

Colorectal Adenocarcinomas 2016 (Quality Improvement Follow Up)

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Introduction:

This is a follow up study for the previous colon cancer study that was done last year. We have identified that we are not performing well in CEA testing (47%) and CT chest imaging (79%) testing at time of diagnosis. We have recommended that all physicians become vigilant about ordering these tests and be compliant with NCCN recommendations. We performed this follow up study to test our compliance with such intervention and recommendations.

Results:

Total of 28 cases of colorectal cancers were noted from December 2015 (after QI initiative) till November 2016.

7 excluded from study as 6 were rectal carcinoids and 1 was Kaposi's sarcoma, so total of 21 cases of true colorectal adenocarcinomas.

We tried to look at the measures that needed to be improved from last year's presentation.

CEA at diagnosis – 20/21 had CEA at diagnosis, one patient had low risk Stage I disease, recommended on follow up

CT chest at diagnosis – 19/21 had chest CT at diagnosis, 2 that did not have were Stage I or localized, one had workup pending.

	Before QI project	After QI project
CEA testing at diagnosis	9/19 (47%)	21/21 (95%)
CT Chest at time of diagnosis	15/19 (79%)	19/21 (90%)

Conclusion:

After performing the QI project and implementing the recommendations. The rate of CEA testing and CT chest at initial diagnosis went up significantly. Would recommend continuing encouraging this intervention and continue monitoring of our compliance with this recommendation.