**Title of Intervention:** Provider Education Intervention to Improve Colorectal Cancer Screening Rates among African American Patients

**Intervention Strategies:** Provider Education

**Purpose of the Intervention:** To improve colorectal cancer screening rates for African Americans

**Population:** Health care providers and their African American patients aged 50 and older

**Setting:** Health care clinic; health care facility-based

**Partners:** George Washington University Division of Gastroenterology and Liver Diseases

**Intervention Description:**
- Provider Education: Health care providers attended instructive seminars on colorectal cancer screening recommendations, which included an observation of screening exams, a 25-question pre-test and post-test and training on how to chart the performance of cancer screening on summary forms in patient medical records. The education sessions were case-based learning discussions moderated by a senior-level health care provider. For each case, screening guidelines were reviewed and the appropriate screening modality was chosen based on patient's age, race, gender and family history.

**Theory:** Not mentioned

**Resources Required:**
- Staff/Volunteers: Senior-health care provider
- Training: Training to deliver education
- Technology: Not mentioned
- Space: Space for discussions
- Budget: Not mentioned
- Intervention: Education materials, access to medical records, screening guidelines, surveys, access to medical equipment, patient models
- Evaluation: Observation forms

**Evaluation:**
- Design: Pre/post comparison
- Methods and Measures: Providers' performances of several colorectal cancer screenings were evaluated.

**Outcomes:**
- Short Term Impact: Not measured
- Long Term Impact: There was no statistical difference in the rates at which rectal exams and fecal occult blood tests were conducted before and after the intervention. There was a significant improvement in the rate at which endoscopic assessments were performed.

**Maintenance:** Not mentioned

**Lessons Learned:** It is important that all patients are offered colorectal cancer screening and particularly important that African Americans undergo assessments due to their higher risk. Educational interventions focused upon racial disparity in colorectal cancer may improve providers' performance of screening exams in African American populations.

**Citation(s):**
Friedman M, Borum ML. Colorectal cancer screening of African Americans by internal medicine resident physicians can be improved with focused educational efforts. J Natl Med Assoc. Sep 2007; 99(9):1010-1012.