

Person with cancer— oestrogen receptor assay result, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Oestrogen receptor assay result
METEOR identifier:	370036
Registration status:	<ul style="list-style-type: none">• Health, Standard 06/03/2009
Definition:	The result of oestrogen receptor assay at the time of diagnosis of the primary breast tumour, as represented by a code.
Data Element Concept:	Person with cancer—oestrogen receptor assay result

Value domain attributes

Representational attributes

Representation class:	Code								
Data type:	Number								
Format:	N								
Maximum character length:	1								
Permissible values:	<table><thead><tr><th>Value</th><th>Meaning</th></tr></thead><tbody><tr><td>1</td><td>Positive</td></tr><tr><td>2</td><td>Negative</td></tr><tr><td>3</td><td>Equivocal</td></tr></tbody></table>	Value	Meaning	1	Positive	2	Negative	3	Equivocal
Value	Meaning								
1	Positive								
2	Negative								
3	Equivocal								

Supplementary values:	<table><thead><tr><th>Value</th><th>Meaning</th></tr></thead><tbody><tr><td>7</td><td>Unknown (test results not available)</td></tr><tr><td>8</td><td>Not applicable (test not done)</td></tr></tbody></table>	Value	Meaning	7	Unknown (test results not available)	8	Not applicable (test not done)
Value	Meaning						
7	Unknown (test results not available)						
8	Not applicable (test not done)						

Collection and usage attributes

Guide for use:**Supplementary codes**

CODE 7 Unknown (test results not available)

Use this code when the test has been performed but the results are not yet available for analysis.

CODE 8 Not applicable (test not done)

This code is used as a validation measure, to show that the reason for the lack of results is due to the test not being performed.

Data element attributes

Collection and usage attributes

Guide for use:

Where the pathologist has stated the test result in the conclusion of the pathology report as being positive, negative or equivocal this value should be coded. If the report does not specifically state the test result, this should be interpreted from the reported % nuclei stained positive. If $\geq 1\%$ of nuclei are reported as stained regardless of stain intensity (weak, intermediate or high/strong) the result is positive. If % nuclei stained is $<1\%$ the result is negative. Definitions from NBOCC & ACN Pathology Reporting Guidelines.

Collection methods:

For cancer registries:

Collection of this data item should only be from notification and pathology reports relating to initial diagnosis and not for recurrent or subsequent metastatic disease.

Where there are multiple reports relating to the primary breast tumour (from different specimens), the 'most positive' value is chosen according to the following hierarchy: Positive > Equivocal > Negative > Test done but results not known > Test not done.

If oestrogen receptor assay tests are completed for invasive tumours with an in situ component, use the values from the invasive tumour.

Do not record oestrogen receptor values for in situ tumours.

For multifocal tumours, use the oestrogen receptor value from the largest focus or from a metastatic deposit, e.g. Lymph node metastasis. A smaller focus that is ER positive may in fact be the source of a metastasis and in this setting the patient would derive benefit from the therapy offered as a result of hormone receptor positive status.

Comments:

Hormone receptor status is an important prognostic indicator for breast cancer.

The Australian Cancer Network Working Party established to develop guidelines for the pathology reporting of breast cancer recommends that hormone receptor assays be performed on all cases of invasive breast carcinoma. The report should include

- the percentage of nuclei staining positive and the predominant staining intensity (low, medium, high) and
- a conclusion as to whether the assay is positive or negative.

Source and reference attributes

Origin:

Royal College of Pathologists of Australasia

Australian Cancer Network

Commission on Cancer American College of Surgeons

Reference documents: Royal College of Pathologists of Australasia Manual of Use and Interpretation of Pathology Tests: Third Edition Sydney (2001)

Australian Cancer Network Working Party The pathology reporting of breast cancer. A guide for pathologists, surgeons and radiologists Second Edition Sydney (2001)

Commission on Cancer, Standards of the Commission on Cancer Registry Operations and Data Standards (ROADS) Volume II (1998)

Relational attributes

Related metadata references: Supersedes [Person with cancer—oestrogen receptor assay results, code N](#)

- [Health](#), Superseded 06/03/2009

Implementation in Data Set Specifications:

[Breast cancer \(Cancer registries\) DSS](#)
[Health](#), Superseded 01/09/2012

[Breast cancer \(cancer registries\) NBPDS](#)
[Health](#), Standard 01/09/2012

[Cancer \(clinical\) DSS](#)
[Health](#), Superseded 22/12/2009

[Cancer \(clinical\) DSS](#)
[Health](#), Superseded 07/12/2011

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