



## PATIENT SAFETY RESOURCES

# DELAYED BREAST CANCER DIAGNOSIS AFTER INSUFFICIENT FOLLOW-UP

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## DESCRIPTION

A 38-year-old patient had a delayed diagnosis of breast cancer resulting in an increased tumor size and advanced staging at the time of diagnosis progressing from Stage 1 to Stage 2.

## KEY LESSONS

Adhering to national standards and internal policies and procedures is imperative to ensuring the timely diagnosis of cancer.

## CLINICAL SEQUENCE

A 38-year-old presented to her primary care provider (PCP) with concern for a palpable breast lump. The PCP noted the presence of the lump but documented that it was “likely a cyst, no imaging needed.” No follow-up imaging was ordered.

One year later, the patient had a screening mammogram. The mammogram showed a 1.5cm mass, and an ultrasound-guided biopsy was performed. She was diagnosed with Stage 2 breast cancer. She required chemotherapy before undergoing a mastectomy and subsequent radiation. The patient required a 5-year course of Tamoxifen after surgery and had to delay pregnancy for that length of time.

## ALLEGATION

The patient alleged that the PCP should have ordered additional diagnostic testing when she presented with a new breast lump per the standard of care, which led to a delay in diagnosis of breast cancer.

## DISPOSITION

The case was settled for more than \$400K.

## ANALYSIS

- **Adherence to national guidelines, at the time, recommended additional diagnostic testing and/or a physical assessment to follow up on the new breast lump.**
- **The delay in diagnosis resulted in a higher staging of cancer, a potential decrease in 5-10 year survival rates, and a delay in the patient's pursuit of pregnancy.**

## DISCUSSION QUESTIONS

- Are policies and guidelines readily available related to diagnosis algorithms?
- What is the cadence of review and education for staff around these algorithms?
- What processes are in place to reduce missed and delayed diagnoses in your organization?

