



Improving Colorectal Cancer Screening Rates in North Dakota



Quality Health Associates
of North Dakota

Crappy Communication (Pun intended)

**Did you
know?**

“People are dying of embarrassment or ignorance, and it is completely unnecessary.”

-Beverly Greenwald, 1/13/2021 (Phone call)

How to
Become a
Colorectal
Cancer
Screening
Champ!



Your guide to successful FIT testing

STEP 1. Fill out the information on the sampling bottle.



Write your name, birth date, current date and time on sampling bottle.

STEP 3. Deposit a stool sample on top of the collection paper.



STEP 5. Use the probe to scrape the surface of the stool before the stool touches the water.



Cover the grooved portion of the sample probe completely with stool.

STEP 7. Wrap the sampling bottle in the small absorbent pad and place it in the biohazard bag.



STEP 2. Place the collection paper on top of the water in your toilet.



STEP 4. Open the sampling bottle.



STEP 6. Place the probe with stool sample back in the sampling bottle and close it. Do not reopen it.



The collection paper is biodegradable and can be flushed.

STEP 8. Place the probe with stool sample back in the sampling bottle and close it. Do not reopen it.



The stool sample is perishable. Please return the kit as soon as possible within 48 hours.

IMPORTANT Please return the completed kit by mail or in person to your clinic within 48 hours of collecting your sample. The stool sample is perishable.

NEED HELP? Contact your primary care physician.

Tips to do while the patient is still in the office

Open the package and explain the process with the patient:

1) Keep this package where you most-often have a bowel movement. How often do you have a bowel movement? What time of day is that? Where is that? That's where this kit needs to be stored. (No refrigeration is needed.)

2) Get agreement to complete the test with the next bowel movement.

“OK then, I can probably expect this kit to be returned in (X) days.”

“I will follow-up in (Y) days to help you make sure you complete this important test.”

A) Update the phone number so you can call the patient for follow-up.

B) Update the mailing address in case a replacement kit needs to be mailed.

C) Here is an instructional video to send by email if the patient wants or this video can be used in your

clinic: <https://www.youtube.com/watch?v=MU0nSa5f8WQ>

D) Pre-paid postage helps return rates.

E) Label the vial with the patient information: name and date of birth.

Poop on Demand: process where patients can complete the test before leaving the clinic



Discuss how to complete the test

Open the package and explain the contents.

Paper

- A) This flushable paper goes on the toilet water to keep your stool out of the water.
- B) Keep the stool away from any chemicals in the toilet water.
- C) If you put the paper down and then didn't collect a specimen, that's OK. There are other ways to collect the stool.
 - a. Scoot forward on an elongated toilet seat and have the stool fall onto the toilet bowl.
 - b. Put a substantial amount of toilet tissue into the bowl so the stool will sit on that toilet tissue.
 - c. Turn off the water to the toilet, flush the toilet, and collect the stool in a dry toilet bowl.
 - d. Otherwise, collect the specimen in a coffee can, yogurt container, ice cream bucket, etc. Collect the samples. Then flush the stool down the toilet.
 - e. Call me at 701-xxx-yyyy and I can mail you a new kit with new paper.
 - f. Write your name and phone number on the outer envelope in case the patient has questions.

How to collect the specimen

- A. Remove this lid from the vial.
- B. See these grooves on the tip of this probe? That's how far to insert this probe into the stool sample.
- C. Probe the stool sample in random places (per the manufacturer's directions which may vary).
- D. Reinsert this probe into the vial.
- E. Write the 1) date and 2) time of collection on the vial.
- F. Wrap the vial with the absorbent paper.
- G. Place the vial into the BioHazard Bag, insert the bag into the mailing envelope, and put it in the mail or deliver it to the clinic.

Fecal occult blood test kit



The single fecal occult blood test kit may be used at home. First, unroll the sheet of special paper on top of the vial in the kit box. After you have a bowel movement, you use the sampling stick to collect a small amount of stool that has been deposited on the testing paper. You then insert the sampling stick with the stool sample in the collection container and snap the cap in place. You may either return the sample by post (see enclosed details) or to the lab for analysis.

Why do I
need to
complete this
test?

COLON CANCER is:

Preventable.

Treatable.

BEATABLE.

Regular testing can prevent colon cancer or find it early.
If you're 50 and older, go get tested!



