

## 2015 Data Review—Male Breast Cancer

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Prior to our SEER data submission, we performed a review of the CRGC male breast cancer cases with a 2015 diagnosis year. The main mission was to make sure our patient gender data was correctly coded so that we had an accurate count of male breast cancer cases. Second, we wanted to follow up on our review of male breast cancer cases done in 2015 on 2013 and 2014 diagnosis year cases to see if there was any change in the percentage of female breast cancer cases miscoded to male.

### QUICK FACTS:

- A total of **146 CRGC breast cancer** cases diagnosed in 2015 were coded as male.
- The data miner query listed patient first name
- Cases reviewed were those with traditional female first names, unisex and ambiguous first names
- Criteria for a CRGC case is the county of the patient's address at the time of diagnosis

### FINDINGS:

- There were 20 tumors (19 patients as one patient had 2 primaries) that had gender coded male that were changed to female. Of those patients 17 had documentation in the record or passive follow-up that the patient was female. One case had no documentation but a traditional female name. Another case had an ambiguous name with a note that the patient was M per face sheet in Remarks but F per PE and text that said "she used.." Verified with the facility that the patient was female.

**ANALYSIS:** The percentage of miscoded male breast cancer cases that have documentation that the patient is female remains the same.

DX Year	Cases Identified as Male (# cases reviewed)	Gender Coding Errors (% or # changed from male to female)
2013	125 Tumors (151 Admissions)	<b>11%</b> 14 changed on Patient level (13 changed on Admission level)
2014	90 Tumors (113 Admissions)	<b>13%</b> 12 changed on Patient level (13 changed on Admission level)
<b>2015</b>	<b>146 Tumors</b>	<b>13%</b> <b>19 changed on Patient level</b>

#### ABSTRACTING TIPS:

- Document gender in PE or Remarks text
- Male breast cancer cases need special attention verifying the patient is male in PE or Remarks text. This is even more important if the patient has a unisex or ambiguous name.
- Documenting female gender also helps when cases are reviewed in audits or research
- Make sure your documentation of gender matches the coded sex field.

#### VISUAL EDITING TIPS:

- Verify that a male breast cancer case has documentation that the patient is male.
- If coded male but there is a traditional female name, look for documentation that the patient is female or if there is passive follow-up gender identification. If neither of these sources provide gender identification then query back to the facility. Query back if all data is ambiguous.

**SUMMARY:**

The CRGC conducts an annual review of breast cancer cases coded as male. This review has been conducted annually beginning with 2013 diagnosed cases. Unfortunately, the percentage of breast cancer cases incorrectly coded as male remains consistent at 11% - 13% over the course of the three year period. In the 2015 review of 146 tumors, gender was changed for 19 patients. Of these 19 patients, in 17 instances, there was documentation on the abstract or passive follow up that the patient was a female. Gender must be documented for all cases of male breast cancer. The CRGC will continue to monitor this to identify patterns and trends. We will also explore conducting concurrent case reviews to provide more timely feedback to educate registrars and positively impact data quality. The CRGC will also work with the CCR and SEER to strengthen text documentation on verifying male gender for breast cancer cases in their respective standards documents. We will also recommend the evaluation of implementing the NAACCR gender edit which compares the most common gender specific patient first names by decade of birth to identify potential gender miscodes.