BACKGROUND

A staggering 3,418,124 women in the United States were estimated to be living with breast cancer in 2015 (National Cancer Institute, 2018). In fact, female breast cancer is estimated to be the most common type of cancer in the United States, accounting for approximately 15.3% of all new cancer diagnoses in 2018. Fortunately, there is an 89.7% five-year breast cancer survival rate (National Cancer Institute, 2018). A key to long-term survival of many cancers, especially breast cancer, is early detection. Therefore, the purpose of this study was to determine the specific clinical practice guidelines Advanced Practice Providers, specifically, physician assistants and nurse practitioners, follow for breast cancer screening and their perceived adherence to those guidelines.

METHODS

An anonymous self-validated 25 question survey was distributed via a College NP and PA alumni database and distributed via a local Physician Assistant Association email distribution list with a link to Survey Monkey. The survey was available for four weeks, limited to PAs or NPs only. The survey included demographic questions, questions pertaining to which guideline participants followed, specific guideline knowledge-based questions, and a question asking the participant to rate how well they thought they were following the guideline. Next, the participants were given the pertaining guideline and the participant was asked again to rate how well they were following the guideline. Data were analyzed using Microsoft Excel for descriptive statistics and numerical statistics were analyzed using t-tests, with statistical significance set at p < 0.05.

RESULTS

- Sixty-one surveys were completed (83 participants began the survey).
- Results revealed that most participants were PAs (n = 74, 89.16%), aged 25-34 (n = 37, 44.58%) and female (n = 66, 79.52%).
- Of the participants who completed the survey, (N = 61), most (n = 22, 31.43%) followed the American College of Obstetricians and Gynecologists (ACOG) breast cancer screening guidelines.
- The mean score for how well participants (n = 22) thought they were following the ACOG guidelines decreased from 3.44 to 3.12 out of five, after being shown the current guideline chart. This was not a statistically significant difference (p = 0.30).
- Results proved a decrease in mean score, 3.43 to 2.38, for participants (n = 16) who follow the United States Preventive Services Task Force guidelines. This was found to be statistically significant (p = 0.03).
- A decrease in mean score, 3.00 to 2.92, was also found for participants (n = 15) who follow the American Cancer Society guidelines, which was not statistically significant (p = 0.84).
- Participants (n = 3) following the National Comprehensive Cancer Network (NCCN) guidelines had an increase in mean score from 3.00 to 3.33, post guideline review, without a significant statistical difference (p = 0.37).
- Five participants chose "other" and were not analyzed further.

CONCLUSIONS

Breast cancer is one of the most common cancers which affects one in eight women and early detection is one of the most important factors in long-term survival. APPs play a major role in recommending regular breast cancer screening to patients. This study found that participants are not following the current breast cancer screening guideline recommendations as closely as they thought or should. This is evidenced by the decrease in mean scores following being presented with the guideline summaries. Therefore it is important that APPs stay up to date on the most current screening guidelines to improve screening recommendations and catch breast cancers in earlier stages.

REFERENCES