THE OFFICIAL SPONSOR OF BIRTHDAYS®

cancer.org/fightcoloncancer

Colon Cancer
is the cancer no
one needs to
die from!

Colon cancer is the
number 2 cause of
cancer deaths in men
and women combined

For example, colon cancer is the second leading cause of cancer death in the United States. Every four minutes someone is diagnosed, and every nine minutes someone dies.

(Kevin Richardson)

IZQuotes

Colon Cancer Statistics

Odds of 1 in 20? The raffle no one wants to win!

Colon Cancer at a Glance



Colon cancer is the second leading cause of cancer-related death in the U.S.



On average, your risk is about 1 in 20, although this varies according to individual risk factors.

50+

90% of new cases occur in people 50 or older.



People with a first-degree relative (parent, sibling or offspring) who has colon cancer have two to three times the risk of developing the disease



There are currently more than one million colon cancer survivors in the U.S.

Colon cancer screening saves lives

This simple test could save your life, and a lot of suffering

5 REASONS TO GET TESTED FOR COLON CANCER

if you're 50 or older or have a family history of colorectal cancer

1. YOUR KIDS
2. YOUR FRIENDS
3. YOUR EXTENDED FAMILY
4. YOUR FUTURE
5. YOURSELF

To learn about ways to prevent colon cancer,
visit cancer.org/fightcoloncancer or call 1-800-227-2345.



There are no early symptoms of cancer.

Screening helps find colon cancer early.

**THE SYMPTOMS
OF COLORECTAL
CANCER CAN BE
NO SYMPTOMS
AT ALL.**

COLORECTAL CANCER SYMPTOMS

-  Blood in your stool
-  Unexplained weight loss
-  Change in bathroom habits
-  Persistent cramps or low back pain
-  Fatigue
-  Feeling bloated
-  Anemia

Late signs of cancer

Finding tiny polyps before they turn to cancer

“This test checks for blood in your stool that might mean you have a growth called a “polyp” in your colon that could turn to cancer. Polyps start small and may grow larger over time and eventually turn to cancer. Polyps will bleed before they turn to cancer.”

