OMECO Family Medicine Residency Increasing Colorectal Cancer Screening in the Outpatient Setting with Educational Posters

INTRODUCTION

Colorectal cancer is the third most common cancer diagnosed in the United States. The American Cancer Society estimates 106,180 new cases of colon cancer will be diagnosed in 2022. The rate of people being diagnosed with colon or rectal cancer each year has dropped overall since the mid-1980s because more people are getting screened, and more people are improving risk factors through lifestyle modifications. Overall, the lifetime risk of developing colorectal cancer is: about 1 in 23 (4.3%) for men and 1 in 25 (4.0%) for women. The American Cancer Society recommends starting regular screening at age of 45 and continuing until age of 75. Screening includes both visual examination and stool-based tests.

For the purpose of our QI project, we focused on routine colon cancer screening performed only through visual examination by colonoscopy. Our goal was to inform our patients ages 45-75 at average risk about screening colonoscopies. We did this by placing an educational poster about colonoscopies in each exam room at our clinics.

OBJECTIVES

Project Aim:

Increase referrals placed for screening colonoscopies by 25% in the specific time period mentioned by placing educational posters in each patient exam room where they were easily viewed by patients and providers.

METHODS

-Educational posters were designed and implemented in rooms of two OSU Family Medicine Clinics between the dates of 04/04/2022 -04/29/2022.

-The poster used simple terminology to inform patients of colon cancer basics. They were easily viewable by the patients and providers.

-We measured the effect by mining data from the EMR to compare colonoscopy referrals in April 2021 vs April 2022. In order to make our search more sensitive, inclusion criteria was patients 45-75 years of age that had a diagnosis Encounter for Screening of Malignant Neoplasm of the: colon (Z12.11) or rectum (Z12.12). The date ranges for these encounter diagnoses was 04/04/2021 -04/29/2021 and 04/04/2022 - 04/29/2022.

Patient Education Poster. This poster was placed in the waiting rooms and each patient exam room at **OSU HCC and Eastgate Clinics.**

45 years or older? Family history of colon cancer? Changes in your bowel movements or notice blood?

If you answered 'yes' to any of these questions, its time to talk to your doctor about scheduling a colonoscopy.

