# BREAST & CERVICAL CANCER



# SCREENING & EDUCATION PROVIDER TOOLKIT

April 2015, Version 1.0







Sponsored by the Illinois Department of Public Health, Center for Minority Health Services.

#### **TABLE OF CONTENTS**

LETTER TO PROVIDER	3
IT IS WORTH IT TO TALK TO YOUR PATIENT	4-5
GETTING STARTED WITH YOUR PATIENT	6
ESSENTIAL ONE	7
RECOMMENDATIONS	8
ASSESS PATIENT FOR READINESS FOR BREAST &	
CERVICAL CANCER SCREENING	9
TIPS FOR HELPING PATIENTS	10
ESSENTIAL TWO	11
WAYS TO INCREASE AWARENESS	12
SAMPLE TRACKING FORM	13
ESSENTIAL THREE	14
SAMPLE REMINDERS FOR PATIENT	15-20
ESSENTIAL FOUR	21
CLINIC SELF-ASSESSMENT	22-23
BREAST & CERVICAL CANCER RESOURCES	24
HEALTH CARE PROVIDER RESOURCES	25-26
MEDICARE BENEFITS	27
BREAST CANCER FACT SHEET	28
CERVICAL CANCER FACT SHEET	29
ACKNOWLEDGEMENTS	30

For an electronic copy of this toolkit, please go to: www. jchdonline.org -> click on the Medical Providers tab, or http://www.hsidn.org/resources.html

#### **BREAST AND CERVICAL CANCER**

April 2015

Dear Healthcare Provider,

According to the American Cancer Society, 1 in 8 women will develop breast cancer in her lifetime. Breast cancer is the second leading cause of cancer death in American women And it is second only to lung cancer and among Illinois women is the most commonly diagnosed cancer. In addition, in Illinois 4 out of every 100,000 women die of cervical cancer.

As you know early detection can dramatically change the mortality statistics. However, women need to be educated on the importance of breast and cervical cancer screenings and early detection.

This toolkit provides information on four essential elements for improving cancer screening rates and clinic self–assessment using these four essential elements. It also includes tips on how to enhance your messages about the importance of early detection for breast cancer and cervical cancer. Finally, you will find that we have also included office aids and patient resources to further reinforce your message.

We thank you for your interest in using this toolkit in your practice. If you have any questions or would like further information please contact Michelle McLernon of Jackson County Health Department at (618) 684-3143 ext. 134.

Sincerely,

Miriam Link-Mullison

Administrator

Jackson County Health Department

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#### IT IS WORTH IT TO TALK TO YOUR PATIENTS

# LEADING NEW CANCER CASES 2015 Estimates

CANCER	<b>ESTIMATED NEW CASES</b>
Breast	231,840
Ovary	21,290
Uterine Cervix	12,900
Uterine Corpus	54,870

# LEADING NEW DEATHS 2015 Estimates

I EADING NEW DEATHS

CANCER	LEADING NEW DEATHS
Breast	40,290
Ovary	14,180
Uterine Cervix	4,100
Uterine Corpus	10,170

CANCED

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#### IT IS WORTH IT TO TALK TO YOUR PATIENTS

#### What are the statistics?

According to Illinois Behavior Risk Surveillance System, 95.7% of the women in Jackson County who are over the age of 40 have had mammograms and 67.4% have had their mammograms done within the last year. In addition, 98.8% of the women in Jackson County have had Pap test done, but for 17% it has been more than a year since they had their last pap test.

Breast Cancer is the most common cancer among American women. CDC's data from 2011, shows that breast cancer rates are 129.7 per 100,000 women of all races in the United States. In addition, African American women breast cancer rates are at 127 per 100,000 women and breast cancer rates are 84 per 100,000 in Hispanic women.

Cervical cancer is ranked as the tenth leading cancer site in African-American women. Each year approximately 11,967 cases of HPV associated cervical cancer is diagnosed in the United States. More African American and Hispanic women get cervical cancer than women of other races or ethnicities. The CDC states this is possibly due to decreased access to Pap testing or follow up treatment.

