Colorectal Cancer Awareness

Colorectal Cancer is the third-leading cause of cancer related deaths in the United States and is expected to cause more than 50,000 deaths this year. This month, we'd like to bring Colorectal Cancer awareness to the forefront and encourage all of our providers to emphasize the importance of regular screenings and early detection.

Colorectal Cancer Screening (COL)

The American Cancer Society estimates there will be more than 140,000 new cases of colorectal cancer in the United States this year. It is more important than ever to encourage patients 50 years and older to receive regular screening tests.



Colorectal Cancer in the U.S.

About 90% of new cases occur in people aged 50 years or older It is estimated that 50,630 deaths will be caused by colorectal cancer It is the **3rd leading** cause of cancerrelated deaths

The colon cancer death rate in this country could be cut in half if Americans simply followed recommended screening guidelines.

The HEDIS® Measure

Adults 50-75 years of age who have a colorectal cancer screening within acceptable timeframes

Documentation Required

- Procedure reports
- Consult/Lab reports with evidence of appropriate screening (see list)
- Progress note indicating type of testing and date performed (year of exam will suffice*)

Appropriate screenings include one of the following:

- Fecal occult blood test (FOBT) performed every year
- Flexible Sigmoidoscopy performed every 5 years
- CT Colonography performed every 5 years
- Colonoscopy performed every 10 years

Provider Tips:

- Strongly encourage screening
- Emphasize importance of early detection
- Help patients overcome barriers if reluctant to go for testing
- Offer alternative methods of screening (eg FOBT, Cologuard)

Remember 3 acceptable forms of documentation include:

- 1. Reports from GI provider (i.e.-Colonoscopy Report)
- 2. Lab Reports (FOBT)
- 3. Progress Notes* indicating type of testing and date performed (Exact date is not necessary, year of exam will suffice)

*Progress Notes: Do not use vague terms such as done "approximately" or write question marks (??) when documenting when a procedure was performed.