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What can eMaRC do for Melanoma Reporting?

NATIONAL PROGRAM OF CANCER REGISTRIES SUCCESS STORY

SUMMARY: Due to staff shortages, electronically-submitted pathology (ePath) reports were accumulating in eMaRC Plus. Of most concern were potential missed melanoma cases. Using unobligated funds, we hired a Graduate Research Assistant (GRA) to carry out a pilot project under the guidance of the Missouri Cancer Registry and Research Center's (MCR-ARC's) Operations Manager (OM) and its Director. We identified more than 200 previously unreported melanoma cases, thereby improving data completeness. We expanded the project scope and determined that eMaRC Plus can be useful for:

- Identifying new dermatology reporters to recruit; and
- Auditing current dermatology reporters who miss reporting some cases.

We identified eight new dermatology reporters and contacted them. We also identified four existing reporters with missed cases. We loaded these missed cases into Web Plus for physician follow-back to collect additional information and enhance data quality and annual incidence statistics. We refined guidelines for identifying linkage matches by patient, diagnosis date, site, histology and laterality. While the yield for unreported cases was significant, we concluded that time spent identifying cases that yielded only more specific details was not cost-effective.

CHALLENGE: Given limited staff, assess feasibility of utilizing eMaRC to improve quality and completeness of melanoma reporting.

SOLUTION: MCR management designed a pilot study to explore costs and benefits of processing ePath reports stored in eMaRC and hired a part-time Health Informatics GRA to lead the pilot. The Operations Manager (OM) -- a certified tumor registrar (CTR) -- first identified melanoma path reports stored in eMaRC. Another CTR (QA staff member) checked each case for reportability and made quality corrections to eMaRC auto-coding of cases versus text. Reportable cases for one diagnosis year were exported from eMaRC and compared to cases in our incidence database (CRS Plus) using Link Plus. The GRA used the multiple primary/ histology rules matrix as a guideline to assess true and possible matches. The OM reviewed the work and assessed possible matches using text from both eMaRC and CRS cases. We recorded yield of new cases or new information, time spent and barriers encountered at each step of the process.

RESULTS:

Of 631 path reports identified/reviewed:

- 48 percent were reportable and not reported from other sources;
- 32 percent were non-reportable;
- 16 percent were reportable but already captured; and
- 3 percent yielded more specific information.

Staff spent 62.5 hours (3% of an FTE) processing cases. We identified more than 200 unique incidence cases not previously reported and 20 unique reported cases whose quality could be improved.

SUSTAINING SUCCESS:

- Screen eMaRC at regular intervals to identify new dermatology practices that need to report melanoma cases;
- Revise regulations governing cancer reporting in Missouri to facilitate bringing non-compliant reporters into compliance with state-mandated reporting requirements;
- Use eMaRC as an audit tool;
- Obtain funding for at least one additional position; and
- Recognize that incomplete demographics on path reports limits precise identification of some potential patient matches.