#### **ACS Recommendations**

ACS recommends women age 40 and older should have a mammogram every year and should continue to do so for a as long as they are in good health. Women should begin cervical cancer screening at age 21.

http://www.cancer.org/cancer/breastcancer/moreinformation/breastcancerearlydetection/breast-cancer-early-detection-acs-recs

http://www.cdc.gov/cancer

IDPH (2007-2009), *Illinois Behavioral Risk Surveillance System*. Springfield, IL: Illinois Department of Public Health, Illinois Center for Health Statistics.

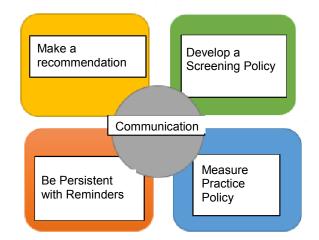
U.S. Cancer Statistics Working Group. *United States Cancer Statistics: 1999–2011 Incidence and Mortality Web-based Report*. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention and National Cancer Institute: 2014\

#### **GETTING STARTED WITH YOUR PATIENT**

This section presents the Four Essential elements for improving cancer screening rates in your practice.

The Four Essentials to help you increase screening rates in your practice are:

- 1. Make Recommendations.
- 2. Develop a Screening Policy.
- 3. Be Persistent with Reminders.
- 4. Measure Practice Progress.



You can start by reviewing the Four Essentials, and using the Clinic Self-Assessment to identify strengths and determine areas where improvements are needed in your clinic.

You will also learn tips and recommendations on how to use this toolkit in your practice.



Guidelines adapted from: How to increase screening rates: A quality Improvement Toolkit for Busy Office Practices. Developed by National Colorectal Caner Roundtable, the American Cancer Society and Thomas Jefferson University. Retrieved from http://canceriowa.org/Files/Health-Provider-Resources/Toolkit-for-Busy-Practices.aspx

#### **ESSENTIAL ONE**

#### Make a Recommendation

The most powerful single factor in the patient's decision to be screened for cancer is a recommendation from their doctor.

Make a Recommendation

#### **Actions**

Establish the screening messages that you and your staff will share with your patients.
Consider the way you and your staff will assess patient's risk status and the receptiveness of your patients.
Take into account your patients insurance coverage and their individual preference.
Assess your patient's risk status, discuss their needs.
Start with patients who are easy to reach and then incorporate less accessible groups.

#### From most accessible patients to least accessible patients:

- 1. Patients who come in for regular check ups.
- 2. Patients who receive regular care for chronic conditions.
- 3. Patients who come in only when they have a problem.
- 4. Patients who rarely come in, but are a part of your practice.

### RECOMMENDATIONS FOR BREAST & CERVICAL CANCER SCREENING

Type of Cancer	When to be screened	What to do or what to watch for	How often
BREAST CANCER	Starting at age 20	<ul> <li>If you notice any change in your breast, such as a lump, tell your doctor or nurse right away. You may choose to do a breast self-exam (BSE) to find breast changes.</li> <li>Have an exam of your breast by doctor or nurse</li> </ul>	Every year
BREAST CANCER	Starting at age 30	<ul> <li>If you notice any change in your breast, such as a lump, tell your doctor or nurse right away. You may choose to do a breast self-exam (BSE) to find breast changes.</li> <li>Have an exam of your breast by doctor or nurse</li> </ul>	Every 3 years
BREAST CANCER	Starting at age 40	<ul> <li>Have a mammogram (X-ray) of your breast and an exam of your breast by a doctor/nurse.</li> <li>If you notice any change in your breast, such as a lump, tell your doctor or nurse right away. You may choose to do a breast self-exam (BSE) to find breast changes.</li> </ul>	Every year
CERVICAL CANCER	Age 21	Have  ◆ A Pap test  ◆ Pelvic Exam	First Exam
CERVICAL CANCER	Ages 21–70	Have one of the following:  ◆ A Pap test, pelvic exam and HPV test (preferred)  - OR -  ◆ A Pap and Pelvic exam	Every 1-3 years
CERVICAL CANCER	Age 70 and older	You may stop cervical cancer screening if you have had a normal Pap test may discontinue testing.	Based on Provider Recommendations

## ASSESS PATIENT FOR READINESS FOR BREAST & CERVICAL CANCER SCREENING

Ask the patient the following questions. Then use the tips on page 10 to help them become screened based on their stage of readiness.