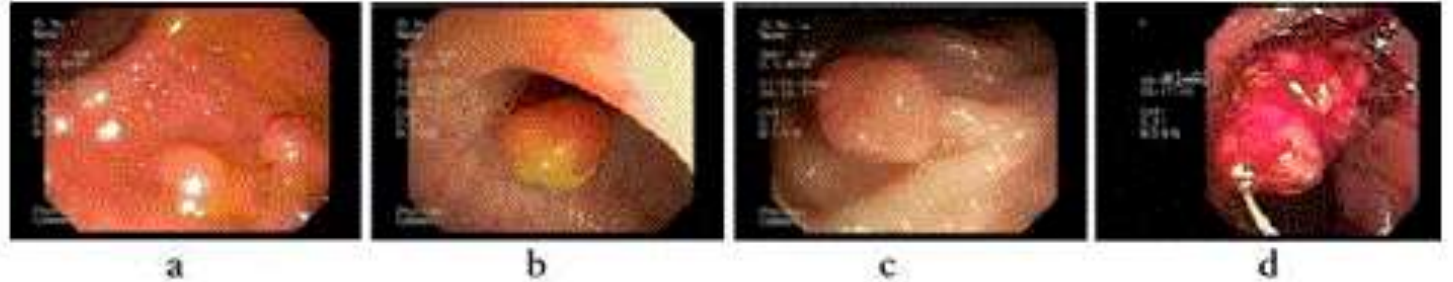
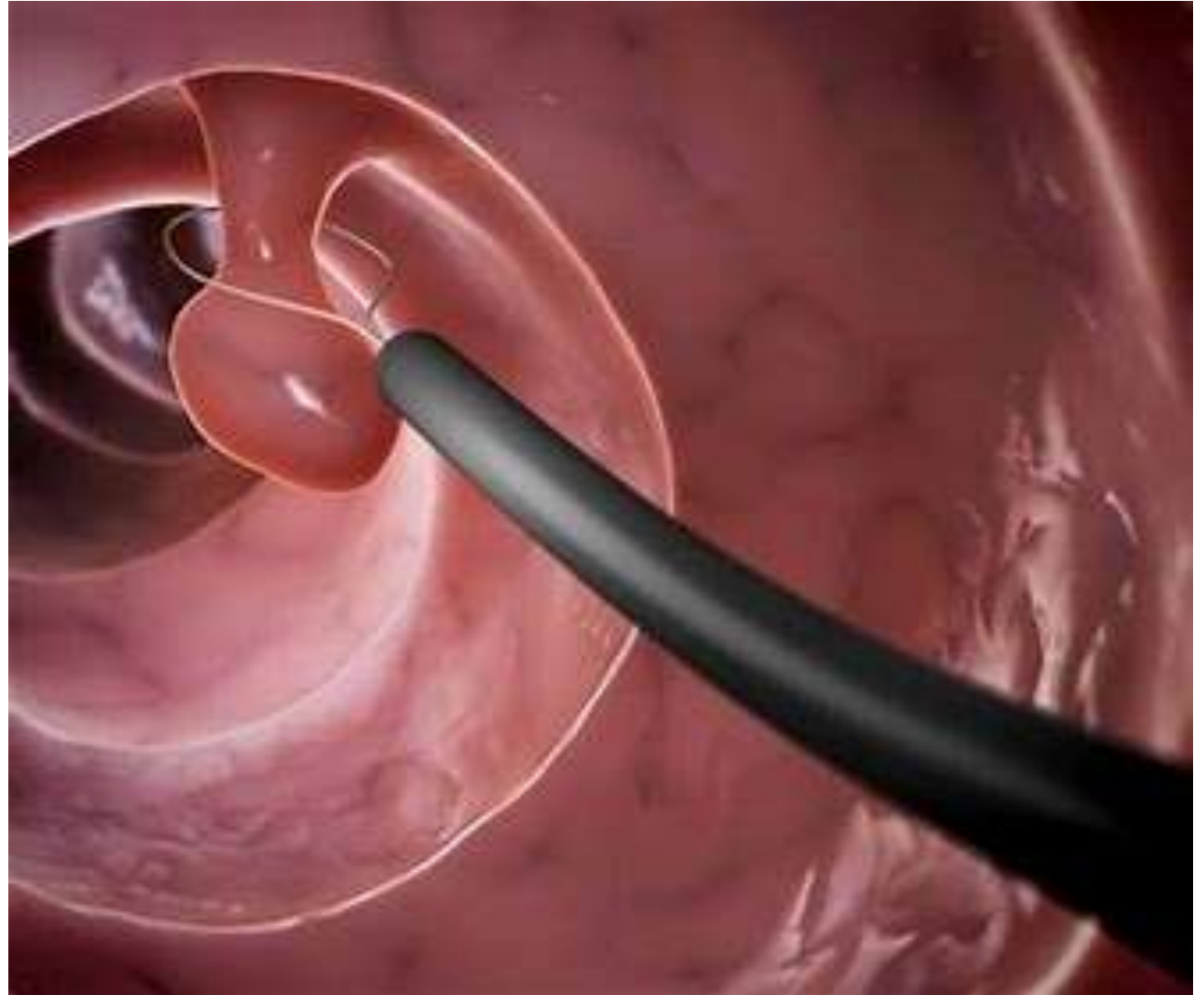


Figure 1: The progression from polyp to cancer, that usually begins as set of benign polyps that protrude the mucosa. Firstly in (a), stages 0 and I of early colorectal cancer, a set of benign polyps that grow from the mucosal (hyper cell proliferation). In (b), stage II is a higher grade of dysplasia. In (c), stage III or adenocarcinoma and in (d), stage IV or an invasive cancer tumor.

