

Snapshot

A quick look at tips, tools, and updates for CRC screening improvement

March 2022

March is Colorectal Cancer Awareness Month!

TURN YOUR FACILITY BLUE!

This recognition month is a great opportunity to draw attention to the importance of CRC screening and provides a chance to share the amazing work you are doing to increase CRC screening rates for patients in your community.

Check out the photo contest and other awareness month resources here.



Congratulations to First Care Health Center (Park River), Quentin N Burdick Memorial Health Care Facility (Belcourt) and South Central Health: Wishek, Napoleon, Gackle and Kulm Clinics on achieving the BRONZE MILESTONE!

QUOTE OF THE WEEK

Colorectal Cancer screening has an advantage over any other type of screening – and that is that there is no need to come into the clinic for most clients. They can screen at home and mail in the sample. You can't do a pap smear for yourself and you can't do a mammogram at home, but you can do a stool test. ~ Susan Mormann, ND Women's Way

Featured Resource

Clinical Guidelines for Your Mobile Device

Access American Gastroenterological Association (AGA) Guidelines on your mobile device at the point-of-care with intuitive and quick navigation and use built-in interactive tools such as diagnosis and treatment algorithms. Currently there are guidelines for nine conditions with more being added regularly.

Apple: AGA Clinical Guidelines - App Store

Android: AGA Clinical Guidelines - Google Play

Peer Sharing

Using SlicerDicer: "CliniCare was granted access to the SlicerDicer tool a few months ago, and after receiving a videorecorded tutorial, we have been able to gather data needed to upload CRC data to Redcap for CRC tracking purposes. This tool helps us extract data from multiple different areas within Epic. It's unique in that it allows us the ability to narrow or hone in on specific data with filters to get the exact information we are seeking. The tool has been helpful to allow us to detect patients who fit the criteria for CRC screening, and get them set up with screenings—whether it be FIT, Cologuard, Colonoscopy, etc. We will continue to use this tool in conjunction with Health Maintenance to better care for our patients by identifying patients who are due for various tests."



Study Investigates Impact of CRC Screening Age on Predicted Outcomes

A recent study modeled perfect and real-world adherence to colorectal cancer (CRC) screening to estimate clinical outcomes for triennial mtsDNA and annual FIT CRC screening strategies in a simulated cohort screened from ages 50-75 and 45-75 years.

Key findings:

- Lowering the age from 50 to 45 years resulted in more predicted life-years gained (LYG) per 1000 individuals and greater reductions in CRC incidence and mortality for both mtsDNA and FIT and regardless of adherence assumptions.
- Annual FIT resulted in greater LYG and fewer CRC cases and deaths than triennial mtsDNA when perfect adherence was applied, whereas triennial mt-sDNA resulted in a greater benefit than annual FIT when reported real-world adherence was applied.

Click <u>here</u> to read the findings and <u>here</u> to listen to a summary by Dr. Durado Brooks.