#### Have you ever heard of breast cancer screening (mammogram)?

Yes - Go on

No - Stop (Stage 1)

#### Are you thinking about having a mammogram?

Yes - Go on

No - Stop (Stage 2)

#### Which of the following statements best describe your thoughts about having a mammogram?

- a. I have decided against having a mammogram (Stage 0)
- b. I am thinking about whether or not to have a mammogram (Stage 2 or 3)
- c. I have decided to have a mammogram (Stage 4)

#### Have you ever heard of cervical cancer screening (pap test)?

Yes - Go on

No - Stop (Stage 1)

#### Are you thinking about having a pap test?

Yes - Go on

No - Stop (Stage 2)

#### Which of the following statements best describe your thoughts about having a Pap test?

- a. I have decided against having a pap test (Stage 0)
- b. I am thinking about whether or not to have a pap test (Stage 2 or 3)
- c. I have decided to have a pap test (Stage 4)

Stage 0: Decided Against

Stage 1: Never Heard of

**Stage 2: Not Considering** 

**Stage 3: Considering** 

Stage 4: Decided to Do

Guidelines adapted from: How to increase screening rates: A quality Improvement Toolkit for Busy Office Practices. Developed by National Colorectal Caner Roundtable, the American Cancer Society and Thomas Jefferson University. Retrieved from http://canceriowa.org/Files/Health-Provider-Resources/Toolkit-for-Busy-Practices.aspx

# TIPS FOR HELPING PATIENTS BECOME SCREENED BASED ON STAGE OF READINESS

#### STAGE 0

Decided against breast and/or cervical cancer screening.

- Give patient informational and educational handouts/pamphlets on the mammograms and pap test.
- Discuss with patient the importance of breast and cervical cancer screenings.
- Explain to patient what the mammogram and pap test procedures involve.
- Emphasis on the importance of screenings.

#### STAGE 1

Never heard of breast and/or cervical cancer screening.

- Same as stage 0
- Emphasis on the importance of screenings.

#### STAGE 2

Heard of but not considering a breast and/or cervical cancer screening at this time.

- Same as Stage 0
- Emphasis on the importance of screenings.
- Ask patients to voice their concerns.

#### STAGE 3

Heard of screening and is considering getting a breast and/or cervical cancer screening.

- Same as stage 0
- Give patient list of facilities that offer mammograms.
- Make an mammogram appointment for patient before they leave the office.
- Track appointment dates and results.

#### STAGE 4

Heard of a breast and/or cervical cancer screening and has decided to get a breast and/or cervical cancer screening.

- Same as Stage 0
- Give patient list of facilities that offer mammograms.
- Make an mammogram appointment for patient before they leave the office.
- Track appointment dates and results.

#### **ESSENTIAL TWO**

#### **Develop a Screening Policy**

Create a standardize course of action for screenings. Engage your team in creating, supporting and following the policy. See page 21.

Develop a Screening Policy

#### **Consider the following:**

- National screening guidelines
- Patient history and risk level
- Patient preferences
- ♦ Insurance coverage
- Local medical resources
- The most effective cues to action are those delivered actively through dialogue with you or a health care provider.

Your initial conversation with your patient should be in person and then follow through with a patient phone call.

Educating your patient before she leaves the office will help increase the likelihood of the patient obtaining a screening.

# WAYS TO INCREASE AWARENESS OF BREAST & CERVICAL CANCER DURING OFFICE VISIT

#### IN THE WAITING ROOM

- ♦ Have patients complete questionnaire to provide information on risk, status, health screening history and attitudes.
- ◆ Make educational information such as posters and fliers available in the waiting room.

#### PATIENT CHECK IN

- ♦ Have staff ask patients about preventative care.
- ♦ Hand out preventative care reminder cards or educational material.

#### **DURING VISIT**

- ♦ Ask patients about their family history.
- ♦ Ask patients if and when they had a screening done.

#### AT CHECK OUT

- Have reminder cards filled out by patients.
- File the reminder cards by the month and year the patient will be notified.

