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## Quality Assessment of New York State Hospital Collaborative Stage Data

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The New York State Cancer Registry (NYSCR) completed a reabstraction audit to assess the quality of data recently reported using the newly developed collaborative stage (CS) system; shortly after its implementation, and before errors became widespread and persistent. Cases were randomly selected from hospital submissions to the NYSCR, and copies of all pertinent documentation were requested from hospital medical records departments. Certified Tumor Registrars (CTRs) at the NYSCR reabstracted the CS items for each tumor, and compared their reabstracted codes to the codes submitted by the hospitals. For each discrepancy, the CTR provided an explanation for the coding decision. Hospital-specific results were sent to each facility, requesting that the facility either correct the codes and resubmit the records or provide justification supporting their original codes. Quality of CS data were determined by evaluating the inter-coder percent agreement and kappa coefficients between hospital and NYSCR codes. The audit included 911 tumors from seven cancer sites, diagnosed in 2004. Over all CS items reabstracted, the inter-coder agreement was approximately 80.2%. Agreement by hospital ranged from 32.4% to 100%. Percent agreement varied by site and data element; colorectal cancers (89.2% agreement) and oral cancers (72.3% agreement) having been coded with the most and least accuracy, respectively. Kappa coefficients stratified by cancer site and CS element ranged from 0.25-0.91, indicating more than a chance level of agreement, with 85.7% of coding disagreements ultimately being reconciled to the NYSCR code. Training material targeting coding problems identified through the audit will be developed as a result.