

Objective

- Increase cancer screenings at PHC
- Make patient and care team accountable for preventative care
- Increase pre visit planning

Background

Historically we did not have a process in place to ensure cancer screenings were being done.

It was recognized that we needed to make a change as percentages were severely low.

Actions Taken

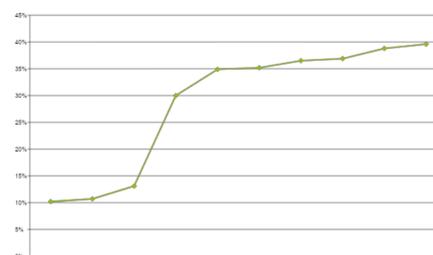
- Creation of the 'Green Sheet' with content to the right.
- Teaching the staff/providers about the need for change.
- Asking patients about their screening history.
- Finding documents of completed screenings to be in the charts.
- Ordering appropriate preventative tests.
- teaching the patient of importance for the screenings.
- Assisting underinsured or uninsured patients to get screenings by utilizing programs

Improving Cancer screenings at Primary Health Care: The 'Green-Sheets'

Dania Siddiqui, M.D.; Nayab Syed, M.D.; Saeed Afaneh, M.D; Chandramohan Batra, M.D., and Michelle Robbins, RN
Statistician Chunfa Jie, PhD

Primary Health Care At MercyOne Des Moines, Iowa

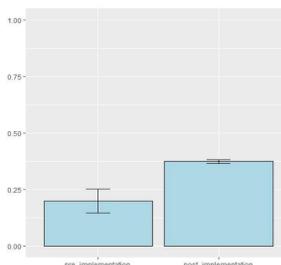
Breast Cancer Screening



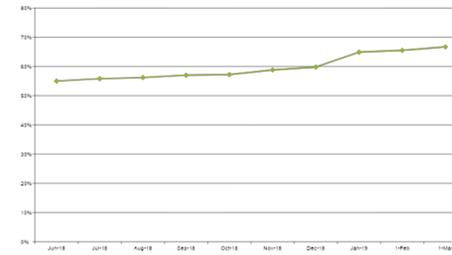
Percentage of female patients aged 40 to 70 with a medical visit who had a mammogram completed in the last 2 years:

Mean of pre-intervention= 0.199
Mean of post-intervention=0.374
Mean difference= 0.174

The difference in means is statistically significant.
(p-value= 0.012)



Cervical Cancer Screening

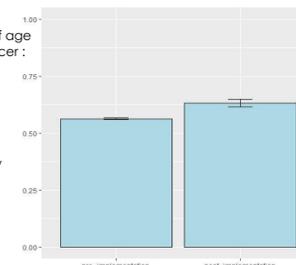


Percentage of women 23-64 years of age who were screened for cervical cancer:

Pre-intervention Mean= 0.562
Post-intervention Mean= 0.631

Mean difference= 0.069

The difference in means is statistically significant.
(p-value= 0.003)



AGE 50-75	Colorectal cancer screening	Insurance type
-----------	-----------------------------	----------------

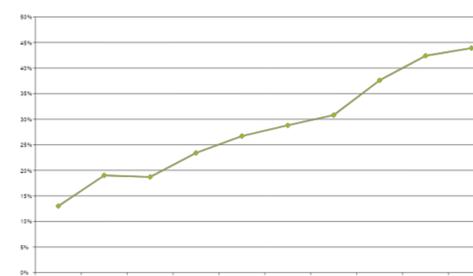
Screening history	YES/NO	Method used
-------------------	--------	-------------

When?	Where?	Provider?	Normal/Abnormal
-------	--------	-----------	-----------------

Female 40-70	Breast cancer screening	Last mammogram
--------------	-------------------------	----------------

Female 21-64	HPV screening/PAP	Last PAP?
--------------	-------------------	-----------

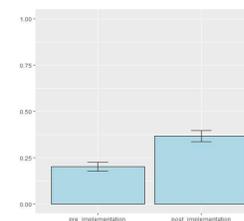
Colon Cancer Screening



Percentage of patients ages 50-75 who have received colon cancer screening:

Mean of pre-intervention= 0.202
Mean of post-intervention=0.367
Mean difference= 0.165

The difference in means is statistically significant.
(p-value= 0.00254)



Analysis

Regarding percentile screened:

The percentage of women 23-64 years of age who were screened for cervical cancer using either of the following criteria: Women age 23-64 who had cervical cytology performed every 3 years OR Women age 30-64 who had cervical cytology/human papillomavirus (HPV) cotesting performed every 5 years had a mean difference of **6.9% (p = 0.003)**. This result may be attributed to the reminder the 'green-sheet' process given to the nurses and resident physicians before each visit. The general awareness of cervical cancer screening increased due to repeat reminders throughout the day and indeed throughout the length of the study.

The percentage of female patients aged 40 to 70 with a medical visit who had a mammogram completed in the last 2 years increased by **17.5% (p=0.0118)**. Previously in our clinic, there was no process in place to ensure adequate breast cancer screening. The 'green-sheet' process filled that void and subsequently a significant improvement.

The percentage of patients ages 50-75 who have received one of the following: a colonoscopy within the last 10 years, a sigmoidoscopy within the last 5 years, a FIT/FOBT test within the last 1 year, or Cologuard in the last 3 yrs increased by **16.5% (p= 0.003)**. The education provided to the nurses and residents as a part of the process regarding new developments in Cologuard screening, including insurance coverage improvements, contributed to this change.

Next Steps

Continue with utilizing 'Green sheets.'

Audit charts for patients that have not met screening needs and reach out to them.

Follow up with patients and test results to make sure information is placed in the EMR.

Encourage patients and provider to be knowledgeable of current guidelines.

