Appropriateness of Referral of Node-Positive Mastectomy Patients to Radiation Oncology

National Quality Strategy Domain

1. Effective clinical care
2. Communication
3. Care coordination

Measure Type

- Process

Description

Percent of patients undergoing mastectomy for node positive breast cancer with referral to radiation oncology.

Numerator

Number of node positive breast cancer patients undergoing mastectomy with documentation of radiation treatment discussion and/or referral to radiation oncology.

Denominator

Number of node positive breast cancer patients undergoing mastectomy.

Denominator Exclusions

Stage 4 breast cancer patients and node positive patients who undergo breast conserving surgery. Patient was presented at multi-disciplinary conference and decision was made not to refer.

Denominator Exceptions

Attempted discussion but patient refuses discussion or referral.

Rationale

All patients found to be node positive after mastectomy for breast cancer should be provided with a discussion of the benefits and risks of post-mastectomy radiation by either their
surgeon and/or a radiation oncologist. There is high level evidence of the benefit of radiation in reducing local regional cancer recurrence and improving overall survival in patients undergoing mastectomy who have four or more nodes positive. There is some evidence but less uniformity of opinion of similar benefit for radiation therapy in patients with 1-3 nodes positive. Current NCCN guidelines recommend use of post mastectomy radiation in patients with 4 or more positive nodes and to “strongly consider” radiation in patients with 1-3 nodes positive. The “consideration or administration” of radiation following mastectomy in women with ≥ 4 positive lymph nodes is a quality measure for the Commission on Cancer’s RQRS program.

**Date Endorsed**

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**References**


