

Implementation of Provider Education: Breast Density As An Independent Risk Factor for Breast Density

Molly Berger DNP student, BSN, RN,¹ Allison Peltier DNP, FNP-C, RN,¹ Kara Falk, DNP, FNP-C, RN,¹ Heidi Saarinen DNP, FNP-C, RN,¹ Daniel Friesner Ph.D.²

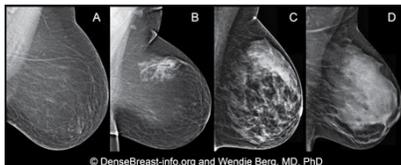
North Dakota State University School of Nursing¹, North Dakota State University School of Pharmacy²

INTRODUCTION and PROBLEM

- The most commonly diagnosed cancer among women is breast cancer^(DeSantis et. al, 2019)
- Dense breast tissue is an independent risk factor for breast cancer^(Berg & Pushkin, 2017)
- Women with dense breast tissue have a 4 to 6X greater risk in developing breast cancer^(Azam et al., 2018)
- 40-50% of women have category C or D density which is defined as dense breast tissue^(Berg & Pushkin, 2017)
- Increased density leads to increased masking of cancers on mammogram^(Berg & Pushkin, 2017)



Women in the United States lack knowledge related to the relationship between density and breast cancer risk. This lack of knowledge interferes with patients' ability to fully participate in informed decision-making about breast cancer screening



PROJECT OBJECTIVES

- 1) Assess the understanding and knowledge of breast density among screening-aged women per the American college of Radiology guideline at a rural clinic in Midwestern ND.
- 2) Educate healthcare professionals at a Midwestern ND rural healthcare clinic about breast density risk and the understanding of breast density among women in their rural community.
- 3) Review breast density notification letters utilized by the Midwestern rural clinic and provide suggestions to improve the readability of the notification letter to at least a sixth-grad reading level.

References are available upon request

THEORETICAL FRAMEWORK

Plan Do Study Act model (PDSA)

- **Plan**- identify stakeholders, committee members, target population, and survey tools. Additionally, obtain IRB approval
- **Do**- distribute survey to the target population over a two-month duration. Develop a PowerPoint presentation based on results collected from the population and hold an educational session for the healthcare team.
- **Study**- summarize the data and observations can be reflected upon, what was learned and if the project predictions were effective.
- **Act**- assess the project outcome and if modifications should be made

PROJECT DESIGN

Steps:

1. Administer survey to women in the target population over a two-month duration
2. Assess women's' knowledge via survey collected and analyze the breast density notification letter using the Flesh-Kincaid model to assess readability and grade level
3. Create a PowerPoint presentation with the information and knowledge obtained from the women's' surveys and general knowledge regarding breast density and provide feedback on breast density notification letters
4. Hold an educational session at the Midwestern clinic for healthcare professionals. Prior to education session a pre survey will be handed out and post survey will be collected after the presentation.
5. Analyze post survey data to assess effectiveness of educational sessions.

Target Population- that will be surveyed includes women between the ages of 40-75. Additionally the educational session will be provided to the healthcare team which includes; nursing staff, lab technicians, pharmacy technician and provider.

PROJECT DESIGN (Continued)

Intervention- Assessment of healthcare team's knowledge of breast density and their community's educational needs. Additionally, the understandability and readability of the breast density notification letter.

Setting- Coal Country Clinic, Center ND

Analysis

- Evaluation of surveys data administered to women of target population
- Pre and post survey of healthcare team to assess the understanding of breast density
- Using the Flesh-Kincaid model, evaluation of each respective facility's breast density letters
- Statistical analysis of data using central tendencies to health care teams' responses of education

TIMELINE

- May 2020 – Complete proposal and receive approval of committee, and obtain IRB approval
- June 2020 to August 2020 – Distribute surveys to female patients meeting sample criteria. Review breast density notification letters at both clinics.
- September 2020 – Analyze data and develop PowerPoint for healthcare professional education session.
- October 2020 – Disseminate collected data and educate healthcare professionals at both clinics. Provide feedback and suggestions for change on breast density letters.
- November-December 2020 – Analyze pre- and post-test data, submit dissertation to committee
- February 2021 – Submit dissertation to graduate school

