University of Texas MD Anderson Cancer Center

Office of Health Policy Alliance for Colorectal Testing Program Instructions

Project Background

The Alliance for Colorectal Testing (ACT) screening project aims to increase colorectal cancer screening (CRCS) for asymptomatic patients at average risk. Primary care clinics are enlisted to offer take-home Fecal Immunochemical Test (FIT) tests to their patients who are uninsured and/or who have low-income. Clinical staff are encouraged to introduce CRCS at all opportunities of provider/patient interaction, including at the time of annual flu inoculation. This project is funded by the Cancer Prevention and Research Institute of Texas (CPRIT)

Clinical Staff Procedures

- 1. Assess financial eligibility criteria, this program is for patients who are:
 - Uninsured
 - Underinsured (i.e. high deductible for colonoscopy)
- 2. Assess clinical eligibility criteria, patients must meet *all* of the following:
 - 50 75 years of age
 - Asymptomatic patients without the following:
 - Visible rectal bleeding or hematuria
 - o Ileostomy or colostomy
 - Symptomatic acute colitis or acute diarrhea
 - Recent acute diverticulitis
 - o Recent colorectal surgery
 - o Active inflammatory bowel disease (Crohn's, ulcerative colitis)
 - Are not menstruating when they take the stool specimen
 - No guaiac-FOBT or FIT screening in the past 12 months
 - No colonoscopy or sigmoidoscopy within the past 5 years
 - Willing and physically able to prepare a stool specimen
 - No patients with terminal illnesses
 - Meet American Cancer Society's screening guidelines for average or increased risk for colorectal cancer (increased risk patients should be referred directly to colonoscopy, not given a FIT).

3. Complete the 2-part lab requisition:

- Write legibly and clearly the name, address, phone, age, and sex for all patients given a FIT.
- Give one copy to the patient to mail in with the specimen.
- Fax the second copy to MD Anderson: (713) 794-1951.
- Keep the second copy for the patient's medical record at the clinic.
- FIT results will be available to clinic via usual reporting from LabCorps.
- 4. Clinic primary care physician will notify patient of results:
 - Negative results repeat FIT test in one year
 - Positive results inform patient that MD Anderson will contact them to schedule colonoscopy

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MD Anderson Responsibilities to Clinics:

- Train clinic staff members on Project procedures and patient qualification criteria;
- Provide Clinic with Project information, patient education materials, laboratory requisition forms, and FIT kits;
- Register patients in the Project database and track unreturned FIT kits;
- Send reminder letters to patients who have not returned the specimen to the laboratory;
- Track returned and processed FIT results;
- Schedule colonoscopy examinations for patients with positive FIT results referred to MD Anderson by Clinic, coordinate with patients as necessary through the completion of the colonoscopy examination and record the results of the colonoscopy procedures;
- Report patient status and all colonoscopy procedure outcomes to the patient's primary care physician at Clinic;
- For patients diagnosed with colorectal cancer or other medical conditions identified through this screening, navigate patient to treatment for which they are eligible;
- Send reminder letters to patients for annual colorectal screening by regular mail, e-mail or placement of reminders in patient charts.

ACT Project Contacts

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