



Phone script for patients eligible* for the ColonCancerCheck (CCC) program

*Please see appendix A for CCC eligibility criteria

Leaving a message: This is *insert name* from *insert doctor's name or office name*. We noticed that you are *overdue/due* for your colorectal cancer screening test, called a FIT. Regular cancer screening is important because when colon cancer is diagnosed early, it is more likely to be cured. *Insert doctor's name* would like to order a FIT for you to screen for colorectal cancer. This test will be sent to you directly in the mail, and you can complete it in the privacy of your own home. Please call our office back at your earliest convenience to confirm if any of your address or health card information has changed. Our office phone number is *insert your phone number* - Thank you!

Patient Available: I'm calling today to let you know that we noticed that you are *overdue/due* for your colorectal cancer screening test, called a FIT. Regular cancer screening is important because when colon cancer is diagnosed early, it is more likely to be cured. *Insert doctor's name* would like to order a FIT for you to screen for colorectal cancer. This test will be sent you to directly in the mail, and you can complete it in the privacy of your own home. To have the test sent you, I will need to confirm your mailing address and other contact information. Are you available to confirm this now?

Phone script for patients eligible* for the Ontario Breast Screening Program (OBSP)

*Please see appendix B for OBSP eligibility criteria

Leaving a message: This is *insert name* from *insert doctor's name or office name*. We noticed that you are overdue/due for your breast cancer screening test, or mammogram. Regular cancer screening is important because it can find cancer early when treatment has a better chance of working. Please call our office back at *insert your phone number* at your earliest convenience to discuss getting a mammogram. Thank you!

Patient Available: I'm calling today from *insert doctor's name or office name* to let you know that we noticed you are overdue/due for your breast cancer screening test, or mammogram. Regular cancer screening is important because it can find cancer early when treatment has a better chance of working. You do not need a referral to get a mammogram.

To book your mammogram, please call *insert local/preferred OBSP site (or provide the patient with the OBSP booking phone number: 1-800-668-9304)*. Or you can visit cancercareontario.ca/breast to find your closest screening site and get more information about the Ontario Breast Screening Program (OBSP).

Phone script for patients eligible* for the Ontario Cervical Screening Program (OCSP)

*Please see appendix C for OCSP eligibility criteria

Leaving a message: This is *insert name* from *insert doctor's name or office name*. We noticed that you are overdue/due for your cervical screening test (often called the Pap test). Regular cervical screening is important because it can help you avoid getting cervical cancer. We are hoping to schedule you for an appointment for your cervical screening test. Please call our office back at *insert your phone number* at your earliest convenience. Thank you!

Patient available: I'm calling today from *insert doctor's name or office name* to let you know that we noticed that you are overdue/due for your cervical screening test (often called the Pap test). Regular cervical screening is important because it can help you avoid getting cervical cancer. We are hoping to schedule you for an appointment for your cervical screening test – would now be a good time to schedule this?

Barriers to Cancer Screening and Suggested Responses:

No knowledge of the test

Examples (CCC): "I have never heard of a FIT test before." "What is a FIT test?"

Sample Response: "A FIT is a safe and painless at-home cancer screening test that checks someone's stool (poop) for tiny amounts of blood. Blood in the stool could be caused by colorectal cancer or some pre-cancerous polyps (abnormal growths in the colon or rectum that can turn into cancer over time)."

Examples (OBSP): "I have never heard of a mammogram before." "What is a mammogram?"

Sample Response: "A screening mammogram takes an X-ray picture of the breast and can find breast cancers when they are small, less likely to have spread and more likely to be treated successfully. A mammogram is the recommended test for screening people 50 to 74 who are at average risk for breast cancer and eligible for the Ontario Breast Screening Program (OBSP)."

Examples (OCSP): "I have never heard of a cervical screening/Pap test before." "What is a cervical screening/Pap test?"

Sample Response: "A cervical cytology test, or Pap test, is a screening test that can help prevent cervical cancer. It looks for abnormal changes on your cervix that could become cancer."

No symptoms

Examples: “I feel fine.” “I am healthy; I do not need this test.” “I have no family history of cancer.”

Sample response (CCC): “I’m glad you are feeling healthy, but part of staying healthy is getting checked regularly with a FIT. A person can develop cancer without any pain or discomfort in the beginning stages, or even with no family history of colorectal cancer.”