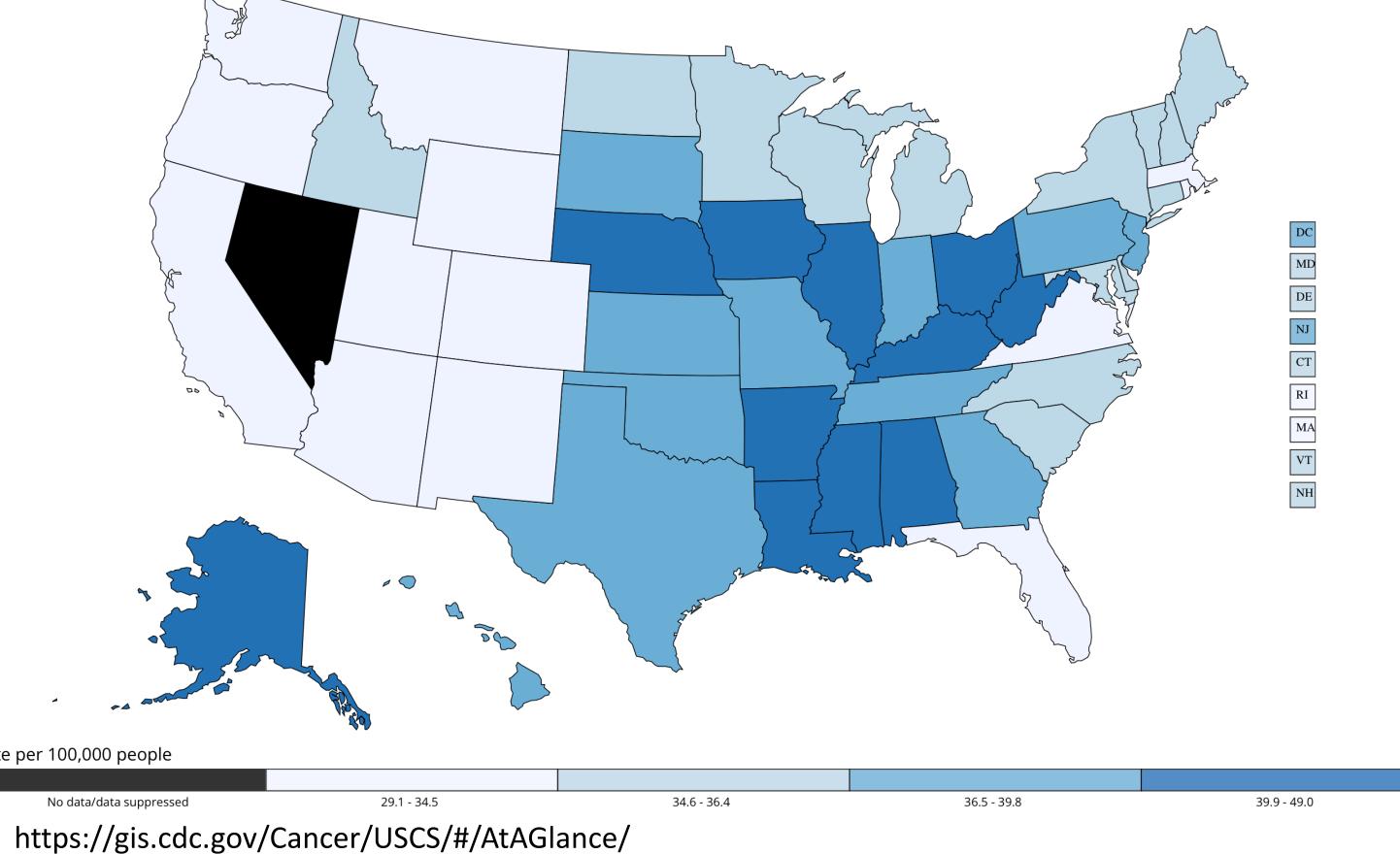
Frequently asked questions:

What is a colonoscopy? This is a procedure that uses a small camera to give the doctor the ability to visualize the colon and remove any polyps that could be cancerous.

Will I be awake for the procedure?

How often do I have to do colonoscopies? If the first colonoscopy is normal, then screening is every 10 years. If the colonoscopy is abnormal, the interval depends on the findings.

What if my parent had colon cancer before the age of 45 years old? It is recommended that screening start 10 years before the age of the family member's colon cancer diagnosis.