#### **BEYOND OFFICE COMMUNICATION**

♦ Contact the patient if they need to follow up on their screenings.

#### TRACKING PATIENT COMPLIANCE

- ◆ Contact patients by phone to verify the screening or remind the patient of a screening.
- ♦ Mark the tracking sheet if screening has been done.
- ♦ Encourage patients to bring an updated health record. This should include any screenings they had done.

#### SAMPLE TRACKING FORM

NEXT PAP TEST APPOINTMENT					
NEXT MAMMOGRAM APPOINTMENT APPOINTMENT					
DATE REMINDER SENT PAP TEST					
DATE REMINDER SENT MAMMOGRAM					
DATE OF LAST MAMMOGRAM PAP TEST					
PATIENT'S NAME					

#### **ESSENTIAL THREE**

#### **Be Persistent with Reminders**

You may need to remind patients several times before they follow through on your recommendations.

# Be Persistent with Reminders

#### **Reminding Patients**

- Determine how you and your staff will notify patients when screening or follow-up is due.
- Involve your staff in reminding both clinicians and patients of upcoming screenings. Examples may include chart prompts on electronic medical records.
- Monitor screenings and follow up tests and make sure they are completed in a timely manner.

Encourage patient to follow through with screenings by using the following:

- Postcards
- Letters
- In-person conversations
- Emails
- Text messages
- Phone calls



#### SAMPLE LETTER TO PATIENT

(Date) (Name) (Address)		
Dear Ms	:	

I am writing to encourage you to CALL TODAY for an appointment to get your next mammogram and have your clinical breast exam. A mammogram is an x-ray that helps to look for early signs of breast cancer.

The chance of getting breast cancer increases with age. Many women do not have any symptoms when they are first diagnosed with breast cancer. An abnormal growth in your breast has to grow to at least the size of a pea before your doctor can feel it when you are examined

The good news is that a mammogram can help your doctor to find the cancer early. It is often 1½ to 2 years before a lump is big enough to be felt. This is why it is so important for women 40 and older to get a mammogram every year. By getting mammograms regularly, breast cancer can be found and treated early when the chances for a cure are good. It is important to take care of your own health. If you have not had a mammogram in the past year and do not have an appointment to get one, CALL US TODAY.

Sincerely,

(Health care provider)

#### **INSTRUCTIONS FOR REMINDERS**

You will find breast and cervical cancer screening reminder postcards options on the following pages.

The breast cancer screening reminder postcard is designed to remind your patients who are 40 years of age or older to "Make every year a mammogram year."

The cervical cancer screening reminder postcard is designed to remind your patients to get tested to protect themselves from cervical cancer.

These tools were created by American Cancer Society to remind your patients of these important screenings. There is a space available on the back to fill in your clinic/provider information, as well as your company logo.

















every year a mammogram year.

If you're 40 or older, make





cancer.org | 1.800.227.2345

Our records show that you are due for a mammogram. For appointment information, please call your doctor or nurse.

Our records show that you are due for a mammogram. For appointment information, please call your doctor or nurse.



We save lives by helping you stay well, helping you get well, by finding cures, and by fighting back.

cancer.org | 1.800.227.2345

@2014 American Cancer Society, Inc. No. 030504



We save lives by helping you stay well, helping you get well, by finding cures, and by fighting back.

cancer.org | 1.800.227.2345

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# from cervical cancer. I get tested to protect myself

from cervical cancer.

I get tested to protect myself











cancer.org | 1.800.227.2345

cancer.org | 1.800.227.2345

# It's time for your Pap test! Pap tests are important because:

- They can save your life.
- They can detect abnormal cells long before they become cancerous.
- Most importantly, you will be able to continue taking care of your family with peace of mind.

For appointment information, please call the clinic at:



We save lives by helping you stay well, helping you get well, by finding cures, and by fighting back.

cancer.org | 1.800.227.2345

@2014 American Cancer Society, Inc. No. 030505

# It's time for your Pap test! Pap tests are important because:

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cancer.org | 1.800.227.2345

02014 American Cancer Society, Inc. No. 030505

#### **ESSENTIAL FOUR**

#### **Measure Practice Progress**

Measure your progress to determine if you are doing as well as you think.

