



A CHRISTMAS TRIBUTE TO OUR HEALTHCARE HEROES

In the quiet of the clinic, where hope and care unite,
You work with dedication, from morning until night.
Screening for the silent, the unseen, and the small,
You stand as our protectors, answering the call.

With gentle hands and caring hearts, you ease the fear away,
Bringing light and comfort to each and every day.
This Christmas, we honor the work that you do,
For the lives that you save, and the strength you imbue.

May your holidays be merry, filled with joy and cheer,
For the gift you give to others is one we hold dear.
Thank you, dear heroes, for all that you give,
In your hands lies the power to help others live.

Merry Christmas to you, with gratitude profound,
May love, peace, and happiness in your hearts be found.



COMPARISON OF SENSITIVITY AMONG SCREENING OPTIONS

Sensitivity	Colonoscopy	FIT	Cologuard	Cologuard Plus	ColoSense	Shield	Freenome
Test Type	Visual (endoscopy)	Hemoglobin in stool	Mt-sDNA	Mt-sDNA	Mt-sRNA	Cell-free DNA blood test	Blood
CRC overall	95%	79%	92%	94%	94%	83%	79.2%
Stage I	75-80%	75%	90%	87%	92%	65% (55% clinical)	57.1%
Stage II	85-90%	88%	100%	94%	92%	100%	100%
Stage III	85-90%	82%	90%	97%	100%	100%	82.40%
Stage IV	>95%	89%	75%	100%	No IV CRCs	100%	100%
APL/AA	90-95%	24% (APL)	42% (APL)	43% (APL)	43% (APL) 46% (AA)	13.20%	12.5% (AA)
High-grade dysplasia	75-93%	NA	69%	75%	65% (HGD or ≥10 adenomas)	NA	29%
Sessile Serrated	70-80%	5%	42%	46%	17% (hyperplastic and SS ≥10 mm combined)	NA	NA

APL = advanced precancerous lesion = Includes advanced adenomas (high-grade dysplasia or with >25% villous histologic features of measuring >1 cm in the greatest dimension) and sessile serrated polyps measuring 1 cm or more in diameter
AA = Advanced Adenoma

P2P SHARING

Did you know that smokers have a higher burden of CRC and CRC-related mortality compared with non-smokers? The association of tobacco consumption and CRC risk appeared to be dose-related (Tsoi KKF, Pau CYY, Wu WKK, et. al, 2009) Unfortunately screening rates among smokers tend to be approximately 15% lower than that of the general population (Atarere, et.al, 2024).

NOTEWORTHY

Stool Tests May Not Be the right choice if the patient:

- Is at high risk for colon cancer
- Has a personal history of colon cancer, adenomas, or other related cancers
- Had a positive result from another screening method in the last 6 months
- Was diagnosed with high-risk-conditions like inflammatory bowel disease, chronic ulcerative colitis, Crohn's disease or familial adenomatous polyposis
- Has a familial cancer syndrome like hereditary nonpolyposis colorectal cancer syndrome, Peutz-Jeghers syndrome, MYH-associated polyposis, Gardner's syndrome, Turcot's (or Crail's) syndrome, Cowden's syndrome, juvenile polyposis, Cronkhite-Canada syndrome, neurofibromatosis, or familial hyperplastic polyposis.

The [President's Cancer Panel](#) is pleased to announce the release of its latest report, [Enhancing Patient Navigation with Technology to Improve Equity in Cancer Care: A Report to the President of the United States](#). In this report, the Panel highlights priorities and recommendations to guide the responsible development and use of technologies to support patient navigation and improve equity. The four priority areas identified by the Panel are:

- Use Technology to Support Patient Navigation and Enhance Equity
- Ensure Equitable Patient Access to Technology
- Promote Responsible Development and Use of Technology
- Maintain Privacy and Security While Facilitating Data Sharing

UPCOMING EVENTS

NDCRCI Office Hours

Join Meeting

Wed, Dec 4 | 12:30 pm

Wed, Dec 18 | 9 am

NATIONAL CRC ROUNDTABLE

NCCRT Meeting, Fort Worth, TX | Nov 20-22, 2024

North Dakota was well represented at the National Colorectal Cancer Roundtable meeting! Attendees included Dr. Jared Marquart, chair of the NDCCRT, Unity Medical Center (Grafton); Jesse Tran, co-lead of the NDCCRT; Jill Ireland, co-lead of the NDCCRT; Kari Novak and Kristen Pastorek, Unity Medical Center (Grafton/Park River); Nikki Medalen, Jonathan Gardner and Carlyne Tufte, Quality Health Associates of ND, ScreeND and NDCRCI Programs; Jennifer Weiss, Sanford Medical Center; Tiffany Boespflug, Grand Forks Public Health, Women's Way.



Highlights:

- Unity Medical Center was honored as a 2024 National Achievement Award Recipient, Health Systems category
- Mikisha Longie was honored as a 2024 National Achievement Award Recipient, Survivor Champion
- Dr. Jared Marquart was a panel presenter representing rural health care: Supporting the Delivery of Timely, Quality Colorectal Cancer Screening: A Conversation with Primary Care Leaders



PDF slides and select meeting session recordings will be made available on the [ACS NCCRT](#) website in the next week.

This publication is supported by the Centers for Disease Control and Prevention (CDC) under cooperative agreement NU58DP006762 awarded to Quality Health Associates of North Dakota. It contents are those of the author(s) and do not necessarily represent the official views of CDC.

CONTACTS

Nikki Medalen, MS, BSN

Quality Improvement Specialist
nmedalen@qualityhealthnd.org
701.989.6236

Carolyne Tufte

Quality Improvement Specialist
ctufte@qualityhealthnd.org
701.989.6238

Jon Gardner

Network Administrator
jgardner@qualityhealthnd.org
701.989.6237



Quality Health Associates
of North Dakota

41 36th Avenue NW
Minot, ND 58703
www.screend.org