CAST Fellowship program Case Report
Form: Neurooncology

Please complete this form when submitting a CAST Accredited NeuroOncology Fellowship Program Application (new or renewal). The report should include each institutional case for each participating site for the most recently completed academic year (July 1- June 30). Each operative experience should generate one case in one category (do not sort or classify using CPT codes). Include all cases done within the training program, even though some might now have had a resident/fellow participate.

Institution Name

Fellowship Director

Neurosurgery Department Chair

Primary Site (Site #1)

Site #2 (if applicable)

Site #3 (if applicable)
Site #4 (if applicable)

Site #5 (if applicable)

Case/Procedure Type

Supratentorial intra-axial (min. 120)
---Glioma/Primary brain tumor
---Metastasis
Infratentorial intra-axial (min. 20)
---Glioma/Primary brain tumor
---Metastasis
Extra-axial (min. 50)
---Meningioma (min. 30)
---Intra-ventricular (min. 10)
---Vestibular schwannoma (min. 10)
Transphenoidal sellar/parasellar (min. 60)
Skull base approaches or Other (min. 20)
Radiosurgery (min. 20)
Spinal Tumors (min. 10)
---Intramedullary (min. 5)
---Extramedullary/metastasis (min. 5)
Biopsy/Stereotactic (e.g. LITT) (min. 20)
TOTAL EACH COLUMN