Cancer Survivor Follow-up in Primary Care

Dr. Mario Elia
OntarioMD Peer Leader
Faculty / Speaker: Mario Elia MD, OntarioMD Peer Leader

Relationships with commercial interests:

• No relationships with commercial interests
Disclosure of Commercial Support

This program has not received financial support or in-kind support from any organization

**Potential for conflict(s) of interest:**

Mario Elia MD has not received payment or funding from any organization supporting this program AND/OR organization whose product(s) are being discussed in this program.
Mitigating Potential Bias

• There are no potential sources of bias.
Objectives

• Review the importance of accurate and efficient follow-up of our cancer survivors

• Identify challenges in identifying and tracking these patients

• Provide an easy-to-use framework for moving forward with cancer follow-up
The Problem

• More cancer follow-up is being downloaded to primary care
  Rarely are we given specific constructs on how to integrate this

• Most have efficient processes in place for diabetes, CHF, immunizations, cancer screening

• In busy practices, can easily become neglected
  “Number needed to track” is very low, huge opportunity for improvements
What is Required

• A system for each practice that allows for cancer follow-up that is inclusive of all affected patients

• Follow-up interventions meet current standard of care, and can be easily updated to reflect new evidence

• Can be easily integrated into a busy practice, with the least amount of human resources required moving forward
Challenges

• Data standardization
  • Significant issue with both free-form and pre-set problem lists
  • Where is the data being entered?
  • How are you entering each cancer in your system?
    e.g. Breast cancer as: ca breast, breast ca, breast cancer, breast carcinoma, carcinoma of the breast

• Timing
  • Should this be occurring in real-time with reminders, or monthly, or yearly?

• Flexibility
  Is my system easily adaptable to changes in evidence?
A Sample Practice

- Sample practice of 2200 patients
- Number of living patients by cancer:
  - Bladder cancer - 14
  - Breast cancer - 42
  - Cervical cancer or dysplasia requiring treatment - 69
  - CLL - 6
  - Colorectal cancer - 21
  - Esophageal cancer/Barrett’s - 16
  - Lung cancer - 8
  - Lymphoma - 3
  - Melanoma - 28
  - Prostate cancer - 50
  - Renal cancer - 4
  - Sarcoma - 2
  - Thyroid cancer - 5
  - Uterine cancer - 4
A Possible Framework

- **Step 1: Decide on a standard method for labelling each cancer**
  - What are the cancers you need to be following?
  - What are your standard entries for each cancer?
  - Where will you enter this data? (Problem list, HPH, etc.)
  - Ensure that every local user is aware of these standards
  - Have glossary available at each clinical workstation

- **Step 2: Find the patients**
  - Go through each cancer, and expand searches to include every method you may have entered data in the past
  - I have a glossary of searches for those interested
  - Update patient data to reflect your new standards
Step 3: For each cancer, decide on most appropriate follow-up means

- What do they require for each cancer?
- Yearly check-up vs. imaging vs. bloodwork
- Passive reminder system vs. active searching
- Timed system audits? Monthly? Yearly?
- How often to review latest evidence for follow-up?
Expanding to Other Areas

• Framework can be used to track other pre-cancerous conditions

• Colon polyps
  • Tubular adenoma, tubulovillous adenoma, villous adenoma, serrated adenoma, colon polyp

• Thyroid nodules
• Barrett’s esophagus
Caution...

• Don’t run home and do all of this work today! (As tempting as it may be…)

• Establish a plan for your office, and delegate tasks accordingly

• Set a goal a few months down the road for where you want your office to be, and continually re-establish new goals for cancer survivor quality improvement
## Breast Cancer Follow-Up

### Jun 21, 2017

#### Breast Cancer Follow-Up - Diagnosis to 2 years

<table>
<thead>
<tr>
<th>Date of diagnosis:</th>
<th>Date of discharge back to primary care:</th>
<th><strong>Visits every 3-4 months</strong></th>
</tr>
</thead>
<tbody>
<tr>
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</table>

**Path/Treatment Received**

**Hormonal Treatment:**

<table>
<thead>
<tr>
<th>Visit Date:</th>
<th>ROS</th>
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<tr>
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- **bone pain**
- **abdominal pain/ascite**
- **arm swelling**
- **unexplained fatigue**
- **headache/neuro sx**
- **new unexplained cough**
- **weight loss**
- **irregular vaginal bleeding**
- **no relevant symptoms**

**P/E (include ht/wt/BP in separate note for data integrity purposes)**

**Affected breast, incision site and axilla:**

<table>
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**Impression**

- **No concerns re: recurrence or mets**
- **Concerns re: recurrence or mets**

**Plan (remember annual mammogram, BMD every 2-3 years if on aromatase inhibitor)**

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**OntarioMD**

Empowered Practices. Enhanced Care.
Prostate Cancer Follow-Up
Cervical Cancer Follow-Up

<table>
<thead>
<tr>
<th>Reminder Name: Preventative - Cervical Followup</th>
</tr>
</thead>
<tbody>
<tr>
<td>HPH/Past Hx/History of Past Health contains laser for cervical dysplasia</td>
</tr>
<tr>
<td>or</td>
</tr>
<tr>
<td>PROB/Problem List/Problem List contains laser for cervical dysplasia</td>
</tr>
<tr>
<td>or</td>
</tr>
<tr>
<td>HPH/Past Hx/History of Past Health contains LEEP,</td>
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<tr>
<td>or</td>
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<tr>
<td>or</td>
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<tr>
<td>HPH/Past Hx/History of Past Health contains cervix biopsy</td>
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<td>or</td>
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</table>

- Delete Line
- Add Line
- Indent Line ->
- Edit Line...
- Outdent Line

- Show Intervention as Reminder: Needs pap for f/u
- Show Custom Form or Stamp: N/A
- Priority: Medium (reminder report)
Cervical Cancer Follow-Up

Reminder Name: Preventative - Cervical Follow-up

- HPH/Past Hx/History of Past Health contains LEEP
- HPH/Past Hx/History of Past Health contains cone biopsy
- PROB/Problem List/Problem List contains cervical ca
- HPH/Past Hx/History of Past Health contains cervical ca
- PROB/Problem List/Problem List contains loop excision
- HPH/Past Hx/History of Past Health contains loop excision
- PROB/Problem List/Problem List contains cone biopsy
- CPP Prob ICD-9 any item starts with 555
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and
- Colposcopy, months since latest > 12
- Pap Test Report, months since latest > 12
- Age < 70
- HPH/Past Hx/History of Past Health does not contain hyst
- Sex is female