Difficulty Using the Cancer Registry to Measure Molecular Testing Quality

Potential Action Items

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- Add EGFR and ALK test results into cancer registry as a structured data field which will allow periodic review of molecular testing rates in an easier, more efficient manner
- Develop more uniform approach for entering NSCLC information into registry

Ideas for Process Improvement

The National Cancer Data Base (NCDB) is jointly sponsored by the American College of Surgeons and the American Cancer Society. This database is sourced from hospital registry data that are collected in more than 1,500 Commission on Cancer (CoC)-accredited facilities. Every learning lab participant had a cancer registry at their center, but they were not all in the habit of routinely reviewing and analyzing the information in their registry to measure their quality around molecular testing in lung cancer. In fact, most centers were not including information regarding molecular testing in their registry of lung cancer patients. So, in order to evaluate their molecular testing practices, their registrars had to:

1. Analyze their registry to identify their lung cancer patients
2. Retrieve and review individual patient charts to see if molecular tests were ordered

This process was both time-intensive and cumbersome, especially since the molecular test results were usually added as an addendum to the original pathology report. Some centers found that it was difficult to understand why molecular testing was not performed on certain patients who may have benefited from the test results.

Several learning lab participants noted that it would be beneficial if they added an expandable structured data field into their cancer registry to document which molecular tests were ordered for their lung cancer patients. Centers that pursued this found that they had to:

- Formulate the data fields
- Incorporate the new data fields into the cancer registry
- Determining how registrars would retrieve and enter this new data
- Spend time to retrospectively review charts and add this data to their registry

Creating an expandable field provides flexibility as additional mutation markers become incorporated into routine clinical practice. Adding molecular testing information to the registry makes it more efficient for administrators to periodically review quality and performance metrics by abstracting this data directly from the registry.