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Improving Colon Cancer Screening in a Resident Ambulatory Clinic

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Colorectal cancer (CRC) screening has been proven to be a feasible, cost-effective way to reduce incidence of and mortality from CRC. CRC is the second-leading cause of cancer-related death in the United States. As early CRC is asymptomatic, it is imperative that we detect it early to reduce mortality. Despite the widespread availability of CRC screening, CRC screening rates in our ambulatory sites have been below average. The Wednesday Jefferson Hospital Ambulatory Practice (JHAP) resident clinic’s CRC screening rate was 44.3% in September 2016 as compared to an average of 57% at other ambulatory sites in the Greater Philadelphia region. Therefore, CRC screening was targeted as an area of quality improvement. Our goals were to implement an intervention to improve CRC screening rates in our practice as well as identify site-specific obstacles to CRC screening that could be intervened on in the future. Fecal Immunochemical Test (FIT) is a FDA approved CRC screening modality for one year.

AIM STATEMENT

Our aim at Wednesday JHAP was to increase the rate of colorectal cancer screenings from 44.3% to 60% from September 2016 to May 2017 (9 months)

RESULTS

Despite not reaching our AIM, we were able to increase our colon cancer screening rate by 16% from 9/2016 to 5/2017. The most common barrier to colon cancer screening reported was difficulty scheduling a colonoscopy. Future steps include collaborating with GI to develop a more efficient and effective colonoscopy scheduling system and having multiple resident education sessions to train residents on how to effectively educate patients about FIT as an alternative CRC screening option. The second most common barrier identified by patients was fear of colonoscopy. We hoped that offering FIT testing would be a suitable alternative for these patients. A future direction is a handout for patients addressing common patient concerns regarding colonoscopy and providing further information to allow for greater patient education and reassurance.

REFERENCES