS Foundation Trust	26
Calderdale and Huddersfield NHS Foundation Trust	44
Mid Yorkshire Teaching NHS Trust	50
*York and Scarborough Teaching Hospitals NHS Foundation Trust (York)	45
Total	302
University College London Hospitals NHS Foundation Trust	
University College London Hospitals NHS Foundation Trust	52
Royal Free London NHS Foundation Trust	80
Whittington Health NHS Trust	17
The Princess Alexandra Hospital NHS Trust	22
Other	1
Total	172
Gloucestershire Hospitals NHS Foundation Trust	
Gloucestershire Hospitals NHS Foundation Trust	83
Wye Valley NHS Trust	24
Worcestershire Acute Hospitals NHS Trust	30
Total	137
University Hospitals of Derby and Burton NHS Foundation Trust	
University Hospitals of Derby and Burton NHS Foundation Trust	88
Other	2
Total	90
Oxford University Hospitals NHS Foundation Trust	
Oxford University Hospitals NHS Foundation Trust	76
Great Western Hospitals NHS Foundation Trust	37
Buckinghamshire Healthcare NHS Trust	33
Other	3
Total	149
South Tees Hospitals NHS Foundation Trust	
South Tees Hospitals NHS Foundation Trust	40
North Tees and Hartlepool NHS Foundation Trust	33
*County Durham and Darlington NHS Foundation Trust (Darlington)	22
Total	95
East Kent Hospitals University NHS Foundation Trust	
East Kent Hospitals University NHS Foundation Trust	77
Total	77
Hull University Teaching Hospitals NHS Trust	
Hull University Teaching Hospitals NHS Trust	80
Northern Lincolnshire and Goole NHS Foundation Trust	30

*York and Scarborough Teaching Hospitals NHS Foundation Trust (Scarborough)	11
Other	1
Total	122
University Hospitals of Leicester NHS Trust	
University Hospitals of Leicester NHS Trust	98
Total	98
Maidstone and Tunbridge Wells NHS Trust	
Maidstone and Tunbridge Wells NHS Trust	70
Dartford and Gravesham NHS Trust	25
Medway NHS Foundation Trust	22
Total	117
West Hertfordshire Teaching Hospitals NHS Trust	
West Hertfordshire Teaching Hospitals NHS Trust	53
East and North Hertfordshire NHS Trust	28
*Bedfordshire Hospitals NHS Foundation Trust (Luton and Dunstable)	12
Total	93
Nottingham University Hospitals NHS Trust	
Nottingham University Hospitals NHS Trust	109
Sherwood Forest Hospitals NHS Foundation Trust	17
United Lincolnshire Teaching Hospitals NHS Trust	47
Total	173
Sandwell and West Birmingham Hospitals NHS Trust	
Sandwell and West Birmingham Hospitals NHS Trust	74
Walsall Healthcare NHS Trust	24
Birmingham Women's and Children's NHS Foundation Trust	25
University Hospitals Birmingham NHS Foundation Trust	60
Other	2
Total	185
Lancashire Teaching Hospitals NHS Foundation Trust	
Lancashire Teaching Hospitals NHS Foundation Trust	64
University Hospitals of Morecambe Bay NHS Foundation Trust	35
Blackpool Teaching Hospitals NHS Foundation Trust	20
East Lancashire Hospitals NHS Trust	42
Total	161
Imperial College Healthcare NHS Trust	
Imperial College Healthcare NHS Trust	128
London North West University Healthcare NHS Trust	38
The Hillingdon Hospitals NHS Foundation Trust	19
*Frimley Health NHS Foundation Trust (Wexham Park)	23
*Chelsea and Westminster Hospital NHS Foundation Trust (West Middlesex)	15
Other	8
Total	231
University Hospitals Sussex NHS Foundation Trust	
*University Hospitals Sussex NHS Foundation Trust (Brighton/Worthing)	78
East Sussex Healthcare NHS Trust	50
Total	128
North Wales	
Betsi Cadwaladr University Health Board	64

<i>Total</i>	<i>64</i>
<hr/>	
South East Wales	
Cardiff and Vale University Health Board	58
Cwm Taf Morgannwg University Health Board	19
Aneurin Bevan University Health Board	46
Other	1
<i>Total</i>	<i>124</i>
<hr/>	
South West Wales	
Hywel Dda University Health Board	30
Swansea Bay University Health Board	45
Cwm Taf Morgannwg University Health Board	11
<i>Total</i>	<i>86</i>
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