

Thompson, Robert

From: Thompson, Robert
Sent: Monday, July 30, 2007 2:32 PM
To: Deborah Gregory; Melissa Sullivan; Pritchard, Rolf
Subject: Fwd: Pls send following to Mike Barron

Robert Thompson
 Deputy Minister
 Department of Health and Community Services Government of Newfoundland and Labrador
 709-729-3125

>>> Robert Thompson 6/12/2007 11:43 PM >>>
 Mike:

Reagrnding database structure, the ideal would be that all 763 cases would be homogeneous and we would seek the following:

1. Board of Origin: EH, CH, WH, LGH
2. Source of original case data (e.g., meditech, registry, phone call from patient, etc)
3. date that sample was obtained by EH 4. date sample sent to Mount Sinai 5. date of phone call to patient to inform that sample was sent for re-testing 6. name of person who placed call 7. employer of person who placed call (e.g., EH, CH, etc) 8. date that results returned from Mount Sinai 9. date sample results were reviewed by panel 10. date that sample results and panel review were sent to physician 11. date that EH contacted patient (phone call? letter?) about results 12. verification that doctor reviewed results with patient

There may be many variations of how various cases were handled, and this may lead to other ways to construct the database. For example, to construct a hypothetical case, we could have a person whose case was identified in the breast cancer registry by EH, the case belonged to CH, CH sent the tissue sample to EH, but the phone call was made to the patient by CH that a re-test was to be done, and when EH received the results the patient relations officer at EH phoned to say that the results were back and have been sent to the patient's physician.

We know that many samples were sent to Mount Sinai before any phone calls were made that re-tests were starting. In October 2005, in response to the media stories, EH changed its approach and began to phone everyone. But by that time the results were starting to flow back from Mount Sinai. Consequently, some patients were phoned for the first time with the results, without being told initially that the re-tesing was underway. In these cases, we would expect the database to show a blank for the field which records the date on which the patient was phoned about their samples being sent for re-test, and we would expect the date of communication about the actual results to be around October 2005.

Good luck and I look forward to discussing this with you.

Robert

Just to confuse a little more, there was a small block of samples from St. Anthony that surfaced in February 2006, which were sent to Mount Sinai and were returned very quickly with the results. In this case, there was no phone call about the fact that re-testing was occurring. The only contact was about the results. We expect the database will show this story.

Robert Thompson
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