Rate per 100,000 people

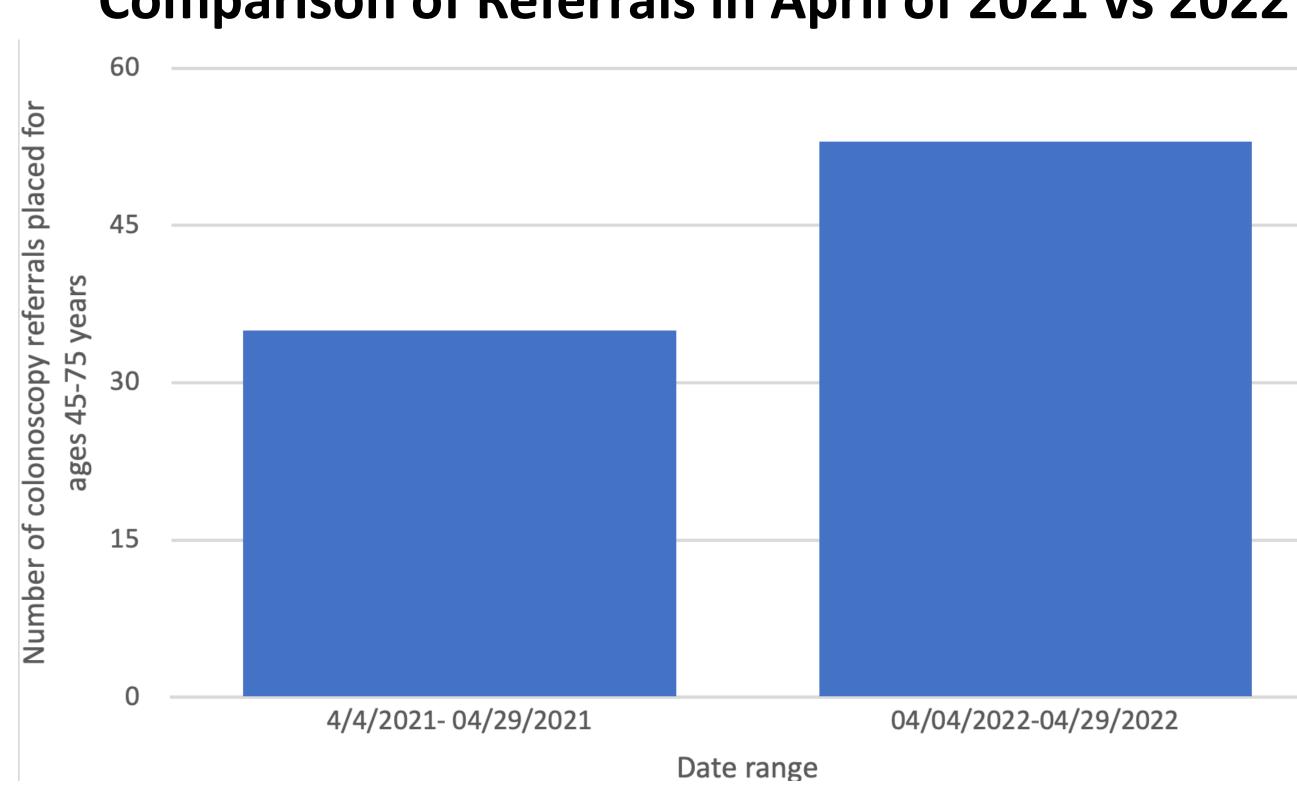




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RESULTS

Based on our data mining parameters, there was a total of 35 colonoscopy referrals ordered in April 2021 at both clinic locations. There was a total of 53 colonoscopy referrals placed in April 2022 at both location. This is a 51% increase in colonoscopy referrals after the implementation of the clinic posters.



Comparison of Referrals in April of 2021 vs 2022

Rate of New Cancers in the United States, 2018 Colon and Rectum, All Ages, All Races and Ethnicities, Male and Female

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CONCLUSION

There is no substitute for face-to-face patient discussion about colon cancer screening. It is the responsibility of the health care provider to make an adequate effort to educate the patient and determine screening needs. Ideally, the posters would improve patient awareness to help facilitate these conversations.

This limited study indicates that education via clinic posters can be an effective method for increasing colonoscopy referrals. We would like to continue the study for another year with fine-tuning of the data mining parameters and potentially incorporating a dot phrase at one clinic location to further assess the effects.

Limitations:

-There is no order in Epic specifically for a colonoscopy which makes tracking difficult. -Patients are increasingly opting for noninvasive colon cancer screening methods (e.g. Cologuard). Our search criteria was unable to discern which screening method the patients opted for.

-The study does not include high risk patients less than 45 or greater than 75 years of age. -Colonoscopy referrals placed does not equal a colonoscopy performed.

REFERENCES OR ACKNOWLEDGEN

"USCS Data Visualizations - CDC." Centers for Disease Control and Prevention,

https://gis.cdc.gov/Cancer/USCS/#/AtAGlance/. "What Is Colorectal Cancer?: How Does Colorectal Cancer Start?" American Cancer Society, https://www.cancer.org/cancer/colon-rectalcancer/about/what-is-colorectal-cancer.html.