Data Dictionary for SWOG S1011 Clinical Dataset
(NCT01224665_D1.txt)
PubMed ID: 39589370

Data can be used to approximate published study findings, but exact reproduction of previous manuscripts may not be possible in some cases (e.g., when data must be modified for de-identification purposes or have undergone further data cleaning). To preserve patient confidentiality, institution and surgeon information are unavailable in this dataset.

All blank values should be considered missing or not applicable.

Variable Name	Variable Description	Type	Code	Code Definition
SUBJECT_ID	Subject identifier (SWOG ALTPATID)	Char		
NPOSNODE	Total number of positive lymph nodes	Num		
NOREMND	Total number of lymph nodes removed	Num		
PATHSTGT	Pathologic T stage	Char	PT0	pT0
			PTIS	pTis
			PTA	pTa
			PT1	pT1
			PT2	pT2
			PT2A	pT2a
			PT2B	pT2b
			PT3A	pT3a
			PT3B	pT3b
			PT4A	pT4a
			PT4B	pT4b
PATHSTGN	Pathologic N stage	Char	PN0	pN0
			PN1	pN1
			PN2	pN2
			PN3	pN3
EXTENDED	Extended lymphadenectomy indicator	Num	0	Underwent standard lymphadenectomy
			1	Underwent extended lymphadenectomy
AGE	Age (years)	Num	Char	
SEX	Sex	Char	F	Female
			M	Male

ORIGNCI	Hispanic ethnicity	Num	0	Ethnicity unknown
			1	Not Hispanic
			8	Hispanic, not specified
NATIVE	American Indian/Alaska Native	Char	Y	American Indian/Alaska Native
			N	Not American Indian/Alaska Native
ASIAN	Asian	Char	Y	Asian
			N	Not Asian
BLACK	Black or African American	Char	Y	Black or African American
			N	Not Black or African American
WHITE	White	Char	Y	White
			N	Not White
UNKRACE	Race unknown	Char	Y	Race unknown
			N	Race known
DERIVED_RACE	Race	Char	B	Black or African American
			M	Multi-Racial or other race
			N	American Indian/Alaska Native
			S	Asian
			W	White
			U	Unknown
TRNO	Treatment arm ID	Num	2	Standard lymph node dissection
			3	Extended lymph node dissection
FOLLOW	Follow-up status	Char	Y	Following
			N	Not following
			L	Lost to follow-up
RXSTAT	Reason off treatment	Char	COMP	Completed treatment
			DEAD	Death
			PROG	Progression/relapse
			REF	Patient refusal
			OTH	Other
SURVEV	Evaluable for survival	Char	Y	Evaluable

ARMNAME	Treatment arm name	Char	Standard LND	Standard lymph node dissection
			Extended LND	Extended lymph node dissection
NEOADJ	Type of neoadjuvant chemotherapy	Num	1	Cisplatin based
			2	Carboplatin based
			3	Other
			4	None
PRIOR	Prior neoadjuvant chemotherapy indicator	Num	0	No prior neoadjuvant chemotherapy
			1	Prior neoadjuvant chemotherapy
PS01	Zubrod Performance Status Score 0-1 indicator	Num	0	2
			1	0-1
TSTAGE2	T2 clinical stage indicator	Num	0	T3 or T4a
			1	T2
SURYRS	Overall survival time (in years) since randomization	Num		
ELIG	Overall eligibility status	Char	Y	Eligible
SURIND	Overall survival indicator	Num	0	Censored
			1	Died
SURTIM	Overall survival time; days from randomization to last contact or death due to any cause	Num		
PROG	Progressed/relapsed	Char	Y	Yes
			N	No
DFSIND	Disease-free survival indicator	Num	0	Censored
			1	Recurrence/relapse or death
DFSTIM	Disease-free survival time; days from randomization to relapse or recurrence, last contact, or death due to any cause	Num		
BMI	Body mass index (BMI) (kg/m^2)	Num		
INELIG	Overall ineligibility indicator	Num	0	Eligible
X_ELND	Crossover to extended lymph node dissection (ELND) arm	Num	0	Did not cross over
			1	Did cross over
AE_ASSESS	Assessable for adverse events	Char	Y	Assessable

VARIANT	Mixed histologic subtypes indicator	Char	Y	Yes
			N	No
HYDRONEPH	Hydronephrosis indicator	Char	Y	Hydronephrosis
			N	No hydronephrosis
DAY90	Day 90 assessment indicator (Surgeon's 90 day adverse event and morbidity assessment)	Num	0	Did not receive assessment
			1	Received assessment
DIED90	Death within 90 days after surgery indicator	Num	0	Alive at 90 days after surgery
			1	Died within 90 days after surgery
ESTBLD	Estimated blood loss (ml)	Num		
LFTLAT	Left lateral nerve-sparing performed	Char	Y	Yes
			N	No
RTLAT	Right lateral nerve-sparing performed	Char	Y	Yes
			N	No
WBTOT_i	Total units of whole blood received intra-operatively (in units equivalent to 500 ml whole blood)	Num		
PRBC_i	Total units of PRBC received intra-operatively (in units equivalent to 500 ml whole blood)	Num		
FFP_i	Total units of fresh frozen plasma received intra-operatively (in units equivalent to 500 ml whole blood)	Num		
PLATE_i	Total units of platelets received intra-operatively (in units equivalent to 500 ml whole blood)	Num		
WB_i	Received intra-operative whole blood transfusion	Char	Y	Yes
			N	No
PB_i	Received intra-operative PRBC transfusion	Char	Y	Yes
			N	No
FP_i	Received intra-operative fresh frozen plasma transfusion	Char	Y	Yes
			N	No
DURHRS	Duration of surgery (in hours)	Num		
SPARE	Nerve sparing performed	Char	Y	Yes
			N	No

DAYSHOS	Days in hospital	Num		
WBTOT_p	Total units of whole blood received during post-operative hospitalization (in units equivalent to 500 ml whole blood)	Num		
FFP_p	Total units of fresh frozen plasma received during post-operative hospitalization (in units equivalent to 500 ml whole blood)	Num		
PLATE_p	Total units of platelets received during post-operative hospitalization (in units equivalent to 500 ml whole blood)	Num		
PRBC_p	Total units of PRBC received during post-operative hospitalization (in units equivalent to 500 ml whole blood)	Num		
WB_p	Received post-operative whole blood transfusion	Char	Y	Yes
			N	No
PB_p	Received post-operative PRBC transfusion	Char	Y	Yes
			N	No
FP_p	Received post-operative fresh frozen plasma transfusion	Char	Y	Yes
			N	No
COD	Cause of death for patients that died within 90 days of randomization/surgery	Char	AE	Adverse event
			NORECUR	Not cancer-related
			NOS	Not otherwise specified
			PROG	Progression
COD_SPEC	Cause of death specified for patients that died within 90 days of randomization/surgery	Char		
DIVERSION	Type of urinary diversion	Char	CCR	Continent catheterizable reservoir
			IC	Ileal conduit
			NEO	Neobladder
PADJCHEM	Planned to start adjuvant therapy	Char	Y	Yes
			N	No
ADJCHEMREC	Received adjuvant therapy	Char	Y	Yes
			N	No

SITEREC	Site of first recurrence	Char	DIST	Distant
			LOC	Local
			BOTH	Both distant and local
			PROGD	Died on date of progression