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**Title**

*Are providers confident in their knowledge of management guidelines for abnormal cervical cancer screening results?*

**Priority 1 (Research Category)**

Screening, prevention, and health promotion

**Presenters**

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**Abstract**

Context: Cervical cancer (CC) screening reduces incidence and mortality only if abnormal results are managed correctly. However, management guidelines are becoming more complex as knowledge of disease risk grows and adherence to these guidelines has been a challenge for providers. Previous studies have identified gaps in knowledge as a possible cause; few have investigated the confidence providers have in their knowledge. Confidence may be an important measure of guideline familiarity and, consequently, management practices.

Objective: Assess whether confidence is associated with knowledge of CC management guidelines.

Study Design and Analysis: We surveyed providers on knowledge of managing abnormal CC test results and level of confidence via four vignettes, specifying age and current and prior test results. We excluded two vignettes concerning evaluation of high-grade and low-grade squamous epithelial lesions from analysis due to >95% correct response. We conducted descriptive and logistic regression analyses for the remaining two vignettes: (1) “mildly abnormal Pap result in young woman” and (2) “positive HPV 16.”

Setting and Population Studied: Primary care physicians (PCPs) and advanced practice providers (APPs) at 3 diverse health systems in Washington, Texas, and Massachusetts.

Intervention/Instrument: Self-administered online survey.

Outcome Measures: Correct responses to each vignette, based on 2019 American Society for Colposcopy and Cervical Pathology (ASCCP) management guidelines.

Results: 487 providers (343 PCPs, 144 APPs) completed the survey (response rate 52.2%). Respondents were 84% < 60 years old, 79% female, and 66% white. Most providers correctly answered the vignettes (74% and 73% for vignette 1 and 2, respectively). Providers who reported being “very confident” were more often correct (86% and 88%, respectively) than those who reported being “somewhat confident” or “not confident” (62% and 61%, respectively;  $p < 0.001$  for both vignettes). Multivariate logistic regression showed that confidence remained significantly associated with knowledge for both vignettes (aOR=3.40, 95%CI 2.07-5.60 and aOR=4.07, 95%CI 2.45-6.77, respectively).

Conclusions: Our findings suggest that providers who are less confident in their knowledge of CC management guidelines are less likely to know appropriate follow-up. Interventions to improve familiarity with these guidelines such as centralizing management among trained staff should be evaluated.