CDC's Cervical Cancer (Cx3) Study Provider Formative Research (Focus Groups) Moderator Guide: Providers in the Cx3 study

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I. BACKGROUND

A. Opening (approximately 5 minutes)

Thank you for taking time for our meeting today. My name is____. As you know from the previous years as part of the Cx3 Study, CDC is conducting a study to determine the use of the HPV test in your practice. We have made free of charge the HPV test to eligible patients in your practice and asked you to follow these women according to recommended guidelines. We would like to give you an opportunity to discuss further any additional recommendations to help with our study results.

II. DISCUSSION TOPICS

- A. Typical routine visits/annual exam for women 30+ (approximately 10 minutes)
 - I'd like to hear about what you typically <u>do</u> and also, what you <u>discuss</u> during routine visits with female patients who are 30 or older.
 (approximately 5 minutes quick rundown, no probes)

Extent to which the following are mentioned: pelvic exam, PAP, HPV, patient education/counsel about these.

How often Pap is included (e.g., annually, or less often for some women; all women or up to certain age)

Whether Pap, HPV are discussed – why/why not, with whom, etc.

Variation by practice type/patient population

Tell me about how you decide what to include, or discuss, in a routine visit? For example... (will give one or two of the examples from below but then listen for/probe a few others if not mentioned, as time allows. Will move on after approximately 5 minutes

The patient's age or particular aspects of her history [will probe: as determined by what – e.g., health and family history form/updates, etc.]

Particular practice or clinical recommendations that guide what you do/how often, etc. [may probe here, but more likely, in later sections]

[Depending on what has/has not been said about guidelines so far...] Someone just mentioned ACOG [or other] guidelines affecting _____. Tell me more about how guidelines affect the type or frequency of exams and tests you do.

-OR-

No one has mentioned guidelines. How do they influence the types or frequency of exams and tests you do?

[Are they aware of updated guidelines and the first time all organizations have consistent messages about extending the screening interval.]

3. How well-informed do your female patients seem to be about gynecologic health?

Are there particular questions -- or misinformation -- you hear often from patients? *(approximately 5 minutes)*

[Looking for patients preferences to come in annually. Probe: if patients were told to come back for annual visit but not to come in for a Pap test would this be a problem?]

B. <u>Cervical Cancer Screening Practices</u> (approximately 20 minutes)

Let's talk about patients at average risk in your practice and your approach to cervical cancer screening.

[Will cover both what they *discuss* with patients as well as what they *do* re these topics – e.g., exam, tests, refer, etc.]

1. For example, the Pap test.

What is your practice regarding the Pap test?

How often do you normally screen women in your practice (looking for annual, other) And why? What would be barriers to extended screening?

What influences that – [after responses] e.g., certain guidelines? Women's expectations?

Do women ever ask what it is for and how often they need it?

What do you say? Is it something you talk about otherwise?

With some patients, but not others?

Discuss barriers (systems, policies, etc.) to changing practice to follow national guidelines (ex. Increased screening intervals)

Listening for:

Whether they explain proactively what it's for or only when there are questions. Whether they address which women it's recommended for/how often.

2. <u>How about the HPV test.</u> In what cases do you give a woman [any age] the HPV test?

Listening for/will probe as time allows:

Which women (age group)....

Do women ask about it or request it?

How do you address that? What if they don't ask -- do you bring it up?

Listening for:

whether they refer to bringing it up with women 30+ if abnormal Pap. Whether they mention the HPV vaccine (but without probing).

3. How well-informed do your female patients seem to be about cervical cancer screening?

Are there particular questions -- or misinformation -- you hear often from patients?

[Looking for patients preferences to come in annually. Probe: if patients were told to come back for annual visit but not to come in for a Pap test would this be a problem?]

C. System Change (approximately 20 minutes)

- 1. Discuss barriers (systems, policies, etc.) to changing practice to follow national guidelines (ex. Increased screening intervals)
- 2. Do you have a reminder system for patients? Discuss.

 Looking for electronic, paper, flags, probe how can this help providers and patients to follow guidelines on screening history
- 3. Who should be included in your medical office when changes in policy, systems are discussed
- 4. Discuss preferences to receiving education regarding cervical cancer screening. (1:1 academic detailing, web, email, podcast, grand rounds)

III. <u>CLOSING</u> (approximately 5 minutes)

Pose any additional questions listeners have requested.

Thank participants and provide instructions for returning consent forms/receiving honoraria, etc.

Total time: Approximately 60 minutes