Provider Recommendation: Influence on Colorectal Cancer Screening

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Acknowledgements

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Background

• Colorectal Cancer: 3rd leading cause of cancer related death
• Healthcare Cost $51,327 (National Cancer Institute, 2010)
• 2016 = 95,270 new cases (American Cancer Society, 2016)
• Provider recommendation has a positive impact on screening rates
Gap Analysis

- Goal: 80% by 2018
- Gap: 40% of eligible Texans
Literature Review

• Impact of Screening and Screening Options
• Adjuncts to Provider Recommendation
• Effect of Provider Recommendation
Iowa Model Seven Steps to Increase Colorectal Cancer Screening

Step 1: Identify a Trigger
Step 2: Form Team
Step 3: Evidence Retrieval
Step 4: Grade the Evidence
Step 5: Developing an EBP Standard
Step 6: Implement the EBP - Pilot
Step 7: Evaluation
PICOT

• In patients 50-75, does a standard provider script increase CRCS compared to usual care by 2018?
Methods

• **Design:** A pre- and post- intervention design

• **Population/Setting/Data Collection Period:** A convenience sample

• **Inclusion Criteria:** Average risk patients ages 50-75 without prior screening

• **Exclusion Criteria:**
  - Prior History of Colon Cancer
  - Patients not Seen in Clinic During Intervention Period
  - Terminal Illness

• **Privacy and Confidentially:** IRB approval from UTA and the hospital system
Data Analysis/Results

- A two-sample chi-square test examining post-intervention data showed no significant difference ($p > 0.005$, 95%), (Fisher’s Exact $p = 0.156$, N = 169).

- Descriptive statistics revealed white men had the highest rates of completing screening after receiving intervention.
Discussion

• Primary Care Providers positively impact CRCS rates by making recommendations
• No significant difference was found in pre-intervention screening rates vs post-intervention
• Use of a standard script is sustainable
• Follow up phone calls after intervention could further increase CRCS
Limitations

- Small sample size
- Natural disaster
- Shift in community priorities
- Use of convenience sample
- Inaccuracies in Information Technology (IT) report
- Patient refusal to participate
- Lack of privacy
- Missed opportunities
Implications

- Provider recommendation has a positive effect on CRCS rates.
- Using a standard script provides consistency
- Embedded Script in the EMR
Conclusion

• Provider recommendation is one of the most important measures that influences a patient’s decision to complete CRCS (ACS, 2014).

• Utilizing a standard script can provide consistency in recommendations (ACS, 2014).
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