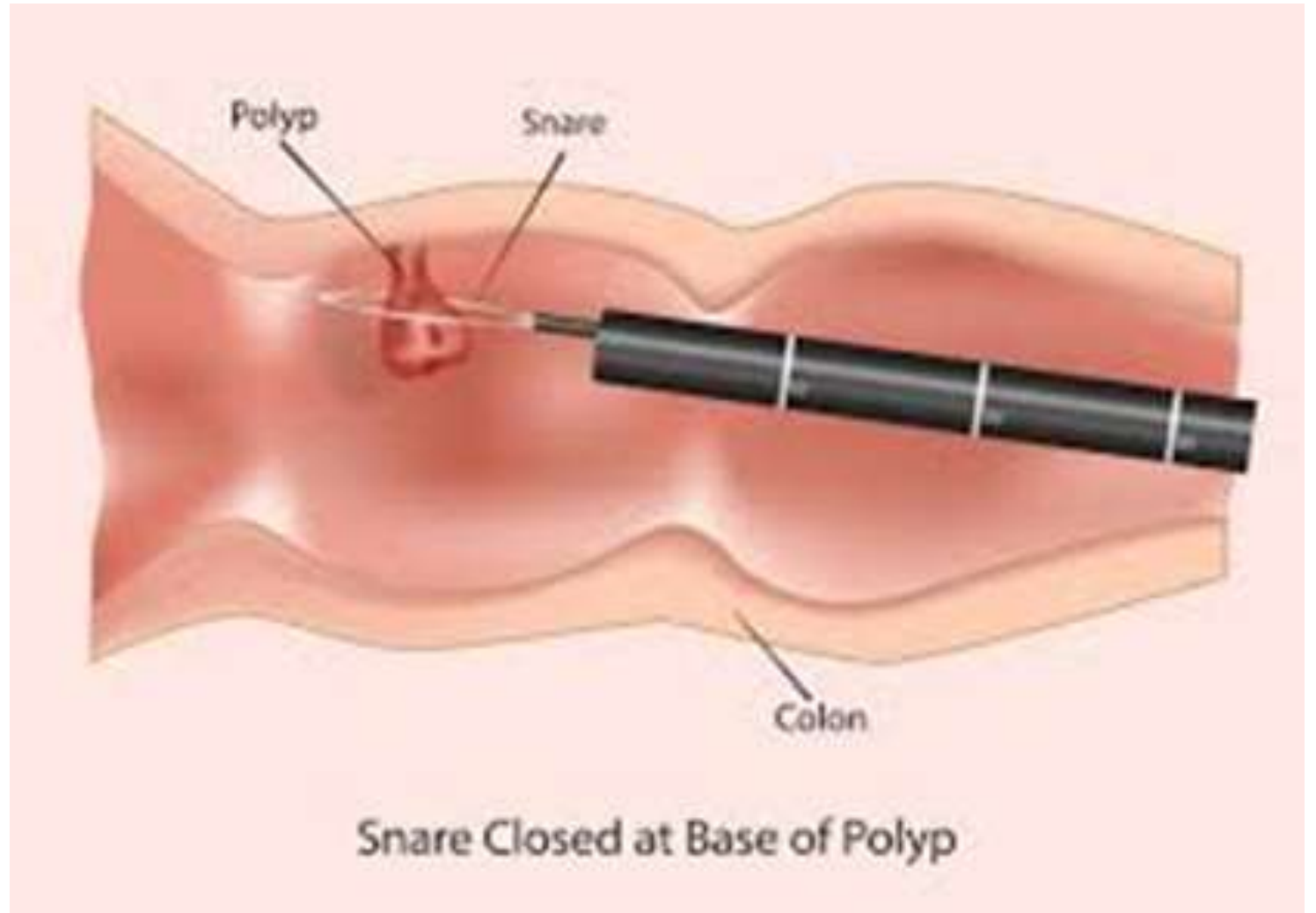
What happens if this test is positive?

If this test is positive for blood, we will look to see what is causing that blood loss. We hope to find these bleeding polyps or cancers early when they are easily removed.



Colonoscopy: the follow-up for any positive stool test

The second test is a
colonoscopy and polyps and
small cancers can be easily
cut out during that exam



Thank you! The behavior- changing power of positive thanking

Thank the patient for collecting this test sample.

Thank the patient for calling with any questions.

Thank the patient for requesting a new kit, if needed.

Thank the patient for putting the sample into the mail by XXXX, as agreed.



Gratitude
can change
everything.

When test samples are not returned by the agreed upon date



- Call the patient at the number provided to remind the patient or resolve any problems.
- Thank the patient for collecting this test sample (add your name and phone number to the envelope).
- Thank the patient for calling with further questions.
- Thank the patient for requesting a new kit, if needed.
- Thank the patient for putting the same in the mail by XXXX, as agreed.

