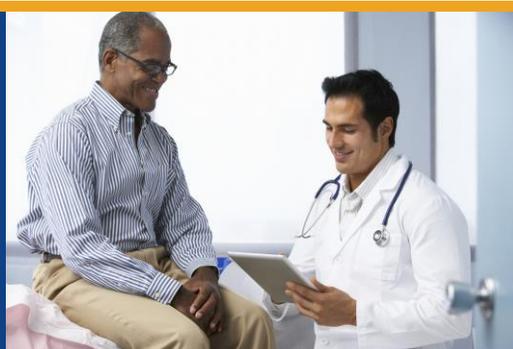


A Physician's Recommendation for Colorectal Cancer Screening Can Improve Screening Rates



About 3,000 New York State (NYS) residents die from colorectal cancer annually making it the second leading cause of cancer death in the state.^{1,2} Regular screening, beginning at age 45, is key to preventing colorectal cancer or finding it early when it is highly treatable. Screening can also find precancerous polyps so they can be removed before they turn into cancer.

Despite the effectiveness of colorectal cancer screening, over 30% of NYS adults are not up-to-date with screening.³ There is overwhelming evidence that a physician's recommendation can significantly improve cancer screening rates, but in NYS many adults in need of colorectal cancer screening report they are not getting this key recommendation from a doctor or other health care professional.⁴

In NYS, over 6 out of 10 patients due for colorectal screening did not recall receiving a recommendation to get screened.



Data Source: 2019 Behavioral Risk Factor Surveillance System.

Among NYS adults aged 50-75 years old that were not up-to-date with colorectal screening who had visited a doctor for a routine checkup within the past year, 64% responded no to the question "In the past 12 months, did a doctor or other health professional recommend that you be tested to look for cancer in your colon or rectum?"

Public Health Opportunity

Every member of a clinical practice including physicians, nurses, medical assistants, and front desk staff can play a key role in helping patients receive life-saving cancer screening tests by:

- Understanding the [power of the provider recommendation](#) as the most influential factor in whether a person decides to get screened.
- Recommending colorectal screening to all patients ages 45 and older, and to younger patients [at increased risk of disease](#) or who present with symptoms and may need to be tested earlier.
- Asking patients about their screening test preferences; studies show that average-risk patients are more likely to complete colorectal cancer screening when given a [choice of test](#).
- Reinforcing recommendations by using [patient reminders](#) and [small media](#) to promote colorectal screening.

References:

1. NYS Cancer Registry. Cancer Incidence and Mortality in NYS, 1976-2018. <http://www.health.ny.gov/statistics/cancer/registry/>. Accessed August 1, 2021.
2. NYS DOH About Colorectal Cancer <https://www.health.ny.gov/statistics/cancer/registry/abouts/colorectal.htm>.
3. [New York State Department of Health, BRFSS Brief Number 2021-17, Colorectal Cancer Screening, New York State Adults, 2019.](#)
4. Peterson EB, Ostroff JS, DuHamel KN, D'Agostino TA, Hernandez M, Canzona MR, Bylund CL. Impact of provider-patient communication on cancer screening adherence: A systematic review. *Prev Med.* 2016 Dec;93:96-105.

Contact: For more information about the data included and their specific implications for action, please send an e-mail to DCDIPIFA@health.ny.gov with **IFA # 2021-22** in the subject line. To see other reports, visit the NYSDOH public website: http://www.health.ny.gov/statistics/prevention/injury_prevention/information_for_action/index.htm