

BC CANCER AGENCY

Colon Screening Program



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Volume, Wait Time and Quality Initiatives Summary
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Primary Care Provider Role in CSP

- **Key influencer for patients**
- Discuss colon screening with patients
 - Referral = registration into the program
- Assess patient eligibility and refer patients for:
 - FIT (average risk)
 - **Discuss implications of an abnormal FIT**
 - Screening colonoscopy (significant family history)
- Kept informed of results throughout pathway
- Discuss results with patients as required

Roles and Responsibilities

the PATHOLOGIST



- Diagnose colorectal polyps and biopsy specimens
- Utilize standardized reporting to provide key information for surveillance and management decisions
- Participate in quality assurance activity

the BC CANCER AGENCY



- Promote program (e.g., personalized mailed invitations, patient brochures, etc.)
- Recall patients at recommended interval
- Develop provincial standards and guidelines
- Monitor and report on program performance and outcomes



the COLONOSCOPIST

- Provide pre-colonoscopy assessment as required
- Provide colonoscopy procedure
- Participate in quality assurance activities to:
 - minimize colonoscopy-related complications and missed polyps and cancers
 - maximize patient safety



the PATIENT

- Patient takes form to participating lab to pick up FIT kit
- Patient completes test at home
- Patient drops off completed test at lab for processing
- BC Cancer Agency, as appropriate, will arrange for patient to see HA patient coordinator for follow-up colonoscopy

the GP



- Key influencer for patients
- Discuss colon screening with patients
- Assess patient eligibility and refer patients for:
 - FIT (average risk)
 - Screening colonoscopy (significant family history)
- Kept informed of results throughout pathway
 - Discuss results with patients as required



the PATIENT COORDINATOR

- Receive referral letter for colonoscopy
- Provide pre-colonoscopy assessment
- As appropriate, book patients for colonoscopy
- Provide patients with information on the procedure and complete instructions on preparation for colonoscopy
- Notify GP if patient not proceeding to colonoscopy

the BENEFITS

Colon Check Pilot reported:

- over 90% acceptance rates for follow-up of abnormal FIT results
- 99% adequate bowel preparation
- better patient preparation for test with fewer repeat procedures
- all medically unfit participants identified prior to being booked for colonoscopy
- patients expressed a high degree of satisfaction with patient coordinator role