

The Impact of PCP Counseling for Colorectal Cancer Screening- A Primary Care Quality Improvement Project



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BACKGROUND

- Effective primary care physician (PCP) counseling plays a key role in patient adherence to primary prevention cancer screening programs.
- The impact of PCP counseling on the patients' adherence to colorectal cancer (CRC) screening programs is believed to be underestimated.
- Therefore, we conducted a 24-week prospective quality improvement initiative investigating the effects of PCP counseling for CRC screening on patient participation rates.

METHODS

- ❖ We identified patients who met the criteria for CRC screening during their routine primary care appointments at the resident-run internal medicine ambulatory clinic at Cleveland Clinic (CCF) from October 2021 to March 2022.
- ❖ A fishbone diagram was used for root-cause analysis which revealed key causes of inadequate CRC screening: lack of patient education and awareness about the importance of CRC screening. Our PDSA cycle included patient education by PCPs about the importance of CRC screening in asymptomatic patients and the benefits of early treatment of the disease.
- ❖ The PCPs explained various screening modalities. The chosen modality was ordered for interested patients. The primary outcomes were the percentage of patients who agreed to undergo CRC screening and the percentage of patients who scheduled or completed the screening test

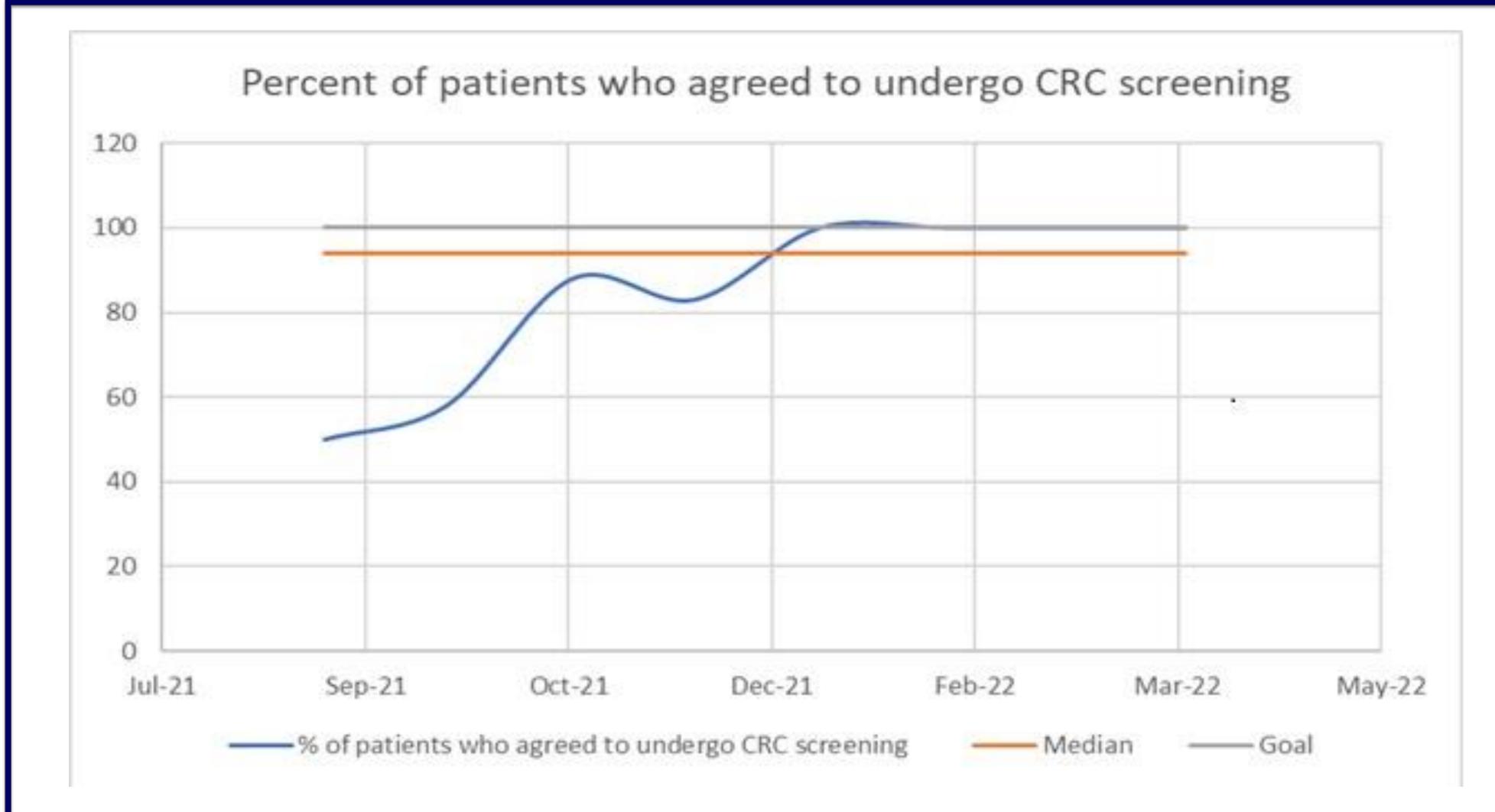


Figure 1. Time course of patients who agreed to undergo CRC screening.

DISCUSSION

- Our study demonstrates that PCP counseling is associated with high patient engagement to undergo CRC screening.
- ❖ However, it is still unclear whether PCP counseling in the context of a primary care clinic visit alone is sufficient to ensure the completion of CRC screening. Thus, we plan to examine CRC screening completion rates within a year of the original test being ordered and explore barriers that limit the completion of CRC screening by surveying patients in subsequent clinic visits.
- * We will propose other interventions (email reminders or phone calls) to address these barriers and improve CRC screening completion rates.

RESULTS

- ❖ A total of 52 subjects both met the criteria for CRC screening and attended their routine primary care appointments at CCF where they underwent PCP counseling. Only 4 (8%) patients had undergone a prior CRC screening test.
- The median age was 55 years, and females compromised 52% of the subjects.
- ❖ A total of 44 subjects (85%) agreed to undergo CRC screening after being counseled by their PCPs. Of those 44 individuals, 42 (95%) chose colonoscopy, and two (5%) chose FOBT.
- ❖ By the end of the study period, eighteen patients (41%) had either scheduled or completed their tests.

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