#### Establish a Baseline

- Identify your target population Example: a patient that has never been screened.
- ☐ Complete a review for a baseline to compare for future audits.
- A simple audit involves reviewing a specific number of patients records and documenting key elements.

#### **Develop a Plan**

During staff meetings have team report on what is working well with your screening system, what can be done differently, what needs to be improved and additional ways to support members of the team.

#### Implement your plan

■ Make sure all staff know their role by engaging them in your plan development.

#### Measure Practice Progress

#### **Study Your Results**

Meet with staff regularly to review your progress and measure your screening rates.



#### **Act on your Results**

Based on your results identify ways to improve.

# CLINIC SELF-ASSESSMENT (BREAST & CERVICAL CANCER)

CLINIC		DATE ASSESSMENT COMPLETED.:		
This assessment will help to give your clinic an opportunity to review the Four Essentials and to identify your strengths and determine areas where your clinic may feel there is a need for improvement.				
Make a Recomme Does my practice p □Yes		dation for screening to every appropriate patient? □Unsure		
Has my practice ide □Yes	entified patient educa □No	ation screening messages? □Unsure		
Does my practice s □Yes	share the screening r □No	nessages with our patients? □Unsure		
Does my practice a □Yes	assess patient's risk : □No	status to screening? □Unsure		
Does my practice a □Yes	assess patient's rece □No	ptivity to screening? □Unsure		
Develop a Screen Does my practice h □Yes		on preventive cancer screening? □Unsure		
Does my practice a □Yes	actively engage in su □No	pporting and following the office policy? □Unsure		
Does my practice h □Yes	nave a compiled list o □No	of screening resources? □Unsure		
Be Persistent with Does my practice u □Yes	n Reminders utilize a reminder sys □No	tem? □Unsure		
Does my practice o □Yes	orders for screening t □No	to see whether patients completed their screening? □Unsure		
Does my practice track patients to determine whether patients who had a positive screening test received a complete diagnostic evaluation?  □Yes □No □Unsure				
Measure Practice Progress  Does my practice establish a baseline and set a goal for cancer screening?  □Yes □No □Unsure				
Does my practice of improvement?	collect data regarding	g documentation procedures or systems that need		
□Yes	□No	□Unsure		
Does my practice f □Yes	ollow a continuous ir □No	nprovement model to develop and test changes? □Unsure		

# CLINIC SELF- ASSESSMENT (BREAST & CERVICAL CANCER)

#### **ASSESSMENT RESULTS**

Based on the Four Essentials assessment findings, please use the following questions to help you determine your clinic's next steps:

questions to help you determine your clinic's next steps.
What are your clinic's strengths?
2. What are areas where you feel improvement is needed within your clinic?
3. Based on the assessment findings, which area does your clinic need to implement?
NEXT STEPS
Identify the cancer screening you would like to increase.
□ Breast □ Cervical
2. Identify your target audience (e.g. age range, those who have never been screened, are behind or over-due for rescreening, etc.).
3. Establish your clinic's baseline (current) screening rate for the cancer type and target audience you've identified above (e.g. percentage or number).
4. Identify your clinic's screening goals.
5. Identify a target timeframe for achieving this goal.

# BREAST & CERVICAL CANCER RESOURCES

AGENCY	SERVICES OFFERED
SIH Donna Crow Breast Health Patient Navigator 618-457-2281, option 3	Breast Self Exam classes offered by the breast health patient navigator.
SIH — The Breast Center 1237 East Main Street, Suite C1 Carbondale, IL 62901 Phone: 618-549-0721 ext. 65616	The Breast Center offers 3D mammogram and a Breast Cancer High Risk Clinic to help in prevention and treatment of breast cancer
Jackson County Health Department 415 Health Department Road Murphysboro, IL 62966 Phone: 618-453-3143 ext. 133	Offers FREE educational materials and serves as a source of information and referral to further services.
American Cancer Society 1-800-227-2345 cancer.org	Offers educational information on diagnosis, treatment, side effects. The American Cancer Society also provides support and resources. Funds and conducts researches to help us better understand, prevent and find cures of cancer.
Illinois Department of Public Health Office of Women's Health 535 West Jefferson Street First Floor Springfield, IL 62761-0001	Illinois Breast and Cervical Cancer Program offers free mammograms, breast exams, pelvic exams and Pap test to eligible women
Illinois Women's HealthLine 1-888-522-1282 www.cancerscreening.illinois.gov	