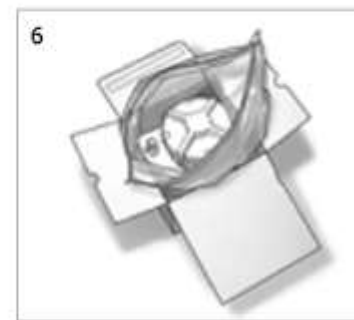
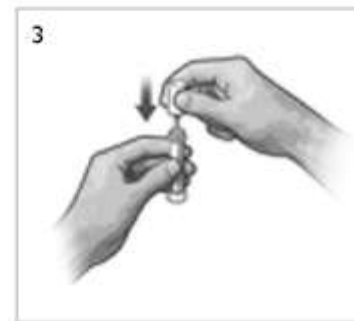
Nonadherent patients

Many clinics use Patient Navigators to help patients adhere to their treatment plans. Patient Navigators can be assigned to ensure timely return of these test samples.

Use a tracking system to make sure all kits get returned.



Multi-target Stool DNA Test



Cologuard

Kit includes both the FIT test and a container to collect at least 30 grams of stool (one ounce med cup = 30 grams).

- The patient sends the kit to the manufacturer within 24 hours.
- The results are mailed to the provider.
- Most insured patients pay no out-of-pocket for this test.

Video:

- <https://www.youtube.com/watch?v=LRiJiwkoiNQ>

Cologuard support services

- This is the Cologuard video:
<https://www.youtube.com/watch?v=LRiJiwkoiNQ>
- Clinics that do not have Patient Navigators may benefit from adopting the Multi-target Stool DNA test.
- This product includes a Patient Navigator service which will call patients until they return the stool sample.
- This test is completed every 3 years.
- The company will call the patient until this kit gets returned. This company makes no money on tests that are not completed. They will make sure your patient returns this test.



Make Colorectal Cancer Screening your routine!

Any office visit is an opportunity to provide these stool test kits.

The CDC has free posters and brochures:

<https://www.cdc.gov/cancer/colorectal/resources/print.htm>

Keep these resources in your exam rooms.



CRC Screening test intervals



FIT	Annual
Multi-target Stool DNA tests	Every 3 years
Screening Colonoscopies	Every 10 years
Any positive stool test must be followed by a colonoscopy Pathology results determine the follow-up interval.	

The CRC screening interval is test-dependent.
The right test is the test the patient will *actually do*.

How to get those 2nd step colonoscopies completed:
Remove the barriers

If 2020 was
a drink, it
would be a
**colonoscopy
prep.**



Provide assistance with understanding how to do the preparation.



Patients who tend to get nauseated might benefit from nausea medication.



Patients who are constipated might need a few days on clear liquids or additional preparation to get cleaned out.



Refer to colonoscopy facilities that offer Patient Navigators to assist with the preparation.



Arrange transportation to the colonoscopy facility. Sedation requires a driver to be present.



Watch for the colonoscopy results. If they do not arrive, investigate the reason and reschedule patients who didn't show for colonoscopy. Resolve the barriers they reported.

Discussion

- Do you have questions about how to address a specific barrier to screening that is common in your population?
- Where are the missed opportunities for screening among your clinic visits?
- What are your best tips for patients completing a stool test? Or colonoscopy prep?

Resources for the Journey Ahead

Resources: www.ScreenND.org

- 2019 Colorectal Cancer Screening Messaging Guidebook
- CDC: <https://www.cdc.gov/cancer/colorectal/resources/index.htm>
- American Cancer Society ([scroll down on this page](https://www.cancer.org/cancer/colon-rectal-cancer.html)): <https://www.cancer.org/cancer/colon-rectal-cancer.html>
- Fight Colorectal Cancer: <https://fightcolorectalcancer.org/resources/>
- Colorectal Cancer Alliance: <https://www.ccalliance.org/colorectal-cancer-information>

Next Steps

- How can you share what you learned today with others on your staff?
- Does your team use a standardized set of patient education tools?
- Evaluation: <https://www.surveymonkey.com/r/ScreenNDModule5050621>

Next Call: May 20th, 9:30 am. Topic: Measuring Practice Progress

ScreenND Contact Information

Nikki Medalen, MS, BSN

Quality Improvement Specialist

nmedalen@qualityhealthnd.org | 701-989-6236

Natasha Green, MBA, RN

Quality Improvement Specialist

ngreen@qualityhealthnd.org | 701-989-6226

Jonathan Gardner

Network Administrator/Data Analyst

jgardner@qualityhealthnd.org | 701-989-6237