Sample Response (OBSP): “I’m glad you are feeling healthy, but part of staying healthy involves getting regular mammograms. A person can develop cancer without any pain or discomfort in the beginning stages.”

Sample Response (OCSP): “I’m glad you are feeling healthy, but part of staying healthy is getting a regular cervical screening test or Pap test. A person can develop cancer without any pain or discomfort in the beginning stages. Cervical cancer does not run in families, and so family history does not change the need for a cervical screening test.”

Cancer Diagnosis

Examples: “Does my doctor want me to do this test because they think I have cancer” “Does this mean I have cancer?”

Sample CCC/OBSP response: “No. A *FIT test/mammogram* is completed by people who have no symptoms and generally feel fine. Regular screening is important because it can find cancer early when treatment has a better chance of working.”

Sample OCSP response: “No. A *cervical screening test* is completed by people who have no symptoms and generally feel fine. Getting cervical screening regularly can help lower the risk of getting cervical cancer.”

Language Barrier

Example: Patient does not speak English or other language of the clinic staff

Suggested approach: If possible, try to get someone on the phone who speaks English. Most households recognize the words, “English” and “doctor”. If unable to obtain a member of the household who speaks English, offer to call back later, or contact an interpretation service to support your call.

Appendix

For more information on cancer screening and provider resources, visit:

<https://www.cancercareontario.ca/en/resources-primary-care-providers>

A) CCC eligibility criteria

Fecal immunochemical test (FIT) screen eligible population

- Ages 50 to 74
- Asymptomatic*
- No first-degree relative diagnosed with colorectal cancer
- No personal history of colorectal cancer, Crohn's disease involving colon or ulcerative colitis
- No colorectal polyps needing surveillance
- OHIP coverage

*People of any age with iron deficiency anemia or symptoms that could be caused by colon cancer, such as rectal bleeding, need to be assessed and promptly referred to a specialist, if appropriate. It is not appropriate to test people who have iron deficiency anemia or colon cancer symptoms with the fecal immunochemical test because it could lead to a delay in diagnosis.

B) OBSP Eligibility Criteria

Average Risk

Screen-eligible population

- Women, Two-Spirit, trans and nonbinary people 50 to 74 years of age

Screening recommendation

- Screening mammogram every two years for most people
- There are several instances where a participant in the OBSP will be called back for screening in one year instead of two years, please see our [website](#) for more information.

Eligibility

- No breast cancer symptoms;
- No personal history of breast cancer;
- Have not had a mastectomy;
- Have not had a screening mammogram within the last 11 months; and
- If transfeminine (i.e., assigned male at birth), have used feminizing hormones for at least 5 consecutive years.

High Risk

Screen-eligible population

- Women, Two-Spirit, trans and nonbinary people ages 30 to 69 are eligible for screening through the High Risk OBSP if they:
 - have gene changes that increase their chance of getting breast cancer (e.g., changes in the BRCA1, BRCA2, TP53, PTEN and/or CDH1 genes);
 - have not had genetic testing, but have had genetic counselling because they have a first-degree family member with gene changes that increase their chance of getting breast cancer (e.g., changes in the BRCA1, BRCA2, TP53, PTEN and/or CDH1 genes);
 - have ≥25 percent lifetime chance of getting breast cancer based on personal and family history (confirmed at a genetics clinic using the International Breast Cancer Intervention Study (IBIS) or CanRisk risk assessment tools); and/or
 - have had radiation therapy to the chest to treat another cancer (e.g., Hodgkin lymphoma) before age 30 and at least eight years ago. For these people, screening would not start before age 30.

Screening recommendation

- Screening mammogram and screening breast magnetic resonance imaging (MRI) (or screening breast ultrasound if breast MRI is not medically appropriate) every year

Eligibility

- Valid OHIP number;
- Referral from their family doctor or nurse practitioner ; and
- No breast cancer symptoms.

C) OCSP Eligibility Criteria

Screen-eligible population

- Anyone with a cervix who is or has every been sexually active
- Age ≥ 25 (or 21*)
- Asymptomatic

* Current Ontario Cervical Screening Program cervical screening recommendations state that people should begin cervical screening at age 21 if they are or have ever been sexually active. The OCSP will formally change the age of initiation for cervical screening from 21 to 25 with the implementation of human papillomavirus (HPV) testing in the program except for people who are immunocompromised. Until the change is formally implemented, we will continue to encourage primary care providers to consider delaying screening until age 25 except for people who are immunocompromised.