#### **HEALTH CARE PROVIDER RESOURCES**

#### Physicians' beliefs about effectiveness of cancer screening tests <a href="http://www.ncbi.nlm.nih.gov/pubmed/25038531">http://www.ncbi.nlm.nih.gov/pubmed/25038531</a>

Study on physicians' beliefs about the effectiveness of different tests for cancer screening

#### **Centers for Disease Control and Prevention (CDC)**

http://www.cdc.gov/cancer/breast/

Link includes basic information, frequently asked questions, statistics, and what the CDC is doing.

#### **American Cancer Society (ACS)**

http://www.cancer.org/index

Resource for educational information. Resource for ACS programs, services and events.

#### Illinois Department of Public Health (IDPH)

http://www.idph.state.il.us/cancer/types/publications\_breast.htmLink includes reports and factsheets on breast cancer and mammograms.

#### Illinois Department of Public Health (IDPH)

http://www.idph.state.il.us/about/womenshealth/factsheets/cervical.htm Link includes facts bout cervical cancer.

#### **National Cancer Institute**

http://www.cancer.gov/cancertopics/types/cervical

Offers educational information, clinical trial reports and literature.



#### **HEALTH CARE PROVIDER RESOURCES**

#### **Mammography Screening Centers**

Please note: You must have a primary care physician/health-care provider in order to be scheduled for a mammogram.

#### The following is a list of local providers you can contact if you have insurance:

- Anna Hospital, Anna IL, 618-833-4511
- Cairo Diagnostic Center, Cairo IL, 618-734-1500
- The Breast Center, Carbondale IL, 618-457-2281
- Ferrell Hospital, Eldorado IL, 618-273-3361 Ext. 412
- Harrisburg Medical Center, Harrisburg IL, 618-253-0222
- The Breast Center Herrin, Herrin IL, 800-360-6902
- Heartland Regional Medical Center, Marion IL, 618-998-7001
- Massac Memorial Hospital, Metropolis IL, 618-524-2176 Ext. 244
- Hardin County General Hospital, Rosiclare IL, 618-285-6634 Ext. 331

#### Free screening through the Illinois Breast & Cervical Cancer Program is available.

You may be able to receive free services if you are a woman:

- Living in Illinois
- Without insurance
- 35 to 64 years old
- \*younger women may be eligible in some cases

#### How do I apply for benefits through the Illinois Breast & Cervical Cancer Program?

- To enroll in IBCCP, you can call the Women's Health Line 888-522-1282 (800-547-0466 TTY).
- The Women's Health Line will be able to walk women through the eligibility requirements and the screening process.
- You can also contact Prairie State Women's Health at 217-532-2001 Ext. 229
  or visit <a href="http://www.idph.state.il.us/about/womenshealth/ibccp/howToApply.htm">http://www.idph.state.il.us/about/womenshealth/ibccp/howToApply.htm</a>
  for more information and to schedule an appointment.

#### **Transportation Available:** \*Call for details and to see if you qualify to use these services

- Jackson County Mass Transit District: 618-549-0304
- Rides Mass Transit District: 1-877-667-6119
- Shawnee Mass Transit District: 618-658-8380
- Southern Illinois Transportation: 1-866-756-7111

# MEDICARE BENEFITS RELATED TO MAMMOGRAMS AND PAP TESTS

#### **MAMMOGRAMS**

#### How often is it covered?

- Screening mammogram once every 12 months
- Diagnostic mammogram when medically necessary

#### Who is eligible?

- Women with Medicare 40 or older
- Women with Medicare between 35-39 can get one baseline mammogram

#### Your cost in Original Medicare

- Patient pays nothing for the screening mammogram if the doctor or other qualified health care provider accepts assignment
- Patient pays 20% of Medicare approved amount, and the Part B deductible applies.

