

Evidence suggests that patient navigators and provider reminders may improve follow-up after positive fecal blood test

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Interventions, such as patient navigators and provider reminders, may improve follow-up colonoscopy rates after a positive fecal blood test. Follow-up is an important step in effective screening for colorectal cancer. Findings from a systematic evidence review are published in *Annals of Internal Medicine*.

Colorectal [cancer](#), the second leading cause of cancer death in the United States, is largely preventable with screening. Fecal immunochemical testing has become the most commonly used method for [colorectal cancer screening](#) worldwide and is increasingly used in the United States to improve population-level screening rates. However, the proportion of test-positive patients having a timely [colonoscopy](#) after a positive test is generally low, suggesting a need to identify proven interventions that can be implemented in practice to improve follow-up colonoscopy rates.

A team of investigators led by Kaiser Permanente Division of Research, reviewed published studies to identify interventions that have been evaluated for improving rates of follow-up colonoscopy after positive fecal test results in asymptomatic adults. The researchers identified 23 studies that met their inclusion criteria. While most of the research was low-quality, particularly with regard to system-level interventions, the team found moderate evidence to support the implementation of patient- and provider-level interventions. The evidence suggests that the use of

patient navigators, or individuals who work with patients to counsel and guide them through the barriers associated with cancer care, can increase rates of follow-up colonoscopy. Provider-level interventions that utilize electronic reminders to alert physicians of patients who have not taken adequate action after a positive test result were shown to improve colonoscopy completion from 9 to 25 percentage points.

The researchers note that these findings are important because until now, research on follow up of positive fecal blood tests in [colorectal cancer screening](#) has been hard to find. Since most of the research is low-quality, more research is needed to provide good, quality evidence for effective interventions.

More information: *Annals of Internal Medicine* (2017).
<http://annals.org/aim/article/doi/10.7326/M17-1361>

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