



COC Standard 4.2
Screening Programs
2017 Report
November 30, 2017

Screening colonoscopy has been shown to be an effective technique for reducing the incidence of colon cancer when applied to the appropriate patient population. This screening modality is endorsed and recommended by a number of health care agencies including the America Cancer Society, National Comprehensive Cancer Network, American College of Gastroenterology and American Society of Clinical Oncology.

As reported by the Idaho Department of Health and Welfare in its publication, "Idaho Comprehensive Cancer Control Program", screening for colon cancer has been found to be underutilized in the communities served by St. Joseph Regional Medical Center. In the most recent Community Needs Assessment, cancer care was identified as one of the top health care priorities. The Cancer Committee, established at SJRMC, recognized in 2016/2017 that a particular population of patients, those who are uninsured/underinsured, was unlikely to seek or participate in colon cancer screening, despite the well documented benefit of this procedure.

Members of the Lewiston, Idaho/Clarkston, Washington and surrounding communities who are uninsured or underinsured are served by a free clinic called the Snake River Community Clinic, which is supported by public and private donations and by a variety of local health care providers. Coordinating with Dr. Carl Dettwiler, a local gastroenterologist, Dr. Alan Peterson, CEO of Pathologists Regional Lab and the Snake River Clinic, the Cancer Committee formulated and supported a colonoscopy screening project for patients identified through the Snake River Clinic who met the demographic criteria for colonoscopy screening. Screening colonoscopies were performed by Dr. Dettwiler in his clinic free of charge. Pathology review of any tissue specimens obtained during the colonoscopy exams was performed by Dr. Peterson at no charge. Follow up care for screened patients was arranged through Dr. Dettwiler's office. Any patients with diagnostic evidence of colon cancer, identified by screening colonoscopy are to be promptly referred to one of 4 general surgeons in Lewiston Idaho for consultation and definitive treatment planning. The following table describes the patients who were served by this program in 2017.

Age	Previous Exam	Personal Hx	Family Hx	Findings	Pathology	FU/Next Exam
64	Yes-2007	Adeno-2007	No	2 polyps, tics	1 adeno, 1 hyperplastic	5 years
65	First colon	No	No	2 polyps, tics	1 adeno, 1 serrated adeno	3 years
61	Yes-2006,2011	Adeno-2006,2011	Father-co CA age 75	2 polyps, tics	2 adeno	5 years
63	First colon	No	No	Tics	None	10 years
59	Yes-2007	Adeno-2007	Father-polyp	1 polyp	1 adeno	5 years
57	Yes-2007	No	No	H'rroids	None	10 years
64	First colon	No	No	2 polyps	2 hyperplastic	10 years
57	First colon	No	Brother-polyp age 50	1 polyp, tics	1 hyperplastic	7-10 years
62	First colon	no	Mother co CA age 49	2 polyps, tics	2 adeno	5 years

It is anticipated that, with Dr. Dettwiler's support, this colonoscopy screening project can continue and perhaps expand to serve this uninsured/underinsured patient population.

Respectfully Submitted,

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