#### PAP TEST/PELVIC EXAMS

#### How often is it covered?

- Once every 24 months for all women
- Once every 12 months if you're at high risk for cervical or vaginal cancer, or if you're of childbearing age and have had an abnormal Pap test in the past 36 months

#### Who is eligible?

All women with Medicare are covered.

#### Your cost in Original Medicare

 Patient pays nothing for the lab Pap test, specimen collection or the pelvic exam, if the doctor accepts assignment

http://www.cms.gov/medicare-coverage-database/

#### **BREAST CANCER FACT SHEET**

- **Cancer:** A disease in which cells in the body grow out of control. When cancer starts in the breast, it is called breast cancer.
- **Breast Cancer:** Except for skin cancer, breast cancer is the most common cancer in American women.
- **Breast cancer screening:** Checking a woman's breasts for cancer before she has any symptoms.
- Mammogram: an X-ray picture of the breast. Mammograms are the best way to find breast cancer early, when it is easier to treat and before it is big enough to feel or cause symptoms.
- When should you have a screening: Most women who are 50 to 74 years old should have a screening mammogram every two years. If you are 40 to 49 years old, or think you may have a higher risk of breast cancer, ask your doctor when to have a screening mammogram.

#### **Risk Factors**

- Being younger when you had your first menstrual period.
- Never giving birth, or being older at the birth of your first child.
- Starting menopause at a later age.
- Using hormone replacement therapy for a long time.
- · Getting older.
- A personal history of breast cancer, dense breasts, or some other breast problems.
- A family history of breast cancer (parent, sibling, or child).
- Changes in your breast cancer-related genes (BRCA1 or BRCA2).
- Getting radiation therapy to the breast or chest.
- Being overweight, especially after menopause

#### **Some Warning Signs of Breast Cancer**

- A lump or pain in the breast.
- Thickening or swelling of part of the breast.
- Irritation or dimpling of breast skin.
- Redness or flaky skin on the breast.
- Pulling in of the nipple or pain in the nipple area.
- Fluid other than breast milk from the nipple, especially blood.
- A change in the size or the shape of the breast.



http://www.cdc.gov/cancer/dcpc/resources/features/BreastCancerAwareness/index.htm

#### **CERVICAL CANCER FACT SHEET**

- **Cancer:** A disease in which cells in the body grow out of control. When cancer starts in the cervix, it is called cervical cancer.
- **Cervical Cancer:** Occurs more often in women over age 30, but all women are at risk for cervical cancer.
- **Pap test**: Looks for cell changes on the cervix that may become cervical cancer if not treated appropriately.
- **HPV test:** Looks for the human papillomavirus (HPV), that can cause these cell changes.
- When should you have a screening: Women should start getting a regular Pap test at the age of 21. Women 30 years or older may choose to have an HPV test.

#### **Risk Factors**

- Have had a diagnosis of HPV
- Smoke
- Used birth control pills for 5 or more years
- Have given birth to 3 or more children
- Sexually active

#### **Some Warning Signs of Cervical Cancer**

There are usually no signs or symptoms of early-stage cervical cancer. Signs of more-advanced cervical cancer include:

- Vaginal bleeding after intercourse.
- Vaginal bleeding between periods or after menopause.
- Watery, bloody vaginal discharged that may be heaving and have a foul odor.
- Pain during intercourse.
- Pelvic pain.



http://www.cdc.gov/vitalsigns/cervical-cancer/

#### **ACKNOWLEDGEMENTS**

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#### Toolkit compiled from the following sources

- American Cancer Society: Breast Cancer: Mammography Statistics. (2014). *Breast Cancer Facts and Figures*. Retrieved from <a href="http://www.cancer.org/acs/groups/content/@research/documents/document/acspc-042725.pdf">http://www.cancer.org/acs/groups/content/@research/documents/document/acspc-042725.pdf</a>
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- **Guidelines adapted from:** "How to Increase Preventive Screening Rates in Practice: An Action Plan for Implementing a Primary Care Clinician's Evidence-Based Toolbox and Guide," developed by the National Colorectal Cancer Roundtable, the American Cancer Society, and Thomas Jefferson University.